

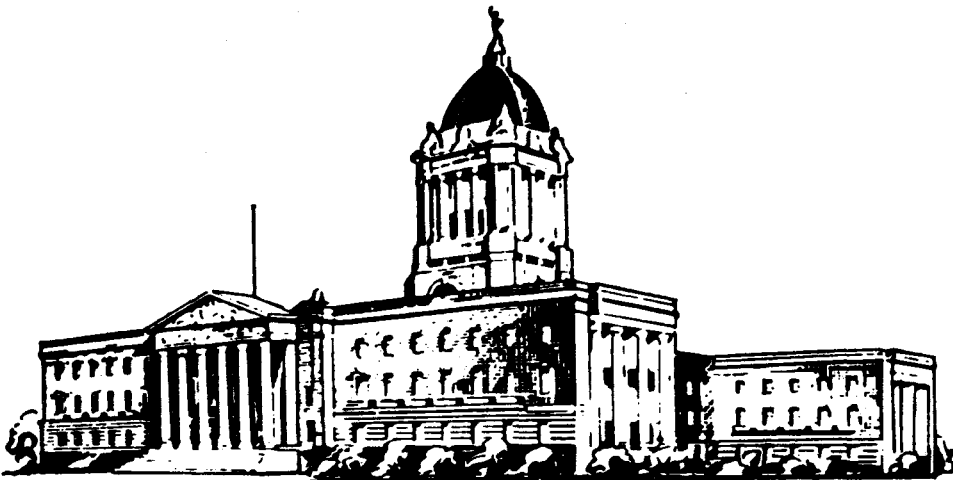


Third Session - Thirty-Fifth Legislature
of the
Legislative Assembly of Manitoba

**DEBATES
and
PROCEEDINGS
(HANSARD)**

39-40 Elizabeth II

*Published under the
authority of
The Honourable Denis C. Rocan
Speaker*



VOL. XLI No. 46 - 1:30 p.m., TUESDAY, APRIL 14, 1992



MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Fifth Legislature

Members, Constituencies and Political Affiliation

NAME	CONSTITUENCY	PARTY
ALCOCK, Reg	Osborne	Liberal
ASHTON, Steve	Thompson	NDP
BARRETT, Becky	Wellington	NDP
CARSTAIRS, Sharon	River Heights	Liberal
CERILLI, Marianne	Radisson	NDP
CHEEMA, Gulzar	The Maples	Liberal
CHOMIAK, Dave	Kildonan	NDP
CONNERY, Edward	Portage la Prairie	PC
CUMMINGS, Glen, Hon.	Ste. Rose	PC
DACQUAY, Louise	Seine River	PC
DERKACH, Leonard, Hon.	Roblin-Russell	PC
DEWAR, Gregory	Selkirk	NDP
DOER, Gary	Concordia	NDP
DOWNEY, James, Hon.	Arthur-Virden	PC
DRIEDGER, Albert, Hon.	Steinbach	PC
DUCHARME, Gerry, Hon.	Riel	PC
EDWARDS, Paul	St. James	Liberal
ENNS, Harry, Hon.	Lakeside	PC
ERNST, Jim, Hon.	Charleswood	PC
EVANS, Clif	Interlake	NDP
EVANS, Leonard S.	Brandon East	NDP
FILMON, Gary, Hon.	Tuxedo	PC
FINDLAY, Glen, Hon.	Springfield	PC
FRIESEN, Jean	Wolseley	NDP
GAUDRY, Neil	St. Boniface	Liberal
GILLESHAMMER, Harold, Hon.	Minnedosa	PC
HARPER, Elijah	Rupertsland	NDP
HELWER, Edward R.	Gimli	PC
HICKES, George	Point Douglas	NDP
LAMOUREUX, Kevin	Inkster	Liberal
LATHLIN, Oscar	The Pas	NDP
LAURENDEAU, Marcel	St. Norbert	PC
MALOWAY, Jim	Elmwood	NDP
MANNES, Clayton, Hon.	Morris	PC
MARTINDALE, Doug	Burrows	NDP
McALPINE, Gerry	Sturgeon Creek	PC
McCRAE, James, Hon.	Brandon West	PC
McINTOSH, Linda, Hon.	Assiniboia	PC
MITCHELSON, Bonnie, Hon.	River East	PC
NEUFELD, Harold	Rossmere	PC
ORCHARD, Donald, Hon.	Pembina	PC
PENNER, Jack	Emerson	PC
PLOHMAN, John	Dauphin	NDP
PRAZNIK, Darren, Hon.	Lac du Bonnet	PC
REID, Daryl	Transcona	NDP
REIMER, Jack	Niakwa	PC
RENDER, Shirley	St. Vital	PC
ROCAN, Denis, Hon.	Gladstone	PC
ROSE, Bob	Turtle Mountain	PC
SANTOS, Conrad	Broadway	NDP
STEFANSON, Eric, Hon.	Kirkfield Park	PC
STORIE, Jerry	Flin Flon	NDP
SVEINSON, Ben	La Verendrye	PC
VODREY, Rosemary, Hon.	Fort Garry	PC
WASYLYCIA-LEIS, Judy	St. Johns	NDP
WOWCHUK, Rosann	Swan River	NDP

LEGISLATIVE ASSEMBLY OF MANITOBA

Tuesday, April 14, 1992

The House met at 1:30 p.m.

PRAYERS

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

Mr. George Hickes (Point Douglas): Mr. Speaker, I beg to present the petition of Genevieve Bruce, Phyllis Simard, Madeleine Michaud and others who request the government show its strong commitment to aboriginal self-government by considering reversing its position on the AJI by supporting the recommendations within its jurisdiction and implementing a separate and parallel justice system.

Ms. Becky Barrett (Wellington): Mr. Speaker, I beg to present the petition of Terry A. Holunga, Brenda Holunga, Tom Holunga and others requesting the government show its strong commitment to dealing with child abuse by considering restoring the Fight Back Against Child Abuse Campaign.

Mr. Gregory Dewar (Selkirk): Mr. Speaker, I beg to present the petition of John Herard, Veronika Stevenson, William Sinclair and others requesting the Minister of Family Services (Mr. Gilleshammer) consider a one-year moratorium on the Human Resource Opportunity Centre in Selkirk.

Ms. Marianne Cerilli (Radisson): Mr. Speaker, I beg to present the petition of Susan Stanton, Susan Lowery, Cathy Byington and others requesting the government consider restoring the former full funding of \$700,000 to fight Dutch elm disease.

READING AND RECEIVING PETITIONS

Mr. Speaker: I have reviewed the petition of the honourable member for St. Johns (Ms. Wasylycia-Leis), and it complies with the privileges and practices of the House and complies with the rules. Is it the will of the House to have the petition read?

The petition of the undersigned citizens of the province of Manitoba humbly sheweth:

THAT the bail review provisions in the Criminal Code of Canada currently set out that accused

offenders, including those suspected of conjugal or family violence, be released unless it can be proven that the individual is a danger to society at large or it is likely that the accused person will not reappear in court; and

The problem of conjugal and family violence is a matter of grave concern for all Canadians and requires a multifaceted approach to ensure that those at risk, particularly women and children, be protected from further harm.

WHEREFORE your petitioners humbly pray that the Legislature of the Province of Manitoba may be pleased to request that the Minister of Justice (Mr. McCrae) call upon the Parliament of Canada to amend the Criminal Code of Canada to permit the courts to prevent the release of individuals where it is shown that there is a substantial likelihood of further conjugal or family violence being perpetrated.

* * *

I have reviewed the petition of the honourable member for Wolseley (Ms. Friesen), and it complies with the privileges and practices of the House and complies with the rules (by leave). Is it the will of the House to have the petition read?

The petition of the undersigned citizens of the province of Manitoba humbly sheweth that:

WHEREAS the Dutch elm disease control program is of primary importance to the protection of the city's many elm trees; and

WHEREAS the Minister of Natural Resources himself stated that, "it is vital that we continue our active fight against Dutch elm disease in Manitoba," and

WHEREAS, despite that verbal commitment, the government of Manitoba has cut its funding to the city's DED control program by half of the 1990 level, a move that will jeopardize the survival of Winnipeg's elm trees.

WHEREFORE your petitioners humbly pray that the government of Manitoba may be pleased to request the Minister of Natural Resources (Mr. Enns) to consider restoring the full funding of the

Dutch elm disease control program to the previous level of 1990.

As in duty bound your petitioners will ever pray.

* (1335)

PRESENTING REPORTS BY STANDING AND SPECIAL COMMITTEES

Mrs. Louise Dacquay (Chairperson of Committees): The Committee of Supply has adopted certain resolutions, directs me to report the same and asks leave to sit again.

I move, seconded by the honourable member for La Verendrye (Mr. Sveinson), that the report of the committee be received.

Motion agreed to.

INTRODUCTION OF BILLS

Bill 76—The Pension Benefits Amendment Act

Hon. Darren Praznik (Minister of Labour): Mr. Speaker, I would like to move, seconded by the honourable Minister of Agriculture (Mr. Findlay), that Bill 76, The Pension Benefits Amendment Act; Loi modifiant la Loi sur les prestations de pension, be introduced and that the same be now received and read a first time.

Motion agreed to.

Introduction of Guests

Mr. Speaker: Prior to Oral Questions, may I direct the attention of honourable members to the gallery, where we have with us this afternoon, from the River West Park School, forty Grade 9 students. They are under the direction of Colin Wilson. This school is located in the constituency of the honourable Minister of Urban Affairs (Mr. Ernst).

Also this afternoon, from the Ralph Maybank School, we have sixty-five Grade 5 students. They are under the direction of Ken Park. This school is located in the constituency of the honourable Minister of Education (Mrs. Vodrey).

On behalf of all honourable members, I welcome you here this afternoon.

INTRODUCTION OF BILLS

Mr. Speaker: I inadvertently did not see the honourable member for Burrows under Introduction of Bills.

Bill 65—The Residential Tenancies Amendment Act

Mr. Doug Martindale (Burrows): I move, seconded by the member for Radisson (Ms. Cerilli), that Bill 65, The Residential Tenancies Amendment Act; Loi modifiant la Loi sur la location à usage d'habitation, be introduced and that the same be now received and read a first time.

Motion presented.

Mr. Martindale: Mr. Speaker, the purport of my bill is to change the schedule in the regulations of The Residential Tenancies Act in order to change the rate at which costs of landlords are passed on to tenants in order to prevent excessive rent increases.

Regrettably, this bill cannot pass until the government proclaims The Residential Tenancies Act, something they have had two years to do but have not done yet.

Motion agreed to.

ORAL QUESTION PERIOD

Manufacturing Industry Shipment Statistics

Mr. Gary Doer (Leader of the Opposition): Mr. Speaker, last year, unfortunately, Manitoba had a decline of 13 percent in manufacturing shipments in the country, the largest decline in shipments of any province in Canada. Today, we heard from Statistics Canada that February of 1992 shipments of manufactured goods from Canada had in fact gone up. In Canada they had gone up 4.4 percent which was seasonally adjusted to 1.1 percent for the country, something that indicates for the first time in six months of manufacturing that we may have some good news.

Unfortunately, Mr. Speaker, like we saw last Friday with the labour force statistics and like we have been watching in a number of other areas, Manitoba was going in the opposite direction. Manitoba went down close to 1 percent in February, keeping the trend from 1991 in terms of manufacturing shipments.

I would like to ask the Premier why Manitoba continues to go the opposite way of the national average in manufacturing shipments, and what impact will this have on jobs in the province of Manitoba.

* (1340)

Hon. Gary Filmon (Premier): Mr. Speaker, as the member may well know, there are a number of areas that may be particular to Manitoba that are not to other areas of the country. In particular, last time I looked at it, those so-called manufacturing shipments included production of base metals and export of base metals which was down substantially as one of the items.

The member may well know that, as well, Versatile just got back into production after a shutdown of more than six months, and they will just be beginning to see the shipments come through after the end of February. Those were two major items.

The good news, of course, is that according to Statistics Canada, Manitoba is expected to have the highest increase in manufacturing investment in the country this year, an indication of confidence in this government's policies by the manufacturers of Manitoba.

North American Free Trade Agreement Sectoral Briefing

Mr. Gary Doer (Leader of the Opposition): Mr. Speaker, the Premier will note that the number of manufacturing jobs in Manitoba in 1988 was some 63,000. It is down to 55,000, and that is a steady decline in manufacturing jobs.

In 1988, in this Chamber, the Premier talked about growth in manufacturing, and part of the increase in manufacturing would be through the Free Trade Agreement. He said in this Chamber that Manitoba will gain, according to his empirical studies, 10,000 to 15,000 new jobs with the Free Trade Agreement with the United States, and that is the best thing we can do to help the unemployment rates in Manitoba. That is why we support the Free Trade Agreement with the United States, Mr. Speaker—the Premier's words in this Chamber.

Since that date, we have seen the Free Trade Agreement and its operation in this province, and it has not been the producer of the 10,000 to 15,000 jobs that the Premier indicated.

This week, the Ministers of Trade were briefed on the free trade agreement with Mexico. They were briefed on all the sectors of the free trade agreement with Mexico and the North American free trade agreement.

Can the Premier advise us of the briefing on all the sectors in trade that took place at the federal and

provincial meeting, and the impact on the so-called six conditions that the government of Manitoba has for supporting free trade with Mexico, a position that is of course contrary to their original position of being opposed to it?

Hon. Gary Filmon (Premier): Mr. Speaker, there was a very lengthy preamble to that question, and I will try and touch on all of the various points that the member raised.

The member wants to be very simplistic in looking at comparisons over the last couple of years, totally ignoring the fact that there is a world recession on and that the biggest consumers of our manufactured goods are the province of Ontario and the United States, both of which have been in an immense recession.

The province of Ontario has lost 260,000 jobs, and its economy has been the weakest in Canada in that period of time. The United States has not only had the recession, but there has been a large change in the value of the Canadian dollar during that period of time. In fact, during last year, it peaked at 89 cents versus the low 80s at the time the forecasts were made.

The reality is we have had some major changes with respect to the Free Trade Agreement with the United States. Among other things, the United States now is the recipient, the purchaser of fully one-third of all of our agricultural products which are exported from this province. That is a huge, huge change and obviously a very positive one for people in the agriculture industry.

I might say that the position we continue to maintain with respect to the free trade negotiations with Mexico is that it is important for us to be at the table so that we do not get sideswiped by a bilateral agreement between the U.S. and Mexico, that this could have even more negative implications to Canada and Manitoba.

If the Leader of the Opposition is suggesting that we pull away from the table and allow a bilateral agreement which could have extremely negative impacts on Manitoba and Canada, then I say to him that this would not be a very wise move.

* (1345)

Public Hearings

Mr. Gary Doer (Leader of the Opposition): Mr. Speaker, again, the Premier did not answer the question. I asked him what the sectoral briefing was

on the free trade negotiations, and the Premier failed to answer the question. I guess he does not care about the sectoral impact of free trade or does not know what is going on. He just has an ideological position, and he will just go along all the way.

Mr. Speaker, we have secret negotiations going on in hotels in Canada, Mexico and the United States. We have trade ministers that report to the Premier going to secret meetings dealing with the very important sectors in the Manitoban and Canadian economy. Thousands of jobs are on the line, and these secret sectoral discussions are going on. Ministers are being briefed, but there is absolutely no input and no access to any information by the Canadian people and by the Manitoban people.

I would ask the Premier what success did he have with the First Minister at the First Ministers' meeting and with the Minister of Trade at this recent meeting yesterday on public access, and why is this government not calling out for public input into the trade negotiations, as the B.C. government is in public statements that they are making in their Legislature?

Hon. Gary Filmon (Premier): Mr. Speaker, I want it to be absolutely clear that there is only one Leader in this Legislature who is ideologically hide-bound and absolutely fixed in stone with respect to the issue of free trade, and that is the Leader of the Opposition.

He is the one who, without knowing anything about it, without having any concept of what was on the table or what was being discussed, said, I am opposed to it; now tell me what it is. He said, I am opposed to it; now tell me what is on the table. That is blind ideology if I ever saw it.

The fact of the matter is, this government has taken the position that we have six conditions that must be met before we will give our consent or our support to any trade agreement with Mexico. Those six conditions were made public, and we are the first province in the country and perhaps the only province in the country to give them a comprehensive response that said these are the conditions under which we believe an agreement would be beneficial to Manitoba and Canada.

I would say to him, as well, that in the discussions with the First Ministers in Toronto, the Prime Minister indicated, as is his right to indicate, that the final decision would be the decision of the government of

Canada. Constitutionally, the entire issue of international trade is fully within the responsibility of the government of Canada, and there need to be no consultations, but he did assure us that there would be consultations, that the input of the provinces would be sought, and this province has done a variety of sectoral consultations with people who would be affected.

In fact, parts of the draft agreement that we have had have been discussed with various sectors in Manitoba to try to assess what would be the impact on those sectors, to try to come at this with knowledge, not just blind ideology, as the Leader of the Opposition has.

Seven Oaks General Hospital Operating Budget

Ms. Judy Wasylycia-Lels (St. Johns): The Minister of Health told this House on March 20 that there would be close to a 5 percent increase for each hospital budget in this province. Employees at the Seven Oaks General Hospital have been told to expect a \$1.2 million reduction in the operating budget of the Seven Oaks General Hospital which represents about a 3 percent reduction.

I would like to ask the Minister of Health: Does this mean that the costs at Seven Oaks General Hospital have gone up 8 percent and they are cutting back to 5 percent, or is Seven Oaks General Hospital really only getting much less than the 5 percent promised by this minister and this government?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, without the benefit of having my Estimates book in front of me because we will be dealing with this this afternoon, but memory tells me that last year this Legislature approved some almost \$900 million dollars for hospital funding in the province of Manitoba.

This year, I am seeking approval for in excess of \$950 million in hospital funding from the taxpayers of Manitoba. Fifty million over \$900 million is a little better than a 5 percent increase in hospital funding, Mr. Speaker.

Ms. Wasylycia-Lels: That does not explain how a hospital could be cutting—

Mr. Speaker: Order, please. This is not a time for debate.

* (1350)

Ms. Wasylycia-Lels: I would like to ask the minister very specifically, what will be the impact of a \$1.2-million reduction on beds, staff, services and patient care at the Seven Oaks General Hospital and Winnipeg's north end community?

Mr. Orchard: Mr. Speaker, a very insightful observer has noted with interest that the last concern my honourable friend expressed was patient care. That is the first priority of this government in all of the decisions that are being made in the province of Manitoba around the delivery of health care services.

Mr. Speaker, my honourable friend, for now in excess of a month, has dillied and dallied in Estimates and has fixed on one aspect only of health care, that being hospital funding. The whole department is a composite of home care services, community-based services. All of those have not received one word of concern from the NDP who claim to understand reform and to have a desire to move the system from institution to community.

The only thing my honourable friend and her New Democratic Party colleagues have fixed on in the last three and a half weeks of Estimates is hospitals. Surely the health care system in Manitoba is more than hospitals, Mr. Speaker.

Ms. Wasylycia-Lels: Mr. Speaker, since the administrator at the Seven Oaks Hospital has told staff that this \$1.2-million reduction is only the first shoe to fall and that a government-directed decree for system-wide bed cuts will be in addition to today's announcement, when will the second shoe fall, and what will it mean in terms of patient care, bed cuts, staff layoffs and delivery of services?

Mr. Orchard: I congratulate my friend on her quick learn. She put patient care first this time, something we have put first every step of the way. That is why the budget in the ministry of Health has increased at least in the greatest amount of any budget, other than possibly Education the odd year, possibly Family Services the odd year, as a commitment of this administration to the preservation of quality health care services.

Mr. Speaker, my honourable friend wishes to deal with health care reform without full explanation of what it really means à la NDP. What I have indicated in my opening remarks which have been reviewed extensively by her minions in the caucus back-rooms—and we have clearly indicated that we intend to put the patient first in health care in

Manitoba and move the budget with the patient to assure that the most appropriate level of care in the most appropriate and cost-effective location is achieved in the reform of the health care system in Manitoba. The patient comes first.

Youth Unemployment Government Strategy

Mrs. Sharon Carstairs (Leader of the Second Opposition): Mr. Speaker, just as the patient should come first, so should young people come first.

I raised last Friday my very deep concern about the loss of job employment opportunities for young people. When I gave a series of numbers, the Premier (Mr. Filmon) from his chair kept saying wrong, wrong, wrong. I went, Mr. Speaker, to his documents, not mine, his documents, and I compared the number of young people that would be served by youth unemployment programs in the 1991 Family Services Annual Report with the ones estimated in the Supplementary Information for Legislative Review. This is the figure: In '91, 16,352 job opportunities would be made available for young people; in 1992-93, 13,400 job opportunities—a difference of 2,952.

Will the Premier tell us how his new initiatives meet the needs of these young people who have an unemployment rate of 18.6 percent?

Hon. Harold Gilleshammer (Minister of Family Services): Mr. Speaker, the budget that we are debating in Estimates now contains the CareerStart program that I think the member is referring to. The CareerStart program is maintained within this budget at last year's level.

In addition to that, later this week, we are going to be announcing the Partners with Youth program, a program that we think will allow municipalities and nonprofit organizations across the province to bring forward projects to employ many more youths between the ages of 16 and 24 in the province of Manitoba.

* (1355)

Mrs. Carstairs: Mr. Speaker, the annual report of this minister's department for 1990-91 shows that 4,736 young people could take advantage of CareerStart. This year they are hoping 3,400 will be able to do that. They watched the northern job corps disappear. The Youth Job Centre which provided for 10,348, they are now estimating will

provide for 9,000. The STEP program which used to provide for 444, they are now saying will be 300, and even if you put in their new 700 Partners with Youth, they are still down by 2,952.

How can this minister say he is adequately serving the needs of these young people whose unemployment rate in the same period of time has jumped by 5 percent?

Mr. Gilleshammer: Mr. Speaker, I look forward to getting into more detail on that this afternoon as we pursue the Estimates process. The budget amount allocated within Family Services for CareerStart in this budget is the same as last year, and we expect we will serve the same number of young people this year, if not more through that program. In addition, we are adding a new program which I have indicated we will be announcing later this week.

Mrs. Carstairs: Mr. Speaker, the bottom line is that this new program will still leave the young people of this province with 2,952 fewer employment opportunities. What is this minister going to do for those nearly 3,000 young people?

Mr. Gilleshammer: Last year through the CareerStart program, we were able to accommodate, I believe, every employer who brought forward a request for funding. In fact, we were able to go back later on after the initial intake and have some of the employers access a second grant. We have maintained that program at last year's levels, and we anticipate being able to serve the same number of students.

As well, the federal CHALLENGE program is on-stream again this year and provides the same wage assistance that the CareerStart program does, and while it perhaps is not going to be able to accommodate all young people in Manitoba, we think that within the budget and within rather difficult times, we have been able to maintain that program.

Provincial Highway Map Exclusions

Ms. Rosann Wowchuk (Swan River): Mr. Speaker, this morning, I attended the MAUM convention, where the Minister of Rural Development (Mr. Derkach) said that there were brighter days ahead for rural Manitoba, we should see industrial growth.

Mr. Speaker, our road structure plays an important part in the promotion of rural Manitoba. However, this government recently printed a

provincial map on which many roads have been removed. We have identified at least 10 roads, and there are many more, I am sure.

Mr. Speaker, I would like to ask the Minister of Rural Development (Mr. Derkach): Can he tell us what impact the changes on these maps are going to have on the economic growth of rural Manitoba? Did he have input into this decision, and how could he allow something like this to happen to rural Manitobans?

Hon. Albert Driedger (Minister of Highways and Transportation): I just want to indicate to the member—and I appreciate the fact that she has looked at the new map. I think it is a very nice map. As indicated by my colleagues, we have all of Manitoba on our map, not the way it was in the previous administration.

I think it is a very positive thing we are doing in terms of promoting tourism with the kind of map that we have. We have a cross section of pictures in there that are going to be very positive.

In regard to the 2,000 kilometres that were turned back, they are not on those maps, Mr. Speaker, and that was the decision that was made over a year ago by this government. We have gone through a painful process with the municipalities and have indicated many times—the municipalities did not like that necessarily, but we also compensated them for the turn-back of the roads to some degree. I do not know where the member has her argument. That argument should have been based over a year ago here.

* (1400)

Ms. Wowchuk: . . . arguments over a year ago—

Mr. Speaker: Order, please. This is not a time for debate. The honourable member for Swan River, kindly put your question now, please.

Ms. Wowchuk: Since this government says tourism is important to rural Manitoba, what message is this government sending tourists when they put out maps that have roads leading to nowhere? One time you tell us you are promoting tourism and then you have no roads.

Mr. Speaker: Order, please. The question has been put.

Mr. Driedger: Mr. Speaker, the member is getting a little exercised about her question there. I just want to indicate that if the member would want to take a little time and compare the record of her

administration when they were in power, what they did with the highway program in this province, where the highway program was \$100 million under my colleague who was Minister of Highways at that time, and by the time when I took over the highway portfolio in 1988, we were spending \$83 million on highways. Instead of just keeping up and helping to develop the rural area, we went in the opposite direction.

I am pleased that at least we are maintaining this expenditure on highways in this province, not compared to B.C. which has cut 50 percent of the highway programs and Saskatchewan which has had a cut of 25 percent in their highway program.

Ms. Wowchuk: Mr. Speaker, this government is causing absolute confusion with what they have done with the roads.

I ask the Minister of Rural Development (Mr. Derkach): Will he request that these maps be recalled and have these roads replaced, so we can go back to the number system where people understand where roads have been and have those roads put back on the maps?

Mr. Driedger: Mr. Speaker, the purpose of the provincial map is to show people where the highways are and where they are going. If the member would put away the old maps, I will make sure that the members get the new maps which show them exactly where the roads are and which are the provincial roads and which are the PTHs in the province.

Bill 45

City of Winnipeg Resolution

Ms. Jean Friesen (Wolseley): Mr. Speaker, Bill 45, an omnibus bill enabling general exit permits from the City of Winnipeg goes before committee tonight. I would like to table a resolution from Winnipeg City Council of March 25 directed to the Minister of Urban Affairs, and it was forwarded to the minister at that time. It requests the province to make Bill 45 specific to Headingley and to delay any other changes to the city until the Winnipeg Regional Committee adopts a regional development plan.

My question for the minister is: Has the minister responded to this motion in any formal way? Will he table the specific proposals he has placed before the Winnipeg Regional Committee to develop a Winnipeg regional policy?

Hon. Jim Ernst (Minister of Urban Affairs): Mr. Speaker, we have embarked upon a process with the capital region municipalities to look at some regional planning for the capital region. That is going to be a long process. We have to address a great number of issues. We have to build a consensus from amongst the municipalities within the capital region because the top-down approach, the one endorsed in the original Plan Winnipeg, did not work. That additional zone municipality situation giving planning authority to the City of Winnipeg did not work. There was no consensus. There was no co-operation.

Mr. Speaker, we have to build upon that, and that is what we have started. We undertook at our last meeting, at the end of February, the beginning of that strategic planning process. We are working toward that end. We will be continuing it over the next period of time, but the building of that consensus is not going to happen overnight. It is going to take some length of time.

Minister's Authority

Ms. Jean Friesen (Wolseley): Mr. Speaker, will the minister acknowledge that the new powers given to the minister in Bill 45 to alter city boundaries and hence the tax base at will and by regulation with no public discussion will seriously limit the ability of the city to fulfill its own planning responsibilities? Will he consider withdrawing those sections of Bill 45?

Hon. Jim Ernst (Minister of Urban Affairs): Mr. Speaker, I wholeheartedly disagree with the preamble of the member for Wolseley.

Secession Referendum

Ms. Jean Friesen (Wolseley): Mr. Speaker, will the minister confirm that it is government policy to give additional powers to the minister to determine by regulation without public discussion and to determine who shall vote in secession referendums and on what basis that franchise will be?

Hon. Jim Ernst (Minister of Urban Affairs): Mr. Speaker, when a regulation is passed, it is passed by Executive Council, not by a minister. When a bill provides for power by regulation, that regulation is a consideration of the entire cabinet.

Nopiming Park - Forestry Environmental Mediator

Mr. Paul Edwards (St. James): Mr. Speaker, my question is for the Minister of Environment.

The integrity of the environmental review process is extremely important to maintain in this province, and we in the Liberal Party have been pleased, unlike our other two counterparts, to consistently speak in favour of the integrity and support of the Clean Environment Commission's process throughout. Mr. Speaker, whether or not we like the decision of the day, we respect the importance of the CEC.

The CEC came up with a decision on forestry in March of this year dealing with Nopiming Park and Abitibi-Price's requirements for new logging sources. Unfortunately, the compromised position which was reached between the various interested parties, both unions and the environmental groups, fell apart over the weekend.

My question for the Minister of Environment is: Will he now respect the request of the environmentalists to appoint immediately an environmental mediator, which is provided for under the act, to deal with this issue and get the parties back together, in particular since they have clearly shown that they can reach an honourable compromise on this issue which is extremely important environmentally and in terms of the jobs in eastern Manitoba?

Hon. Glen Cummings (Minister of Environment): Mr. Speaker, I, too, respect the environmental process that is in place in this province, and I am not sure why the member would want to characterize me as otherwise.

The recommendations that we have from the Clean Environment Commission are recommendations. We have said that some of them are in effect recommendations on policy which will be part of a larger debate.

The specifics of whether or not we can bring in an environmental mediator, the suggestion is good; however, both sides have to be willing to come to the table to mediate, and unfortunately, without going into detail, Mr. Speaker, that does not appear to be possible at this time.

Negotiations

Mr. Paul Edwards (St. James): Mr. Speaker, can the minister elaborate on that last response, given that the party that pulled away from the table is the same party that is suggesting the mediator? Is the minister saying, from his answer—do I understand him, that the unions involved who had reached an agreement and are accused over the weekend of committing some bad faith advertising, some untimely advertising—who is saying they are not willing to go to the table?

Will the minister do everything possible to make sure they do get back to the table?

Hon. Glen Cummings (Minister of Environment): Mr. Speaker, I am not going to negotiate in relationship to recommendations from the Clean Environment Commission, nor do I choose to get into a debate, publicly or privately, about the good faith or not on either side. It is my opinion that both sides have acted honourably, but the fact is that there is an extreme amount of distrust between the labour unions on one side and the corporation and those groups who are environmentally concerned.

I have to say that unless there is a willingness all the way around to come to the table for discussion, then that cannot be forced. At the same time, Mr. Speaker, I think that we want to be a little bit careful and a little bit circumspect on how we view this type of process. I believe in an open, public process when we are talking about public policy.

Mr. Speaker, I do not think that the people of Swan River or the people of Dauphin would be adequately represented where there is only discussion of the nature that the member is talking about, and I very much support the type of process that the Minister of Natural Resources (Mr. Enns) is proposing to embark upon when we talk about further policy issues in a very broad public spectrum.

Land Division

Mr. Paul Edwards (St. James): Mr. Speaker, in keeping with the minister's commitment to an open public policy process, will he indicate today his support for the April 10 agreement which called for the division of Nopiming into two parks, one where forestry is permitted and one where it is not, with additional lands being added to the wilderness park to make up for that loss of protected land which appears to be an eminently reasonable solution?

Will the minister commit publicly to that as part of his public policy development?

* (1410)

Hon. Glen Cummings (Minister of Environment):

Mr. Speaker, if I were to make a commitment immediately, I am sure it would be characterized as the position of the government. I just finished saying that we want the policy aspects of the recommendations taken to a broader public debate. I would go this far, however, to say that those are useful suggestions and those are the types of things that need to be put on the table.

Without trying to characterize the member's position unfairly, I believe that he is saying that he is interested and that probably the Liberal Party is interested and looking at some of those principles. If that is the case, then I see a very fruitful public debate ahead of us where we can talk about those broad policy issues and it can be a win-win situation.

Abitibi-Price - Pine Falls Feasibility Study

Mr. Jerry Storie (Filn Flon): Mr. Speaker, my questions are to the Deputy Premier, who I also believe is on the Economic Development Board of Cabinet.

Following on the question of the member for St. James (Mr. Edwards), this issue is obviously extremely important to the people of Pine Falls. As the member has indicated, and as we know, there are negotiations ongoing between various groups and the government to resolve the outstanding issues. They include not only the question of environmental policy, they also include the question of public financial input into what we hope will be a satisfactory conclusion to these negotiations.

My question to the Deputy Premier is: Given that the First Minister (Mr. Filmon) indicated on March 27 that the Economic Development Board of Cabinet had been apprised of this issue, can the minister indicate whether in fact the government has received or reviewed a feasibility study on the proposal for the buy-out of Abitibi at Pine Falls?

Hon. James Downey (Deputy Premier): Mr. Speaker, let me say that we as a government are very interested and supportive of further developments that would support that community in the activities that have been carried out there. There has been a series of activities taking place, of work being carried out as it relates to that whole

activity which I do not think it would be fair at this point to express publicly because there are negotiations and discussions taking place. We do not want in any way to jeopardize the activities that are going on in that particular area.

Mr. Storie: Mr. Speaker, of course, the government and the First Minister (Mr. Filmon) have chided us on many occasions for not wanting to be positive. We are positive about wanting to resolve this issue. We also want to know what the government intends to do with respect to the input of public dollars, taxpayers' money.

I assume, and perhaps the Deputy Premier can tell us whether in fact they have reviewed the feasibility study on the issue of public input into Pine Falls.

Mr. Downey: Mr. Speaker, let me thank the member for putting forward a positive support for the operation at Pine Falls. I think I would be remiss if I did not thank him for the support of activities going on there.

There are currently discussions taking place which I do not believe would be in the interests of the discussions or the operations that should be disclosed. I can tell you that we are anxious to see a resolve to the long-term activities at that mill.

Mr. Storie: It is not apparent to the public of Manitoba that the government is dealing with any factual information. Certainly they are not prepared to share it.

Mr. Speaker, my question to the Deputy Premier is, tomorrow we are meeting with another group from Pine Falls who have a vested interest in the success of this project. Will the Deputy Premier undertake to provide members of the opposition with feasibility studies and reviews of the implications for both the environmental policy and the public purse before the government proceeds to negotiate any further with this group?

Mr. Downey: Mr. Speaker, my colleague, the member who represents the area, and the ministry of I, T and T have been working, as well as other individuals within government, to take a positive approach and to try to make sure that all avenues are pursued to make sure that the operation of the mill at Pine Falls is continued.

I want to assure him that every effort will be put forward by this government, by my colleague the member who represents that area and the Minister

of I, T and T to make sure that all avenues and all options are followed up and considered.

Health Care System Anesthetist Manpower Review

Mr. Gulzar Cheema (The Maples): Mr. Speaker, my question is for the Minister of Health. I want to raise the issue of the field of anesthesia in this province. Last week the question was raised by the member for St. Johns (Ms. Wasylcia-Leis), and the major point was missed because of angry words between the two, the minister and the member for St. Johns.

Mr. Speaker, the report has been given to the Department of Health, and it is recommending that under the new plan, there will be a decrease in anesthesia in community hospitals.

Can the minister tell this House how these recommendations will coincide with his policy of moving care from large institutions to community hospitals, because when you are cutting services, you are cutting hospitals in the long run?

Hon. Donald Orchard (Minister of Health): Mr. Speaker, my honourable friend has made a rather quantum leap in conclusion. The report that my honourable friend the New Democratic Health critic indicated we had for 10 months was made available to the department on the 24th of March in draft form, and the meeting we held with the respective facilities took place as soon as possible, on March 30.

We are asking them to reply back to the recommendations which are in that draft report, one of which indicates that the sessional fees in terms of national ranking for compensation to anesthetists are more than adequate, and part of the resolution is an internal reallocation from sessional fees to fee-for-service, fee-for-service being the problem that I have long identified in anesthesiology where the MMA, in dividing the taxpayer pie, have left anesthetists in the province of Manitoba on the short end of the stick.

That reallocation would not compromise or have the sort of consequences that my honourable friend is predicting.

Mr. Cheema: Can the minister tell us then whether he is going to get in touch with his Department of Health and ask them to follow his own recommendation, what he has said in the House, so that the Seven Oaks Hospital and Concordia Hospital will not lose their anesthesia manpower?

Those are very essential services, and they are going to lose if they follow this drafted report which is dated March 24, as the minister has said.

Mr. Orchard: Mr. Speaker, that is exactly the process that is in place right now. That report which says draft, I think my honourable friend would acknowledge, was given to the CEOs at a meeting March 30. We are asking them to reply as to how they believe the major recommendations, one of which I have already shared today and last week, how that will impact on service delivery.

In addition to that, we have made the commitment that we would pick up one month of the shoring-up that the hospitals had found internally in their budgets last year in order to make the month of April more smooth in its transition, Sir.

Mr. Speaker: Time for Oral Questions has expired.

MINISTERIAL STATEMENT

Hon. Leonard Derkach (Minister of Rural Development): May I have the permission of the House to revert back to ministerial statements?

Mr. Speaker: Does the honourable minister have leave to revert back to ministerial statements and tabling of reports? Leave? It is agreed.

Mr. Derkach: As the members are undoubtedly aware, I was very proud to announce the Rural Economic Development Initiative or REDI this morning. The REDI program is designed to put video lottery dollars back to work in the rural economy to encourage economic development and diversification in Manitoba's rural communities.

Priority for REDI funds will be given to communities who have organized and prepared a strategy for economic development. The REDI program will focus on commercially viable development that has long-term economic benefits for communities.

Our government has continued to demonstrate its commitment to rural Manitoba. We recognize that rural Manitoba is a vibrant and vital part of our province, and we are taking steps to ensure that our rural economy is strong and diversified. The REDI program is another step towards building upon the traditional strengths of rural Manitoba and capitalizing on new opportunities.

* (1420)

REDI complements our government's current economic development programs by providing the

tools government and local communities need to act on these initiatives. Communities who are investing in their future through Manitoba's Grow Bonds program and those communities who have designed an economic development plan for their community will benefit from the initial five-year programs we announced today.

The Infrastructure Development Program will help communities meet the infrastructure needs required to attract business. This program will assist communities whose goal is to create projects specifically designed to expand or attract new business by improving sewer, water and energy services, transportation access, waste disposal facilities and telecommunications to service those specific projects.

REDI also expands the current consultation programs available to rural businesses through both the MBA Student Consulting Program and the Feasibility Studies Program. The MBA Student Consulting Program will enable business students to provide consultation services throughout the year for rural businesses with the assistance of the provincial government.

The Feasibility Studies Program will offer cost-shared assistance to rural businesses, local governments and local economic development organizations who wish to retain the services of an independent consultant. This initiative builds on programs currently provided by the Department of Industry, Trade and Tourism.

I am sure that all members will appreciate the value of the programs we introduced to encourage innovative and unique ideas. The rapidly changing world economy and marketplace demand that rural Manitobans be innovative in order to remain competitive.

The Development Support Program is designed to provide a one-time contribution to fund innovative proposals in nontraditional areas which will in turn create business development opportunities. As members are aware, REDI is also involved in a new initiative to work with and assist young people in rural Manitoba.

As Minister of Rural Development, I am very excited about the immense potential of the REDI program as well as other programs we have established. Over the past year, the people of rural Manitoba have demonstrated that they are willing and eager to take on the challenge of each program

we have introduced. With each new day, we are witnessing the success of these local communities. The development and growth of their economy will benefit the whole province and send a message out to other communities that our government's programs are working with you and for you. Business people will see that rural Manitoba is the place to invest with people who are prepared to work hard and achieve success and our government will work with them every step of the way. Thank you.

Ms. Rosann Wowchuk (Swan River): Mr. Speaker, I would like to make a few comments on the minister's announcement. I am pleased to see that they have come forward with this announcement, and hopefully it will be a success. I have to say that I am saddened that the only initiatives that this government is taking to rural development right now relates to gambling. We see the Minister of Health (Mr. Orchard) hanging his Health department on funds from gambling and now we see the Rural minister tying the rural economy into gambling, and it is the same money coming back. It is really a regressive tax on the poorest people in the community who are going to be investing in their own community.

I would hope that the government would show some other initiatives that would really stimulate the economy, and it would not all be related to the money that could be raised in the communities. I have to say that I am also disappointed in the amount of money. When you look at \$2.4 million being the amount designated for the program, as I understand was announced this morning at the MAUM convention, that is a very small amount that will have very little impact on any of the infrastructure that is happening. Municipalities have to match the money, but they are going to be matching money that is already coming from the communities.

The MBA Students Consultant Program and the Feasibility Studies Program are expansions of programs that are already in existence and cannot be considered new programs.

A comment that was made this morning that I find very positive is that I hope this program will be implemented by an independent commission rather than government officials themselves and that we do not have any political meddling in it. We have a small enough amount of money being set aside here. I hope that it is not meddled with as we have seen. We know that the minister carries a bit of a

reputation for meddling. I would not like to see it with this program.

The minister mentioned this morning that they are going to move the office to rural Manitoba as soon as possible. I think that is a positive sign. I would very much like to have influence on where it is going to be, but I do not think I can. I hope that other ministers do not meddle with it and it is put in an area that needs jobs, that it is not a political move but a move for needed jobs.

We will watch this program very closely, and again I encourage the government to put as much emphasis as possible to promote the rural community. I hope that they will put more into assistance for our young people. As we had an indication of this morning, there has been a real cutback in the number of jobs for our young people.

I look forward to the announcement that is going to be made that will create jobs for our young people in rural Manitoba. I also hope that the ministers on the other side of the House will look very seriously at what they are doing to rural Manitoba and help promote jobs, tourism and industry in rural Manitoba. Thank you very much.

Mr. Kevin Lamoureux (Inkster): Mr. Speaker, there are really two issues that we have at hand here. One is in terms of the rural economic development, something that no one in this Chamber questions. In fact, we would argue that the government should be acting on programs of this nature as a given. We would expect, whether it comes from general revenues, whether it comes from lotteries, wherever it might come from, that programs of this nature are necessary, that we need to have programs of this nature to ensure that the rural community is going to benefit in the future.

There is the other issue in which one would have liked to have thought that the minister responsible for lotteries would have stood up to. That is the whole issue of the video lotteries, where this particular money has come from. What the government has really done, Mr. Speaker, is put two issues into one and promote the one issue in which they know everyone in the province of Manitoba is going to be in favour of.

What we have managed to avoid or what this government has attempted to avoid is the issue of gambling in the province of Manitoba. They have avoided that issue by trying to tie it into different programs, lotteries or monies that are raised in what

many in this province, including this particular opposition party, would like to have a debate on. That is, of course, Mr. Speaker, the whole question of gambling. First we saw it with the casino, now we see it with the VLTs, and this is really what the government is afraid to do.

Once again, Mr. Speaker, we do not have any qualms with programs of this nature going to benefit rural Manitoba. We heard about the bonds program, another program that will go a long way. Mind you, we have some questions, as I have mentioned, in terms of the bonds office and the manner in which it has been set up, in particular one of the appointments.

Mr. Speaker, the program itself is good. It is unfortunate that we are not debating the other issue that this government has chosen to try to sidestep, and that of course being one of gambling in the province. Thank you.

Committee Change

Mr. Neil Gaudry (St. Boniface): I move, seconded by the member for Inkster (Mr. Lamoureux), that the composition of the Standing Committee on Municipal Affairs be amended as follows: the member for Inkster (Mr. Lamoureux) for the member for St. Boniface (Mr. Gaudry).

Mr. Speaker: Agreed? Agreed and so ordered.

ORDERS OF THE DAY

Hon. Darren Praznik (Deputy Government House Leader): Mr. Speaker, I would like to move, seconded by the honourable Deputy Premier (Mr. Downey), 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.

Motion agreed to, and the House resolved itself into a committee to consider of the Supply to be granted to Her Majesty with the honourable member for St. Norbert (Mr. Laurendeau) in the Chair for the Department of Health, and the honourable member for Seine River (Mrs. Dacquay) in the Chair for the Department of Family Services.

* (1440)

**COMMITTEE OF SUPPLY
(Concurrent Sections)**

HEALTH

Mr. Deputy Chairperson (Marcel Laurendeau): Will the Committee of Supply please come to order.

This afternoon this section of the Committee of Supply, meeting in Room 255, will resume consideration of the Estimates of the Department of Health.

When the committee last sat, it had been considering item 1.(c) Evaluation and Audit Secretariat: (1) Salaries on page 82 of the Estimates book. Shall the item pass?

Hon. Donald Orchard (Minister of Health): Mr. Deputy Chairperson, I think there is one question that my honourable friend the member for St. Johns (Ms. Wasylycia-Leis) indicated—no, the other information, I want to share with the whole committee.

I gave some details on the doctors that my honourable friend indicated had left the department, and she left the impression that they were leaving because of chaos and low morale in the department. I answered a number of circumstances that I knew from my own personal circumstances. There were three individuals that I would not want maligned as being one of the ones that may have indicated to my honourable friend that they left because of chaos in the department and low morale.

Dr. Ian Johnson left on December 20, 1988, the reason is personal. His spouse was offered employment in Toronto, and I would think that in all due respect to Dr. Johnson one would not want to have him left as one of the ones who indicated, as my honourable friend alleges someone indicated. Dr. Chris Greensmith left on July 27, 1988, the reason was personal—spouse's career took her to Ontario and professional. He was offered a higher paying salary. The other individual was Dr. Gary Tipping. He left on April 30, 1991, two reasons, location and salary, both being more attractive in Ontario. So I think that doctors Johnson, Greensmith and Tipping should be absolved from that blanket accusation that my honourable friend made last evening.

Ms. Judy Wasylycia-Leis (St. Johns): Mr. Deputy Chairperson, I do not think I will go back over this issue since the minister is choosing to ignore the facets to the question I raised yesterday and has

chosen not to answer the overriding concern of ability within the department to provide expert advice in the areas of community medicine and communicable diseases and so on.

So let me go on. There are a couple of other outstanding matters from yesterday and previous days. One is a list of all the studies that are underway in the department with indication of the progress for each study.

Mr. Orchard: Well, that is what I was sort of, you know, wanting to have my honourable friend here, but I guess he will be able to read the Hansard.

This is Health Advisory Network: first, activity status as of April 1992, Study No. 1, Winnipeg Hospital Role Definition, Report A, Obstetric Services, final report to be submitted to the minister in May 1992; secondly, Teaching Hospitals' Cost Review: final report to be submitted to the steering committee in June of 1992.

Point of Order

Ms. Wasylycia-Leis: On a point of order, Mr. Deputy Chairperson, not to be at all unhappy with the minister's attempt to answer the question, I am just wondering if the minister would—I had asked for a list to be tabled, and he has read, in the past, the Advisory Network reports and the progress of those studies.

So I would hate to see the time of the committee used up with a repeat announcement strictly of the Health Advisory studies. I am just wondering if we could save some time by having it tabled and then the member for The Maples (Mr. Cheema) would also be able to see it and deal with it as soon as he returns to Estimates.

Mr. Deputy Chairperson: Order, please. The honourable member did not have a point of order.

* * *

Mr. Orchard: The Teaching Hospitals' Cost Review is the report which I have indicated is before the St. Boniface/Health Sciences Centre Boards, and they are making their analysis on the report to the Health Advisory Network.

The third report, Extended Treatment Bed Review for Winnipeg, the report has been released, decisions made around it. Health Services for the Elderly, there are three reports: one on health promotion, second on health prevention, third on

housing and home care ready for release, printed in both English and French.

Report D, Services for the Cognitively Impaired, it is expected the final report will be submitted to the minister in May 1992, French translation to follow. Northern Health Services, final report to be submitted to the minister in May 1992.

The Rural Health Services, this report is printed and ready for release. Health Promotion "Choices for a Healthy Future," I have the final report; French translation is underway. Health Information System, the final report is printed and ready for release.

Alternative Health Services, four reports, Palliative Care, the final report to be submitted to me in May 1992; French translation to follow. Ambulatory Care, the second report, final report to be submitted in May 1992; French translation to follow. Report C on Midwifery, we are expecting the final report to be submitted to a steering committee in June 1992.

* (1450)

Primary Health Care, initial review to begin in May 1992. The rural Extended Treatment Bed Review and interim report expected in June 1992. Northern Air Medical Services initial review to begin in May 1992. Those are the Health Advisory Network reports.

My honourable friend wants to have the reports of the Urban Hospital Council. First of all, I think it might be important that my honourable friend knows the membership of the Urban Hospital Council. My deputy Frank Maynard chairs it—

Point of Order

Ms. Wasylycia-Lels: Yes, first of all my request was not for the membership of the committee. The minister has provided that to us. We have a list of the membership, and we have his press package that he produced not too long ago. I had asked for a complete listing to be tabled of all the studies underway in this department which includes the Advisory Network and the Urban Hospital Council and a number of other studies and task forces and reviews.

I was prepared to be patient for a time, but this is getting ridiculous, and I think the minister does not need to eat up time reading out his own press package that he provided to us and to members of the media and to the public. I am wondering if he

could just respect the request that I made in all sincerity.

Mr. Deputy Chairperson: Order, please. The honourable member for St. Johns did not have a point of order.

* * *

Mr. Orchard: Mr. Deputy Chairperson, I will not read the entire membership of the Urban Hospital Council, but my honourable friend the member for St. Johns on one previous occasion and again yesterday referred to it as the old boys' club.

I think my honourable friend ought to reflect on those phraseologies, those glib, political phraseologies. Because Major Edith Taylor, executive director of Salvation Army Grace Hospital, is a member of the Urban Hospital Council as a CEO. Carol Renner, our regional director for Winnipeg region, is also on there.

I think my honourable friend, in making her glib, political statements, might consider the sensitivities of her remarks when, in fact, it is not this exclusive old boys' club as my honourable friend indicated.

Now, my honourable friend already answered her own question. She said we already have a copy of the minister's press release from which I was going to review the number of reports. If that is satisfactory, I shall not put that on the record.

Ms. Wasylycia-Lels: Let the record show that my request was not treated with sincerity, and the intent and expression made with that request was ignored by the minister.

Let me ask, since the minister was so interested yesterday in indicating how co-operative and open he is in sharing information, if the minister could table for this committee and outline the plans that were provided to the chairpersons of the boards and chief executive officers of health facilities in the province of Manitoba this past Saturday regarding wage policy for this government.

Mr. Orchard: No, Mr. Deputy Chairperson.

Ms. Wasylycia-Lels: Mr. Deputy Chairperson, that information was provided to health facilities throughout the province of Manitoba. Discussions took place. There is some concern coming from those discussions. There is some confusion in our health care facilities around the policies of this government. I do not think it is too much to request that the minister share with this committee the general policies as outlined to those hospitals

regarding wage policy and regarding overall budgetary matters for health facilities.

Mr. Orchard: Mr. Deputy Chairperson, I am going to try to maintain the greatest degree of calmness that I can, but here from opposition, my honourable friend the New Democrat, is wanting to know the bargaining position of management and wants it tabled for all and sundry to see when we are entering—MHO is entering negotiations with unions providing health care service in the province of Manitoba. I want my honourable friend to quietly consider whether, in the history of this province, New Democrats in government, Conservatives in government, that ever before has there been a request from an opposition party for the bargaining position of one side or the other when bargaining is ongoing.

The New Democrats in government have never, never released a bargaining position when their negotiations were ongoing, and from opposition now my honourable friend with her usual glib and phantom rhetoric saying, there are concerns that have been expressed to me. Well, my honourable friend is the most concerned person I have ever run into without any identified attachment of whence those concerns come from other than my honourable friend's mind.

I tell my honourable friend, I want it clearly established, is the New Democratic Party now saying that policy of the New Democrats in all bargaining is for one side or the other to be asked to put their position on the table while the negotiations are ongoing? Is that the new policy demand that the NDP is going to make? Because if that is the case I want my honourable friend to state that unequivocally, because I want to tell my honourable friend, I will not negotiate in public. I will not compromise the negotiating position of MHO, nor would I, if I had the details of what the union demands were, put those on the table while bargaining is commencing and ongoing.

My honourable friend, in making that mistake, has really gone over the edge of trying to—well, I do not know what my honourable friend is trying to do.

Ms. Wasylycia-Lels: Mr. Deputy Chairperson, it is always interesting when this minister has a burst of indignation. When it comes to questions pertaining to anything that gets at the overall funding policies and budgetary policies and strategies of this government, we spend hour after hour trying to

ascertain a general policy framework around funding for hospitals and health care facilities for the Province of Manitoba. Any time we attempt to get that broad framework and get an understanding of where this minister is coming from and where he is going, he has these outbursts of indignation and refuses to even to treat those requests with any kind of courtesy.

Mr. Deputy Chairperson, the minister likes then to cast the opposition's questions in terms of which they were never phrased and cast them coming from a certain position, when they are objective questions about overall budgetary policy.

Mr. Deputy Chairperson, I, at no point, asked this minister for his government's bargaining position going into a set of negotiations with labour around wages. I asked for the overall plans with respect to hospital budgets and the directions provided at a recent meeting as those budgets pertain to salary negotiations. I did not ask for the detailed plan of this government's negotiating strategy. I asked for overall policy and funding directions.

Mr. Deputy Chairperson, that is not unreasonable to ask when this minister leaves this House and this province with the impression that there is this 5 percent increase for hospitals, which never seems to be the case, which is never borne out in terms of reality and actual situations facing hospitals. We are simply asking for some broad indication of how that breaks down and what hospitals will be getting.

Now is it not interesting? We have tried asking this in a number of different ways. We have tried asking for the overall framework for reform and how hospitals fit into that. We have tried asking for the increase that is going to each hospital. We are told that that is just out of the question at this point in time, unless we wanted to speed things along and get right to the line on hospitals in this set of Estimates. We have tried asking questions about specific hospitals, as we have learned about them. We have tried to piece together, bit by bit, the plans of this government, and have been stonewalled. Our questions have been dismissed, out of hand, by this minister. So, Mr. Deputy Chairperson, we keep trying.

Part of this overall funding issue for hospitals is the question of, if there is an increase to hospitals, how it breaks down in terms of supplies and how it breaks down in terms of salaries. Now, since when is basic information like that interfering in the

government's bargaining and negotiating process with the facilities and with the unions representing the workers at those facilities? Mr. Deputy Chairperson, I am asking broad policy questions. They are in order, and the minister is deliberately stonewalling.

* (1500)

I am asking because part of this whole discussion has to do with what this minister is including in his numbers and what they actually mean. When it comes to the overall operating budgets, we do not know, Mr. Deputy Chairperson, to this day if there is an increase; if there is an increase, on what that is based; whether there has been such exorbitant requests that there, in fact, is a real increase in each and every hospital of 5 percent across the board. We do not know how that increase splits out in terms of operating and wages. Now we do not know, when it comes to the salary component of hospital budgets, what part of that is provided in terms of the overall negotiating process and what part has to do with meeting some other obligations, like pay equity.

Because, Mr. Deputy Chairperson, we are concerned with this government and its policies on pay equity and how it chose to go the court route before dealing with its obligations to meet its responsibilities under pay equity legislation. We know it has been the case in the past that this minister and this government have dealt with their obligations around pay equity as part of overall salary negotiations.

Mr. Deputy Chairperson, we have expressed those concerns in the past. They are legitimate concerns in the present, and we will raise them in the future. To ask for that kind of broad plan and information is quite in order, and for the minister to treat that request the way he has just done is clearly a dismissal and an attempt to circumvent this democratic process of Estimates and the legitimate role that we have in seeking information about this government's budgeting process.

I do not think it is at all out of order, and I would, with respect, Mr. Deputy Chairperson, ask the minister to provide us with some of that general information.

Mr. Orchard: Mr. Deputy Chairperson, now my honourable friend is trying to change her question, after realizing that she asked for something that government and anybody in a bargaining position does not provide. My honourable friend asked for

the details that the department shared with MHO last Saturday. That meeting, since my honourable friend obviously has a "source," was to deal with the funding mandate that government would provide to MHO as the employer in the upcoming bargaining with several union groups. The funding mandate was given, and from that we are asking MHO, as has always been the case, to craft the best offer they can, given the difficult circumstances we face, and not having unlimited tax dollars to draw upon, to try to come to a negotiated settlement with the unions.

That process is not open to the kind of information sharing my honourable friend is asking for. It never has been, it never should be, and my honourable friend knows that requesting it is a significant digression from policy that she herself lived by when in government. Government did not share their bargaining stance with anybody else other than MHO and the management, and neither will we, because the bargaining process is one that you do carry on with some integrity around the process of confidentiality. Both sides respect that. My honourable friend is wanting me to break it. I will not do that.

My honourable friend wants to talk about the bargaining process, et cetera. What we have told the MHO is that there are so many dollars that we can make available at their disposal to achieve a settlement. We have also indicated that there will be no additional dollars so that, should they settle for some higher figure requiring more dollars, those dollars would have to come from the global budget.

Now, my honourable friend may wish to cry foul in that, but I remind my honourable friend that if she does, then she ought to explain how the New Democrats would handle the circumstance in Manitoba differently from the New Democrats in Ontario, who at the last nurses negotiation in Ontario, left the beginning pays at the same level, raised the senior level of nursing pays rather extraordinarily, and then did not provide one cent of funding for that settlement that they acceded to. The administrations there were left with an agreement and no funding from government. That led to significant layoffs and bed closures.

In addition, my honourable friend mentions pay equity. My honourable friend disenchanted with the implementation of pay equity? That is interesting. Ontario is not funding pay equity in the base-line budget, as we are.

Is she suggesting the Ontario solution is better than the Manitoba solution? I would be interested in hearing my honourable friend's comments.

I simply tell my honourable friend that, when she is asking that government, hence management, lay out the details of their bargaining strategy in union negotiations, she is asking for something that she never, never, never would have acceded to, would have dismissed out of hand if she were in government, just as I have done.

I want to tell my honourable friend that I am somewhat disappointed that this is the tactic of the New Democrats in opposition. You would not do it in government, you did not do it in government, and you are asking me to compromise the bargaining process by laying out the details of MHO's position as based on a meeting we had with them as government on Saturday, April 11. Well, I cannot do that, Sir.

Ms. Wasylycia-Lels: I repeat, Mr. Deputy Chairperson, I am asking for general policy of this government with respect to funding of hospitals, which has a couple of components, I remind the minister. When funding budgets, as the minister has indicated in the past, one has to look at supplies, operations, salaries, capital, all of that.

We have been trying to sort out in this process, since the minister touts a 4 to 5 percent increase for each hospital, yet we keep hearing from different hospitals that they are finding difficult situations on their hands and must make adjustments accordingly.

We are asking for some very general information about the minister's funding policy for hospitals—how it breaks down, what are the broad parameters, and yes, we did get concerned when we read in a memo from MHO to all the boards and chief executive officers of health facilities, and I quote: that in 1991 the government indicated that it was prepared to fund collective agreements out of an envelope. In 1992, we are hearing that government is only prepared to fund a certain level, leaving the facilities to find a shortfall within their budget.

* (1510)

That is a broad policy area. That requires—Mr. Deputy Chairperson, the minister just yelled out, and I just told you that, but let me remind the minister what it took to get to this point. It took a lot of verbal abuse from the minister, it took about half an hour.

I do not know why we cannot simply ask questions and get broad information. The minister does not have to go on in terms of these diatribes and attacks on individuals, and we should not have to pull teeth in order to get information.

I appreciate that the minister finally answered part of my question. The other part I am still seeking an answer for, and that has to do with pay equity. He raised Ontario and asked the question if we wanted to move in that direction.

I am asking this minister for Manitoba what his policy is with respect to meeting his obligations under pay equity and how that fits into his overall funding policy for hospitals.

Mr. Orchard: We have complied with the tenets of the legislation. Having that be subject to a court challenge, government is in discussions around that issue. By complying with the legislation, irrespective of the court challenge, government funded in the base budget those dollars. This government funded in base budget those dollars required for pay equity that we believed met the criteria of the legislation that we passed in this House.

In addition to that, we exceeded the legislation with extension to beyond the 23 named facilities in the legislation as passed in the House. That also was base budget included in the global budgets of hospitals, contrary to Ontario, to achieve pay equity for the nursing profession, for instance, in all facilities across Manitoba. This government provided base budget. Ontario did not.

Now, that is a general policy to date. We are finding ourselves continually stressed for dollars in health care, and we are making best effort to provide funds for reasonable settlements given today's economic circumstances. We are asking the MHO, as the employer, and the bargaining group, from government's commitment to funding, which is not as much as they would like to see, nor was it during the nurses' strike; however, we ended up reaching an agreement very, very close to our original offer of January 1.

We are asking again the managers of the system to bargain as firmly as they can, and to craft the best possible offer out of a commitment of government funding which we have given to them. Should they exceed that, they will have to find the additional dollars from within in their global budget because the finite resources of government are identified,

and we have given them a clear bargaining mandate. I am not prepared to share with my honourable friend details other than that because I will not compromise that bargaining process.

Now, does my honourable friend want to ask any more questions about the progressive policy on funding pay equity in Manitoba when Ontario does not fund pay equity?—and comment as to whether who is right or who is wrong, because I will tell you, the taxpayers of Manitoba would have saved a big chunk of money had we followed the NDP policy of Ontario on pay equity, and not funded it.

Ms. Wasylycia-Leis: Yes, I just had one follow-up question to the issue of pay equity. Can the minister tell us now, approximately what is the price tag for achieving pay equity to meet the obligations from the court ruling and all facilities beyond the 23?

Mr. Orchard: I will provide that detail.

Mr. Gulzar Chøema (The Maples): Mr. Deputy Chairperson, I want to raise a few questions about the Seven Oaks Hospital as I have a commitment with the hospital administration that the issues will be only raised after they are made public and after their press conference.

So we have this press release from the Seven Oaks Hospital and it is sending two messages. One message is that we must not be jumping the gun before having a look at the facts because it was told that in the House today, and I am again disappointed that the member for St. Johns (Ms. Wasylycia-Leis) said it is for \$1.2 million, so many beds are going to be cut, so many people are going to lose jobs.

Mr. Deputy Chairperson, I work in that hospital. It is very painful to see anybody lose jobs, but the issue here is where the cuts are coming, how they are going to manage with them, very difficult resources. As long as the patient care does not suffer, I think that is the issue here. The patient care must be kept and we will be very watchful because there have been some, about ten, summer beds increased, but that could change because I understand each and every hospital has a policy which varies from year to year and time to time, depending upon the circumstances.

So I want to make it very clear that that has to be—maybe the minister should have a good look at that, how if there is an increased demand, if there is a problem, then those beds can be reopened, to implement additional 10 short bed stays, one of the things to do in this time.

Everybody in this country is looking for those solutions where one can have a selective bed admission, and I think that is one of the ways. That will save some money. Definitely some people are going to be laid off, and I have great sympathy for them, but to scare people for the last almost two weeks, a lot of staff have stopped me and asked what am I doing; I am working with them, why am I not raising the issue? I said I want to have a look at the facts.

The facts are telling something which is very, very different and very, very away from the normal, what the member for St. Johns (Ms. Wasylycia-Leis) was telling in the House and making us look bad, especially me because I work in the institution. It looks very bad that a person who works in an area will not raise an issue and show them they are uncaring. That is simply not true. I want to put it on the record.

I am going to send to each and every staff member of that hospital, as far as I can do, to make sure that they know that we are for health care, for patient care, and we will be very watchful. But I want the minister to make note of this, one of my objections, which is for 10 bed closures, for extending during the summertime, to make sure that, if there is an increase in the demand as we shift from the larger institutions to the community hospitals, that could change. So I think that has to be kept in mind.

The other issue is of the people who have lost their jobs out of this very unfortunate situation. In terms of their own livelihood, I think if they can be given a chance in other institutions or within the Department of Health, where there is a competition for similar positions, that it will be helpful to get them back to serving the community again. Also, I think they could be a part of the community care which is going to be a component once more reform comes. So with that, I will end my remarks and I will see what the minister has to say.

I do not want to be seen in the House in terms of saying that I am not raising an issue when it is being raised in my workplace where I worked for the last seven years. So I would also send a copy of Hansard to the board of directors and to Mr. Kalansky because it was very important for him to communicate with us in a very open fashion and a very direct way, and, I think, also the medical staff and other people, the nursing staff and the other support staff, who have been led to believe that the

disaster is going to fall and patient care is going to suffer. We should be very, very careful. This is one example.

* (1520)

That is what the media was asking me outside, and I made my views very well known on that. I think it is very, very tragic. So I would again caution the member for St. Johns (Ms. Wasylycia-Leis). Those kind of things do not help any one of us, because it is not sending the right message. She has all the right intentions, but we should look at the facts. Let us debate this. Let us see which party says what should be done within those restricted resources, how we are going to fund the system, and which patient is going to suffer here. I would like to know. My questions are also to the management.

So we will be watching that. We are not giving a blanket cheque here, but we are simply saying, let us be reasonable. People will not forget because some people have put a lot of staff in a very, very fearful way; it was very bad this morning because everybody was so afraid. So I think most of the people will be very satisfied.

They may not be all happy with the staff situation, but I would like the minister to make sure that people who got laid off, that they get proper guidance in terms of reapplication within the department, if there are new positions that are coming and within the community care component or within the outpatient services. Those are very essential then.

If the message goes in that way, I think that will help to ease the pain, but it may not solve the problem right now. So I would like the minister to, if he wishes to, comment on those things.

Mr. Orchard: Well, Mr. Deputy Chairperson, I appreciate the very sensitive position my honourable friend is placed in. He is really wearing two hats.

He is wearing the hat in his private life and personal life of a caregiver at an institution. There are expectations and pressures, I am sure, that are put on him by his co-workers to try and come to grips with some of the rumours that were proliferating around the institution.

Then the second hat my honourable friend has got to wear is one of an MLA who, as an MLA, has made the very conscientious decision to try and be very objective in the criticism that you lay on

government's activities, including health care. You know, I have been there.

I mean, I have been in opposition without the problem my honourable friend wears, of a career in health care delivery. So I had a bit of the luxury that I could take every single little rumour and, if I so desired, bring it to the House without the concern of whether I was compromising the institution I worked for, et cetera.

I appreciate my honourable friend's delicate balance in that, because that is the by far easier political decision, to simply take the shotgun out to shoot at everything, which happens, not from my honourable friend, but from other sources. So you know, I respect his concerns, his professional integrity in terms of expressing his concerns about how the system is going to change and how institutions are going to change.

Some specifics in terms of what I understand to be the Seven Oaks action plan—the member for St. Johns (Ms. Wasylycia-Leis) mentioned a figure of \$1.2 million I believe today in Question Period. I do not know the source of that information but, if I could be so kind, it again appears to be not absolutely accurate.

The number that is put forward in order to achieve a balanced budget for 1992-93—there was a financial target for reduction of approximately \$767,000. A number of the initiatives, and there are seven of them, compromise or compose those initiatives at Seven Oaks to achieve a balanced budget for 1992-93.

I want to read the second last paragraph from the chairman of the board and the chief executive officer of Seven Oaks Hospital. I quote directly: This amalgamation of responsibilities will not impair negatively on the quality or volume of services offered at Seven Oaks General Hospital. All other staff will continue to concentrate their efforts on the provision of high quality services to our patients.

I think that is a pretty responsible decision-making effort that the board of Seven Oaks and the management and the staff of Seven Oaks have attempted to come to grips with funding that is not as high as they would like it to be or as high as we would like it to be, for that matter.

The financial circumstances of the province do not allow us to provide that extra money. So, Seven Oaks had undertaken some seven initiatives. The implementation of an additional 10-day short stay

unit, my understanding is that right now Seven Oaks operates two 10-bed short stay units. One of them operates 10 beds seven days a week. The second one operates an additional 10 beds five days a week.

I am informed that they will be operating all 20 beds at five days a week. So they will not be operating one 10-bed unit on the weekend in my understanding. They have a management organizational review and reduction—incidentally, that first initiative is budgeted to reduce their expenditures by \$75,000.

The management organization reduction and review is expected to reduce the budget by \$422,000. That is where the majority of the layoffs, as I understand it, will take place. There are 10 management positions involved. The net result was the accommodation to integrate management functions and amalgamate positions thereby reducing 10 management positions, which involves two director positions and eight manager-co-ordinator positions in nursing, materials management and environmental cleaning.

You know, it is really quite coincidental because yesterday, as I was attempting to leave the debate at the MNU, it is almost prophetic—not prophetic, I want to make sure that Hansard picks it up right—but a nurse, one of the shop stewards came to me and indicated that, look, she understands the difficulty of changes that have to be made and that a Health minister's job today in any province is a tough one, but she indicated that there are areas where the hospitals can effectively contain budget without compromising patient care.

The one area that the individual gave me, and I put it through to the department to see whether this was accurate—I like to check the details because I had not heard of this one before—but the indication by this staff nurse was that Seven Oaks had a nursing management system which maybe had half as many beds under the management purview of a nurse manager than similar institutions. She indicated that clearly that was a management position that, just bringing it into line with other institutions, would not compromise patient care and would be a significant budget saving.

It appears as if this individual must have made that case to the management directly, because I had encouraged her to take those kinds of suggestions

forward because they are exactly the ones that we in government are wishing our management within institutions to seek so that changes can be made without compromising our ability to deliver patient care. It seems as if the message that she gave to me had already been received by board and senior management at Seven Oaks.

That does not mitigate in any way, and my honourable friend the member for The Maples (Mr. Cheema) alluded to this, the personal effect of the individuals laid off. I mean, that is a traumatic event for those individuals, and certainly the system in general will try to accommodate redeployment of those individuals, but it is a significantly different issue than if, for instance, Seven Oaks, as was the pattern 15 years ago when budgets were asked to be contained at the hospitals, to not consider management but to often have a tendency to go directly to wards for patient care, close them and lay off nurses in the most politically sensitive fashion possible in an attempt to have government back away from asking managers of the system to make sure we are managing appropriately.

It certainly appears as if, even though these layoffs are traumatic for the individual so affected, the board and management of Seven Oaks have some degree of comfort that it will not compromise patient care. I have to say, from my initial information, that I have to concur. It is a significant amount of saving, \$422,000 projected.

* (1530)

Going on to some other areas, and the other significant area is nonmanagement staff reductions, I am unable, because I do not have details around that although—no, I do have the details in here. In addition to the management positions, other reductions have occurred in nonmanagement staff as well. Specifically, five other positions in the area of physiotherapy, occupational therapy, social work, dietetics and nursing were deleted, and the layoff notices have gone out. There were some early retirements; there were some vacant positions. It appears as if there are seven layoffs in total, I think. I will stand corrected if the figure is higher than that.

My honourable friend the member for The Maples (Mr. Cheema) indicates a concern he has over the increase in the numbers of surgical beds that are being proposed for summer bed closures. I share my honourable friend's concern. However, I do receive some comfort from the statement that these

decisions will not impact negatively on the quality or volume of services offered at Seven Oaks. So, quite possibly, we may be seeing the ability to add 10 surgical beds over summer closure because of a combination of a lowered slate and shorter length of stay, et cetera—all management and patient care techniques that have been part of our health care system.

Mr. Deputy Chairperson, I guess I would have to close and respond from the information I have before me today that the board and management of Seven Oaks Hospital have taken their responsibility quite seriously and, I believe, have made changes, which are never easy to make, and decisions, which are never easy to make, but have kept the patient at the centre of their decision-making process and appear to have been able to achieve a little better than a \$0.75 million budget reduction to maintain a balanced budget position. I have done it in what I think probably is a pretty reasoned fashion, contrary to the stated questioning of critics of that process, both in the House and outside of the House.

Mr. Cheema: Mr. Deputy Chairperson, about those surgical summer bed closures, as the minister knows from his previous experience as a minister and before that as a critic, each and every hospital makes those decisions depending upon the last year's projected work and the occupancy rate.

Why I am raising the issue is that I think when it is going to be for the changes in the teaching hospitals and some of the beds are going to be reorganized—I will be very careful to use the word "cuts," because that could be used against me, that I am favouring cuts, and I want to make it very clear that there are words one can use and abuse, but it is just reorganization—and when those patients are going to be released into the community, and the community hospitals are major components of the community.

So certain changes may very well have to be made, because this is less expensive and that is what the health care providers would like to see, and certainly, as the minister has said, that there are two positions out of the department of occupational therapy, social work, dietetics and nursing, three are already vacant and two individuals are going to be laid off and seven from the initial management positions. They are quite senior positions, and I am sure if opportunities are given to those people to serve in another capacity from time to time, the positions come when the department has very

experienced people and a communication from the Minister of Health's department, personally saying that we will try to accommodate. We will be very helpful and very easing in these tough economic times.

That will really take some of the negative things away. It will not solve the whole problem, but I am sure it will help because it does—because nobody is out there to really accuse things, and they have pretty good understanding of the system. That is why I was very careful because once you work with people for almost nine years, day to day, it becomes very difficult to see those people lose their jobs, but difficult decisions the management makes and you have to respect their decisions based on the basic principle of patient care.

One very good thing that was happening at Seven Oaks is that we have not seen any closing or backing of the emergency room either for the last few months. There is more efficiency and they have served 2,000 more patients over a period of a year. It has been a very good and very effective way and something is being done there.

I would have raised an objection if we would have had a backup in the system, saying there are so many people waiting in the corridors. That is not happening now, because first of all, Deer Lodge has accommodated some patients out of the third floor and also the fourth and fifth floors of Seven Oaks, and some patients have been able to go into a personal care home, and the period has shortened.

I think those things we must take into consideration because that is one thing behind this process. If you see that not many individuals are waiting in the observation unit, which is again 14 beds, that is also extra bed capacity. So that caused the system to back up because the patients cannot go upstairs.

So I think those freeing of beds and also continuing to provide some of the services in terms of the psychogeriatric which is very efficient and, of course, the development of geriatrics, which has probably been a model in Manitoba, has been done very well in Seven Oaks Hospital.

As for the other issue which I think needs to be implemented in other hospitals is a physician management team they have at Seven Oaks. The physician is given a responsibility in a department to make sure that if there is an average, for example, of a five- to seven-day stay for a given illness, the

physician is checking on the other physicians, and it is not in a negative way, but in a very positive way, says something can be done. Maybe this patient should be discharged or we can put something into the community.

More meetings are being done in terms of the co-operative care, which is working very well. Co-operative care is that when the patient's family comes in, you get the nurses, you get the hospital staff, and everyone sits at the table. They are trying to initiate admission-and-discharge planning in advance, and that is helping.

We get into a situation where sometimes the families have a difficult time to take the patients home, but, overall, the message is getting across in a very positive way. The co-operative care is another model which has to be expanded. I am sure the minister knows about co-operative care and the physician management system, which was picked up, I guess, from the States or someplace else.

It is just a Manitoba model, and it is working with one's own colleagues. They are private practitioners, and they have their own interests as well, but their first interest is patient care. I think that is functioning extremely well at Seven Oaks. I used to work at St. Boniface, but I cannot do it anymore because there are only 24 hours in a day.

Probably that is why we are not seeing a major, major reduction in terms of the patient care. That is the reason. There are a number of factors that have impacted on many areas. I just want to let the committee know and the individuals who read the Hansard and the media that there is a lot of valuable information one has to put into context before the decisions are made.

Those people have to face the individuals every day. Even if one day or two days in a week you have a backup in the emergency room, there will be major trouble, and I will be the first one to make a noise. But that is not happening because something is right, something more efficient is being delivered.

I think the community-care complement is functioning much better. The north end has a population from the senior group more than some other parts of the city. Those are some of the things I want to put on the record and make sure that our views and our comments on Seven Oaks are based on the facts and figures and not on the numbers picked up by someone, who says in six months or two months just to make the government look bad.

People in the area are very frightened, and I think they will get a message. It will not be all positive, but eventually it will improve the situation and the patient care will not suffer.

I think especially the selective bed admission program has to be expanded. I do not think we have any choice. Five days admission or you want to give it any name, a short bed stay or selective admission or nonweekend admissions, establishment of preadmission clinics, which is being done at Seven Oaks, and I am not aware it has been done at other hospitals.

The preadmission clinics, with the post-discharge clinics, along with the early discharge program in many illnesses, are being very helpful. Patients are being sent home even with the IV medications, the families are being trained, and people are participating.

I think that is what is getting across. They know that each and every one has to participate. I can tell you that you meet with so many individuals in the hospital setting who have no political bias, and I think the message is getting across that things have to change. As long as we all know the facts, then we can criticize if something is not going right.

* (1540)

I want the committee to know that our comments are based on those facts, and if somebody or other individuals want to twist them the way they want it, so be it. We are not going to shy away from responsible opposition.

Mr. Orchard: I just want to say to my honourable friend that there is a difference between criticizing and critiquing. Critiquing offers both positive and negative comments around an issue and where the process needs to be changed. A good critique will accomplish that, and I think that is what my honourable friend is trying to do. That makes for positive change in the system.

Mr. Deputy Chairperson, while I have the floor, the member for The Maples (Mr. Cheema) asked for four pieces of information yesterday, at least I believe he asked about the anesthesia report.

Mr. Cheema: Yes.

Mr. Orchard: That is the Atkinson report?

Mr. Cheema: I have the draft.

Mr. Orchard: Yes, I know you have a copy of the draft copy. I realize that, but there has been some indication, and I believe this may be stimulated from

questions made by the member for St. Johns (Ms. Wasylycia-Leis) last week that there have been two studies. There has only been the one study carried out by the department. Dr. John Atkinson of Ottawa was engaged to carry out a study of anesthesia services in Manitoba and to compare the service to cross-Canada data. The study was commenced approximately April of 1991 with a first draft report provided in August of 1991.

A number of the terms of reference required further clarification and, as a result, Dr. Atkinson engaged the assistance of a local medical economist, Michael Lloyd and Associates. That may have caused my honourable friend from St. Johns to come to the conclusion there were two studies. There is only one retention and that is Dr. Atkinson. He has engaged from within his contract obligations Michael Lloyd and Associates to add information that he was unable to provide.

Second draft of the report was received March 24, 1992. It was shared with the concerned hospitals on March 30, 1992, hospitals and anesthetists for their review and comment. We have asked the hospitals to comment back by April 15, and we hope to be able to finalize the report by the end of April. The cost of the review to date is approximately \$78,000 inclusive of Dr. Atkinson's retention of services from Michael Lloyd and Associates.

Another piece of information that I want to reconfirm, the allegation I think was made by the member for St. Johns (Ms. Wasylycia-Leis) last week that when we met with the administrator of the hospitals and the anesthetists on March 30 that we ordered them to unilaterally reduce the budget and respond in 36 hours. However my honourable friend gained that information, I simply indicate to her it was not accurate information. We did not mandate any response in 36 hours as my honourable friend indicated. What we confirmed was that, as we had indicated at previous meetings, we would not be providing any bridge funding or supplementary funding to the hospital budgets for their topping up of anesthetist services.

Second, the piece of information that the member for The Maples (Mr. Cheema) requested was details around the Drysdale Consulting contract. The contract period was January 1, 1989, to March 31, 1990. The contract amount was \$36,000. It was approved by Treasury Board in 1989, and there were additional costs of \$1,174.74 for mileage, meals, telephones, accommodations, incidentals as

expenses attached to the contract for a total cost of \$37,174.74.

Now, the member for The Maples inquired yesterday as to the actual expenditures of the Health Advisory Network. In 1988-89 the actual expenditures were \$100; in 1989-90 the actual expenditures were \$193,300; in 1990-91 the actual expenditures were \$433,300, and I think it is fair to say, in that year that that was when they retained Michael Lloyd and Associates on the Teaching Hospital Review. That was the highest annual expenditure that the Health Advisory Network experienced. For 1991-92 the projected actual expenditures, because we just finished year end, we believe will be slightly over \$213,000, and we are budgeting \$250,000 of expenditures for this year.

(Mr. Bob Rose, Acting Deputy Chairperson, in the Chair)

The last question I believe my honourable friend the member for The Maples (Mr. Cheema) asked was for the Standing Committee on Medical Manpower, SCOMM, we budgeted a little over \$290,000 in 1988-89 and spent \$280,200. In 1989-90, we budgeted a significant increase. That was the year that we budgeted \$703,700. The committee put a number of programs in place, but because they triggered in partway through the year, their actual expenditures were \$482,400. In 1990-91, the budget was increased again to \$724,800. The actual expenditures in '90-91 were \$619,600. The budget for '91-92 was increased again to \$746,500 and it is estimated that they will spend \$700,000 of that budget. We are budgeting a level budget this year of \$746,500.

Mr. Cheema: I just want to ask two or three questions on the issue of anesthesia. The report the minister has indicated, I had a copy of the draft report as of March '92, and I think there was one report that was in 1989, but that was by the anesthesia section through the MMA. That report gave a lot of information, and from that report I did raise probably about 10 to 12 questions in Question Period alone for a period of four years. The basic concerns were expressed at that time in terms of the shortage during '88 and '89, and also the possible retention of the anesthesia manpower in Manitoba.

Now from this report, there are a couple of issues which are quite serious in terms of the future of the community hospital, in terms of the Seven Oaks and Concordia hospitals. The report has made some

recommendations, it is in a draft form, but I would like the minister to have somebody pay more attention to that issue because it says that the people who are serving in the community hospitals, their compensation packages in terms of the services they have provided in the past, will be taken away. They are given a six-month self-grace period now, and they will be renegotiating again, but that does not go in line with the change in the health care reform, if there are going to be beds taken, if the beds are going to be reorganized from the institution to the community hospital so the community hospital may end up doing more work. I think those things must be taken into account.

* (1550)

The other issue here is the age of the two or three people who are serving these hospitals and if their working environment is not adequate it will cause some difficulty for those hospitals. In a way this report is treating the teaching hospital in a different fashion as compared to the community hospital, and that is where the problem is. Those issues were brought to my attention and I raised them today in the House. I would like the minister to look from an overall reform point of view rather than only from the teaching hospitals where the support is mostly concentrated. I will see if the minister wants to respond to those comments.

Mr. Orchard: Mr. Acting Deputy Chairperson, I am always willing to listen to my honourable friend's suggestions on this one. I will tell you straight out that this frustration with anaesthetists' salary or ability to earn income in Manitoba has been a frustrating problem that I inherited in 1988. I think it is fair to say, it was a problem that frustrated the previous administration as well.

To try and put the problem in simple and short and general terms, the way various specialists have had their compensation levels set has been at the sole discretion of the MMA as the bargaining agent, the union, for doctors. For whatever reason, over the past 20 years, some groups have done well; other groups have not done so well.

Unfortunately, anaesthetists in Manitoba, in relative comparison, have not done well because the internal reallocation of dollars given by successive governments to the MMA has led to a distribution that has compromised the ability of anaesthetists to earn income in Manitoba in relative comparison to other jurisdictions.

An example I have often used is for one procedure, our fee schedule in Manitoba pays over \$2,300, the Ontario fee schedule pays just over \$1,300. That is an example of one professional group at the MMA table being generously treated, if I can be so bold as to say. That did not solve the problem of anaesthetists; in fact, it exacerbated it.

Our efforts have been in negotiations with the MMA to try to correct that problem, but suggestions that we have made in agreements that have been turned down by the executive of the MMA would have made a significant contribution to resolving this problem. But that is past history. You cannot have 20-20 hindsight. I am sure even the MMA executive that rejected the offer in late 1989 would love to accept it today. But that is not in the cards.

We tried when we settled in the fall of 1990 to have a portion of the 3 percent increase, a greater portion of the 3 percent increase, dedicated to anaesthetists. That was rejected by the MMA as a bargaining position put forward by government. They acceded to some increased fee schedules to rheumatologists, pediatric, cardiac surgery, and, I believe, geriatric medicine, but they refused to put a greater portion of the 3 percent towards anaesthetists' compensation, and so the problem persisted.

That is general background. Specific background: we had problems commencing spring of 1990, where we funded an arrangement with Seven Oaks Hospital. That led to sort of a leapfrogging of the problem, where, in reality, government was being called on directly to put money to end-run the bargaining process with the MMA, put money directly in to support one specific medical discipline, namely anaesthetists. That is not a satisfactory way for us to operate, and it really lets the MMA executive off the hook.

I mean, I will be very blunt: they created the problem, and the pressure on the system from anaesthetists led government to provide extra monies, which was outside of the negotiating process. That is not proper. If we have to solve problems directly with specific professional groups in medicine, then you have to ask yourself: Do we even need to bargain with the MMA? Why do we not just settle with all the groups separately? That is not what the MMA wants, on one hand; but, on the other hand, they do not want to come around the issue of rectifying a problem they created for anaesthetists.

The long-term solution is in negotiations with the MMA and with completion of fee schedule reform. An interim solution was attempted to be achieved, starting in December of 1990, approximately, wherein we began the process which led to the engagement of Dr. Atkinson and the subsequent report that came to the board.

The essence of that report is to approach the problem in terms of the availability of trained anaesthetists. The report makes suggestions on how the training program at the Faculty of Medicine can deal with that. The main comparison done in this Atkinson report was to compare our compensation package at our community hospitals, teaching hospitals, with national averages.

If you use the national average, if I recall, of anaesthetists' billing \$40,000 and above, our current compensation level compared favourably. The consultant also put in a comparison of \$100,000-and-plus billing, where we fell into relative disparity in that particular comparison. We have always used the \$40,000, but that is a moot point at this time, wherein the comparison showed reasonably for Manitoba.

There is another problem: community versus teaching hospital. The community hospital problem is that their volume of off-hour, if you will, requirement for anaesthetists is low compared to the teaching hospitals in most cases, so that retaining fee for service in the community hospitals may have an anaesthetist on call all night or on standby all night without earning any income because there was no demand. That led to a sessional fee system at the community hospitals, it is my understanding. The fee-for-service schedule remained in place at the teaching hospitals because their increased volume did not compromise, to the degree that it did at the community hospitals, the ability to earn income.

One of the recommendations, given that we have a reasonably favourable comparison nationally on the sessional fees at community hospitals, is a redistribution of about one-fifth of anaesthesia funding by changing the assignment and value of sessional fees. That reassignment was to go to enhance the fee-for-service compensation rates, which does what my honourable friends says, moves from community to teaching hospital, but comes around on the larger issue, the relative compensation issue.

I have never said that this is a perfect solution. We are expecting comment back from the facilities, and, hopefully, we can come to some interim solutions. As I indicated already, the long-term solution is in the negotiations with the MMA and, more importantly, with fee schedule reform. Within the \$250-million-plus budget that we routinely make available to physicians of Manitoba through distribution by fee schedule established by the MMA, we see an opportunity to enhance the relative income earning opportunity for anaesthetists in Manitoba from within that global budget.

Mr. Cheema: I think that, in terms of the whole lagging behind and the payments for the anaesthetists in Manitoba, it is quite clear from their fee schedule for the last 15 years or so. I mean, how they lagged behind, and lagged behind, and then, ultimately, when the crunch came, it became a critical problem.

I am sure everyone knows it, but how to solve it in the long run, that is going to be a major question. Right now, we were able deal with the situation for two years or so, and now this situation came back again. Within six months there is going to be again some difficulty of adjusting and renegotiating.

Ultimately, I think the basic question is going to come here: As taxpayers, do they have a control on \$250 million or more? If they do not have any control, then why people who are not making decisions, why do they get blamed? That is the issue here. It was not under somebody else's control, but the decision was made with a collective agreement within their own association who divides the money and that is their wish, and that is how they would like to be.

But, ultimately, these are the circumstances where we end up. The mistakes which were made 10 years ago, somebody is paying for them now, and if we do not correct the system now, somebody will be again accusing some people right now. So I think, other than anaesthesia, there has to be a major focus in terms of how the money is going to be divided, rather than saying money, how the financial resources are going to be divided, and whether the government should have control or should not have control, is going to be quite an interesting public debate—very much so, because that is one of the public education campaigns, to tell people who is spending their money, and how it is being spent.

So if we look at the whole issue of the payment for the anesthetists in Manitoba, I think it is very unfortunate they are left in a situation where they have to almost plea every six months to fight for their case, but I think the larger problem has to be solved. The larger problem is the funding formula and within the MMA's bargaining power, and also taking into account what the Treasury Board is going to give, and whether they are going to have control. If they are not going to have any control, then nobody should be getting blamed for it.

Ultimately the public suffers. Still the responsibility comes to the government anyway, whether we do it or not. That is not the issue here. It is just that somebody can wait for four years, say, well, we will have a committee next year, and the next election is going to come and then the problem is going to come back again, saying to the other administration. I think it is fair to say that there has to be a reorganization of the whole funding formula, and that has to take place whether we like it or not, whether the professional group is in agreement or not, whether it is in their favour or not, but I think it will probably take some heat from them also, because right now it is a question of, there is \$1 and everybody is trying to get around that dollar.

It is very tough for them to make that decision, so there has to be some provision. I do not have all the answers. I do not have that answer because it is very tough for me personally, for reasons quite clear, being a member of the MMA you do not want to be seen too much from outside, but I think it is very important to make those views known that this is a real problem and that is why when the issue comes in the House, the issue is being a politician, but that is not the real issue here. The issue is the funding formula which has been in place for so long. That message never gets across because the message is only picked up that there is a shortage, but why there is a shortage, that is the issue here.

I think the report has pointed out some of the issues very clearly. They have been outlined in the past also, but it is a matter of taking a responsibility and saying, well, that solved the problem. The fee schedule reform, that will take care of—at least to some extent, but still there is a gap and the gap has to be filled and that was filled for the psychiatrists, because the same situation they were facing so there was some extra incentive given to keep them here, and that worked. Ultimately, the same

situation with the anesthetists may work for a short while, but the larger problem has to be resolved.

I want the minister to know from our point of view, from a public point of view also, that that message is not there. That message is there that the government is not paying right now. The problem goes back a long time, before any of the decision makers who are even at the table.

In the meantime, there is going to be this gap for two or three years, and those gaps have to be resolved, the issue of the community hospital has to be taken into account in terms of the age group, the type of professional capabilities, their work capacity, and also you do not want to really alienate or cause a problem for people who have served the community for a long time. Those things must be taken into account before the decisions are made. I just want the minister to know that those are the real concerns from our caucus, that those issues must be resolved so that in two to three years time, we should not be discussing the same thing again, at least in a matter of principle, that should be resolved.

Mr. Orchard: Mr. Acting Deputy Chairperson, again I appreciate my honourable friend's observations on this because, again, he has taken an internal risk because he has a professional group that would expect maybe an advocacy role rather than a system-wide role, but look, and I want the member for St. Johns (Ms. Wasylycia-Leis) to listen, because I am actually going to be complimentary to the previous government, and this may ruin the balance of the week.

The previous government recognized this problem within the MMA and creatively tried to solve the problem in part by in the last settlement I think that they achieved with the MMA they established what was known as a shoring-up fund. There they allowed a greater percentage increase to some of the relatively underpaid disciplines within the specialty groups represented by the MMA. That was really the first time that government as the provider, taxpayer dollars to the MMA, had some influence in terms of distribution of those increased dollars in the basic budget.

* (1610)

We introduced the concept at our first negotiations of fee schedule reform. Now I am not certain whether that was not on the table with the previous administration as well. I simply do not

know at this stage of the game, but it may well have been advanced to negotiations as well, though we insisted a fee schedule reform be part of what we do. I will give you the reason why. I make the case, and this is a case that I tried to make in terms of trying to bring some sense to this, it is an easy argument. The reason why we have lost as government—and the previous government lost, and it was their fault because the NDP were blamed for shortages of anesthetists by the general public. I probably blamed them as a critic because I did not understand the system as well as I do now.

My honourable friend is right, government carries the can when there is a shortage of a given professional discipline regardless of the background causing that. In this case the anesthetists were relatively undervalued in the distribution of the fee schedules since about 1969-70. Okay, the previous government tried to come, in part, to grips with that by a separate funding mechanism. That is the first time it was ever attempted. I have made the case, and this is the case for fee schedule reform, of how much advantage is it to Manitoba surgeons to be relatively high paid if they do not have an anesthetist to anesthetize the patients so they can do their surgery.

Within the system of health care, that is what fee schedule reform means. I mean, you cannot have one professional group compromised because of the fee schedule and thereby leading to a potential compromise of the entire system. If government created the problem, I would accept blame and I would go in and fix it. But my hands in some ways are partially tied in that it is a negotiated agreement that has led us to the circumstance we are in. Well, I am only going to leave my hands tied for so long before I take what I perceive to be my honourable friend's advice of taking initiative to solve the problem, and if it is not going to be solved co-operatively, government will have to consider unilateral action to resolve this relative disparity.

Fee schedule reform offers us the greatest opportunity, and in meeting with the president of the Winnipeg anesthetists I pointed out to him that I need, and I being government, the support of the anesthetist to drive the process of fee schedule reform at the MMA level, because appreciate, the MMA does not want to get into fee schedule reform because that means some people there that have done exceptionally well may lose in fee schedule

reform. MMA is like any other union. They only want to create winners within their membership, and they only want to see the bottom people brought up. They do not want to see any members who are maybe exceptionally well reimbursed see that compromised in any way. I understand that, but I also have to be responsible for the overall monetary policy of government and the overall funding made available for service position by physician.

If the current system with the sole empowerment of the MMA is not working, then I have to seek ways to change that. I would hope and I would think that if I approached it reasonably that both opposition parties may well agree. I am not asking for that agreement, because I think we can resolve the problems of fee schedule reform.

I want to give you an example which really drives me around the bend. We have rheumatology as an underserved medical discipline in the province of Manitoba, not unique to Manitoba. I mean, they are being recruited across the length and breadth of North America. Why? Now I am only going by figures off the top of my head, but it seems to me that some 160,000 Manitobans suffer from varying degrees of arthritis and rheumatism.

Now, when you have that many individuals, we need to have more rheumatologists, more trained specialists in that professional discipline. Their fee schedule, and bear in mind that you are generally, not always, but generally dealing with seniors, an office visit will often take a half an hour. The fee schedule for that leaves a rheumatologist with an income potential of some \$540 in a full day. That is the income potential that a rheumatologist has.

That is why we insisted in that fall of 1990 settlement that rheumatologists receive a 20 percent increase out of the 3 percent for their office visits. There were two purposes: first of all because they were undervalued for the contribution they can make; and secondly, we hoped that it would assist in the recruitment effort nationally.

Now I do not think we have had a whole lot of success, because we are probably still not there but, clearly, fee schedule reform ought to be a mechanism by which we can recognize those kinds of service delivery requirements of the general population.

We have not been able to date, and that is where we want to take the system. We do not think that that is an unreasonable public policy position to take

in terms of physician compensation. The quicker we can get to fee schedule reform, the quicker we will resolve some of these problems, including anesthetists.

Now I say to my honourable friend, I know he is right when he says we have patchwork solutions, which I admit openly that this is what we are doing, that we are going to have the problem keep rearing its ugly head. I want to tell you that at the time we commenced this study in the fall of 1990, I fully expected that we would have fee schedule reform completed by now.

We have been danced around as government in choosing the consultant until we have only just recently, I believe, agreed to the consultant. Now I see some consternation in staff—I think we have just recently agreed to the consultant. Well, I mean, that is an important first step.

Now let us get on with the job in an expeditious fashion so that we can resolve this problem that government, previously and this one certainly, did not create.

Ms. Wasylycia-Lels: Mr. Acting Deputy Chairperson, just while we are on the issue of anesthesiology, I need a clarification from the minister. He indicated that what had happened in the meeting on March 30 was an indication to heads of departments and hospital administrators that there would be no, and I am trying to remember the words the minister provided today, no supplementary funding for topping up.

I believe those were the minister's words. My understanding of those words is that that in essence means the end to the special agreement that had been arranged and arrived at about a year ago in order to address the then critical situation or explosive situation facing anesthetists in our hospital system and that in effect it was a rollback to the previous situation, and that caused the very grave concerns following March 30 and worries about how to implement that within a 36-hour period or to adapt to that situation in a 36-hour period.

Then I believe the minister and his department then agreed to hold off on that decision until the final report of the consultants was in after, I assume, response by the community. Is that generally the situation? Could the minister indicate if in fact—I mean, I do not have any reason to doubt the anesthetist whom I spoke to that there were certainly strong feelings and some very tense

moments in that period of time. I am wondering what has been done to redress that kind of situation and to get things back on a decent working relationship.

Mr. Orchard: First of all, to attempt to put accurate information in the public purview, my honourable friend may well understand that there has been three sources of income for anesthetists: pay for service, which is primarily at the two teaching hospitals; sessional fees provided by government at primarily the community hospitals; and hospitals have provided, I believe the period of time was April 1, 1991, to March 31, 1992, a topping up of both fee for service and sessional fees out of their global budgets.

It was in discussions with government during the last fiscal year that we would give consideration to trying to find additional remuneration for last year as well as for this year. We did not find the additional money. We indicated we would make best efforts; we could not do that. As we indicated, we had given them indications on previous meetings, but on the March 30 meeting we indicated clearly that we would not be able to provide any of the topping-up money that the hospitals had provided from within their global budgets to the anesthetists. We could not even consider reimbursing them for that topping up.

We have not reduced the commitment that government has made in terms of the sessional fees, et cetera. The hospitals made the decision that they could no longer continue with the topping up from within their global budgets when government indicated that they would not be able to consider it in this fiscal year.

The hospitals made the decision to inform their anesthetists that the topping up would not be available as of April 1. Government did not direct them to do that, they made that decision. I am not arguing with the decision, I am simply telling you the mechanics of the decision. Government did not mandate them to make that decision.

I am told, and although I was not present at any of the discussions, one ought to be cautious of indicating rumours, my honourable friend indicated, and certainly the letter from the president of the anesthetists, that the government had mandated the hospitals to not pay the topping up. That is not accurate.

I am assured by my associate deputy minister that was not directed to the hospitals on the March 30 meeting. Subsequent to that, I believe it was on the 9th or was it on the 8th?—Thursday of last week, the day the issue broke in Question Period—on Wednesday? It was coincidental but my deputy had arranged a meeting with the president of the Winnipeg anesthetists association.

* (1620)

During the course of that meeting we explained our position, government's position, to the president, because he was under some wrong impressions that government had mandated XYZ.

As a consequence of that meeting, we agreed to pay for the month of April the topping up, if you will, that the hospitals had provided out of their in-globe budget. We agreed to pay that for the month of April with the full understanding that on April 30 the problem would not go away, that the problem would still be there of approximately \$170,000—no, I am wrong there—\$1.3 million in total that the hospitals had used from their global budgets to top up anesthetists.

We agreed that we would provide one month of that figure for April to ease the transition, but at the end of April the circumstance that existed as of the 1st of April would return, and give the anesthetists the opportunity to discuss the direction government was taking, the direction facilities were taking. As I indicated to the physician, the head, the president of the Winnipeg anesthetists, in my office, I needed to recruit his support to advance fee schedule reform, because it is too easy for the MMA, without pressure from their members, to dance around the head of the pin and never get on with the study.

If there is pressure from both government and from a professional group, then I think we can move rather quickly on fee schedule reform and, hopefully, resolve the problem as it ought to be resolved, internally. So that is the best capsulation that I can give my honourable friend of the circumstances surrounding anesthesiology.

Ms. Wasylycia-Lels: Just a quick question on the fee schedule study. The minister indicated that he is getting close to or there has been an agreement achieved in terms of a name to head up that study.

Is this the same area that the minister indicated in last year's Estimates that there might have been an individual from New York who was prepared to—or that there might have been some agreement to

move in that direction? What happened? Could the minister explain what happened to that suggestion and how soon we can expect to see this individual named, the new individual named?

Mr. Orchard: Yes, I think at Estimates time last year we had some discussions through the Centre for Health Policy and Evaluation—I believe was the reason for the contact with one of the leading physicians in the U.S., advisor to the U.S. Congress out of Washington, around their remuneration system. We approached that individual when he was in Winnipeg to see whether he was interested, had the time and wished to take on the fee schedule reform initiative. That individual could not undertake that because of time commitment, et cetera, so that is when the discussions ended.

The information is that we have tentatively agreed to a consultant firm out of Fredericton, New Brunswick, to undertake the fee schedule reform. Hopefully, that will be fast-tracked.

Ms. Wasylycia-Lels: Thank you to the minister for that information. I would like to revert back now to a topic we addressed earlier, and that is the situation at Seven Oaks General Hospital.

The minister and the member for The Maples (Mr. Cheema)—I was going to say the associate Minister of Health, but I think we will stick to the member for The Maples for now. Although I think the member for The Maples should check back to some press releases he has put out in the last year or so, suggesting that the government and this minister have had a very heavy-handed approach with medical professionals, a destructive force in our health care system. So it is an interesting metamorphosis of the member for The Maples.

If the minister would like more details, I can refer him to a press release I just happened to see in my file on anesthesiology that goes back about one year ago from the member for The Maples.

Now, on the issue of Seven Oaks General Hospital, I still have some questions, Mr. Acting Deputy Chairperson. The minister has basically danced around the questions I have asked with respect to this matter time and time again. Now he is finding it—rubbing his hands because he feels he can deflect all attention because the announcement today was not \$1.2 million, as was indicated previously.

To the member for The Maples, if he had been, and I am sure he was, listening and talking to nurses

yesterday at the Manitoba nurses' union conference and to the large contingency from that hospital, he would have heard some very emotionally expressed concerns from nurses who had just been told of a \$1.2 million reduction in the Seven Oaks General Hospital.

Mr. Acting Deputy Chairperson, I want it clearly noted that these concerns, this issue was brought to our attention by nurses who were genuinely concerned, who had been told of a \$1.2 million reduction, who brought that concern to our attention yesterday, and unless the minister—I was going to say two ministers—the Minister of Health (Mr. Orchard) and the member for The Maples (Mr. Cheema) are going to suggest that these nurses are lying, I think that we have to at least give some recognition to the concern expressed.

Point of Order

Mr. Cheema: Mr. Acting Deputy Chairperson, on a point of order, I have never, never said those words about any profession. I may say those words about politicians—I will continue—if I find they are wrong. I never say that about anybody. If I say things, I apologize.

The Acting Deputy Chairperson (Mr. Rose): The honourable member did not have a point of order.

* * *

Ms. Wasylycia-Lels: Mr. Acting Deputy Chairperson, the member for Maples (Mr. Cheema) should listen to what I was saying. I was clearly indicating the concerns expressed at our meeting yesterday from nurses from the Seven Oaks General Hospital. I clearly enunciated that in my questions today in the Legislative Assembly so that if the two members here take great offence at those comments, that they are in effect taking great offence at the information provided by nurses from that hospital and their real concerns.

* (1630)

Mr. Acting Deputy Chairperson, our overriding concern is still very much present. We are trying to piece together bits and pieces based on different reports coming forward. Now, if the minister would simply tell this committee and the Chamber what percentage increase is going to each hospital, we could perhaps put to rest some of these concerns and worries that members of our communities have,

that some members of this Legislative Assembly have.

When one looks at the information that we have received today of about \$800,000, we are still looking at a roughly 2 percent reduction from the hospital budget of Seven Oaks General Hospital. So my question still remains. Does this mean that Seven Oaks General Hospital came to this minister—and this is tied into his previous argumentation around funding of hospitals—does this mean that Seven Oaks Hospital came to this minister indicating costs had increased by 7 percent, and that they had to reduce their budget by 2 percent in order to be in line with the 5 percent increase that the minister had said he was providing or—

Point of Order

Mr. Cheema: Mr. Acting Deputy Chairperson, can the member tell us in this committee: Has she talked to the hospital board, or the executive, and can she give me substantial evidence other than what I have here? I will put my seat on the line. I will put even my seat on the line if she can prove that there are more cuts than this. She is telling us that we are telling lies? I am telling you lies? That is absolute nonsense. I cannot even sit in this committee anymore. It is becoming almost insulting in this committee to say that and being accused for not taking care, and saying something which is not right?

The Acting Deputy Chairperson (Mr. Rose): The honourable member does not have a point of order, and I think everyone will have the opportunity to put their comments on the record.

* * *

Ms. Wasylycia-Lels: I just want to indicate again that I at no point made any statements implicating the member for The Maples (Mr. Cheema) on anything. I simply have indicated so that the member for The Maples could hear where—[interjection] I have simply indicated where that information came from so that individuals here would know that I was not making them up, that they were not old, that they were generally expressed to me yesterday at the meeting.

I think that is only responsible to indicate the source of one's comments, to raise those concerns, and to try to put it in context and get the information to relieve those concerns. So, Mr. Acting Deputy

Chairperson, what I did yesterday, what I did at the forum, what I did after hearing those comments, what I did in yesterday's Estimates, what I did in today's Question Period, and what I am doing now, are all consistent and out of concern for a community hospital that is very near and dear to my heart as well.

I am not trying to distort anything, exaggerate, I have simply, because that is my job, brought here information that was made known to me: To seek clarification. Today we have indication that it is not \$1.2 million, that we are looking at about—I forget the number, I do not have it in front me—close to \$800,000 in reductions to the Seven Oaks General Hospital.

That is certainly a relief to me. That is quite a bit less than \$1.2 million. I am certainly glad to see this and I appreciate this information. I hope that there are not more cuts coming; I certainly hope so. All I am asking for is information about the overall budget and trying to figure out, if a hospital the size of Seven Oaks has to cut even \$800,000 from the budget, how can they be getting a 4 or 5 percent increase? Is that not a simple and straightforward question? I know the minister in the past has said we will get to that under Hospitals.

Perhaps we can deal with some of this tension right now by providing that information and addressing all of our concerns.

Mr. Orchard: I think this debate over the last couple of days has been rather enlightening. My honourable friend is justifying her use of \$1.2 million because an individual, who has to be a nurse, indicates that is what she was told and passed it on to her. Of course, my honourable friend brought that to the House, hoping that it would cause a great deal of concern, because then the \$1.2 million would be the figure that would be accepted as gospel.

I simply want to say that that is interesting. It is sort of like my honourable friend saying last week that government had this report on anesthesiology for 10 months—those were the words my honourable friend used in the question—and that we met with the hospitals on March 30 and gave them 36 hours to make a bunch of decisions. That was not accurate. The report we received on the 24th of March; we met as soon as we could with those board chairmen and heads of anesthesiology, which was March 30.

My honourable friend put false information on the record on that issue. But, no, it was false. You

mean to say that your information that we sat on that report for 10 months, you are saying right now as you sit across from me, that that is the proper information? Is that what you are saying about the report on anesthesiology?

Ms. Wasylcia-Lels: I would be glad to clarify for the minister: This outlining of events around the anesthesiology study were based there on real people's concerns and comments. Now, if the minister disagrees with that, then he has a serious problem in terms of relations with good chunks of our community.

Very clearly, Mr. Acting Deputy Chairperson, it is the strong belief among many members of the anesthetist community in Manitoba that the study done, that the study embarked on by John Atkinson from Ottawa and Arthur Scott of B.C. was done within about two months of being hired, and that in fact considerable time was needed by this government and through the help of Michael Lloyd and Associates to refine and amend and rewrite that report. Now the minister is saying that is not true.

I will accept that. I am simply indicating to him what has been reported to me from reputable members in the community. I am not about to suggest and put on record that those people are lying; that those reports and those feelings are not legitimate and not real. I simply on the basis of information that is not to be dismissed and should be treated seriously, ask questions. For the minister to try and dismiss all of those concerns because they do not coincide with his understanding of the facts is not doing anything to build better, more productive relations between this minister and health care professionals in the province of Manitoba.

Mr. Orchard: Mr. Acting Deputy Chairperson, that has nothing to do with the issue that my honourable friend brought incorrect information to the House, and after having it clearly identified to her that she was wrong she now insists on saying, well, you know, there are other reasons why I was wrong. I am not going to admit I was wrong. I am just going to continue to put wrong information on, and if I get caught, well so what? I mean, that is not the way to be a critic.

You were dead wrong by saying directly that government had that report for 10 months. You were wrong, and you made that statement to create the impression that government sat on reports,

right? That accusation you have made on many, many occasions of this government, and that at the last minute with 36 hours left in the year, we forced the hospitals to make certain decisions. Again, wrong. I mean, wrong.

There is an obligation in this House that honourable members at least try to bring factual information to the House. If I mislead the House in the fashion that my honourable friend did on Wednesday of last week my resignation would be demanded. I do not have the luxury of putting false information on the record. I do not have it. Today my honourable friend used a figure of \$1.2 million at Seven Oaks Hospital. That figure was not accurate. She feels comfortable in saying that her sources who are reputable people are telling untruths. Well, I cannot judge that because I do not even know whether my honourable friend has sources. I do not even know whether my honourable friend has contacts in the professional community and who they are, and I cannot judge whether the information they provide her is to their knowledge accurate. It has not been in some cases.

* (1640)

So I do not even know whether those phantom sources exist. It is another maligning of everybody out there that my honourable friend does by saying, well I have these sources that are saying XYZ. Okay, fine. I will accept that, but I want to tell you how important it is to have accurate information. I mean, I have to have accurate information; I cannot make decisions; I cannot come to conclusions; I cannot sort of direct policy making and decision.

My honourable friend justifies her action by saying that, you know, at the nurses' union meeting yesterday we heard these concerns raised about reductions, layoffs, et cetera, and some of them told her that there was \$1.2 million. Well, okay, maybe accept that, but does that give you automatic cause, without asking the board as my honourable friend the member for The Maples (Mr. Cheema) has suggested. He asked you the direct question: Have you contacted the chairman of the board of Executive Directorate to see whether in fact those allegations are accurate before you come to the house and state them as matters of fact with the hope?—and here is what I find troubling with the New Democratic Party process.

The Leader of the New Democratic Party got caught when he was Leader of the Second

Opposition party on several occasions bringing incorrect information to the House. One of them was empty hazardous waste boxes at the Cadham Lab, pictures of it and this great exposé. He was going at government that we were storing in an inappropriate and dangerous fashion hazardous waste. Well, they were empty shipment boxes. When he was caught with that piece of bad information his statement to me was, well, you know, I do not really mind that because I am going to get the headline on the front page of the Free Press, and when the story is finally corrected, if it is carried at all, it will be buried in page 30. I have made my impression that things are not right in health care by getting my false information as a front-page story. That is what I describe as the leader's disease in the New Democratic Party.

My honourable friend the member for Wellington (Ms. Barrett) was exposed to it last week to her embarrassment on Thursday, but do you know what the difference was? The member for Wellington came to Estimates and apologized for having wrong information and leaving the wrong impression. She does not suffer to the same degree from the leader's disease as the Leader does and that my critic does.

I have not heard my honourable friend even say for one minute that she had wrong information. It was just that the people who told her believed it was right, therefore it is all right to bring it to the House, because it does what her Leader said he wants do, get the headline, get the chaos, get the fear going in the system. Then when the truth comes out at a later time, well, nobody may report it, and if it is, it will be buried on page 30. That is a very good way to contribute to the reform of the health care system, by leading the discussion with false information.

(Mr. Deputy Chairperson in the Chair)

Now, I want to deal with another issue that came up at our debate yesterday. Recall the very emotional presentation by the nurse whose aunt was discharged—and the impression was clearly left—from the Health Sciences Centre with no continuing care to back the person up. I said I believe that sounds inappropriate and if I was to receive details of that person's aunt's discharge, or name, I would check it out. I am not at liberty to release the name of that individual, so I will be very, very direct in saying that I am not dealing with the individual, I am dealing with the circumstances, because, Mr. Deputy Chairperson, false information was put on the record, inadvertently, I do not know.

That individual was in the Health Sciences Centre for significant surgery. That individual wanted to go home on the weekend to supervise her farming operation. The physician agreed that she could, providing dressings could be changed. The son and daughter-in-law who were living in the farmyard caring for the farm operation said that it was fine for her to come home for the weekend. The daughter-in-law came in and learned how to change the dressings completely in accord with the patient, so that the dressings could be changed. They were supplied by continuing care. The individual went home for Saturday and came back midafternoon Sunday, readmitted herself to the Health Sciences Centre and was later discharged with home care support appropriately.

It was the patient's decision to leave the hospital for that weekend. It was the family's decision that the leave would be appropriate and that they would care for this individual, in this case the mother. The impression left by that individual yesterday at the MNU was that the person was kicked out of the hospital with no community support to support that discharge, clearly to leave the impression, as my honourable friend tries to leave with incorrect information, that there is chaos in the health care system.

I have said consistently this system works and works very, very well thanks to dedicated professionals. I am going to provide my honourable friend with a copy of this letter so that she does not bring that case to the House in home care as another false piece of information about how badly the system works. That was incorrect information; it left the wrong impression; it was headline news on at least one of the television stations, with incorrect information.

I hope to correct that this afternoon. When I hear those circumstances, and they appear to be inappropriate, I investigate because if the circumstances were correct somebody would have been in difficulty for improperly managing a patient's care. That was not the case, yet the professionals at the Health Sciences Centre were maligned by that bad piece of information at a debate that we were at just yesterday morning.

That is the kind of misinformation that promotes the fearmongering my honourable friend thrives on in the New Democratic Party and does not do one single thing to make an improved patient care service in the province of Manitoba. Every time

false information is presented I am going to correct it, including when my honourable friend the member for St. Johns (Ms. Wasylcia-Leis) presents it and does not have the decency to apologize when she so presents that false information. The member for Wellington (Ms. Barrett), her colleague, at least does have the decency to come to committee and say, look, I was wrong, sorry.

The leader's disease is alive and well in the New Democratic Party, but it is not contributing to the kind of credibility that our health care system, care delivered by caring professionals working substantially with incredible effort to make care delivery possible in Manitoba.

What kind of feelings do they have when my honourable friend the New Democratic critic for her narrow political agenda paints that wide brush about how horrible the health care system is? How do the 98 percent of circumstances or 99 or 99.5 percent of the circumstances of patient care which are delivered appropriately and perfectly, how do those people, those caring professionals delivering that care, feel when they are broad-brush tarnished by the narrow accusations, often based on false information, from my honourable friend? How do the caring professionals feel in those circumstances? I suggest to you, not very good.

So my honourable friend, when she justifies her bringing incorrect information to the House as being because someone told her, that is not good enough. I cannot do that. My honourable friend the member for The Maples (Mr. Cheema) does not do that anymore. He got caught a couple of times, and I got caught a couple of times as critic.

I got the living bedevilment beat out of me by Desjardins a couple of times because I took the bait. I came in here with half the side of a story, and I went ranting and raving at Desjardins, and my God did I regret it, because I had only half the story. The other half of the story made sense to what was going on, and with regret I had to admit I was wrong. I did not do it too often after that, because it is not very, very reinforcing of one's credibility if you constantly come to the House with false information.

So I simply say to my honourable friend, if that is the way you want to play the game, fine. You maybe get your opportunity, as your Leader has told me he likes to do, of getting the headline or the news item on radio or television and then when the truth comes out and it is retracted, well, it may never end

up in radio or news and if it is in the newspaper it will be buried on page 4. I have made my point. I have scored because I have this story about chaos in some part of government.

* (1650)

Well, that is some honest and open means of integrity of achieving the Premier's office in the province of Manitoba. Manitobans will not tolerate that. They are wise to the leader's disease, and every time it is exercised it is going to be drawn to the attention of everyone who is within earshot by myself and others in government.

Ms. Wasylycia-Lels: Mr. Deputy Chairperson, first of all, I want the minister to know that since he has been shaking this piece of paper at me from the Health Sciences Centre, that we did not, I did not encourage someone to present at the nurses' union false information. I had no more of an inclination or understanding of that individual's circumstances than the minister did, and for him to wave this at committee now and suggest that I might be behind this, he is totally misrepresenting my actions and my involvement in any of those issues.

Let me say very clearly that I was very careful first of all to ask the minister questions in Estimates yesterday, to try to get information based on what had been told to me by nurses, who are living very much with a lot of worry and fear and concern about doing their jobs adequately. Let me indicate I was very careful to say in the House today that these were reports and information from staff as reported to them by the administration.

I at no time tried to leave the impression that I had all the information. In fact, I have constantly done the opposite, to say I am still piecing together piece by piece this whole funding policy around hospitals, and I am still no further ahead in terms of trying to understand the government's policies and programs around this whole area than I was 20 hours ago when we started Estimates.

So I am going to have to keep asking questions in order to understand what is happening with respect to our hospitals and how it all fits into the health reform agenda of this government.

So, Mr. Deputy Chairperson, I have done nothing but brought forward the concerns as expressed to me by nurses. If I have done anything by relaying those genuine feelings and concerns and fears and worries to the minister or to the member for The Maples (Mr. Cheema) or to anyone else, I would be

happy to apologize. I will apologize right now, but I at no time tried to leave the impression that I was doing other than bring that information to get some understanding of what was happening.

Mr. Deputy Chairperson, I do not want to ever not be sensitive to the concerns of those who are working in the field and who are dealing with an incredible amount of pressure and stress on the job because of fewer resources, more acutely ill patients, more trying experiences on the job. I know from talking to those nurses how hard it is to do their job the way they set out to do it and still go home and be good and responsible mothers and fathers, parents and grandparents.

I hope that the minister will listen to their concerns as well. If they are telling us information they are getting from administration about cuts to their hospitals, then I think we have to try to get to the bottom of it and understand where it is coming from and what it means. I am not going to say to those people that you have totally misread a situation, that you have clearly not had the facts, that you are lying, whatever. Maybe there is more to it; we do not know.

We know, for example, that there is a \$27-million budget reduction exercise for urban hospitals that covers a two-year period. We have tried to find out how that breaks down for each hospital and for each year. It may very well be, Mr. Deputy Chairperson, that the target for Seven Oaks General Hospital is \$1.2 million over a two-year period, so I cannot discredit this information until the minister is prepared to be forthcoming and give us the whole picture.

Again, the minister says he is prepared to do that if we just get to the Hospital line. I would suggest that today or this week would be a good opportunity, so we can get the information out on the table, so that hospitals, administrators, the staff, right from the medical practitioners to the nurses to the LPNs, to the aides, to the orderlies, to the nutritionists, to the dietitians, to the maintenance people, can be put at ease in terms of their worries and concerns.

I know that, when I have raised these concerns in the past, the minister has often said, all I am worrying about are workers and unions. The implication was there today in Question Period. By framing a question and asking about, in a very objective way, the impact of a monetary value in terms of beds and staff and services and patient

care, the minister likes to chastise for not putting patient care first.

Mr. Deputy Chairperson, it is my understanding that patient care happens when you have the appropriate number of beds, the adequate level of staff and the resources to provide the services, so that you have quality patient care. I make no apologies for bringing those concerns forward because they are in the field working hard to provide a good service, to be the kind of caring, compassionate professionals that they were taught to be by going through the nursing program, or whatever training program they went through, and why they entered that profession to begin with.

Let me conclude, Mr. Deputy Chairperson, if the member for the Maples (Mr. Cheema) is offended by anything that has been said, or the Minister of Health (Mr. Orchard), or anyone involved with the administration, by this dialogue, by this debate, by this profile of the issue, then I would be happy to apologize, but I will not apologize for bringing to this Legislature the voices of individuals who are not often heard in the system who do not feel they are part of the decision making, who are not included in those inner circles, despite the pretense being created or the suggestion being made that they have every opportunity to avail themselves of that process and of being part of that decision-making process.

We have heard too often, not just yesterday from nurses, but on a day-to-day basis from many professionals and workers in the system that they have not been able to find a way to voice their concerns to get the necessary information, to put their worries at rest and to feel that they can carry on providing quality patient care. I hope that the minister understands the situation and is prepared to address as soon as possible the overall question that we have been asking day in and day out about hospital budgets, funding levels, any bed reduction targets and how all of those individuals' specific decisions fit into an overall health care reform agenda.

Mr. Orchard: Mr. Deputy Chairperson, that is exactly what I have indicated is in the plans of government that may well even be before Manitobans this month in terms of the reform plan. It will bring together these system-wide changes so that my honourable friend will not have the luxury of talking about a bed here or a bed there. She will have to talk about a system. It is going to be

interesting to hear what the comments are going to be.

Mr. Deputy Chairperson, my concern about my honourable friend's comments in the last period of time, and I ought not to do this because it may help her with her credibility if she were to take my advice, but when you bring those issues to the House without so much as a discussion with the board and the management of the institution, you perpetuate the very rumours that you picked up on because you were deemed to have some credibility in this whole system.

You are the Health critic for the first opposition party. What you say is not as if it is some average citizen on the street. What you say is listened to. From that standpoint, one would hope that you will offer some comment that enhances the position you are taking. When you make statements which turn out to be not accurate, you have not only damaged yourself but you have compromised—how do the people that you have brought those allegations against improperly and incorrectly feel about those allegations?

You said my staff sat on a report for 10 months. They did not. I mean, you are maligning people when you make those accusations and that is why—I mean, I do not care if you do it. I expect that. I am in the political game, but you might consider the sensitivities of the people that you have improperly provided information about.

* (1700)

Mr. Deputy Chairperson: Order, please. The time is now five o'clock and it is time for private members' hour. Committee rise.

FAMILY SERVICES

Madam Chairperson (Louise Dacquay): Will the Committee of Supply please come to order? This section of the Committee of Supply is dealing with the Estimates for the Department of Family Services. We are on page 61, Manitoba Developmental Centre, 5.(c).

Would the minister's staff please enter the Chamber?

Ms. Becky Barrett (Wellington): Madam Chairperson, I wonder if I might, before I get specifically into the Manitoba Developmental Centre, ask a few questions on some of the Community Living and Vocational Rehabilitation Programs payments to External Agencies that were

handed out to critics yesterday, if I could ask some questions on those grants to External Agencies in this general area.

The Ten Ten Sinclair Housing Inc. has received, from my figures from last year's Orders-in-Council an increase of approximately 3 percent while some other agencies have received less and some have perhaps received a bit more.

Is that a reflection of a particular situation at Ten Ten Sinclair, because I know they have had financial difficulties in the past?

Hon. Harold Gilleshammer (Minister of Family Services): Yes, the agencies that are providing service are generally showing an increase of approximately that amount in their budgets.

Ms. Barrett: Is Ten Ten Sinclair one of the agencies that is working with the department on the service and funding agreements?

Mr. Gilleshammer: Yes, we have not started working with them on that particular issue in any detail.

Ms. Barrett: But they will be undertaking that process at some point in the future.

Mr. Gilleshammer: Yes, I think it is fair to say our priorities are with some of the other organizations we work with, and as we progress we will be addressing that with Ten Ten.

Ms. Barrett: The minister's answer has engendered a question from me. Can the minister share with us what those priorities are? On what basis does the minister and his department work with these external agencies in establishing these funding agreements?

Mr. Gilleshammer: Our priorities have been the larger agencies that we are involved with. In the case of Ten Ten Sinclair, they also are of course involved with other government departments as well.

Ms. Barrett: One other question on this sheet of external agencies, the Concept Special Business Advisors Inc., I could not find that last year in the external grants. I am wondering if it was in last year. If it is a new agency this year, could the minister explain exactly what those funds are used for?

Mr. Gilleshammer: It is not a new agency. It is one we have been working with, and there is a shift from funding them on the per diem basis only to the operating grant plus per diems.

Ms. Barrett: On the next page, the page that starts with Association for Community Living and ends with Community Projects, the two last items old Grace Hospital loan payment and Community Projects. I did not see them in last year. Again, could I ask the minister if they were there that I did not see them or if they are new what those monies are to be used for.

Mr. Gilleshammer: The old Grace Hospital loan payment is something that has been part of the department for some time, and its provision for the loan payment on a mortgage assumed as a result of the purchase of the old Grace Hospital. The community projects are grant budgeted and in support of the decade conference, for instance, through the Manitoba League of the Physically Handicapped.

Ms. Barrett: Madam Chairperson, one comment I would have is that there does not appear to be, as far as I can tell, in the other items on this particular page any increase in grant funding from last year for any of those organizations, while other organizations on the earlier page, which are also Community Living and Vocational Rehabilitation Programs, many of them did have increases.

I am wondering if the minister can explain why organizations such as the ACL and the League of the Physically Handicapped and the CNIB and the volunteer centre, all of which do have as one of their main components assisting individuals to make the transition from a hospital or an institution into the community or help provide services to enable them to stay in the community rather than returning to or going into more expensive care facilities, receive in this budget absolutely no additional funding when even the minister's own, or the government's own, inflation projections are at approximately 2 percent.

Mr. Gilleshammer: I guess there are a variety of grants that are part and parcel of the grants list, and some of them are more along the lines of general purpose grants as opposed to specific service provision. In doing our budget and having the difficulty of accessing additional funds, we have tended to give a slight increase where there was specific service provision as opposed to the general purpose grants.

Ms. Barrett: I appreciate the distinction there. I would like then to revert back if I may for one final concern I have on the earlier page, which I understand is the specific service provision

agencies, the Independent Living Resource Centre, which had \$177,200 last year, has been reduced to \$100,000, and it would appear to me to be virtually—no, sorry, it has been increased; I had it wrong. Get my columns straight here.

I do not have any further questions on the external grants. I appreciate the chance to ask those questions.

I am just changing my positions here. I do have some questions on the Manitoba Developmental Centre, if I may. My understanding from last year's Estimates is that there was a slight decrease in the number of residents at the MDC and that this year there appears to be virtually no change in the number of residents. I am wondering if the minister can respond to that and say if those 570 or 574 residents are the same residents that were at the beginning of the year, or if there has been some movement in and out of the resident population at MDC.

Mr. Gilleshammer: I would like to introduce Mr. Steve Bergson, who is the Director of the MDC complex.

Last year at the beginning of the year there was a population of 579. There were seven admissions, 23 readmissions, 24 discharges, 11 deaths and a year-end population of 574. That sort of gives you an idea of the changes that occurred during the course of the year at MDC.

Ms. Barrett: Could the minister shed some light on the 23 readmissions and the 24 discharges, in particular the readmissions. How long had they generally been away from MDC, what were the reasons for their coming back and the discharges, to what facility were those discharges made?

Mr. Gilleshammer: On the discharges, of course, it is an attempt to have individuals who are ready to rejoin the community find a place in the community with a family or with the group homes that are available. In some cases it does not work as well as one would like, and these people are readmitted. At other times, there are other people who perhaps have been discharged in a previous year that are part of the readmissions.

The readmissions tend to be as a result of a number of reasons: It may be behaviour problems, and I use that I suppose in a broad sense of individuals who have a difficult time in coping; secondly, there may be some medical problems whereby the individuals are better served by being

back in the institution; thirdly, there may be parental problems, whereby the continuance of that individual with parents is not possible.

Some of the readmissions, of course, are discharges that have taken place within that year or the previous year. Some of the admissions, of course, are a result of family circumstances or health problems or problems within the community, so it tends to be a very individualized situation.

* (1450)

I can recall of one case that did receive some attention, where there was a desire on the part of the individual to participate in the community and live in the community and a number of attempts were made to accommodate that person. There were problems. The parents, for instance, felt more comfortable having the client back in the institution; at the same time, there are community groups who would like to see us make the living arrangements work. So there is a lot of pressure from time to time brought to bear on individual cases once they are discharged and are later readmitted.

There are a variety of reasons, but basically those three: the behaviour problems, medical problems, and parental preferences and problems.

Ms. Barrett: Most of the individuals who are discharged, do they go back to their families, or do they go to the I believe it was called the cottages, where there is an interim kind of physical group of residences where individuals who are seen by the staff at MDC as being ready or getting ready to be discharged are established? Is that where the people who are discharged go to generally, or are there other areas that take them?

Mr. Gilleshammer: The people who are discharged from the institutions by and large go to community residences. In some cases, it may be a family home, but community residences probably are the most common place for them to be housed.

Ms. Barrett: When an individual is readmitted, is there a combination of voluntary and involuntary readmissions? What is the process for coming back into MDC? If an individual is in a community residence, would it be at the request of the community residence head or what is the process for readmission then?

Mr. Gilleshammer: There are certain legal obligations that have to be followed, but basically it will be a recommendation by family or staff in their

analysis that for whatever reason there is difficulty coping and people are readmitted.

Ms. Barrett: I am wondering if the minister can tell us the average length of stay in the institution and the average age of individuals. It appears from the statistics that he read in earlier about the admissions and the readmissions and the discharges and the deaths and the final total that there is not a whole lot of movement. I would anticipate that the vast majority of the individuals in MDC have been there for a fair length of time and that the population is continuing to age. I am wondering if that is an accurate assessment of the situation.

Mr. Gilleshammer: I can give an age breakdown if that would help. People between 18 and 20 years of age, there are 10; between ages 21 and 24, there are 21; between ages 25 and 30, there are 102; between ages 31 and 36, there are 105; between ages 37 and 42, there are 108; between ages 43 and 49, there are 72; between 50 and 55, there are 40; 56 to 64, there are 60; and 65 plus, there are 56. It gives you an idea of the age range, the composition of the 574 clients.

Ms. Barrett: I am not quite sure how to ask, what kind of statistics to ask to get the second part of that question. It looks like the age curve is skewed older rather than younger, and I am assuming that individuals in MDC have a fairly extensive stay. We have all agreed that there are not enough community supports in place to be able to put many of these individuals into the community. I know that there is disagreement among various elements in the community as to whether, even if there were a lot of resources, everyone from MDC would be able to take advantage of them. It does seem to me that the age of the residents is getting older. So there are not as many younger people coming, so the age is getting older, and that people are likely once they come into MDC to stay in MDC. Is that accurate?

Mr. Gilleshammer: I think it is accurate to say that these are long-term residents and, because there is not a great deal of change in those numbers that I read before, that the population is aging. Whether it is older is a relative thing. These are long-term stays and there are fewer and fewer young people coming in, I would think. If you look at the difference between age 24 to the next group I gave you, it is the difference between 21 and over 100. I suspect, and I will have the staff confirm it, that people who are coming out of the school system are being accommodated either at home or in community

residences rather than seeing MDC as their destination.

Ms. Barrett: I would like to ask another general question about the residents at MDC and I suppose at Pelican Lake. Are there any residents there who are there as a result of a criminal offence? Is this a location for individuals who have been convicted of a criminal offence with a psychiatric component to it?

Mr. Gilleshammer: We currently have two residents at MDC who have been found guilty of a criminal offence. It is not unusual to have two or perhaps three individuals within the population of almost 600 who have some sort of offence and it has been deemed that that is the place they should be.

Ms. Barrett: How many people are currently being held at MDC under Lieutenant-Governor's Warrant?

Mr. Gilleshammer: None.

Ms. Barrett: I have no further questions in the area of MDC.

* (1500)

Mrs. Sharon Carstairs (Leader of the Second Opposition): Can the minister tell me if the same levels, one to five, are used at MDC as are used in community placements, and does he have the breakdown for the 574 residents at MDC?

Mr. Gilleshammer: There is a different description given, and I can give the member some numbers. There are some that are described as borderline and there are 22 of them; the second category is mild and there are 77; the third category is moderate and there are 74; the fourth category is severe and there are 225; the fifth category is profound and there are 176, to make up that population of 574. Generally there is a distribution through all of the age groups in determining that number.

Mrs. Carstairs: I would assume that when we look at discharges—the last annual report was 19, I think the minister said it was 24 for '91-92—that we are looking primarily at those that would fit in the borderline, mild to moderate range.

Mr. Gilleshammer: That would be so in some of the cases, but it would depend on the type of community residences that are available and the type of client that they are able to receive.

Mrs. Carstairs: When the whole Welcome Home initiative was going at full force in '86-87, one of the difficulties—and I talked to staff about this with regard to The Vulnerable Persons Act—was the relationship

and what rights did the parents have vis-a-vis the fact that many of them were in the care of the Public Trustee. What is the attitude at the centre now with respect to involvement of parents in making decisions with respect to whether their family member would be discharged even though they have no technical legal rights over that particular individual?

Mr. Gilleshammer: Parents are consulted wherever possible and encouraged to be involved in the process.

Mrs. Carstairs: Madam Chairperson, can the minister tell me if they have any breakdown as to where in fact these 574 residents are living? How many are in the buildings per se? How many are in the cottages?

Mr. Gilleshammer: I am told that there are 204 residents in the cottages and the remainder in the three main residences.

Mrs. Carstairs: The last time that I visited the MDC the most profound patients were in the buildings, and I can only assume that is probably still the case since the cottages were not really equipped to look after the more profound patients. There was also no air conditioning in those buildings. Is that still the case at MDC?

Mr. Gilleshammer: I am told that three of the cottages are air conditioned with another three coming on stream this summer, and that the three residences are now air conditioned.

Mrs. Carstairs: I do not know who was the minister when that happened but thank God. The last time I was at MDC it was 104 degrees one day and these very profoundly mentally retarded people who were living there, I felt sorry for the staff, but I felt a heck of a lot more sorry for the clientele.

The readmission and discharges—I really just want a feel for this. There were 23 readmissions in '91-92 and there were 24 discharges. Are these the same people or is there any relationship between these two groups of numbers whatsoever?

Mr. Gilleshammer: I am told that it is coincidental that the numbers are fairly similar. There is some overlap, but the majority of them are different individuals.

Mrs. Carstairs: This discharge column will potentially disappear or be very difficult under the ideas that are being debated with regard to The Vulnerable Persons Act, because one of the

provisions would be that you would need a court order to readmit. At the present time readmission is relatively easy to do at MDC. What alternatives are being debated and discussed for the care of those individuals who now can be admitted to MDC because they have the technical and competent people to deal with it, but would not potentially be easily readmissible under a change in the act to meet—I mean, this is no condemnation of the government; this is just simply to meet what we know is a Charter case?

Mr. Gilleshammer: The whole idea or at least one of the ideas is that these residents and these individuals should be living where they can be best accommodated, and one of the effects of the legislation is that there may be more impetus to accommodate them within the community. It will be a challenge before government and the department and the advocacy groups to identify those areas where these people can live.

Madam Chairperson: Item 5.(c) Manitoba Developmental Centre (1) Salaries, \$20,799,100—pass; (2) Other Expenditures, \$2,991,500—pass.

5.(d) Special Employment Programs.

Mr. Gregory Dewar (Selkirk): I was wondering if it is appropriate now to ask questions dealing with the closure of the Human Resources Opportunity Centre in Selkirk. Would that be an appropriate line?

Madam Chairperson: It is 5.(d)(3) Human Resources Opportunity Program, I believe, if the honourable member is looking for clarification. The minister is also allowed a lot of flexibility in terms of the questioning on this section, so I leave it to the will of the committee.

* (1510)

Mr. Dewar: I just want to first of all express my and my community's dismay and disappointment with this minister's decision to close the training plant in Selkirk. It is my understanding that the program has been very successful, and the closure without consulting or without asking any of the affected groups will hurt those individuals who need this type of training the most in these tough economic times.

I want to ask the minister, why did the minister pick Selkirk as the centre to close?

Mr. Gilleshammer: We have had some opportunity to talk in Question Period about this

issue before, and I appreciate that we may have more opportunity to go into some detail here. We have undertaken to review all of the training and employment initiatives with the thought that we have to direct our funding to where it is the most effective and cost efficient, and as a result determination was made that the Selkirk Human Resources Opportunity Centre will be closed at the end of June.

I think we had to look at the appropriateness of the training as we attempt to train people for the 1990s, and we also looked at the cost and the cost of updating the facility and equipment so that the skills training that could be directed to the workplace in the 1990s could be taken into consideration.

The majority of the clients served by this HROC in Selkirk come from Winnipeg or the Interlake region, and there are HROCs located in Winnipeg and Gimli which are in a proximity to serve these clients.

I want the member to know that in looking at all of the demands which are placed on this department, demands that we talk about from time to time in daycare and social allowances and programming for child welfare and on and on, we deal in this department with some 180,000 Manitobans, most of them who could be described as in some way vulnerable. As we add to our budget we also have to look at ways of doing things more effectively and efficiently and make tough decisions. One of those difficult decisions was to close the Selkirk HROC and redirect some of that money and redirect some of that training elsewhere.

Mr. Dewar: The residents of Selkirk do not share that view; they see this as basically a political vindictiveness. Will the minister provide me then with the department studies which demonstrate that Gimli or Winnipeg is more cost effective than Selkirk?—if you stated that is the case.

Mr. Gilleshammer: You know, I have always been very pleased with the level that we are able to debate these issues in here in Estimates. I certainly would not want the member to portray this as a political decision because we have to look at the demand for training and the way we can best do that given the costs, so I am pleased to provide the member with some figures that show the cost per participant per day. The cost we had in Selkirk was the most costly per participant. It was costing us \$72 a day in that training facility and many of the other training centres were doing the training that

they did for anywhere from \$30 to \$48 to \$56 a day. So there was a difference and it was a more costly training process that we were embarking on there. That was a major factor in making that decision.

Mr. Dewar: I was wondering if the minister could tell us how many trainees were enrolled in the program in Selkirk.

Mr. Gilleshammer: In the 1991-92 year there were 37 at the beginning of the year, others were added and some left during the year. A total of 247 were served during the course of 1991-92.

Mr. Dewar: The minister provided me with some information about the cost effectiveness of Selkirk, saying that it is approximately \$72, other centres were \$30 to \$48. Can you explain why?

Mr. Gilleshammer: The nature of the structure of the HROC varies in some of the other HROCs in that the board who is responsible in most cases for the activity and the hiring in the centre will set those rates. In Selkirk one of the differences is that those positions were part of the Civil Service as opposed to others who are hired by those individual boards. That is a cost of salaries plus materials that are used in the production of the product that is being made in Selkirk as compared to some of the others. Some of them are probably spending less on the goods and services that go into production. I know in visiting the one at The Pas last fall that one of the activities there was a paint shop for some of the other government departments and private enterprise in that area as well as some work being done on reupholstering. So you have to factor in the cost of the supplies in Selkirk that tended to be higher there than the other HROCs.

* (1520)

Mr. Dewar: Can the minister provide us with the number of trainees who went on to find jobs after successfully completing the course at the Selkirk training plant?

Mr. Gilleshammer: In '91-92 there were a total of 188 leaving the program. Sixty-five went to employment; 15 went to further training; 28 completed and were seeking employment—for a total of 108. So the percentage of successful leavings was deemed to be 57 percent.

Mr. Dewar: What about the success rate at the Gimli training plant or the Winnipeg training plant? How does it compare to Selkirk?

Mr. Gilleshammer: The percentage of successful leavings in Interlake was 78 percent. In Winnipeg, it was 60 percent.

Mr. Dewar: It is my understanding that Gimli and Winnipeg are currently stretched to their enrollment limit. How does the minister expect Winnipeg or Gimli to absorb these new trainees?

Mr. Gilleshammer: There is a turnover in the program with people exiting, and the advice of staff is that we will be able to accommodate within those two programs that I have referenced.

Mr. Dewar: Of course, one of the reasons individuals are in the training plant program is that they have little financial resources. I was wondering if the minister will be providing the trainees who are in Selkirk now with transportation allowances to get to either Gimli or to Winnipeg.

Mr. Gilleshammer: The department, of course, will try its very best to accommodate the clients who come before it to receive the training in other centres.

Mr. Dewar: Does that mean the department will provide financial support for those seeking transportation assistance, or not?

Mr. Gilleshammer: For those who were in process in the Selkirk plant, we will accommodate them.

Mr. Dewar: That deals of course with those who are currently in the program. What about those who will be requiring this service in the future?

Mr. Gilleshammer: As we plan for the programs that we offer in this area of the department and other programs, we will attempt to accommodate people in the most cost effective way and appropriate program that we can.

Mr. Dewar: The Selkirk local of the Manitoba Metis Federation estimated that 40 percent of the trainees in the program over the years were Metis. Will the minister comment on this estimation?

Mr. Gilleshammer: We have not done an ethnic breakdown of the people served within the Human Resources centres that we fund.

Mr. Dewar: When exactly is the final closing date of the training plant in Selkirk?

Mr. Gilleshammer: June 30.

Mr. Dewar: Will the minister confirm that the training plant is currently being dismantled?

Mr. Gilleshammer: I would point out to the member that the facility falls under the Department

of Government Services. My understanding at this point is that some of the staff and some of the equipment are being moved over to the Corrections Branch. It is not my understanding that the plant is being dismantled.

Mr. Dewar: Has the minister been approached by groups from Selkirk and what has been his response?

Mr. Gilleshammer: Madam Chairperson, I have not met with any person or groups from Selkirk. I know that we have been trying to arrange a meeting with, I believe, the mayor and it may be some time later this week.

Mr. Dewar: I have just a few more questions. What is the government planning on doing with the abandoned site?

Mr. Gilleshammer: As I indicated to the member, it comes under the auspices of Government Services. I am sure the department will be looking at options where it may be used within government or if there is interest from the private sector that may be a possibility. It will fall under the jurisdiction of Government Services.

Mr. Dewar: My final question to the minister is: Will the minister consider delaying the closure of the training plant for a year until he has a chance to meet with the mayor of Selkirk or any other group interested in seeking alternatives to the closure?

Mr. Gilleshammer: We have made our budget decisions after due consideration and will be proceeding with those decisions.

Madam Chairperson: 5.(d) Special Employment Program.

Ms. Barrett: I have just one question on the Expected Results for the Human Resources Opportunity Program on page 78. The Estimates from last year stated that the Human Resources Opportunity Centres and programs would assist 1,550 individuals through the opportunity centre. This year it is reduced by 250 to 1,300. I am assuming that reflects the closing of the Selkirk facility, and I am wondering if the minister can tell us if that is based on the fact that he anticipates fewer individuals needing these services or if he expects to be able to assist those individuals in other areas.

Mr. Gilleshammer: Yes, I think it is a combination of refocusing some of those resources on other areas and accommodating the anticipated need

within the existing facilities and redirecting some to other areas.

* (1530)

Mrs. Carstairs: Since we seem to be dealing with this, we may as well finish this section, I guess, and move back to some of the other sections.

I am concerned about the establishment of programming and what kinds of evaluations, if any, are done of the programs on an ongoing basis. I am going to give the minister a very specific example. I took a look of one of the so-called curriculum guides for one of these programs being taught in Brandon, and I have to tell you that a third-year psychology student could not have passed a course as was outlined in this curriculum guide.

It was supposed to be training a teacher aide, but they are talking about psychology. Not only were they dealing with Gestalt and Freud—I mean, the thing was a myth. There is no way that anybody was going to be able to teach that kind of curriculum in this kind of a program. It read well, but did not mean anything. Who does the kind of evaluations of whether this is legitimate programming, whether it is in fact taught or not taught, and what kind of evaluation is done after it has been taught?

Mr. Gilleshammer: I could not agree more with the member that we have to have a curriculum in the HROCs and HROPs that make some sense for the client base that we are serving.

I have not sat in on those classes, but I attended at Brandon, I think two years ago, with the previous minister, where we looked more at the hands-on aspects of the program. We also discussed some of the classroom work that was being done with individuals in attempting to build up their confidence and self-worth. I attended, as well, to one of the HROCs here in Winnipeg at the graduation ceremony that I referenced before, but there is no question that the curriculum and methodology of instruction has to be suitable to that client base, and from any of the programming and programs that were being carried on, there were not any courses in psychology at a third-year university level that were being offered.

We are in the midst of doing some analysis and looking at the programs offered by these HROCs and HROPs. We have contracted out to a private firm to do some of it for us and department staff are also doing some, and the evaluation is going to

examine several issues, including the program rationale and the program relevance.

I think at times the programming is written for the professor or the teacher, but in the actual delivering of the program it has to be delivered at a level that is comprehensible by the student.

Mrs. Carstairs: Can the minister tell me—the minister may not know and maybe not the present group of staff here—why is this part of the Department of Family Services? Why is it not part of Training. Why is there this overlapping in bureaucracies?

Mr. Gilleshammer: Well, it is an excellent question. I think that in looking at training programs across government there are times when some rationalizing is done, and I am always interested when I go to federal-provincial ministers' meetings to see in various provinces what ministries are put together. Of course, at the federal level it is Health and Welfare, and at some provincial levels it is Health and Welfare. In this whole area of some of the employment programs, in some cases Corrections is added to that mix.

In Manitoba, historically, there has been concern with employment programming for social allowance recipients and I suppose a feeling that if you move it into what could be called the mainstream education or labour or Workers Compensation Board training that this may be an area which is neglected.

It reminds me of a school system once that had a preponderance of university entrance courses and no programming for what we now see as the general course, or the occupational entrance or the special needs children, so in historical terms it was a way of ensuring that there was programming for the social allowance recipients. I think it is an area that we have talked about, and one that possibly will see some changes in the coming years.

Mrs. Carstairs: Well, just to put it on the record, I do not believe the Minister of Education (Mrs. Vodrey) should have this either. I mean I think it is time that we looked at a training in post secondary education model for this province and to remove training from being little bits here and a little bit some place else without any co-ordinated approach whatsoever to the way in which it is handled.

I am pleased to hear the minister say that there is some evaluation going on to bear hopefully some fruit on relevance and rationale of what these

programs are. Can the minister tell me what types of funding come for the Human Resources Opportunity Program and Opportunity Centres from the federal government, if any?

(Mrs. Shirley Render, Acting Chairperson, in the Chair)

Mr. Gilleshammer: The HROC and HROP programs are cost shared at a 50 percent level under the Canada Assistance Plan.

Mrs. Carstairs: Can the minister tell me then who decides on the curriculum, and who would be ultimately responsible for the evaluations of that curriculum?

Mr. Gilleshammer: The course design, the program design and evaluation is done within the department in consultation with other departments and some of the training that they do. As well, at the Human Resources Centres there are advisory boards that do bring some information forward to the minister and to the department.

Mrs. Carstairs: When a decision is made to stop a program, for example, at Selkirk, what kind of input if any is required from the federal government in that decision-making process?

Mr. Gilleshammer: That decision is made within the Manitoba government, and the federal government does not play a part in the decision making.

Mrs. Carstairs: So you get permission from the federal government then to have X number of spaces and they will cost-share those, and then it is completely up to the province as to where those spaces will be located.

* (1540)

Mr. Gilleshammer: Basically, the department and the Manitoba government decide on the programming, and then there is a good understanding within the department of whether it is cost shareable under CAP, but CAP officials will have to make a decision on it. Based on our history we have a good idea of what is cost shareable. In addition to that, there is the Employability Enhancement agreement which is for social allowance recipients which allows us to enter into some other programming.

Mrs. Carstairs: What availability are any of these programs to those who are on unemployment insurance?

Mr. Gilleshammer: By definition, these programs are for people who are in need or who are potentially in need, and as a result people who are just entering into that U.I. phase generally are not eligible, but as the time runs out on it they can become eligible and enter these programs.

Mrs. Carstairs: At that point, it is my understanding that Manpower might also have some input into the curriculum because they will not allow students to go into programs for which they have not had an acceptable perusal, if you will, of the program. At what point does the mix then take place between the provincial government and the federal government?

Mr. Gilleshammer: Under the Employability Enhancement agreement, CEIC has \$6 million and we have \$6 million targeted for individuals who enter the Gateway Program and the Single Parent Job Access Program.

Mrs. Carstairs: I would rather leave that, but I will get back to it, because the minister has opened a whole new avenue. There is only \$4.3 million in the budget, and he says both of them are putting in \$6 million. So just let it sit there until we get back into this section.

The Acting Chairperson (Mrs. Render): Shall item 5.(d)(1) Branch Operations \$774,200 pass?

Some Honourable Members: Pass.

Mrs. Carstairs: Pass, but I think perhaps we have to do it in two parts.

The Acting Chairperson (Mrs. Render): Item 5.(d)(1)(a) Salaries \$652,900—pass; (b) Other Expenditures \$121,300—pass.

5.(d)(2) Youth Programs \$3,544,600. Shall the item pass?

Ms. Barrett: I would like to start with the Expected Results. Last year in Estimates the minister stated that they expected to employ 435 students in summer positions under STEP; this year it is 300. Last year they expected to place 11,000 students through referrals from 44 Manitoba youth job centres; this year, 9,000. The CareerStart figure actually is slightly higher this year than it was last year, 3,000; now this year it is 3,400.

The minister has heard questions from both opposition parties, particularly the member for Brandon East (Mr. Leonard Evans), since the budget came out about the concerns of the opposition regarding the employment opportunities,

the job creation programs, the re-education, the education programs available to the youth in our province, particularly in these days with the youth unemployment rate at unconscionable levels. The special employment programs generally, in the youth programs in particular, are designed to alleviate some of that stress, not all of it, but some of those problems that young people in Manitoba have faced and are continuing particularly to face.

I am wondering if the minister can explain why—in light of this enormous stress on the young people of Manitoba today; in light of the fact that thousands of people, many of them young people, are leaving the province because there are no job opportunities, there are no training and education opportunities—why, in light of the fact that the minister speaks about and the government members speak about the youth of Manitoba being our future and the need for training and upgrading, et cetera, the minister has chosen this year to decrease most of the funding under the youth programs? It is not that the minister has not known about the problem that is facing Manitoba youth. This problem has been going on for several years.

I would like to ask the minister a general question as to why under most of the expected results in this category he shows a decrease in the numbers of young people who are to be serviced under programs in this youth programs area.

Mr. Gilleshammer: I would point out to the member that if she is comparing the expected results this year to last year, there are some increases. There were some changes made last year with programming that changed which shows some decreases and some of them are estimates. Maybe the best example, is the Youth Job Centres. We fund and help to create Youth Job Centres throughout the province and last year there were 8,864 placements. In 1990, there were 10,348, but last year there were 8,864. We are anticipating and projecting this year that there would be 9,000 placements made. Again, that is an estimate based on what the private sector is going to do.

In the STEP program last year there were some 273 students employed. We are anticipating that there will be 300 of those employed this year.

* (1550)

In the departmental budgeted positions, last year there were 930 students employed. This year we

are anticipating that there will be 950 students employed.

Under the CareerStart, last year we had 3,003 students employed. We are anticipating that probably there will be 3,550 employed this year.

As well, we have created the Partners with Youth program which will show an increase of 700 students or youth employed under that budget line.

This year's figures, I think, are not only comparable but show some increase over last year. If you compare them to a couple of years ago there is a difference. If you go back into the early '80s, there is a significant difference in that they were much lower then. It depends on which years you want to compare.

We have maintained CareerStart, as I have indicated, at last year's levels, the Manitoba Youth Job Centre program—it is an estimate. It is difficult to say how many students will access those 44 offices across the province. As I have indicated, there will be a new program that we think municipal level governments and nonprofit organizations will be accessing, and we will be announcing that program later this week.

Ms. Barrett: The numbers that I put on the record in my original question were numbers that were the estimates from last year's Estimates, and those are the only numbers I had access to.

In the case of the Manitoba Youth Job Centre, it was estimated in July of last year that 11,000 students would be placed. So the estimate of last year was 11,000, and you are saying to me that, in effect, 8,800 were placed. So again the actual was much lower than the estimate, and I would suggest that probably has something to do with the problems faced by private employers in this province.

So I would like to ask the minister why the actual placement in the Youth Job Centre last year was so far under the estimate that was given in July when we actually dealt with Estimates?

Mr. Gilleshammer: Projections are made from year to year and are often based on the previous year's numbers. I can tell you that there are a lot of students who access jobs that do not register and go through the process with the Manitoba Youth Job Centre.

I can tell you in areas of my constituency, which has a high tourism component, that certainly they access the CareerStart and they access the federal

CHALLENGE program, but they make direct hirings of students without going through the job centres simply because there is a demand in that particular area where hundreds and hundreds of students are hired who do not show up on these statistics. That service is provided for people looking for employees and students who are looking for work. So there is another side to it as well, in that the employer and the students make direct contact.

I can tell you from being in the national park during the spring break that many of the private entrepreneurs there were going through their interviewing and hiring process at that time and were not waiting for the Youth Job Centres to open and start providing that service. So that is only a part of the figure. There are others who are hired without showing up on these statistics.

Ms. Barrett: I am sure, in 1990 and in earlier years, that was also the case, but there has been a significant decline in the actual number of students and young people who have been placed through these summer offices just from 1990 to '91, almost, well, 150, which is a fairly substantial decrease. I think that it is not just that individual students are finding independent, private placements; it is that the economy of the province has decreased as well substantially. This decline in the uptake, in the youth job centre, I would suggest, reflects the fact that private business and other organizations in this province just do not have the resources with which to hire individuals through this position. The youth of the province are finding it much more difficult to gain employment.

The minister stated that, under the STEP program, the actual number of students placed last year was 273. The estimated figure in July of last year was 435. That is a substantial decrease in the actual uptake of the STEP program, and I am wondering if the minister can explain that decrease, and why he thinks that there will be an increase from the actual placement last year to this year.

Mr. Gilleshammer: Those decisions are made within the various departments, according to what their needs are and what ability that they have to make jobs available or funds available for jobs. As the member well knows, departments have tremendous demands on their resources, and there are times when the money simply is not there to be hiring on the Student Temporary Employment Program. Again, it is an estimate of what we feel

the departments are going to be doing in this coming year.

Ms. Barrett: So the minister feels that there will actually be more money available in these department this year to provide STEP positions? He is suggesting there will be 27 additional students able to be placed over the actual from last year. Maybe the actual figure is difficult to estimate, but he is assuming there will be more students placed in the STEP program, even though there is a substantial decrease in the figures under the budget item.

Mr. Gilleshammer: Let me say to the member that we are hopeful that departments will find those positions to hire students in Natural Resources and Highways and other areas where they have budget issues that they have to account for as well. Again, through preliminary discussions with other departments, we would foresee some—give us some reason to assume there may be more hirings there.

Ms. Barrett: We will be watching that as carefully as our eyes will allow us to do so, particularly in light of the downward slope from estimated numbers last year to actual numbers last year and what is estimated this year.

I would like to ask a few questions on the CareerStart Program. Again, the minister is now stating that the estimated number of students who will be uptaking their CareerStart Program is now 3,550, which is an increase of 150 over the printed figure in the Estimates book, and 550 over the estimate and actual for last year. Can the minister explain why he thinks that there will be that increase in uptake in this program?

* (1600)

Mr. Gilleshammer: Again, this is an estimate on what the employers are going to be seeking this year, and we are at a stage where there are the applications flowing in. We are in the middle of a process right now, and we are optimistic that there will be a good uptake in the CareerStart.

One of the facts of life is that many of those employers apply both for a CareerStart grant or grants as well as the CHALLENGE program with the federal government, and we go through a process of trying to ensure that people are not accessing both programs, but indications are that we will be able to accommodate a few more students there this year. Again, as I say, we are in the middle of that process, and those are our projections.

Ms. Barrett: Can the minister share with us the average number of weeks to be worked per CareerStart applicant? They must have an estimate of how many weeks they anticipate on average each CareerStart applicant will have of employment this year.

Mr. Gilleshammer: The average is in the area of 10 weeks and, of course, you are looking at students of different types. High school students perhaps are limited to six or seven weeks in some cases, although in some areas they may be out in June and not going back until September.

University students tend to look for longer-term employment as university classes are now over. I know some students are going to be finished their programs and their exams in the next week or so, but employers perhaps do not need to bring them on stream until sometime in May, so it varies, but the average is around 10.

You have students who access some of these who quit the job because perhaps it is not suitable, and there is maybe a time lag before somebody else is hired. Sometimes, if weather conditions play a part in it, jobs will either start later or terminate earlier. Construction is a good example of that. I know that the Minister of Highways (Mr. Driedger) would like to be building highways today, but because of the weather is not able to do so. So there are a number of variables, but probably around 10 weeks is an average.

Ms. Barrett: Is that the number of weeks that it is anticipated students will actually work? That is my understanding of what the minister is saying. What is the number of weeks that the employers are requesting?

Mr. Gilleshammer: Well, again, it is an average of the number of weeks that students work. There is a mix there of high school and university plus the other caveats I put on it of people perhaps not starting the position as early as perhaps they had anticipated, or the position ending earlier. There is a cost to the employer, so it is not a complete freebie to him or her.

(Madam Chairperson in the Chair)

It is like our Canada Assistance Plan funding I suppose, where people encourage us to spend more because we get more back. There is still a cost. So there are a lot of variables that come into play in making those decisions.

Ms. Barrett: There certainly are some parallels between the decrease in federal funding for a variety of programs and the decrease in provincial funding for this program.

My question specifically was: How many weeks are employers requesting for CareerStart, employers having been an employer who had CareerStart students for two summers? I know that there is a cost to the employer. I also know that there is an enormous benefit to the employer and that many employers who are accessing CareerStart students do so with the understanding that there are changes that take place, that some students who might have the skills that would fit with this particular organization will not be available as soon as possible, but when you put in your application there is a request for a certain number of weeks per application.

Can the minister tell me, on average, how many weeks of employment potential CareerStart employers are requesting to be funded for?

Mr. Gilleshammer: The maximum number of weeks that employers are eligible for is 16 weeks. Probably the average of the requests is around 13 weeks and the actual is around 10, but that tends to vary somewhat from year to year as the reality of the job situations come forward.

The member made some reference to the Canada Assistance Plan and we have consistently accessed more funding through that Canada Assistance Plan year over year to the point where we recover, I believe, in excess of \$300 million now through that Canada Assistance Plan. So that has been on the increase as our programming and our own budgeting has increased. It is one of the building blocks of the relationship between the Canadian provinces and the federal government, and it is one that concerns us in terms of decisions that were made in three of the provinces, but that program has been very beneficial to this department.

Ms. Barrett: Yes, I have absolutely no quarrel about the beneficiality of the Canada Assistance Plan program historically and share the minister's concern over the potential disintegration of that major building block. We have discussed Canada Assistance Plan particularly in Child Day Care already in these Estimates.

I would like to ask the minister if he can tell us the average number of weeks worked by CareerStart students in '91-92 and in 1991?

Mr. Gilleshammer: The figures that we gave you were the average for 1991, but it is too bad, I suppose, that some provinces are looking beyond the Canada Assistance Plan and beyond the other cost-sharing plans to put in special payments and charges for families for things like health care. I would hope that does not become the wave of the future. It does point out the difficulty that provincial governments are having in funding these social programs and points out the means that are being taken in areas where spending has been high and where taxes are at their limit and people are finding new ways of taxing for these programs.

* (1610)

Ms. Barrett: Madam Chairperson, the potential situation the minister is referring to, I am assuming, and I put heavy emphasis on potential situation, is as a result of 10 years of Conservative government, and a government that came in last fall finding a billion dollars in deficit, very dissimilar to the situation facing the Filmon government when it came into office almost four years ago with an operating surplus, not a half a billion dollar deficit as it is now facing. Let us just be accurate when we talk about the background of situations which have not yet occurred.

My question to the minister on the average number of weeks worked in CareerStart, he is telling me that the estimate for '92-93 is 10 weeks and the actual for '91-92 was 10 weeks, if I remember the actual small bit of information that was in the minister's latest response. Can the minister tell me what the average number of weeks worked in 1990-91 was?

Mr. Gilleshammer: The numbers would be similar to what I have given you.

Mrs. Carstairs: Before I begin to deal with the whole programs in general, can the minister tell me if there were in fact any Northern Youth Corps positions for the previous fiscal year?

Mr. Gilleshammer: No, there were not.

Mrs. Carstairs: When I was in Question Period earlier, I gave a figure of 16,352. In fact, as a result of the minister's figures, the figures are even worse because he gave us some government placement figures which would have brought us up to 17,832. If one compares, I will give him his 950 government

placements for this year plus an additional 150 for CareerStart, you come up with a total of 14,500, which means that over the last two years there has been a decrease of 18.7 percent in the number of opportunities available or, if you would like the raw figure, 3,332.

Obviously, this is not a particular section of the minister's budget that is getting the kind of attention that it deserves. I would like to know if there was any debate in the preparatory stage of this Estimates process about the very severe increase in unemployment of young people between the ages of 15 and 24.

When this government came to office in 1988, those figures were already very high. They have increased some 5 percent in the last two years, so that we are now looking at an average unemployment rate between the ages of 15 and 24 of some 18.6 percent, with a 22.7 percent unemployment rate for males between the ages of 15 and 24. Was that part of the budget debate over the last two years when it basically was decided that this youth employment program initiative would be cut by some 18.7 percent?

Mr. Gilleshammer: Madam Chairperson, I want to assure the member that the budget process is very thorough and very difficult, that departmental staff are asked to bring forward some of the ideas within the department that might be areas where we can reduce funding, and also we have to look at areas where we want to expand programming. We are under, I suppose, a constant barrage by advocacy groups and opposition critics to add more funding to all areas of the budget. I wish I could say that there was some area of the budget that was not providing needed services and required funding.

You look at the list of people who are receiving grants on the grants list, and you wonder there where perhaps you could spend less. I know it appears to be a popular move across Canada with other governments that you can attack your capital expenditures, whether it is in health care where millions and probably billions of dollars are spent on capital, whether you look at it in highways construction. On the one hand, governments are being encouraged to get into capital works to put people back to work, yet that is a popular area of budgets where people think they can save and put off that expenditure for a year so that you can redirect that funding into needed social programs.

Just in the social allowances area, we were lobbied extensively and within the department looked carefully at all of those new program initiatives, whether it was the program for the handicapped, or taking a look at the other areas of the program where we have to spend more money, and also look at this area where we would like to spend more money as well.

At some point you have to evaluate where the greatest need is, and even at that we are spending close to 9 percent more money. You look at some of the other departments across government, where there have been major reductions in positions and reductions in other areas, and Family Services has come out quite well in terms of the total budget.

You know, these are extremely difficult decisions, and I want to assure the member that a debate and discussions do take place and all of these decisions are very, very difficult.

We talk to municipal levels of government. This morning I was at a bear-pit session with the MAUM officials, and it was not that long ago, in fact last Friday afternoon, we met with the executive of UMM. Their recommendations are for more capital being spent on infrastructure and development; at the same time they are asking us to keep taxes down.

The taxes on property and farm land as it relates to education are always a part of the equation. To access more funding, we are either going to have to find that from within, create more taxes—and you get a very clear message, and all governments are getting a very clear message, that increased taxes are not in the cards. The other alternative, of course, is to increase the deficit, and we are seeing government after government across this country trying to stay away from those immense deficits.

I recall my first meeting in Ontario with a minister, who was appointed at the same time I was, talking in rather enthusiastic terms of how an \$8-billion deficit was necessary. Then shortly after that the minister was changed, and the deficit was rising to \$10 billion, \$12 billion and \$14 billion, and they were scrambling desperately to find ways of being able to contain it.

All of these things come into the equation when we talk about where our funding is going to be placed and where our priorities are.

Even in these really difficult times, we are maintaining our CareerStart Program at last year's levels and maybe a little above; we are creating a

new program; we are hopeful that in the STEP program that other departments will be able to provide more programming. I wish we could do more. Through the Manitoba Youth Job Centres, we hope that the training programs that we give to those young student managers is going to allow them to go out into the private market and encourage business people and others to hire more students, that they are going to be able to place more students. We would like to do more.

I think the Partners with Youth Program that we are going to announce later this week has a lot of potential in attracting more funding from private groups on projects, whether it be municipal governments or entrepreneurs or nonprofit organizations out there that want to get into some of the infrastructure development and some of the environmental projects that we would envision that would leave behind something tangible. So this is a new direction that we are looking at that we are going to announce shortly. We hope it will be a welcome addition to the youth programming that we currently have.

* (1620)

Mrs. Carstairs: Well, not to let the minister put things on the record that I am sure he would be ashamed to read later on, the deficit of this province has increased. It is up to \$531 million. It has not decreased. It has increased significantly over last year in terms of so thick the cuts to this particular program, and it is a cut to this line, is not helping this government keep the deficit in control, because the deficit is not in control. Let us face facts. I mean, there is \$2,100 less being spent in this particular section than was spent last year.

I would like to specifically address the STEP program because I am very confused. In 1991-92, you required staff years 117. Now you need staff years at 89. If one looks at what those salaries would be for those staff years, they would have increased by 9.8 percent, going from an average of \$1,834 to an average of \$2,033. This does not make any sense to me. Perhaps the minister can make sense of it. If you are trying to find it, it is in this book on page 77.

Mr. Gilleshammer: Within the Department of Family Services, we have reduced some of the STEP staff years that would have shown up last year. Those staff years are based on a full year and

the students, more than one, can occupy that particular staff year.

Within the budget that we have, and we reduced that because the uptake last year was not as great as we thought it would be, there is a reduction of some 25 staff years within that. But we would still be able to accommodate some 300 students within the STEP program.

Mrs. Carstairs: My concern is that in reducing the staff years, if one takes 117 staff years and divides it by 214,000 you come out with a staff year component of 1,834. Now you do the same thing, and you come out with a staff year of 2,033 which is a percentage increase of 9.8 percent.

These are not permanent people. They are not even subject to Civil Service guidelines. Why would there be that kind of an increase?

Mr. Gilleshammer: I am told that the dollar amount shown there is not the dollar amount that funds those staff years. The staff years are funded by the departments that use them. This is additional funding that is used for special needs.

Mrs. Carstairs: That is different, because normally when one sees the figure next to staff year, it is in fact the figure for the staff year. But if it is for special needs, and you are anticipating there is going to be more people that are going to be covered this year than last year, how come your special needs has gone down so much?

Mr. Gilleshammer: Those special needs funded three specific programs that will not be operating at the level they were operating at last year.

Mrs. Carstairs: It was my understanding that there were only two special initiatives. One was disabled students and the other was the Quebec Exchange. Is there a third program that is not mentioned in the Detailed Estimates, and in what way are those three programs not going to be offered at the same level?

Mr. Gilleshammer: There were four components within this particular line. The Disabled component, the Quebec Exchange, the AIESEC program and the Shad Valley Program. Those latter two programs, the last one being for gifted students, and the second last one was an international work exchange, are going to be funded within other departments if they are going to proceed.

Mrs. Carstairs: I am very familiar with the Shad Valley Program. Can the minister tell me which particular department is now looking to fund that?

Mr. Gilleshammer: One of those will be found within I, T and T and another one within the Department of Finance.

Mrs. Carstairs: In light of the other information that in fact the staff years component on page 77 did not correspond with the amounts of money, is that also true for the Manitoba job centre, Volunteers in Public Service, Manitoba CareerStart? How are they broken down?

Mr. Gilleshammer: This appropriation appears different than most others in that the dollar figure is for staff salaries as well as the operating component of that.

Mrs. Carstairs: Is it possible to get a breakdown for each of the categories, if not today, sometime in the future, as to what is staff years and what is the operating part?

* (1630)

Mr. Gilleshammer: Yes, we will provide that for the critics.

Madam Chairperson: Item 5.(d)(2) Youth Programs \$3,544,600—pass.

5.(d)(3) Human Resources Opportunity Program
(a) Salaries \$1,216,600—pass; (b) Other Expenditures \$168,200—pass; (c) Financial Assistance \$166,500—pass; (d) Opportunity Centres \$4,519,200—pass.

5.(d)(4) Employability Enhancement.

Ms. Barrett: Yes, again comparing the Estimates book for this year to the Estimates book for last year, again in the context of the horrendous unemployment statistics that the youth of Manitoba are facing this year, can the minister explain why the Single Parent Job Access figures, estimate to estimate, and the Gateway Program, estimate to estimate, are the same from last year as to this year, and why there has been a decrease of almost 100 clients—grant funding to support clients under community-based employability projects? The Estimates last year said 325; the Estimates this year say 230.

Mr. Gilleshammer: We have held the expenditure for the Single Parent Job Access and the Gateway Programs at last year's level, and we have done some evaluation of where we have been more successful. Some of the community-based employability projects that were part of the programming last year will not be part of it in this budget year.

Ms. Barrett: Can the minister explain what parts of the community-based employability projects will no longer be part of that line item?

Mr. Gilleshammer: In evaluating the projects, that there were fewer of them that will be accommodated, we have looked at the ones that were more successful, and we will proceed with those. Some of the others will not be part of the program.

Ms. Barrett: Not a great deal of clarity, but can the minister give to us a list of the projects that will be funded under the community-based employability projects line and also the corresponding projects from '91-92.

Mr. Gilleshammer: I can indicate some of the approved Community Based Employability Projects from last year. Some of those groups may not be bringing forward projects in this budget year. So I will give you a list of some of the organizations and project names: Anishinaabe RESPECT was one of them; Association for Community Living in Beausejour; Association for Community Living in Interlake; Children's Home of Winnipeg; Resources for Women; Native Employment Services; Premier Personnel; Salvation Army Addictions and Rehabilitation Services; Sara Riel Incorporated; Trainex Industries; Waso Incorporated; Winnipeg Boys and Girls Clubs; and Youth Employment Corps.

Again, those were last year's Employability Projects.

Ms. Barrett: Those are from last year, and are those same projects all going to be funded this year, have they all put forward funding applications for this year as well?

Mr. Gilleshammer: They have not all come forward at this point with a project and the evaluation and decisions have not been made at this time.

Ms. Barrett: Yes, I would like to ask the minister, again, if he could clarify why it was felt that this money that went to these projects last year was not effectively spent. I am assuming that is what they decided, because there will be fewer projects funded for far fewer clients. Can the minister tell us why he chose to eliminate this funding from this line?

Mr. Gilleshammer: Again, it is basically a decision of where we want to put our funding. In some cases these programs or programs similar to them will be brought forward as applicants under the Employability Projects. For instance, we talked

about Premier Personnel yesterday, I believe it was. There are some possibilities, I think, of finding some funding from another area of the department or from within this area if that becomes a priority.

Again, I guess government cannot simply go on from year to year doing, not only the same thing it did the previous year in trying to add new programs and enhance these without making some decisions and changes. So there will be some difficult decisions to make in terms of which projects are funded and which ones will, you know, meet the guidelines of the program best.

At this time, some of them have not reapplied and some have.

Ms. Barrett: Even if all of those agencies reapplied this year, there would be fewer funds and fewer positions available because the department has made that determination.

* (1640)

I find it interesting that, again, comparing the figures that we looked at last July in the Estimates, for this area there has been a reduction of over half a million dollars from the estimated expenditures in this Employability Enhancement program line, to the Estimates of this year, and almost half a million dollars less in the actual amount spent in this line to the Estimates for 1992-93.

I find that very interesting in light of the fact that every single person who accesses the programs under this line is a recipient of social assistance. When 80 percent of the funding increase in the Department of Family Services in 1992-93 is going specifically to maintain the mandated social assistance recipients' funding, that at the same time that there is that enormous increase—an acknowledgement on the part of the government that our economic situation, for a variety of reasons, is not improving and will not improve for the most vulnerable people in our province—at the same time that he is recognizing that we need to put all of that additional money into basic maintenance of social assistance recipients, he is cutting access to programs that are designed to assist people on social assistance to get off of social assistance.

How can the minister explain the cost effectiveness, the long-term viability, of that approach? Why is he cutting half a million dollars out of programs such as this, and at the same he is adding 80 percent of his additional funding into social assistance payments, which are not designed

to enable people to get off social assistance as these programs are? What is the logic behind that movement?

Mr. Gilleshammer: I have indicated to the member that there are difficult decisions that are made in terms of expending more funding within this department, that we simply have not been able to add additional funding to each and every line within the budget. In the whole area of training, and we were talking about that earlier, there are other departments which are providing some training and coming forward with some new training programs in Labour and in Education.

If the member is saying, are we doing everything we would like to do within the department, there is always more in every aspect of this department that we could do and we would like to do, but we have to work within certain budget limitations. We look at the success rate of some of these programs and make determinations that perhaps we can do a little less here, so we can do a little more somewhere else.

Overall, we have increased the total budgeting for the department in excess of 8.5 percent, some \$51 million. The member, you know, consistently comes back to the fact that \$40 million of that is for social allowances, and that is the reality of it. A portion of that is on the increase in rates, but there is then some volume increase at the provincial level, a greater volume increase at the level of the municipal organizations that fund social allowances.

We have been able to basically maintain most of this program with some program adjustments that are taking place, and we will look more carefully at the programming that is brought forward. The member, I think, wants us to provide more money in some areas. Well, we cannot simply keep adding without looking at what we are doing.

Ms. Barrett: Can the minister share with us the success rate, estimated or actual, for these various programs that he is reducing in this line?

Mr. Gilleshammer: I can give some general evaluation of the programs that we are talking about here. This dates back to the previous year's programming. It indicated 68 percent of all completers were either working or were enrolled in further education or training, 49 percent of completers held at least one job after program completion with an average wage of \$7.91 per hour. That was in '89-90. Social assistance dependency

decreased 90 days after program completion, and 21 percent of completers who received income support were enrolled in further education or training. So I do not have a breakdown per program here, but I believe we do have that information in the department where those programs were evaluated.

Ms. Barrett: I am wondering if the minister could give me—I know this is going back to a different line—but the number of individuals who are on social assistance in the province of Manitoba at this point. Is it something like 24,000?

Mr. Gilleshammer: I am told that on the provincial social allowance list we have between 26,500 and 27,000 cases.

Ms. Barrett: In the minister's earlier discussions with the member for Selkirk (Mr. Dewar) on the Human Resources Opportunity Centre closing in Selkirk, he stated that the success rate for HROC in Selkirk was approximately 67 percent, and the program in Winnipeg was 70 percent. It would appear from the general statistics of the Employability Enhancement Programs that are under discussion here, that there is a fairly equitable success rate, at least on some categories of employability, enhanced employability, people actually having jobs, functioning in the work force, paying taxes and also going for further education and training.

* (1650)

It does not appear that these programs are simply a revolving door where the students come in, the clients come in for the program, leave the program and then immediately go back onto social assistance or come back into accessing these kinds of programs. There appears to be a fairly substantial success rate.

So I am wondering, if that is the case, and the success rate appears to be similar to the Human Resources Opportunity Centre in Winnipeg that is remaining open, why the minister would choose to decrease by half a million dollars the funding for these external programs, a very high percentage increase year over year, when it would appear that they have at least as good, if not better, success rate than other programs that are continuing to be funded.

Mr. Gilleshammer: As I indicated before, we do have to evaluate the success rate of the various programs and how they are delivered, and make decisions on not only which ones are the most

appropriate and most successful, but also take a look at the type of training that is leading people to either further training or employment, and make some difficult decisions.

The ideal solution, of course, would be to have thousands of dollars for each individual who is on social allowance to get them retraining, and then have them access a job to enable them to look after themselves. That would, of course, lead to a tremendous increase in the social allowance line of the budget for the training component of it.

We are cognizant of the fact that some of the training programs are more successful than the others, and we have to make those decisions and decide which is the most appropriate training for the 1990s.

Ms. Barrett: In the evaluation that has been undertaken by the department in this area, I would assume, given the fact that the Single Parent Job Access and Gateway have been maintained and the community-based employability projects funding has been decreased, that those first two seem to be more effective.

My final question is: What happened to the Job Access for Young Adults Program that had a quarter of a million dollars last year and nothing this year?

Mr. Gilleshammer: The two programs where we have had the most positive feedback are the Single Parent Job Access and the Gateway Program, and those applicants who were served in the Job Access for Young Adults will have to access those other two programs for their training. But we have had very positive feedback on those two in particular, and anything that I have seen or heard about the Single Parent Job Access or the Gateway has been very, very positive.

Mrs. Carstairs: If they have been so positive, and if it was decided for some reason or other that community-based employability projects were not as effective, why was the money from community-based employability projects that was going to be cut, not been put into Single Parent Job Access and at Gateway so that more clients could be handled in this successful way?

Mr. Gilleshammer: That goes back to, I suppose, my comments earlier. We have to look at the entire department and where we place our funding priorities. There are other demands that are out there, and we will proceed with Single Parent Job Access and Gateway with the funding that is

available and I think be able to accommodate as many applicants there as we had before. As I have indicated, we are also introducing a new program, the Partners with Youth as well this year. Certainly there is some decline in the amount of dollars for the community-based employability projects, some of which are funded in part by the federal government. We will have to take a close look at the projects that come forward and see that they are in fact being successful. We are not sure at this time whether all of those organizations will be applying for projects this year. We will have to not only look at the projects, but at the total cost that it is going to be to government.

Mrs. Carstairs: The minister points to some success with these clients, and if one just takes the dollar value and the number of clients it would look as if the training component costs about \$40 to \$100 per client. It is not obviously easy to do it exactly that way, but one looking at dollars and one looking at clients.

Has any long term study been done on a 48 percent success rate, if that is the success rate for this thing, as to what that means in reducing numbers for social assistance? Forty-eight percent of them find jobs. That presumably means that of the 1,050 clients served, 525 of them go off the welfare system and find themselves as employees. Is this not a very cost-effective program or has that kind of study and evaluation not been done?

Mr. Gilleshammer: I am told that in the analysis that the department has done there is a three- to five-year payback on the funding invested in training here. Of course some of these clients are able to access employment initially and then perhaps be back in the system again if that particular position is lost for whatever reason. I think one of the facts of life is that sometimes the training is not as portable as we would like, or is as broad as we would like so that they can access other positions. There does appear to be a payback over a three- to five-year period. Again, there is a significant number of dollars put into the training component; for some it is successful, for others it is not.

Madam Chairperson: 5.(d) Special Employment Programs.

Ms. Barrett: I would just like to ask the minister if he has actually done that evaluation of the three- to five-year payback and figured out what the cost

effectiveness of those programs at that time frame is, as it relates to the cost of social assistance.

Mr. Gilleshammer: Yes, the department has done a study on that.

* (1700)

Madam Chairperson: Order, please. The hour being 5 p.m., and time for private members' hour, committee rise.

Call in the Speaker.

IN SESSION

Mr. Speaker: The hour being 5 p.m., time for private members' hour.

Committee Report

Mrs. Louise Dacquay (Chairperson of Committees): The Committee of Supply has considered certain resolutions, directs me to report progress and asks leave to sit again. I move, seconded by the honourable member for Sturgeon Creek (Mr. McAlpine), that the report of the committee be received.

Motion agreed to.

Mr. Speaker: Six o'clock. Is it the will of the House to call it six o'clock? Is it agreed?

Some Honourable Members: Agreed.

Mr. Speaker: It is agreed. The hour being 6 p.m., this House is now adjourned and stands adjourned until 1:30 p.m. tomorrow (Wednesday).

Legislative Assembly of Manitoba

Tuesday, April 14, 1992

CONTENTS

ROUTINE PROCEEDINGS

Presenting Petitions

Aboriginal Justice Inquiry: Support for
Recommendations
Hickes 2192

Fight Back Against Child Abuse Campaign
Barrett 2192

Selkirk Human Resource
Opportunity Centre Moratorium
Dewar 2192

Dutch Elm Disease Funding
Cerilli 2192

Reading and Receiving Petitions

Criminal Code Amendment, Family Violence
Wasylycia-Leis 2192

Dutch Elm Disease Funding
Friesen 2192

Presenting Reports by Standing and Special Committees

Committee of Supply
Dacquay 2193

Introduction of Bills

Bill 76, Pension Benefits Amendment Act
Praznik 2193

Bill 65, Residential Tenancies
Amendment Act
Martindale 2193

Oral Questions

Manufacturing Industry
Doer; Filmon 2193

North American Free Trade Agreement
Doer; Filmon 2194

Seven Oaks General Hospital
Wasylycia-Leis; Orchard 2195

Youth Unemployment
Carstairs; Gillehammer 2196

Provincial Highway Map
Wowchuk; Driedger 2197

Bill 45
Friesen; Ernst 2198

Nopiming Park - Forestry
Edwards; Cummings 2198

Abitibi-Price - Pine Falls
Storie; Downey 2200

Health Care System
Cheema; Orchard 2200

Ministerial Statement

Rural Economic Development Initiative
Derkach 2201
Wowchuk 2202
Lamoureux 2203

ORDERS OF THE DAY

Committee of Supply

Health 2203
Family Services 2226