

**Third Session - Thirty-Eighth Legislature**  
of the  
**Legislative Assembly of Manitoba**  
**DEBATES**  
and  
**PROCEEDINGS**  
**Official Report**  
**(Hansard)**

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**MANITOBA LEGISLATIVE ASSEMBLY**  
**Thirty-Eighth Legislature**

<b>Member</b>	<b>Constituency</b>	<b>Political Affiliation</b>
AGLUGUB, Cris	The Maples	N.D.P.
ALLAN, Nancy, Hon.	St. Vital	N.D.P.
ALTEMEYER, Rob	Wolseley	N.D.P.
ASHTON, Steve, Hon.	Thompson	N.D.P.
BJORNSON, Peter, Hon.	Gimli	N.D.P.
BRICK, Marilyn	St. Norbert	N.D.P.
CALDWELL, Drew	Brandon East	N.D.P.
CHOMIAK, Dave, Hon.	Kildonan	N.D.P.
CULLEN, Cliff	Turtle Mountain	P.C.
CUMMINGS, Glen	Ste. Rose	P.C.
DERKACH, Leonard	Russell	P.C.
DEWAR, Gregory	Selkirk	N.D.P.
DOER, Gary, Hon.	Concordia	N.D.P.
DRIEDGER, Myrna	Charleswood	P.C.
DYCK, Peter	Pembina	P.C.
EICHLER, Ralph	Lakeside	P.C.
FAURSCHOU, David	Portage la Prairie	P.C.
GERRARD, Jon, Hon.	River Heights	Lib.
GOERTZEN, Kelvin	Steinbach	P.C.
HAWRANIK, Gerald	Lac du Bonnet	P.C.
HICKES, George, Hon.	Point Douglas	N.D.P.
IRVIN-ROSS, Kerri	Fort Garry	N.D.P.
JENNISSON, Gerard	Flin Flon	N.D.P.
JHA, Bidhu	Radisson	N.D.P.
KORZENIOWSKI, Bonnie	St. James	N.D.P.
LAMOUREUX, Kevin	Inkster	Lib.
LATHLIN, Oscar, Hon.	The Pas	N.D.P.
LEMIEUX, Ron, Hon.	La Verendrye	N.D.P.
LOEWEN, John	Fort Whyte	P.C.
MACKINTOSH, Gord, Hon.	St. Johns	N.D.P.
MAGUIRE, Larry	Arthur-Virden	P.C.
MALOWAY, Jim	Elmwood	N.D.P.
MARTINDALE, Doug	Burrows	N.D.P.
McGIFFORD, Diane, Hon.	Lord Roberts	N.D.P.
MELNICK, Christine, Hon.	Riel	N.D.P.
MITCHELSON, Bonnie	River East	P.C.
MURRAY, Stuart	Kirkfield Park	P.C.
NEVAKSHONOFF, Tom	Interlake	N.D.P.
OSWALD, Theresa, Hon.	Seine River	N.D.P.
PENNER, Jack	Emerson	P.C.
REID, Daryl	Transcona	N.D.P.
REIMER, Jack	Southdale	P.C.
ROBINSON, Eric, Hon.	Rupertsland	N.D.P.
ROCAN, Denis	Carman	P.C.
RONDEAU, Jim, Hon.	Assiniboia	N.D.P.
ROWAT, Leanne	Minnedosa	P.C.
SALE, Tim, Hon.	Fort Rouge	N.D.P.
SANTOS, Conrad	Wellington	N.D.P.
SCHELLENBERG, Harry	Rossmere	N.D.P.
SCHULER, Ron	Springfield	P.C.
SELINGER, Greg, Hon.	St. Boniface	N.D.P.
SMITH, Scott, Hon.	Brandon West	N.D.P.
STEFANSON, Heather	Tuxedo	P.C.
STRUTHERS, Stan, Hon.	Dauphin-Roblin	N.D.P.
SWAN, Andrew	Minto	N.D.P.
TAILLIEU, Mavis	Morris	P.C.
WOWCHUK, Rosann, Hon.	Swan River	N.D.P.

## LEGISLATIVE ASSEMBLY OF MANITOBA

Thursday, June 9, 2005

The House met at 10 a.m.

*PRAYERS*

**Mr. Speaker:** Order. The first order of business. During the last private members' hour there was a request for a recorded division which was deferred to this time in accordance with Rule 23(4).

Therefore, call in the members. However, I should note that the bells can only ring for up to 52 minutes, given that the bells rang for 8 minutes last week.

\* (10:05)

**Mrs. Bonnie Mitchelson (River East):** Mr. Speaker, I would like to ask for leave of the House to withdraw the motion.

**Mr. Speaker:** Is there leave of the House to withdraw the challenge? *[Agreed]*

Okay, there is agreement, so we will not have a vote.

**Introduction of Guests**

Before we move on to Private Members' Business, Orders of the Day, I want to take this opportunity to introduce some guests we have in the public gallery. We have, from Shaftesbury High, 14 Grade 11 students under the direction of Mr. Steve Peers. This school is located in the constituency of the honourable Member for Tuxedo (Mrs. Stefanson).

Also in the public gallery we have, from Windsor Park Collegiate, 8 Grade 10 students under the direction of Mr. Brent Epp. This school is located in the constituency of the honourable Member for Radisson (Mr. Jha).

Also in the public gallery we have, from Gray Academy of Jewish Education, 26 Grade 11 students under the direction of Mrs. Linda Connor. This school is also located in the constituency of the honourable Member for Tuxedo (Mrs. Stefanson).

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

**ORDERS OF THE DAY****PRIVATE MEMBERS' BUSINESS****DEBATE ON SECOND READINGS—  
PUBLIC BILLS**

**Mr. Leonard Derkach (Official Opposition House Leader):** Mr. Speaker, this is just a matter of order, I think, and I recognize that we are kind of moving through this hastily, but with leave, could I ask that we deal with Bill 207 first this morning, please?

**Mr. Speaker:** Is there leave of the House to deal with Bill 207 and then we will revert to the order as is on the Order Paper? Is there agreement? *[Agreed]*

**Bill 207—The Medical Amendment Act**

**Mr. Speaker:** I am going to call forward Bill 207, The Medical Amendment Act, standing in the name of the honourable Member for St. James (Ms. Korzeniowski).

What is the will of the House? Stand?

**An Honourable Member:** No.

**Mr. Speaker:** No, it has been denied.

**Hon. Tim Sale (Minister of Health):** Mr. Speaker, this is an important bill that has been brought forward by the member of the opposition. It seeks to find an appropriate balance between allowing new procedures to develop in our medical care system while protecting both the safety of patients and the ability of the College of Physicians and Surgeons to reasonably discipline and hold to account physicians for standards of practice.

I believe that the proposed bill as it currently stands will require some modification in committee in terms of some amendment. I have discussed this with the honourable member. I believe there will be agreement on the nature of the amendment that we will put forward. I think that it is always tricky to find a balance in this kind of an issue, and I just close by giving the example of acupuncture which for years was treated as a non-acceptable medical practice, whereas today we accept that, in specific

cases in the hands of a qualified practitioner, acupuncture can be a very valuable treatment.

So, Mr. Speaker, I believe that there is agreement to move this bill to committee where it can be the subject of public input and where we believe that necessary amendment that will be agreeable to all parties can be made.

**Mr. Kevin Lamoureux (Inkster):** Mr. Speaker, I recognize that I have already spoken on this bill, so I would ask if I might just have leave just to comment for two minutes prior to its passage to committee, if I may.

**Mr. Speaker:** Does the honourable member have leave to speak again to the motion? Is there leave? *[Agreed]*

**Mr. Lamoureux:** Mr. Speaker, I appreciate the members giving me leave just to very briefly comment that we are happy to see that this bill is, in fact, going to be going to committee. The only emphasis that we would put with the minister is that if the Minister of Health can give some sort of indication to members as to when we could anticipate the committee being called, some time in the next week or sometime over the summer, if the Minister of Health could give us some sort of indication at some point in time. Thank you, we would appreciate it.

\* (10:10)

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

**Some Honourable Members:** Question.

**Mr. Speaker:** The question before the House is second reading of Bill 207, The Medical Amendment Act.

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

### **Bill 200—The Personal Information Protection Act**

**Mr. Speaker:** We will move to Bill 200, The Personal Information Protection Act, standing in the name of the honourable Member for Burrows (Mr. Martindale).

What is the will of the House? Is it the will of the House to leave it standing? *[Agreed]*

**Mr. Speaker:** It will remain standing in the name of the honourable Member for Burrows.

**Mr. Kelvin Goertzen (Steinbach):** It is a pleasure to rise today to speak this morning on Bill 200. I want to begin by offering my commendation and congratulations to the member from Morris for bringing forward this legislation. I know, for private members' legislation, it is quite detailed in terms of the sort of things that it lays out, but I think that that speaks to her ability and interest in this particular issue and the work that she has put into it to ensure that it is brought forward in this Legislature and put on the radar screen of all Manitobans.

I do think that this issue of protection of privacy is one that Manitobans are becoming more concerned about as they hear and learn about the instances within our province and within our country where privacy is in fact impeded upon. We often think of privacy within a general context, Mr. Speaker, of privacy within our homes, privacy of our personal security when it relates to privacy issues to ensure that we are not impeded upon in a physical manner. But there is a whole lot of parlance of privacy that is now being discussed within the country and, indeed, within North America and throughout the world and that is protection of personal information.

We have heard, and there has been some news, not just this week but really throughout the last number of months, about the identity theft that happens within Canada. It is perhaps the most insidious form of breach of privacy for many, many Manitobans because it happens in a way that is unexpected, often not detected for some time, and it can be difficult to unwind the wheel, as it were, Mr. Speaker, once that identity theft has taken place.

It can be a very simple form the way identity theft takes place. I understand, in reading an article a couple of days ago, it can often take place by just one number, one social insurance number being taken from an individual, and then it grows from there. Once that particular number is obtained, then an individual who is going about committing this theft can kind of go and build the profile of the individual whose number has been stolen. And that has a number of different effects.

I can tell you, Mr. Speaker, that I worked for some amount of time in a financial institution. In the financial institution, like really any financial institution within our country and within North America, the issue of credit is one that is important. As a lender or a borrower, the status of one's credit really determines what you will be able to do, whether it is purchasing a home, whether it is purchasing a vehicle. We routinely would run credit checks on individuals within that financial institution, through Equifax, the main credit organization in North America. We would get the different ratings of credit, and you would really see a true portfolio, a true history of an individual lender's history, everything from, obviously, credit cards to past loans and past institutions.

But there were cases and I came across a few of them, Mr. Speaker, where individuals would come to my office and talk about the fact that they had had their identity stolen and what impact that had on their credit because once their identity was in fact stolen, then it opened the door for these identity thieves to go forward and use that information to rack up credit charges on the personal identity of the individual who had then become an unknowing and unwitting victim of this crime.

The impact of it, particularly at the time that I was working in the financial institution, was quite severe because it was new at that time, and there was often a suspicion about identity theft and whether or not it was true. It took quite a while, I would say, as somebody working in that financial institution, to kind of go through and back-track in the history and determine whether or not that, in fact, was the case, whether or not somebody's identity was stolen or whether or not they, in fact, were just putting forward that as a guise to the difficulties that they were having with their own credit.

But, as time has gone on, we have seen that this is a crime that has become more and more significant, because, I think, Mr. Speaker, the ease in which it is performed, the anonymity with which it is performed and the significant amounts of money that can be obtained in a very, very short period of time.

So what the Member for Morris (Mrs. Taillieu) has done is identify a gap that we have in current legislation. There is, in Manitoba, as members of this Chamber know and perhaps to a lesser degree members of the public know, there are a number of

schemes and mechanisms for personal information to be protected, whether it is personal information of them as individuals, whether it is information that government maintains, we do have a myriad of legislations that cross over, that talk about how it is that information can be protected.

But there has been a gap, as I mentioned, identified by the Member for Morris, and that is that private institutions, businesses, probably primarily, but private institutions do not have a mechanism to protect the information of their employees. That is, in fact, I think critical, Mr. Speaker, where government has that kind of protection in the public sector for their employees, we see that private institutions do not have that same kind of mechanism in place and that kind of assurance that their employees will be protected. Employee protection is something that I know is not foreign to this government.

Discussion has come up on a number of different issues. I know that there has been some debate about the smoking ban in the province of Manitoba and the fact that it does not apply uniformly across the province, that it does not, in fact, apply to certain areas, as those designated on reserves. We see, then, that there is an inequality or an inequity of protection for those employees who are working within a casino on a reserve and those who are off the reserve. One is protected from that harmful smoke and one is not. So just as there is an inequality in that legislation, Mr. Speaker, the Member for Morris (Mrs. Taillieu) has identified an inequality in this particular area. Both relate to the protection of individuals. Both relate to the protection of employees. Both, certainly, could be addressed in one form or the other by legislation.

Certainly, Mr. Speaker, I suspect, and I know that private businesses throughout Manitoba are very concerned about their employees, and I know that they do their best to ensure that information is protected, but having the legislative scheme in place would, I think, provide standards and provide certainty that just simply does not exist at this time.

I understand that a resolution was brought forward by the Manitoba Federation of Labour at some point, an organization that probably is not foreign to the members opposite. They may have heard of the Manitoba Federation of Labour. In fact, I am quite surprised that, more often than not, they do their best to implement and agree with virtually

everything that comes from organizations like that, but now, when the Federation of Labour brings forward the notion or the concern about this gap in legislative protection for private employees, they are simply ignored, and their concerns are not adhered to. So that is, I think, why the Member for Morris picked up on this issue, identified it as one that was important or should be important to Manitobans, identified it as one that could be used to protect individuals within the province and that it should be addressed, and has brought that forward.

You know, we saw, just a few moments ago in this Chamber, an example, Mr. Speaker, of how co-operation can be had with private members' bills. Bill 207 has now, I believe, been referred on. There has been some movement on, and there might be some amendments coming to it, but that is an example of how a private member's bill can be reacted upon by the government.

\* (10:20)

I would encourage the government, in the same spirit of co-operation that we just bore witness to in this Chamber, to take a look at the private members' bill that the Member for Morris (Mrs. Taillieu) has put forward, because I think that kind of co-operation could be extended to her bill. Perhaps there are amendments that the government wants to speak about regarding the Member for Morris's bill. Maybe there are suggestions that they want to put forward. I know that the Member for Morris, being the kind of person that she is, I am sure would be more than gracious enough to sit down with the government and explore all of those options, explore all of those possibilities to try to do what is best for Manitobans.

So I would encourage the government to take that opportunity to look at this issue on behalf of all Manitobans who deserve to have their privacy protected, deserve to be secure from the kind of identity theft that we see arising across North America. There are a number of technological issues that come forward that are impeding upon people's privacy within our nation and within North America, the borders of North America and indeed throughout the world. Those issues I think can only be dealt with by a proactive approach. Too often in government, and I do not say this specifically about the NDP, but really all governments at times can be too reactive to issues and not proactive enough. But here is an opportunity for us to get ahead of an issue to ensure

that we are doing our best at the forefront of a problem and ensure that we are trying to address it in a way that is done respectfully and responsibly.

I do know that when this legislation was being looked at, the Member for Morris (Mrs. Taillieu) took some advice from others who were experts in the field. I know that Mr. Brian Bowman looked at this particular issue and Melanie Bueckert looked at the issue. I believe that Melanie is someone that I studied law with, the name rings a bell, and was an excellent student of law, may have been a gold medalist I believe if my memory serves me correctly. So there is a lot of good expertise here. Mr. Bowman, who lent us his expertise on the issues of privacy, and Melanie, as well, who has put in her expertise and her strong knowledge of the law into this. They, I think, jointly crafted this legislation with the Member for Morris and then did a lot of the government's work for them.

I would hope, Mr. Speaker, that that is not what is holding up this legislation, the fact that it is coming from this side of the House, the fact that it is coming from somebody who is not a New Democrat. I do not think that Manitobans would expect us as legislators to get hung up on the issue of partisan politics, to get hung up on the issue of which party has brought forward this issue. I think in the end what Manitobans will remember is that a Legislature as a whole brought forward legislation that protected them, that protected a strong segment of the population of Manitoba. That is truly what they will remember in the days ahead. I think that they would reflect and look on all of us more positively if we took this legislation and moved it forward in a co-operative spirit than it has been.

A lot of, as I mentioned, legal advice has gone into this issue, a lot of free legal advice for the government. We know at times the government, the NDP government get themselves entangled into situations where they need a lot of legal advice that they end up paying for because of scandals and difficult things that happen within their administration by the nature of the way they run government, and they had to then pay for that legal advice. Here we have legal advice that has been provided in the parlance of law on a pro bono, I suppose, nature, Mr. Speaker. I think that the government should accept that gracious offer that has been put forward by Mr. Bowman and Mrs. Bueckert and ensure that they look at this legislation, and not just simply I would

say look to bring it back at another time, in a few months under their own name, because that is not really necessary.

Every day that goes by without legislation in place is a day that somebody else could simply fall through the cracks and be a victim for a number of reasons because of a lack of privacy, Mr. Speaker. I know that my time is growing short to speak on this particular bill, but I would certainly encourage members opposite to use the time that we have today, and perhaps in the days ahead, to move this legislation forward quickly and to ensure that no other Manitobans fall through this privacy gap, that no other Manitobans are victims of a privacy window that could be closed, one that could be sealed to ensure that all Manitobans are better off.

I do want to, again, conclude the way I started my comments by commending the Member for Morris (Mrs. Taillieu) for her hard work on this issue. I know, on behalf of all Manitobans, I thank her. Thank you, Mr. Speaker.

**Mr. Ralph Eichler (Lakeside):** Mr. Speaker, I want to rise today to put a few comments on the record with respect to Bill 200, Manitoba's Personal Information Protection Act, that has been brought forward by the hardworking member from Morris. I know that the time and dedication she has put into making sure that the thought went into the bill, made sure that it was worded properly, and I know that with the assistance from Mr. Brian Bowman did a tremendous amount of work to make sure that everything would be included into the bill.

No matter what type of a job you do, there is always room for improvements. We find that through the member from Burrows that mentioned that it is very unlikely that a bill would be brought forward from opposition and accepted. But we understand today there is a bill that is going to be brought forward today that will pass, and we are glad to see that the government has had the wisdom to make sure that when there is a good bill, good legislation, no matter whether it comes from this side of the House or that side of the House, that it is brought forward in a way that is best for all Manitobans.

I know that we recently had a break-in to an insurance company within the town of Stonewall, and, believe it or not, the only thing they wanted was the information that was there on their list from the

database that they had within their store, and it is unfortunate that information did get stolen. We know that the e-mails we get each and every day, we know the letters that we get each and every day, that come from information that has been provided, without wilful consent, is a violation of our individual rights. The member from Morris went above and beyond when it comes to trying to make sure that this bill would cover that off.

I know that each of us has probably a relative or even we, even personally, have been victimized one way or another, through probably no fault of our own, through either a pickpocket or just accidentally left our wallet or information laying around, or even one of our employers that maybe one of the places we worked at had their information stolen or taken.

I know that it is important that we maintain and keep our credibility. I know we work very hard to make sure that our names are clean, and we want to make sure that information is not used against us in any way. I know that we work so hard as individuals and especially as politicians to make sure we are credible, and that is something that we have to maintain and pursue. But sometimes, by no fault of our own, information could get out that is wrong. An act like this would protect some of that information from getting into the wrong hands.

I know that even the other day I went to renew my insurance, and there was a form there that I needed to sign, that I did not want my information passed on. But, having said that, Mr. Speaker, I know there are members on the other side of the House that have great interest in seeing this bill passed. We are looking forward to the opposition of the government in power to speak on this bill. I know they would like to see it move forward, one of those bills that just makes the province of Manitoba a better place to live.

So having said those few words, I just want to commend once again the hard work that the member from Morris has put into this bill and Mr. Bowman to make sure that the i's have been dotted and the t's have been crossed, that this bill is a good bill and ask the government to support it and move it on to committee, Mr. Speaker.

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

**An Honourable Member:** Question.

**Mr. Speaker:** The question before the House is Bill 200, The Personal Information Protection—

**An Honourable Member:** We agreed to let the matter remain standing.

**Mr. Speaker:** Okay, yes. Any other speakers? Okay, when this matter is again before the House, it will remain standing in the name of the honourable Member for Burrows (Mr. Martindale).

**Bill 201—The Legislative Assembly Amendment Act**

**Mr. Speaker:** Bill 201, The Legislative Assembly Amendment Act, standing in the name of the honourable Member for Pembina (Mr. Dyck).

What is the will of the House?

**Some Honourable Members:** Stand.

**Some Honourable Members:** Oh, oh.

**Mr. Speaker:** Stand? When I am addressing the House, this is not the time to play games because I need to affirm, one way or the other, the will of the House.

\* (10:30)

What is the will of the House? Is it the will of the House for the bill to remain standing in the name of the honourable Member for Pembina (Mr. Dyck)? *[Agreed]*

It will remain standing in the name of the honourable Member for Pembina.

Are there any speakers? Okay. When this matter is called again before the House, it will remain standing in the name of the honourable Member for Pembina.

**Bill 202—The Health Services Amendment and Health Services Insurance Amendment Act**

**Mr. Speaker:** Bill 202, The Health Services Amendment and Health Services Insurance Amendment Act, standing in the name of the honourable Member for Minto (Mr. Swan).

What is the will of the House? Stand? *[Agreed]*

It will remain standing in the name of the honourable Member for Minto.

Are there any speakers? Okay.

**Bill 203—The Manitoba Public Insurance Corporation Amendment Act**

**Mr. Speaker:** On the proposed Bill 203, The Manitoba Public Insurance Corporation Amendment Act, standing in the name of the honourable Member for Rossmere (Mr. Schellenberg), what is the will of the House? Stand? *[Agreed]*

It will remain standing in the name of the honourable Member for Rossmere.

**Bill 204—The Audiologists and Speech Language Pathologists Act**

**Mr. Speaker:** Bill 204, The Audiologists and Speech Language Pathologists Act, standing in the name of the honourable Member for Rossmere.

What is the will of the House? Stand? *[Agreed]*

**Bill 205—The Legislative Assembly Amendment Act (Set Date Elections)**

**Mr. Speaker:** Bill 205, The Legislative Assembly Amendment Act (Set Date Elections), standing in the name of the honourable Member for Interlake (Mr. Nevakshonoff), who has 10 minutes remaining.

What is the will of the House? Stand? *[Agreed]*

**Bill 208—The Child and Family Services Amendment Act (Grandparent Access)**

**Mr. Speaker:** Bill 208, The Child and Family Services Amendment Act (Grandparent Access), standing in the name of the honourable Member for Burrows (Mr. Martindale).

What is the will of the House? Stand? *[Agreed]*

It will remain standing in the name of the honourable Member for Burrows.

**Bill 210—The Highway Traffic Amendment Act (Bicycle Helmets)**

**Mr. Speaker:** Bill 210, The Highway Traffic Amendment Act (Bicycle Helmets), standing in the



name of the honourable Member for Selkirk (Mr. Dewar).

What is the will of the House? Stand? *[Agreed]*

**Bill 212—The Pension Freedom Act  
(Pension Benefits Act Amended)**

**Mr. Speaker:** Bill 212, The Pension Freedom Act (Pension Benefits Act Amended), standing in the name of the honourable Member for Turtle Mountain (Mr. Cullen), who has nine minutes remaining.

Is it the will of the House to stand? *[Agreed]*

**SECOND READINGS—PUBLIC BILLS**

**Bill 209—The Firefighters Compensation Act  
(Workers Compensation Act Amended)**

**Mr. Speaker:** Bill 209, The Firefighters Compensation Act (Workers Compensation Act Amended), brought forward by the honourable Member for Turtle Mountain (Mr. Cullen).

**RESOLUTIONS—DRAW SELECTION**

**Res. 3—Rural Health**

**Mr. Speaker:** We will move on to Resolutions. Resolution 3, brought forward by the honourable Member for Turtle Mountain on Rural Health.

**Mr. Cliff Cullen (Turtle Mountain):** Mr. Speaker, I move, seconded by the member from Pembina:

WHEREAS the Premier during the 2003 election campaign promised the communities of Erickson and Rivers that their hospitals would not close; and

WHEREAS the Premier promised to these communities that on-call and emergency services would be restored by the spring of 2004; and

WHEREAS the Premier has broken his promise to the people of Rivers and Erickson; and

WHEREAS rural Manitobans especially on the west side of the province are witnessing the removal of services; and

WHEREAS doctor shortages in rural communities have reached a crisis situation resulting

in the termination of such services as chemotherapy; and

WHEREAS as a result of hospital services being closed, patients living in rural Manitoba have been relegated to second class citizens; and

WHEREAS the term "hallway medicine" has been replaced by "highway medicine"; and

WHEREAS this NDP government has seriously damaged the way in which rural health services are delivered.

THEREFORE BE IT RESOLVED that the Legislative Assembly of Manitoba strongly urge the NDP government and the Premier to live up to their promise to the rural communities of Erickson and Rivers to restore all services as promised in the 2003 election campaign; and

BE IT FURTHER RESOLVED that the NDP government end its ill-focussed policy of highway medicine and put patients first so that rural Manitobans can receive medical treatment in their local hospitals as was promised by the Premier in 2003.

***Motion presented.***

**Mr. Cullen:** Mr. Speaker, I certainly thank you for the opportunity to put a few words on the record in regard to this very, very important resolution. Certainly health care is a very high priority for all Manitobans, especially those out in rural Manitoba. I think, in particular, the people of my constituency have some very serious concerns about health care delivery and how it will affect them down the road.

It is kind of ironic today that we bring forward this particular resolution when hearing on the television this morning that we do have probably a ruling coming down from the Supreme Court today and how that may very significantly impact the delivery of health care all across Canada. I think it will be very interesting to see how that ruling comes down and what discussions are brought forward from that point on.

Seriously, from this side of the House, we do think that the government of the day should look at various options in terms of how we deliver health care particularly in Manitoba. We do believe that

there is some room here for the private delivery of health care. We certainly are not bringing forward the concept of American-style health care. We do think that there is room for the free enterprise system to bring forward services on behalf of all Manitobans and, with that in mind, still have those particular services paid for out of the public purse.

We do know that we are facing backlogs, particularly in orthopedic surgeries, and I am talking primarily about knee and hip surgery. I know I have constituents who have been forced because of the extremely long waiting lists to go to other provinces and to go to other jurisdictions, even into the United States to seek services because of these long delays. Unfortunately, because of those severe delays, they have had to pay for the costs of those surgeries and those procedures out of their own pocket.

\* (10:40)

Mr. Speaker, a lot of this money is their hard-earned money that they have been saving up through the years, saving for their retirement. Unfortunately, they are being forced to turn those funds over to providers of these particular services, and they cannot enjoy the money and the resources they worked so hard for over the years. We think that is very unfortunate.

We do notice there are private clinics in Manitoba that are being underutilized, and we think that the government of the day should give serious consideration to those particular facilities because there are obviously lots of, we feel, doctors that can deliver these processes and procedures here in Manitoba in these private clinics. That I think, Mr. Speaker, would really reduce the backlogs that we are facing here. It really speaks to the whole lifestyle.

I know a lot of these people are waiting over a year, sometimes two years, and it really impacts their way of life. They cannot go out and enjoy the activities that they once would, such as walking or partaking in sports such as curling or golf or whatever their particular pastimes were. So it really speaks to a matter of their own personal activities.

I know sometimes, too, it further complicates their health. For instance, one gentleman has a diabetes problem. He requires a lot of exercise to maintain his diabetes, and with a bad hip he was unable to get his regular exercise. So it is very

unfortunate that these delays actually complicate other health issues for these people, and it really exacerbates the whole situation. So I think it is certainly important for the government to have a look at how these particular services are delivered throughout Manitoba.

I know, in particular, the residents of western Manitoba are really concerned about the potential of closures of different facilities, in particular emergency room facilities in the western side of the province. I know that the Premier (Mr. Doer), for instance, was out in Rivers in 2003, just prior to the election, and made a commitment on behalf of his government that these hospitals would not be closed or converted. Quite frankly, we are finding that the facility is basically closed at this point in time. Rivers is not the only one that has met this particular fate. There are a number of jurisdictions and hospitals across the province that are facing closure.

Clearly, right now, we have 12 emergency rooms that are closed. Mr. Speaker, just for the record, I will read these: McCreary, Erickson, Rossburn, Rivers, Birtle, Pembina-Manitou, Emerson, Gladstone, Ashern, Benito, Whitemouth and Reston. Also, one of the hospitals in my particular constituency has been closed, the H has been removed from the highway. The facility has undergone some major changes. The town of MacGregor, a fairly good-sized community in my constituency, has faced closure of the emergency room, and quite frankly, the residents there are quite upset. They have started to raise money to put up a facility there that would house a doctor, put up a clinic to address some of those issues. Unfortunately, the government of the day has not really come to the table with them to discuss those particular issues. Quite frankly, Mr. Speaker, we are appalled at the lack of direction and the lack of leadership and the lack of caring on behalf of this government. We think the government should be there to at least discuss options with these communities.

We recognize in rural Manitoba that rural health care and hospitals, personal care homes are a very, very important aspect of rural Manitoba. Clearly, when we lose these types of facilities in a community, it impacts the whole culture of that community. We know that rural Manitoba is suffering right now with the tough economic crisis it faces across all facets of agriculture, whether it be through the BSE crisis, the low commodity prices,

the withdrawal of the PMU industry altogether in Manitoba. There is just a number of factors out there, and all rural Manitoba is suffering under these tough economic times.

Mr. Speaker, when we take away the services that Manitobans have come to take for granted, it just significantly impacts the entire community. We have seen this happen through the closure of schools through the various communities and the closure of hospitals and personal care homes. It is really just another nail in the coffin for some of the small communities. It really just implicates and exacerbates the whole problem of the downturn in some of these communities when these particular resources are taken away from the communities.

Mr. Speaker, it really is a very, very important aspect to rural Manitoba that these particular facilities be maintained. If they are not maintained, what it does lead to is rural Manitobans being treated as second-class citizens. I think we need a commitment from this government that they will not be closing or shutting down or changing any of these facilities into the future.

Mr. Speaker, just to point out, in Manitoba we have an additional \$1.3 billion going into health care since 1999, and quite frankly, Manitobans are not sure if we are actually getting a net benefit for that \$1.3 billion. Out of our \$8-billion budget, over 40 percent is spent on health care in Manitoba, approximately \$3.5 billion. In 2004, we spent more per capita in Manitoba on health care than any other province. In 2004, that amount was \$4,400. Unfortunately, we are still being plagued by those increased waiting lists and, quite frankly, I think it points to the misguided and mismanagement by this government. We know more money is being thrown into the health care field. Unfortunately, we are not seeing the results of that money coming into the health care field.

Mr. Speaker, it is a very, very important issue for all Manitobans, and we think that the government of the day should really look quite seriously at how it delivers the health care dollars throughout Manitoba, and really, we are appalled at the mismanagement, the lack of caring on behalf of the minister and his department and how this is delivered. We recognize the RHA system was set up a number of years ago, and at the time we thought the concept would work quite well. Over the years, and in particular I look at

the Assiniboine region, the health care RHA there has grown and expanded, just doubled and tripled in size. Unfortunately, it has kind of grown out of control. I think it is time for us to have a look at how that system is delivered and maybe there are some other things that can be done in terms of delivering our health care.

We know the money that goes into the bureaucracy and administration in some of these RHAs, and it really appears to us that it is getting out of hand. So I think, Mr Speaker, we have to take a serious look at how these health care procedures, how the system is being delivered. I know in particular a few years ago we had shared services within four hospitals within my region, and it seemed to work out pretty well. We were able to move doctors from hospital to hospital. They are able to share on-call weekends, and it seemed to work out very well for them. Also, we did the same thing for the lab and X-ray technicians, which of course we know that there is going to be a shortage up here directly as well.

Mr. Speaker, I certainly could go on and on in regard to health care and the very significant impact it has on rural Manitoba, but certainly those are the important issues that I wanted to put on the record this morning. I certainly look forward to hearing some of my colleagues bring forward their ideas and their issues on how health care can be delivered in rural Manitoba.

Thank you very much, Mr. Speaker.

### Introduction of Guests

**Mr. Speaker:** Before recognizing any member I want to draw the attention of honourable members to the public gallery where we have with us, from Tyndall Park School, students from the TAP program. This school is located in the constituency of the honourable Member for Inkster (Mr. Lamoureux), and I welcome you all here today.

\* \* \*

\*(10:50)

**Mr. Speaker:** Order. I want to take this opportunity to address some potential misunderstanding of the procedure that I went through this morning when we were in the process of undertaking to present the vote

that was called for last week and the member rose on a point of order

I want to read, for the information of all honourable members, to refer to Marleau and Montpetit on page 494, and it says, "Although the standing orders do not expressly forbid the raising of points of order and questions of privilege during divisions, the general practice has been to proceed with the vote and to hear its results before bringing forward any points of order or questions of privilege. There have been occasions when members have attempted to bring some matter to the attention of the Speaker in the course of a vote after the members have been called in and before the result is declared, and the Chair has declined to interrupt the voting process in favour of hearing the point of order or question of privilege. More recently, however, points of order related to the recording of the vote were heard and addressed during the voting process."

So to me, as the Speaker, it is very clear that the Speaker has that option available to them if they so choose. So I hope that will reassure members that have any questions.

\* \* \*

**Mr. Speaker:** We will now proceed with other speakers to the resolution brought forward by the honourable Member for Turtle Mountain (Mr. Cullen).

#### Point of Order

**Ms. Bonnie Korzeniowski (St. James):** Yes, Mr. Speaker. I would just like to put it on the record that I would like to apologize to the House. I feel that I have caused this inconvenience. In reflection, I believe the ruling was not correct, and the Member for River East (Mrs. Mitchelson) was relevant in her speaking to the issue. It was a decision that I made on my own, and it was only in reflecting on it that I realized that it was an error.

**Mr. Speaker:** Well, I thank the honourable member for that.

**Mr. Denis Rocan (Carman):** Mr. Speaker, on a point of order. I rise on the same thing. It could be a point of order.

Mr. Speaker, there are times that the House takes two different points of view on a particular issue. In this case, I just personally want to thank the Member for St. James for standing up and making this apology to the Member for River East who many of us, at that point in time, had believed that she was being relevant. We just appreciate the fact that the Member for St. James has stood up and apologized to the Member for River East. So we on this side, Sir, thank the member immensely for that.

**Hon. Dave Chomiak (Minister of Energy, Science and Technology):** I, too, want to rise on this point of order to indicate that some of us had discussions in this House about the ramifications of this issue. The Member for St. James made it very clear in her comments, particularly the latter part of the comments, that the decision that she made was a personal decision that she had arrived at and there was no reflection on advice or rulings or directions. She had determined that. Then she had realized on reflection that it was an inappropriate decision and, I think to her credit, she apologized to that and indicated that the Member for River East was relevant.

So I just want to make it clear that, in those comments and in the proceedings, there is no reflection on advice or no reflection on anyone else in this Chamber. It was a personal decision. I have had discussions with the Member for St. James on that point. I hope that helps in aiding the record for the House.

**Mr. Speaker:** I thank the member for that contribution and there is no point of order.

\* \* \*

**Mr. Speaker:** The honourable Member for Interlake, to speak to the resolution brought forward by the honourable Member for Turtle Mountain (Mr. Cullen) on rural health.

**Mr. Tom Nevakshonoff (Interlake):** It is a pleasure to rise today to speak on this resolution, because I think that, certainly, the record needs to be put correctly on this. There are a lot of points raised by the Member for Turtle Mountain that I think we need to address, and myself as a rural member welcome the opportunity to do so.

I think our record speaks well for itself. Since we came to office in 1999, the situation has improved dramatically not just in rural Manitoba, but in Manitoba in general. I would just point to a number of things that have been done over the last couple of years. Just the fact that 24 Telehealth sites have been established across the province is a case in point. Using technology, trying to address the distance disparities that we are faced with in our province, this is a move that is a giant leap forward, I think, in the right direction, and something that members opposite have been not fully up to speed on in their time in office, so that is a very positive move. I think if we look at the CT scanners that have been put in place in rural Manitoba and the MRIs, it goes without saying.

Communities like Selkirk, like Steinbach, for instance Portage, The Pas, Brandon, Winkler, Morden, and with the construction of the Boundary Trails hospital in our time in office, for them to suggest that first of all, that we are lacking in our representation of rural Manitoba is false. Their suggestion that we are catering only to NDP constituencies is an even greater distortion of the facts.

As I said, with the construction of a hospital in Morden-Winkler, which I think could hardly be classified as NDP territory—[interjection] Not yet, but in times past this seat has tended to vote with the opposition, and yet it was this government that spent some, I forget how many millions and millions of dollars the hospital cost, but certainly we stepped up to the plate in that regard.

In terms of building hospitals, the Tories seven times no less promised that they were going to build a hospital or improve the hospital in Brandon. That is all it was, empty promises for year after year after year. Well, our minister and our government stepped up to the plate, and that is now a reality.

When I look at my region, in particular, the Interlake region, it was not too, too long ago that we cut the ribbon on a new hospital in the community of Gimli which again was long overdue. It will not be too, too long from now, Mr. Speaker, that we will be travelling to the community of Riverton, where we will be opening up a new clinic there, thanks to the former Minister of Health who moved forward on that point.

I am not ashamed by any means to stand up in the House and comment on the performance of our government in rural Manitoba. I look at my fact sheet here, 140 new state-of-the-art ambulances have been put on the highways by this government, so in terms of dealing with emergency measures services, we are there.

Of course, there are challenges. The fact that the previous government under Gary Filmon reduced, not increased the number of training spaces in our universities, has added to the problems of doctor shortages today. No question, but since we have come to office, that number of spaces in our universities has steadily increased.

\* (11:00)

I think just recently an announcement was made where we will now have 100 training spaces in our universities to try and address this. This was not rocket science because back in the mid-1990s, the national association of emergency room physicians pointed out that there would be a shortage, so for members opposite to criticize when they were in office actually reduced the number of training spaces compared to our time in office when we have increased it, that is not rocket science. That is pretty obvious which party is representative of increasing the number of spaces, addressing doctor shortages, in particular in rural Manitoba. I can think back to the nursing shortage as another good example, and LPNs is something that we have moved on—

**Mr. Speaker:** Order. When this matter is again before the House, the honourable member will have nine minutes remaining. It is now eleven o'clock.

**Hon. Steve Ashton (Deputy Government House Leader):** I defer here to the Opposition House Leader (Mr. Derkach), but I believe there has been some discussion by leave of continuing this debate in the second hour of private members' hour.

**Mr. Speaker:** Is there leave to continue debate on this resolution past, well, it is already 11, so to continue on with the Resolution No. 3 brought forward by the honourable Member for Turtle Mountain (Mr. Cullen). Is there agreement? [Agreed]

The honourable member for the Interlake, to continue.

**Mr. Nevakshonoff:** Thank you, Mr. Speaker, and I welcome the opportunity to continue putting my thoughts on the record. I believe prior to your intervention, I was beginning to discuss about the LPN program, something that was nonexistent when the Conservatives were in office. You know, there may have been talk about it, but the fact is that the rubber never met the road when they were in office.

It reminds me of something that, well, just to digress for a moment, speaking in terms of agriculture and the rains that are coming down at this point in time, something that they said they were going to do. I remember the honourable member Harry Enns was saying, "Oh, if we had stayed in office, we would have had excess moisture coverage put in place. That was on the verge; it was on the cusp. We were about to move forward on that." But, lo and behold, 1999, the government changed. So they never got around to doing that. When we came into office, it was not too, too long after that that excess moisture coverage became a reality in this province. You know, the parallels are there. We would have done it, but we did not quite get around to it. Now that we are in opposition, oh, this would have been done yesterday. So, you know, it is somewhat ironic, to say the least.

Getting back to the health issue, the LPN, something that was absolutely necessary. We were dealing with shortages in nursing, and this government moved on that. I can say that my region in particular benefited from this. We had an LPN program that was delivered in the community of Arborg, and we went on to a First Nations community, the Fisher River Cree Nation. There was an LPN program also delivered there. So not only are we dealing with rural issues, but we are also dealing with shortages in our Aboriginal communities. So this government has nothing to be ashamed of in terms of delivering when it comes to rural Manitoba.

In '99, again, the number of doctors in rural Manitoba was actually falling. It was below 500, whereas today in rural Manitoba we have 534 doctors practising. So for them to suggest that things are going backward is simply not true.

Now, as I said, there are challenges, and we are doing everything in our power to address them I can think of. Some communities in my constituency I know were having some problems, up No. 6 Highway in the communities of Ashern. In Eriksdale,

currently there are problems, but we are working our way through that. I know the Interlake Regional Health Authority is doing everything in their power. So I am sure in the not too distant future those problems will be solved. We have a couple of doctors who will be writing the CAPE assessment test this month, as a matter of fact, and a couple more are scheduled to write later on in the summer. So hopefully, by the latter half of the summer, this problem will be resolved. But doctors are not easy to come by. It takes many years to train a doctor, and it takes governments with foresight and vision and commitment over a long period of time to make sure that these problems are addressed.

And since we have come to office, I think we have definitely stepped up to the plate, but the fact that the previous government chose to reduce training spaces in our universities instead of increasing them, despite the advice from organizations, as I said, such as the national association of emergency room physicians pointing out very clearly to them that there would be shortages in the years to come. Despite that fact, the Filmon government chose to ignore that advice and reduced instead of increased training spaces. So the chickens are coming home to roost now, and for the Member for Turtle Mountain (Mr. Cullen), in a very short-sighted manner, to dump all of this on the current government and say, "It is your fault" is being a little callous and to say playing politics would be an understatement, Mr. Speaker.

So, you know, we are proud of our record. We are not finished yet. Our motto is much accomplished; more to do, and the challenges in health care are substantial, but they are not unique to the province of Manitoba. I think it would be safe to say that there is a challenge across North America in terms of delivering on rural health care but give credit to our government. We have established an office of rural and northern health to deal specifically with this problem.

For members opposite, the majority of their members are from rural Manitoba. Why did they not do something like that? Talk is cheap when you are in opposition, but you were in office for 11 long, dark years in this province and failed miserably to deliver on this front so to sit across the way and cry these crocodile tears at this point in time, I do not think is resonating with the Manitoba public.

So, Mr. Speaker, we are not going to apologize for anything. We have expanded cancer care programs out into rural Manitoba. The communities of Deloraine, Pinawa, an expansion of the programs in Steinbach, another strong, Conservative seat, to say the least, once again proves that we have the interests of all Manitobans at heart, and I think all Manitobans are aware of that and probably agree with that. Certainly, the fact that we increased the number of seats from 32 to 35 in the last provincial election is a strong indicator that our government is doing the right thing, that it is serving the needs of all Manitobans, not just New Democrats, serving the needs of rural Manitobans, of northern Manitobans, not just people in the urban environment.

With all due respect to the Member for Turtle Mountain (Mr. Cullen), you know, I acknowledge him and wish him well here, but with all due respect, I cannot support his resolution. Thank you, Mr. Speaker.

\* (11:10)

**Mr. Stuart Murray (Leader of the Official Opposition):** I want to rise to speak in support of the motion that was brought forward by the member from Turtle Mountain that deals with the issue on rural health care, and I think his motion that he has put forward is very self-explanatory. You now see the NDP have been in power, have been government, for six years and, unfortunately, what we are seeing in rural Manitoba, and I think the reason that the honourable member from Turtle Mountain felt so passionate about this is because he is one of the people that believes that in rural Manitoba we should have all of the same services that we do and are afforded in urban centres and that there should not be any lack of services in rural Manitoba. But the member from Turtle Mountain felt very strongly that we needed to bring this motion forward so that we could put on the record all of the issues around the failure of the NDP government with respect to health care in rural Manitoba.

It is certainly well documented through the media sources, in comments made in this House, comments that this Premier (Mr. Doer) has made as he has travelled around the province of Manitoba, in terms of commitments, promises made with respect to health care, unfortunately, it is only too well documented on the other side of it, Mr. Speaker, the obvious failures that we have seen from the NDP

government with respect to health care in rural Manitoba.

One only has to look, as a matter of fact, from the member who was just speaking, from the Interlake, who knows full well the news reports today are full of stories of concern in his own constituency, of a hospital in Ashern. I believe the report, I would have to say that I would recall and make reference to a report I heard on CBC radio, my understanding, the tenor of the article was they were concerned that Ashern might become a ghost town because of the potential closure of the hospital and the issues suffering there under the member who just, on this, spoke prior to me, Mr. Speaker.

And that is indicative of what we are seeing throughout all of rural Manitoba. The NDP have basically decided and made commitments that they are going to treat rural Manitobans like second-class citizens. I think that is very, very unfortunate, Mr. Speaker, because we, on this side of the House, do not believe that rural Manitobans should be treated with anything other than the same respect that those in urban centres are treated, because people who choose to live in rural Manitoba do so because they are looking for a quality of life that comes with the kind of services that you get by staying in those communities.

Clearly, as people decide that they are going to look at communities to retire, what they are looking for is what sort of health care facilities they have, as they age, what are their opportunities? Well, it is pretty clear what their opportunities are under the NDP government. Their opportunities are to be treated as second-class citizens. Their opportunities are to be treated by highway medicine. The NDP talked about getting rid of hallway medicine. They have now created highway medicine.

Case in point, Mr. Speaker, if you are a mom who needs pediatric treatment in Brandon, their solution under the NDP government—I mean, we hear them rant about the fact that they have built a brand-new hospital in Brandon, that is a fact of life. It is just unfortunate there is nobody working there. So it is wonderful to have the bricks and mortar, but when there is nobody working there and you have mothers who are seriously in trouble, and so what you have are the issues on the fact that there are doctor shortages and mothers that have to be put into an ambulance and sent to the hospital in Winnipeg.

So, Mr. Speaker, that is the unfortunate issue with the NDP. They want to talk about a building, and the fact is we know there are doctor shortages in those buildings in Brandon, and we know that is causing serious problems to the people in west Manitoba. Their answer is to say to you, "Well, you know, you have to be put into an ambulance to go into Winnipeg." Well, that is the beginning of highway medicine in the province of Manitoba. I think that is unfortunate.

In Brandon, as I mentioned, we know there are doctor shortages. I think it was unprecedented that three doctors in Brandon were front page in the *Brandon Sun* with a story of their concern about the rising crisis in the Brandon regional hospital because of the doctor shortage, Mr. Speaker. Well, that is what we are seeing under this NDP government. We are seeing doctor shortages. On one hand, we will hear the NDP talk about how many more doctors they have brought in, but as usual, their inability to tell the complete picture is to say how many of those doctors have actually stayed in Manitoba. So, sure, you want to talk about how many doctors have come, but how many have left? In fact, in Brandon, where we have two NDP members in Brandon, the unfortunate part is that the person who has charge of recruiting doctors into Brandon, that recruiter was recruited out of Brandon. So they do not even have a recruiter anymore in Brandon.

I comment, again, I think it is important to put on the record that under the NDP we have 12 rural emergency room closures, and the following are those rural closures: the hospitals in McCreary, Erickson, Rossburn, Rivers, Birtle, Pembina-Manitou, Emerson, MacGregor, Gladstone, Ashern, the Benito Hospital, the Whitemouth Hospital and the Reston Hospital. So, Mr. Speaker, those are communities that should be thriving and growing, but, unfortunately, under this NDP government, they are doing the opposite because this government does not know how to manage health care. So we see that these emergency rooms are closed.

What is their response, Mr. Speaker, to the people that live in those communities? Well, the response is simply, "Well, jump in an ambulance, and go to the nearest location, wherever that may be." Well, again, I think it is unfortunate that this NDP government has chosen to treat rural Manitobans as second-class citizens.

I mentioned the ER closures, and I want to come back to this on Rivers, because what we know is that the Riverdale Health Centre is a place where this Premier (Mr. Doer) of the province—and one thing you hope that the Premier of the province would do is have the ability to stand in front of communities, and when he makes a promise to that community, you would hope that he would be able to live up to that promise. What he did say when he went to the town of Rivers, he said very clearly to community leaders in that community, "I promise that there will be no change to the ER or the acute services in the Riverdale hospital." That was a promise that he made.

When did he make it? It is interesting to note that he made that promise and that commitment just prior to the last election. So, in other words, elect an NDP government and there will be no change to your hospital. What happened to that? Well, it is very interesting that what happened is that not only did that election take place, but a Progressive Conservative member maintained that seat in Minnedosa. So the Premier was not successful in getting his person elected despite the promises that he tried to make to the people in Rivers.

Unfortunately for the people in Rivers, they do not have the ER room that he was promising. The Premier made a promise, and he failed to deliver. On the good side, the people of Minnedosa, the constituency of Minnedosa, the people in the town of Rivers and others are very fortunate to have a very hardworking Progressive Conservative member of the Legislature who will fight for all of the things that we believe allow Manitobans, particularly in some of these rural areas, to stay as first-class citizens not second-class citizens.

So, Mr. Speaker, what we have seen in rural health care with respect to this NDP government is the fact that the delays that we see, the closures of rural hospitals, the treatment of Manitobans as second-class citizens, we now see in Manitoba that, under this NDP government, health care delayed is health care denied. Again, that speaks to the gross mismanagement, the inability of the NDP to manage health care. It speaks more to the fact of the inability of the NDP to be accountable and transparent for the kinds of promises, the kinds of commitments that they make either prior to an election campaign, and then they fail miserably to be able to deliver on those promises made.



So, Mr. Speaker, I say shame on the NDP government for not being able to live up to promises. Shame on the NDP government for making promises that perhaps they know that they cannot make, but they are just hollow pieces of rhetoric to try to convince people that that is why you should be talking making those kinds of promises.

\* (11:20)

Mr. Speaker, I also note in the province of Manitoba that there has been an additional \$1.3 billion of money come into this province, and what do we see with the \$1.3 billion? Things have not improved, things have not gotten better. I find it fascinating that, even though I have made that kind of a clear attack on this current government, there is nobody speaking against what I am saying. They are not even heckling. Why? Because they know. They know that it is true. They know factually that even though there has been more money come into the province of Manitoba that they have failed to deliver on the promises that they made in 1999 and 2003.

So, Mr. Speaker, I am very much in support of what the member from Turtle Mountain has said because he understands very much as a person who was raised in the community of Glenboro, in the constituency of Turtle Mountain, understands what the challenges that people in rural Manitoba are going through because of this NDP government and their approach to health care. They are finding that there are challenges that go beyond what anybody would have thought with respect to closures of ERs in rural Manitoba, to putting people in ambulances, sending them down the highway, hours from Brandon to Winnipeg. Those are the kinds of decisions that this NDP government has caused rural Manitobans to suffer.

Mr. Speaker, I believe that this government has time and time again said to Manitobans, "Oh, we have the solutions for health care; we have all of the solutions for health care." As a matter of fact, in 1999, this Premier (Mr. Doer) said to Manitobans, and it is documented. He said to Manitobans, "You know, elect me and I will get rid of hallway medicine," and he put a timeline on it. He said six months, and he put a time and a money amount on it. He said with \$15 million. Well, here we are some six years later, and I know that I was up in, the member from Dauphin, I was up in Dauphin. I was in the hospital there, and what they did was the doctor went

and showed me in the emergency room where in hallway medicine how they have all the beds numbered so that they know exactly how many patients they have in the hallway. This is six years later, \$1.3 billion of additional revenue being spent. What has it come down to? It comes down to the fact that the NDP cannot manage health care in the province of Manitoba.

Mr. Speaker, the other issue I want to make is that we see the rising administrative costs under the regional health authorities under this NDP government. When you try to find out why they are expedientially going up, Manitobans will not be able to find that information out. Why? Because this NDP government has buried the regional health, the administrative costs, in a global budget. That shows you why they are afraid to be transparent to Manitobans. They cannot handle health care. They cannot manage the economy. They cannot manage costs. Because of that, we know full well that they are unable to deliver what Manitobans should have in terms of proper health care.

I know that, for example, the member from Minnedosa who fights for the people at Wawanesa because she wants to ensure that those people have the kind of health care that they deserve in the province of Manitoba. I know our member from Minnedosa is standing strong with the people from Wawanesa and will continue to do so to ensure that we on this side of the House stand strong for rural Manitobans. We will not treat them as second-class citizens, as the NDP do, because we believe that all Manitobans deserve to have the kind of health care that we should have, not like the NDP government, but the kind that we would have under a new Progressive Conservative government after the next election. Thank you very much, Mr. Speaker.

### Introduction of Guests

**Mr. Speaker:** I would like to draw the attention of all honourable members to the public gallery where we have with us from Wawanesa School, from Wawanesa, Manitoba, we have students from that school.

Welcome, on behalf of all honourable members.

\* \* \*

**Hon. Jon Gerrard (River Heights):** I rise to speak to this resolution, and I welcome the class from

Wawanesa. Wawanesa is a pretty important community, and I have been out there visiting in Wawanesa and talking to people about health care delivery in Wawanesa. Clearly, it is one of the communities which has been quite significantly affected by the poor management in a variety of areas of health care by the current NDP government and that is the basis for this resolution.

So we welcome you all here. What we are debating and trying to do is to improve the system and bring out where the problems are. I know that you have had some personal experiences, and we all know that there is a lot of room for improvement.

The MLA for the Interlake has said a few minutes ago that the health system is better than ever and yet the people in Ashern in his constituency cannot even get access to an emergency room. The member from the Interlake says the system is better than ever but the people from Dauphin River, from Grahamdale, from Fairford, from Lake St. Martin, from Little Saskatchewan cannot get access to—*[interjection]* The fact is that things have gone downhill big time in Ashern under the government in which the Member for the Interlake (Mr. Nevakshonoff) is playing a part.

*Mr. Conrad Santos, Deputy Speaker, in the Chair*

One of the fundamental ingredients of the health care system should be that people are able to get quick access and quality health services when they are needed. If you have a child who has a broken leg, there should be nearby access to an emergency room so that that can be treated properly, can be put in a cast, and the child does not have to wait. If you have problems with somebody having a heart attack or a stroke, there should be quick access to the type of care that is available across Canada.

What we saw in the *Free Press* this morning was that when Manitoba was compared to other provinces, the quality of care for somebody who has a heart attack is not up to the standards across the rest of the country, that we are last and worst when it comes to the treatment of heart attacks of any province in Canada. It is not a record to be proud of. It is certainly something that needs improvement.

What is happening, Mr. Speaker, is that there are changes in the nature of care and there have to be changes to the health care system to be able to

provide quick access to the high-quality care that is so badly needed in the case of heart attacks or in the case of strokes. The care for somebody who has a stroke has changed dramatically over the last 15 years. Every other province in Canada has a system operating so that people with strokes can be assessed very quickly, and where appropriate, given a drug called tPA, tissue plasminogen activator.

Essentially, what happens in a variety of people who have a stroke is that there is a blood clot which forms in a blood vessel to the brain, and if you can identify that that is what has happened in the CT scan very quickly, within the first two or three hours, you can provide to the person who has had a stroke, tPA, the tissue plasminogen activator, and in a remarkable number of these people, it will break up the clot and reverse the process, allow the blood and the nutrients to flow to the brain, and the stroke, and the process involved in the stroke, can be reverted and the person can return back to a normal life.

\* (11:30)

The problem is that in Manitoba the organization of the health care system has not been such that it put a priority on making sure people who have a stroke are identified quickly and know what to do and get in and get assessed and get treated quickly. What happens with the Manitoba system is that because people do not get treated quickly. The stroke may be stopped in its progress, it may be progressive, but it is not reversed as you with can with tissue plasminogen activators. The net result is that you have people who have a stroke, who go on to have long periods in hospital, very expensive periods in hospital and recovery and tremendous amounts of therapy, physiotherapy and rehabilitation therapy are needed.

So that the NDP have set up a system instead of providing prompt access to quality care, and there are some costs associated with that, but because there is a failure to provide that adequately and well organized in Manitoba, what is happening is that people who come in with a stroke are ending up having much longer hospital stays. Well documented in Manitoba, this stroke is costing a lot more to our health care system than it needs to because people are paralyzed, partially paralyzed, have to take a lot longer for recovery because they are not able to get access to tissue plasminogen activators, which can open up the blood vessels and reverse the process.

Tissue plasminogen activators may not be successful in every case, and that should be clear, but there certainly is a significant number of people who have major benefit from that, and major savings then to the health care system where this is successful. This treatment is interestingly similar to what is being used for heart attacks where there is a similar blood clot and a similar process for dissolving the blood clot and opening up the system.

So what we are seeing is a failure of the NDP government to deliver health care in an adequate fashion both in rural areas and in the city of Winnipeg. It is that failure to provide quick access to quality care which is a very black mark on the NDP. It is a terrible burden for people in Manitoba to bear, not being able to get quick access to quality care, and it is setting up all sorts of problems and ramifications running through the system. When you do not treat things promptly and in a quality way, you end up as in the case of somebody with a stroke, with a prolonged hospitalization, a prolonged recovery period, very expensive to the health care system both in time and in personnel. The net result is that you have a vicious cycle and a deterioration of the system because you have to put dollars and personnel into the recovery effort, when in fact the stroke could have been reversed early on if it had been treated promptly within the first two to three hours.

The NDP clearly have not moved quickly. As we see in a major front page article in the *Free Press* today, the NDP have not adapted the rural health care system in the way that they should have done. One of the issues in southwestern Manitoba for this summer is the health care provided in Riding Mountain National Park. There may be many MLAs who go to Riding Mountain National Park and, because of the failure of this government, that is a park over which the Minister of Conservation (Mr. Struthers), I think has some interest. It is a national park, but the Minister of Conservation, I know, is very concerned about the operation of all parks in the province and making sure that people are comfortable coming to the parks.

So the absence of health care in Erickson where it is no longer able to be delivered because of the incompetence of this government means that there is not quick and local access for people in Riding Mountain National Park. I have had some interesting discussions, Mr. Speaker, about how you could use the nurse practitioner to be able to help deliver much

of the care during summer, making sure that people who have a minor injury do not have to travel long distances in order to get it looked at.

Clearly, it is really advisable to get things looked at and cared for promptly so that they do not get worse and more serious. It would be highly advisable to the NDP to get their act in order. We have a lot of difficulty believing that they can, after five years and nine months, but the sad part is that the system of health care which we need so much has been deteriorating day by day under their watch, and every time we turn around we get reports of worse things happening. Mr. Speaker, it has been a very sad day.

Certainly, the Liberal caucus, we will be supporting this resolution and I hope that it will be supported by all members of the Chamber in recognition that there need to be some major changes both, as we would argue, in urban and in rural Manitoba. We are certainly willing to support this resolution in recognition of the shortcomings of the present government and the need for quite considerable improvement.

**Hon. Stan Struthers (Minister of Conservation):** Mr. Deputy Speaker, it is indeed a pleasure to stand and talk about rural health care here in the Legislature. I do appreciate the opportunity to speak after the leaders of each of the other two parties in this Legislature because what I think they presented is a very superficial, very cosmetic, I think, an overly simplistic view of, not just rural health care, but I think they missed the boat completely on how rural people live, particularly the Leader of the Progressive Conservative Party here in the House.

I want to assure the Member for Kirkfield Park (Mr. Murray) that we are not second-class citizens, those of us who live in rural Manitoba, and I would ask him not to treat rural people as second-class citizens. Rural Manitoba is not a ghetto. We should not be ghettoized by the Leader of the Official Opposition. There are a lot of things that we rural people in Manitoba do that are positive. There are a lot of challenges that we face that we take head-on as rural people in Manitoba. The last thing that we need is the Member for Kirkfield Park to ghettoize our efforts and to lead people to believe that there is a silver bullet for every challenge that we face. That is just not a good approach. That is not helpful to the very real problems that we need to address as rural Manitobans.

Mr. Deputy Speaker, I think the Leader of the Progressive Conservative Party made his priorities very clear this morning. I want to point to two statements that he made in his speech. First of all, it seems to be that the Leader of the Official Opposition (Mr. Murray) believes that what is important about rural health is electing Progressive Conservative MLAs in seats such as Minnedosa.

*Mr. Speaker in the Chair*

I do not want to reflect upon the performance of the MLA for Minnedosa, but what I do want to point out is that this is not an issue for partisan politics the way the Leader of the Opposition outlined it here this morning. This rural health care problem means more to rural Manitobans than who actually wins the seat of Minnedosa. That means more than who actually wins the seat of Dauphin-Roblin. These are very important issues for rural Manitobans, and I object to the minister—

**Mr. Speaker:** Order.

**Point of Order**

**Mr. Speaker:** The honourable Member for Inkster, on a point of order.

**Mr. Kevin Lamoureux (Inkster):** Mr. Speaker, I would request a quorum count, please.

**Mr. Speaker:** Quorum count. Please rise in your places.

\* (11:40)

**Madam Clerk (Patricia Chaychuk):** Honourable Mr. Lathlin, Mr. Cummings, Mr. Reimer, Mr. Rocan, Mr. Maloway, Mr. Dyck, Mr. Fauschou, Mr. Jennissen, Mr. Dewar, Mr. Martindale, Hon. Mr. Struthers, Hon. Mr. Rondeau, Mr. Swan, Mr. Cullen, Mr. Lamoureux, Mr. Schellenberg, Mr. Nevakshonoff, Hon. Mr. Hickes.

**Mr. Speaker:** There is a quorum in the House.

\* \* \*

**Mr. Speaker:** The honourable Minister of Conservation, to continue.

**Mr. Struthers:** Mr. Speaker, as I was saying, rural health is too important an issue for the Leader of the Official Opposition to boil this down to whether or not they re-elect members in their constituencies.

**Mr. Speaker:** Order.

**Point of Order**

**Mr. Speaker:** The honourable Member for Inkster, on a point of order.

**Mr. Lamoureux:** Mr. Speaker, I would ask for clarification as to what the member from The Pas was trying to imply to me when he from his seat chose a selective finger and gave it to me in my direction. He was very selective with his finger usage.

**Some Honourable Members:** Oh, oh.

**Mr. Speaker:** Order. From my Chair, I made no observation of any actions by any members. From my Chair, I was concentrating on the person that had the floor. So the honourable member does not have a point of order.

\* \* \*

**Some Honourable Members:** Oh, oh.

**Mr. Speaker:** Order.

**Point of Order**

**Mr. Speaker:** The honourable Member for Inkster, on a point of order.

**Mr. Lamoureux:** Yes, Mr. Speaker. I would request that the member from The Pas apologize for his gesture that he has made. He knows what gesture he made.

**Mr. Speaker:** Order. I cannot instruct a member for any action if I have not observed it as the Speaker. I will reiterate that I was concentrating on the member that has the floor, and I made no observation of any action by any other member except the member that had the floor.

The honourable member does not have a point of order.

\* \* \*

**Mr. Speaker:** We will continue the debate.

**Mr. Struthers:** Mr. Speaker, so I think we have to recognize, all of us in this House, that the approach of the Official Opposition Leader is not the correct one. The No. 1, most important thing in rural health care is not to re-elect the member from Minnedosa. The most important thing is to take on the challenges, the real challenges that we face in rural Manitoba when it comes to health care. There are challenges in the North. There are challenges in the city of Winnipeg. We need to be able to take these on.

I was also not impressed with the statement that the Leader of the Official Opposition came up with when he said that, by not heckling in the House, we were actually agreeing with what he said. Well, I want to assure the Member for Kirkfield Park (Mr. Murray) that I do not agree with what he says, and heckling in this House is no measure by which to take that measurement from.

Mr. Speaker, you have over and over and over again throughout this session reminded us of decorum in this House. You have done that over and over and over again, and now we have the Leader of the Opposition using it as a measure by which we use to judge the statements that he was making in this House. I am offended that the member for Kirkfield, because I am sitting in my seat listening to him, not being rude, not interrupting, being a good MLA here in the House, that it was used against me that I was not heckling. That is disgusting. The Leader of the Progressive Conservative Party, who told Manitobans that he could solve all their problems in this province with a 1% increase in the budget, tells me that I am agreeing with him because I did not heckle him in the House. That is ridiculous.

Mr. Speaker, I know of a person in the Parkland area who lives about 45 minutes north and west of Dauphin. He farms in the area and he was out at his place, he was working. He was a man in his early sixties. Unfortunately, he suffered a heart attack. Fortunately, he survived the heart attack. He lives 45 minutes northwest of Dauphin.

The most important aspect of rural health in that person's dilemma was getting an ambulance to that person quickly, getting an ambulance there that could do more than just put him on a stretcher and take him away, but having an ambulance there and a

trained professional that could actually help that person. And do you know what? It happened. Lots of respect from this member for those professionals who got to this person, this farmer, and saved his life.

Yet, Mr. Speaker, I do not see anywhere, not one mention in this rural health care resolution that we are dealing with in the House, not one mention of how important emergency medical services are to rural Manitobans. Not every Manitoban lives within a stone's throw of a hospital in this province. If we do not take seriously rural EMS, which this resolution does not even mention, then we are doing one great disservice to so many people that live in this province. I would have thought that my friend from Turtle Mountain would have known enough about rural health care and cared enough to include at least a WHEREAS that had something to do with rural ambulances.

It is not here, Mr. Speaker. It is absent. If it is there and I just cannot see it, then I would invite the Member for Turtle Mountain (Mr. Cullen) to point it out to me, or any of the members of the opposition to point it out to me when they get up and start speaking. It is not there.

I will tell you what else is not there, which is very important, and that is that efforts to bring, from the city of Winnipeg and from larger centres, services closer to rural Manitobans. I will give you a very good example: Over the last five years and nine months, to quote the Member for River Heights (Mr. Gerrard), we have brought 24 Telehealth sites to rural and northern Manitoba. Now this, along with 140 new state-of-the-art ambulances; this, along with a transportation centre that we announced in Brandon; this, along with working with EMS professionals to boost the skill level that they have so they can provide good services to rural Manitoba.

When we came into government, there were stories of EMS vehicles losing communication in a trip from Swan River to Winnipeg, going through gaps where they were totally out of touch with the outside world. We fixed that, Mr. Speaker. No mention of it in this resolution. No mention of the 24 Telehealth sites that we have moved into rural facilities. We do have a problem in ensuring that there are enough doctors and nurses and specialists

available for rural people and northern people in our province. We are moving to fix that problem.

**Some Honourable Members:** Oh, oh.

**Mr. Struthers:** I said we are moving to fix that problem. One of the angles that we need to address in encouraging doctors to come to rural and isolated areas is this phenomenon that we see where doctors, who have put in a number of years of university, have done a lot of work, have spent a lot of money to make sure that they are qualified to go out and take positions as physicians around our province, want to be able to do the things that they were trained to do. One of the things that is very much of a challenge is that many of these things they cannot do in our very small facilities. We all know that. We all know that this is a challenge. One of the ways that we can help physicians do more in small communities, more of the things they are trained to do, is to hook them up through Telehealth sites as we have been doing. This is a very key component in dealing with the challenges that we face in rural health.

\* (11:50)

One other very important initiative, I think, that is not listed here in this resolution, involves the co-operation of our government, the federal government and local authorities, including municipalities, including regional health authorities. We have some isolated communities all across Manitoba where there are no hospitals now, who do need and rely on nurse practitioners, other services. We participated with the federal government and rural health authorities in announcing and then helping fund the Primary Health Care Transition Fund. We need to make that move from treating sickness to preventing sickness. This is a very good step in that direction. It brings communities such as Skownan and Pelican Rapids into the health care loop.

This resolution does not talk about that at all. This resolution is a political document and the Member for Ste. Rose (Mr. Cummings) may be interested in just the problems that we are facing. This resolution should talk a little bit about some of the successes that we have been looking at, and not just successes of this government. This government, I think, has been doing an excellent job in addressing these problems and maybe the same Member for Ste. Rose can make the case opposite to that.

But, you know what, Mr. Speaker? I think it is a challenge to the member of Ste. Rose to understand how rural Manitobans are helping to solve these problems too. And his leader today and the Leader of the Liberal Party did not say one iota of how rural people are helping themselves and not one mention of how hard rural people are working. I do not think the Member for River Heights (Mr. Gerrard) or the Member for Kirkfield Park (Mr. Murray) understands rural Manitoba, and as a result, this resolution does not make any sense. Thank you, Mr. Speaker.

**Mr. Glen Cummings (Ste. Rose):** Well, Mr. Speaker, I notice the member from Dauphin made sure he used every minute he could knowing that the House would rise at noon so there would not be much chance to rebut the information that he has put on the record.

I look, Mr. Speaker, at this resolution and there is not enough paper to list the issues that we on this side of the House believe that this government has been missing in health care. When you look at the issues and you look at the record of this government and the promises that they made in the 1999 and 2003 elections, and that is really what this discussion is about. That is what this resolution opens up. It was his Premier (Mr. Doer) who said, "Give me \$15 million and six months and health care will be fixed."

You know what? There were a few people who believed him. I wonder if they still believe him. Health care is changing. It is a huge problem. Nobody on this side would object to that statement. It is a large problem, and there is a lot of work that needs to be done. But the member from Dauphin accuses us on this side of ghettoizing health care. They have been government since 1999, they promised nurse practitioners and what have they done. How many nurse practitioners have we got in this province since they came to government? They cannot continue to look back in the rearview mirror and talk about the nineties and pretend that they are not government.

The problem, Mr. Speaker, when we look at services in rural Manitoba, we know that our population is shrinking, we know that we need emergency services, and the best emergency services we can get in rural Manitoba, because that is one of the few services that will still be able to be

maintained, as we have had a shrinking population, as we have had difficulty in acquiring doctors.

Well, Mr. Speaker, the member from Dauphin says it is not here. I think in the interests of not abusing the members of this House with three pages of "WHEREASes" in a resolution, this serves as a platform to express our concerns about what is happening to rural health care.

I have a riding, Mr. Speaker, that has three regions represented in it: Parkland, Central and what used to be Marquette, now Assiniboia. I see each in its own way. Each region in its own way is struggling to provide services to their citizenry, and some areas are succeeding more than others. But I look at areas like Alonsa, which is sort of in the middle of my riding, and if they do not have health care services at Gladstone or McCreary, there is a pretty big hole between the lake, Neepawa and Dauphin and Ste. Rose, for those people to acquire services. We know that services have to be adjusted, but this government has not moved to live up to their promises of how they would maintain services. The member from Rivers has a legitimate issue when the Premier (Mr. Doer) comes to her constituency in the heat of a campaign goes into Rivers and says, "Don't worry, we will maintain your hospitals. Don't worry, we will maintain your services."

Mr. Speaker, I know it is unparliamentary to call people liars in this Chamber, so I will not call the Premier that. I am saying very clearly, however, that he has not lived up to his promise and he needs to be called to account on it, as he needs to be called on account on a number of other areas where he talked about we would not be sending people to the States for service. There was a big ad in the last election, or the '99 election, with a bag over top of the route that many people follow to the United States for health care. Now we see that this government continues to refer people to the States for services because they will not look at the options of providing alternative services in this province. People are taking their own personal money, spending it outside of the province to get the health care that they cannot get here.

Now, Mr. Speaker, I am understanding of the fact that we cannot provide every service here in this province, but I am sorely disappointed that the government of the day, considering what they did in the nineties when we attempted to share services with Saskatoon. They said that was horrible; they

could not possibly consider using specialists outside of the province. We had to supply all those services here today. Now that they are in government they do not want to talk about their record in government. They want to talk about the nineties still. When are they going to stand up and take responsibility and take leadership in an area that they said they could easily handle? Well, they have not handled it. They have not provided leadership.

We have gone from a \$5-billion budget in this province to 6.7, and the Premier (Mr. Doer) made a great joke and I love to include this any time I have the floor, Mr. Speaker. I love to remind the Premier that he went around the province, and I do not know if he had a piece of that paper in his hand or not, but he kept saying it on radio so I could not actually hear the crinkling of the paper, but he kept saying, "I looked for the million. I can't find a million under here. Is there a million under here?" He was joking. He was absolutely joking. There were a billion dollars coming into this province in 1999 forward, and he was ridiculing the fact that we had indicated it would be there. Most of that money was needed for health care.

The Liberal sharks, Mr. Speaker, in Ottawa pared back transfer payments across this country. The very Prime Minister that we have today raped the province of Manitoba and other provinces relative to their transfer funds. This government refuses to acknowledge that they have taken forward all of that money. They have been able to spend it, but have they spent it wisely? They will not even stand up and defend their own record. All they want to do is look back at the 1990s and say why things were not done then. They know why they were not done then. They know why they have not cured the problem today. It is a very, very sad situation when we are criticized for calling the Premier (Mr. Doer) to account on his promise to maintain health services. If he knows he cannot do it, why does he promise it? Why does he mislead the people of this province? Why does he not acknowledge that as he moves forward, he is not going to be able to keep his promise, he will not be able to deliver the services that were expected?

\* (12:00)

Mr. Speaker, if I seem a little exercised when I have a member of the opposition who is willing to

stand up and attack the position of the Leader of the Opposition (Mr. Murray), then he should be prepared to respond and stand up on behalf of his own leader about the things that he has said in rural Manitoba.

That is why we are so annoyed. That is why we are so unforgiving about the fact that services that were promised are not being delivered. They will never be delivered. This government cannot keep up to their promises to rural Manitoba.

It has got nothing to do with ghettoization. It has got everything to do with that government keeping the promises that they made in two elections consecutively, misleading the people of this province.

**Mr. Speaker:** Order. When this matter is again before the House, the honourable member will have seven minutes remaining.

The hour being twelve o'clock, we will recess and we will reconvene at 1:30 p.m.



**LEGISLATIVE ASSEMBLY OF MANITOBA**

**Thursday, June 9, 2005**

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