SECOND SESSION — THIRTIETH LEGISLATURE

of the

Legislative Assembly of Saskatchewan

DEBATES AND PROCEEDINGS

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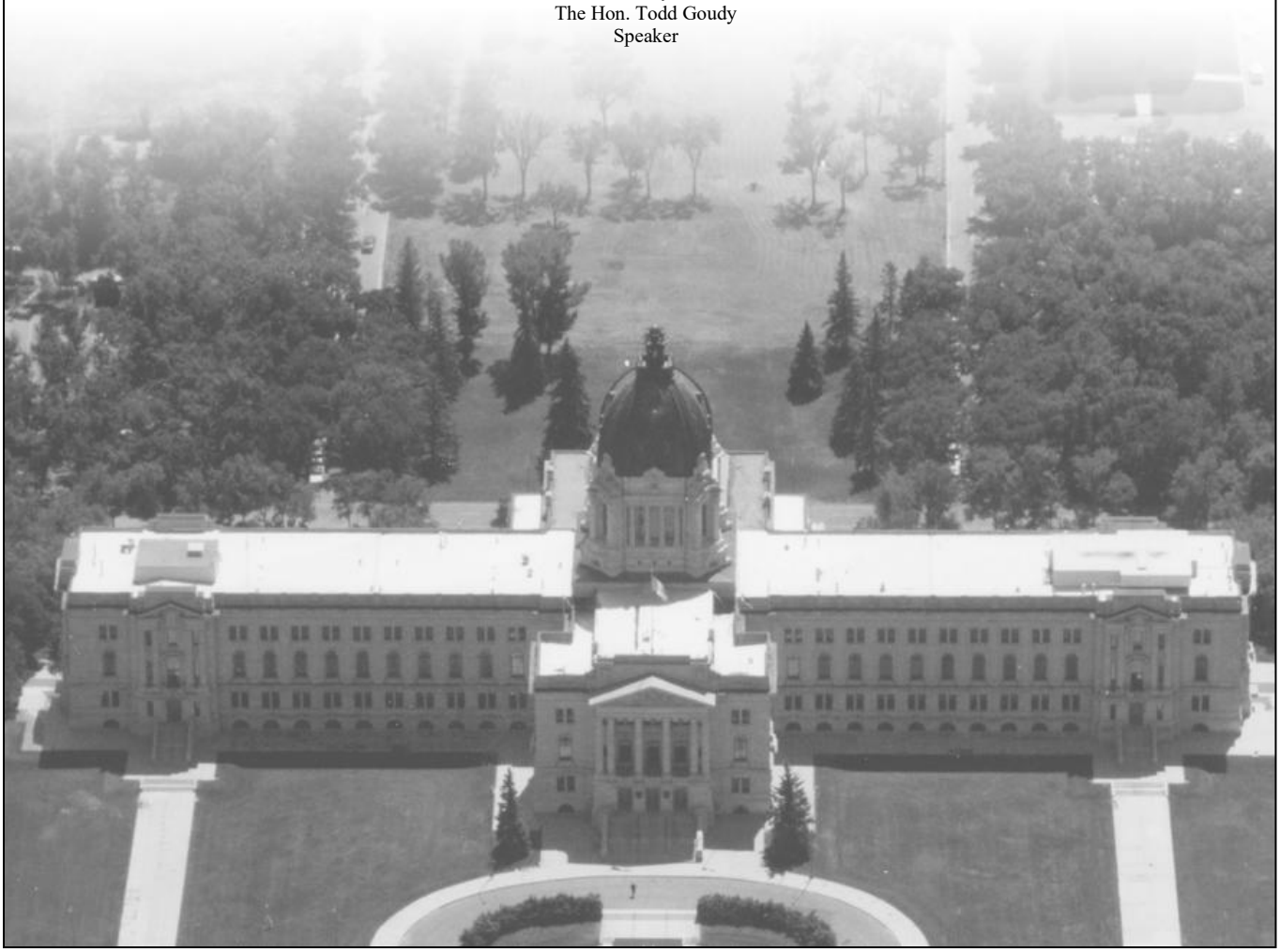
Speaker



N.S. VOL. 67 **NO. 33A THURSDAY, MARCH 12, 2026, 10:00**

LEGISLATIVE ASSEMBLY OF SASKATCHEWAN
2nd Session — 30th Legislature

Lieutenant Governor — Her Honour the Honourable Bernadette McIntyre, S.O.M.

Speaker — Hon. Todd Goudy
Premier — Hon. Scott Moe
Leader of the Opposition — Carla Beck

Beaudry, Hon. Chris — Kelvington-Wadena (SP)
Beck, Carla — Regina Lakeview (NDP)
Blakley, Brent — Regina Wascana Plains (NDP)
Brar, Bhajan — Regina Pasqua (NDP)
Breckner, Kim — Saskatoon Riversdale (NDP)
Bromm, Terri — Carrot River Valley (SP)
Burki, Noor — Regina Coronation Park (NDP)
Carr, Hon. Lori — Estevan-Big Muddy (SP)
Chan, David — Yorkton (SP)
Cheveldayoff, Hon. Ken — Saskatoon Willowgrove (SP)
ChiefCalf, April — Saskatoon Westview (NDP)
Clarke, Jared — Regina Walsh Acres (NDP)
Cockrill, Hon. Jeremy — The Battlefords (SP)
Conway, Meara — Regina Elphinstone-Centre (NDP)
Crassweller, Brad — White City-Qu'Appelle (SP)
Gartner, Hon. Kim — Kindersley-Biggar (SP)
Gordon, Hugh — Saskatoon Silverspring (NDP)
Goudy, Hon. Todd — Melfort (SP)
Grewal, Tajinder — Saskatoon University-Sutherland (NDP)
Harrison, Daryl — Cannington (SP)
Harrison, Hon. Jeremy — Meadow Lake (SP)
Hilbert, Racquel — Humboldt-Watrous (SP)
Hindley, Hon. Everett — Swift Current (SP)
Housser, Sally — Regina University (NDP)
Jenson, Hon. Terry — Warman (SP)
Jorgenson, Keith — Saskatoon Churchill-Wildwood (NDP)
Kaeding, Hon. Warren — Melville-Saltcoats (SP)
Kasun, Kevin — Prince Albert Carlton (SP)
Keisig, Travis — Last Mountain-Touchwood (SP)
Kropf, Barret — Dakota-Arm River (SP)
Laliberte, Leroy — Athabasca (NDP)
Love, Matt — Saskatoon Eastview (NDP)
Marit, Hon. David — Wood River (SP)
Martens, Hon. Jamie — Martensville-Blairmore (SP)
McBean, Don — Saskatoon Chief Mistawasis (NDP)
McLeod, Blaine — Lumsden-Morse (SP)
McLeod, Hon. Tim — Moose Jaw North (SP)
McPhail, Jordan — Cumberland (NDP)
Moe, Hon. Scott — Rosthern-Shellbrook (SP)
Mowat, Vicki — Saskatoon Fairview (NDP)
Nippi-Albright, Betty — Saskatoon Centre (NDP)
Patterson, Megan — Moose Jaw Wakamow (SP)
Pratchler, Joan — Regina Rochdale (NDP)
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Ross, Hon. Alana — Prince Albert Northcote (SP)
Rowden, Hon. Darlene — Batoche (SP)
Roy, Jacqueline — Regina Northeast (NDP)
Sarauer, Nicole — Regina Douglas Park (NDP)
Schmalz, Hon. Eric — Saskatchewan Rivers (SP)
Senger, Brittney — Saskatoon Southeast (NDP)
Steele, Doug — Cypress Hills (SP)
Teed, Nathaniel — Saskatoon Meewasin (NDP)
Thorsteinson, James — Cut Knife-Turtleford (SP)
Warrington, Darcy — Saskatoon Stonebridge (NDP)
Weedmark, Kevin — Moosomin-Montmartre (SP)
Weger, Hon. Michael — Weyburn-Bengough (SP)
Wilson, Hon. Sean — Canora-Pelly (SP)
Wotherspoon, Trent — Regina Mount Royal (NDP)
Young, Aleana — Regina South Albert (NDP)
Young, Colleen — Lloydminster (SP)

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Clerks-at-the-Table
Clerk — Iris Lang
Deputy Clerk — Robert Park
Principal Clerk — Danielle Humble-Selinger
Clerk Assistant — Miranda Gudereit

Sergeant-at-Arms — Lyall Frederiksen

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[The Assembly met at 10:00.]

[Prayers]

ROUTINE PROCEEDINGS

INTRODUCTION OF GUESTS

Speaker Goudy: — I recognize the member from Saskatoon Fairview.

Vicki Mowat: — Thank you, Mr. Speaker. To you and through you, in your gallery, I want to introduce someone who is no stranger to this Assembly, has been here before — Lenore Pinder.

I want to welcome Lenore on behalf of the official opposition. She worked in health care previously, has spent a lot of time working for positive change in this province though as well, Mr. Speaker. And part of that is in being our former candidate in Yorkton and also stepping up into the role of Saskatchewan NDP [New Democratic Party] Party president as well.

I want to thank her for that commitment, the way that she works so hard on behalf of people in this province and just exudes kindness and dedication through that work. So on behalf of the official opposition I want to thank Lenore for her presence today in our Legislative Assembly. Thank you.

Speaker Goudy: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — Thank you, Mr. Speaker. It's an honour to rise to my feet and welcome a group of grade 4 students from St. Mary école. Bienvenue à votre Assemblée législative.

[Translation: Welcome to your Legislative Assembly.]

I also want to say, welcome to their teachers that are here with them today — Suzanne Beckel, Guillaume Pruvot — and parent chaperones Breanna Sheldon, Maria West, and Heather Anderson. Welcome to the Legislative Building, students. I am excited to chat with you after the sitting this morning, and I hope you have lots of good questions.

So with that, Mr. Speaker, I ask all members of the Assembly to welcome these fine students from Regina Walsh Acres, the school École St. Mary.

PRESENTING PETITIONS

Speaker Goudy: — I recognize the member from Regina Wascana Plains.

Brent Blakley: — Thank you, Mr. Speaker. I rise today to present a petition calling on the Legislative Assembly of Saskatchewan to implement rent control.

These residents of the province of Saskatchewan wish to bring attention to the following: Saskatchewan leads the nation in average rent increases; Saskatchewan's average rent continues to increase, rising 4 per cent in the last year; average rent in Regina has gone up 3.9 per cent in the last year and 5.4 per cent in Saskatoon.

Rent control would protect tenants from excessive and unreasonable rent increases. People living month to month, paycheque to paycheque cannot afford rent hikes of 20 or 30 per cent. Rent control becomes even more critical when you factor in that Saskatchewan has the highest rate of child poverty in the nation. British Columbia, Manitoba, Ontario, and Prince Edward Island have all implemented rent control.

The prayer reads as follows:

> We respectfully request the Legislative Assembly of Saskatchewan call on the Government of Saskatchewan to immediately protect tenants and implement rent control.

Mr. Speaker, the signatories today reside in Regina and Pilot Butte. I do so present.

Speaker Goudy: — I recognize the member from Saskatoon Stonebridge.

Darcy Warrington: — Thank you, Mr. Speaker. It's an honour to rise again to present a petition that was brought forward by Tammy O'Brien last week. People shouldn't have to bring out their credit card when they're accessing life-saving treatment.

To the honourable Legislative Assembly of Saskatchewan. We, the undersigned residents of the province of Saskatchewan, wish to bring to your attention the following: that many Saskatchewan residents requiring specialized care unavailable locally must pay substantial travel-related costs out of pocket, creating a financial barrier to essential medical treatment. This undermines equitable access to health care and places undue hardship on patients seeking medically necessary services outside the province.

> We, in the prayer reads as follows, respectfully request the Legislative Assembly of Saskatchewan to amend provincial health care policy so that the Government of Saskatchewan provides financial support or reimbursement for reasonable travel-related expenses, including travel accommodation incurred by Saskatchewan residents who must leave the province to obtain medically necessary treatments or procedures not available within Saskatchewan.

Mr. Speaker, this petition has been signed by citizens of Humboldt, Watrous, and Saskatoon. I do so present.

Speaker Goudy: — I recognize the member from Saskatoon Chief Mistawasis.

Don McBean: — Thank you, Mr. Speaker. I rise today to bring again the petition to the Legislative Assembly calling for mandatory intimate partner violence education.

Joan McDonald has been bringing this to us, and we've been working with her. She was in the Legislative Assembly in the fall, and it still didn't seem to make the impact. So we present again, bringing to your attention that Saskatchewan has the highest rate per capita of IPV [intimate partner violence], known as domestic violence, in Canada; that the workplace orientation would include all genders from all walks of life in all areas of the

province. Employers and employees need to know the signs of IPV and where to call for help. Education is the key to changing these rates of IPV.

> The prayer as follows respectfully requests the Legislative Assembly of Saskatchewan to call on the Government of Saskatchewan to immediately mandate education on intimate partner violence, and that be included in the orientation process for all new employees across the workplaces in the province.

The signatories today come from Goodsoil, Saskatchewan. I do so present.

Speaker Goudy: — I recognize the member from Saskatoon Fairview.

Vicki Mowat: — Thank you, Mr. Speaker. I rise once again to present a petition that we collected all summer in Saskatoon Fairview for the Government of Saskatchewan to open up vacant Saskatchewan Housing Corporation units for occupancy.

We know that homelessness has quadrupled in Saskatoon over the last three years. It's hit many in my riding of Saskatoon Fairview very hard. We need to occupy vacant SHC [Saskatchewan Housing Corporation] units. We also need to make necessary changes to the SIS [Saskatchewan income support] program. These are common-sense changes that people are calling for, Mr. Speaker.

I'll read the prayer:

> We, in the prayer that reads as follows, respectfully request that the Legislative Assembly of Saskatchewan call on the Government of Saskatchewan to immediately renovate all SHC units that require renovation, make units available and affordable, and ensure that all currently vacant SHC units are made occupied.

This is signed by individuals from Saskatoon Fairview today, Mr. Speaker. I do so present.

STATEMENTS BY MEMBERS

Speaker Goudy: — I recognize the member from Humboldt-Watrous.

Athletic Achievements of a Saskatchewan Family

Racquel Hilbert: — Thank you, Mr. Speaker. I'd like to take a moment to recognize a family of athletes from the town of Muenster. They're the Varga family. Darren and Jewel have three sons — Skyler, Lyndon, Devin — and a daughter named Jenay. Their involvement in local sports has reached a global stage.

Skyler won the 2025 NCAA [National Collegiate Athletic Association] men's volleyball championship in Ohio with his team of Long Beach. And he's won gold medal in the 2022 Canada Cup and Canada Games for Team Saskatchewan.

Lyndon currently plays in Germany in the European professional league in his fourth season. Devin is the head coach of the Camrose Vikings volleyball team and won Coach of the Year in 2025. Jenay is also a third-time national ladies' volleyball championship player for Lloydminster Rustlers.

Their family is affectionally referred to as the Varganauts. This title was given to them due to their loud, expressive cheering at many volleyball events. The Varga family is a great example of small-town Saskatchewan. The children are making it big in the world of volleyball.

I know them from an earlier time when they used to rent movies from Video Quest, where I used to work as a young person. And my husband used to know them because they owned Varga Lumber and cafe. He would buy his supplies there, everything from nails to .22 shells. Darren is now working at the Humboldt Home Hardware Building Centre and continues to serve the area for over 35 years. He's active in his parish and still is involved in coaching.

They serve as an inspiration to all families across Saskatchewan that have dreams of going pro or competing at a higher level. Mr. Speaker, I'd like to take this opportunity to recognize the hard work and success of the Varga family.

Speaker Goudy: — I recognize the member from Saskatoon Chief Mistawasis.

Saskatoon Under 18 Women Win Curling Championship

Don McBean: — Thank you, Mr. Speaker. It is with great pride that I rise to speak of the newly crowned national under 18 women's curling champions from Saskatoon. Renee Wood, Edie Jardine, Amelia Whiting, Winnie Morin, with alternate Abby Hogeboom, coached by Dwayne Yachiw and supported by manager Sara Fox, became the first-ever from Saskatchewan women's under 18 national champions at the recently held event in Timmins, Ontario. The winter Olympics were on. That likely affected the whole province from cheering, but today we give these determined and skilled young women our fully voiced congratulations.

Renee and her manager mom, as constituents of Saskatoon Chief Mistawasis, were the first-ever walk-ins a year ago to our new location. We found them some swag and even provided some in-person cheering at the 2025 nationals held at the Saskatoon Nutana rink, and that experience served them well. Loaded up again this year with pins and flags, these champions finished at the top of their pool, swept their way through to the podium with a resounding victory over Ontario.

We all know how curling is woven into the fabric of Saskatchewan. Every small town has a rink, the hub of the community, where young people grow up learning the game, soaking in the spirit and history of this, our provincial sport.

I ask all members to join again in congratulations to Team Wood. Looking forward to seeing that name lots more in the future.

Thank you.

Speaker Goudy: — I recognize the member from Canora-Pelly, the Minister of SaskBuilds.

Saskatchewan Athletes to Compete at Cross-Country Ski Nationals

Hon. Sean Wilson: — Thank you, Mr. Speaker. Mr. Speaker, I rise today to recognize and congratulate Hudson Maier and Levi Maier, dedicated members of the Preeceville Nordic club who are proudly representing our province at Nordiq Canada's cross-country ski nationals at Mont Sainte-Anne near Quebec City.

Hudson and Levi are accompanied by their coach, Nathan. From March 9th through the 14th these outstanding young athletes are competing in a full week of national-level racing. Mr. Speaker, day 1 proved to be an exciting start as Levi scored a bronze medal in the interval start classic 5 K, a remarkable accomplishment that deserves province-wide recognition.

Hudson and Levi will continue to compete in the U18 [under 18] and U16 [under 16] sprint events, the distance mass start skate races, and will conclude the week with team sprint.

Mr. Speaker, Canora-Pelly is incredibly proud of these athletes. Their dedication, discipline, and commitment to excellence serve as an inspiring example for young athletes across our province. We look forward to cheering them on as they represent Saskatchewan on the national stage. And we wish them every success in the days ahead. Thank you.

Speaker Goudy: — I recognize the member from Saskatoon Stonebridge.

Constituents Give Opposition Member a Warm Reception

Darcy Warrington: — Thank you, Mr. Speaker. I rise today to recognize the amazing residents of Moose Jaw, Prince Albert, and Willowgrove. Our team has reached out to most households in our own ridings over the last year, but we find more energy to connect with folks across the province, hear their stories, and get a better understanding of their hopes and dreams.

The incredible response and reception from them inspired me to honour and acknowledge their experiences. The people in these communities truly embody the hospitality that our province values so deeply. People in P.A. [Prince Albert], MJ [Moose Jaw], and Willowgrove have shown that, if given the opportunity by elected representatives of this province, they have much to say. Their voices matter and our Sask NDP caucus are motivated to hear them all. Even when the weather has been less than great, people have literally opened their homes to us for such productive dialogue. These conversations on doorsteps make both sides of this House better at serving and surely leads to better connection.

The Saskatchewan NDP caucus are so thankful for the warm reception from these communities. We are thankful that they know that we're here for them all the time, not just during elections, and we look forward to hearing from more hard-working folks and families across this province in weeks, months, and years to come.

[10:15]

I would be thrilled to have the Assembly join me in recognizing the kindness and openness present in the incredible communities of Prince Albert, Moose Jaw, and Willowgrove. Thank you, Mr. Speaker.

Speaker Goudy: — I recognize the member from Cut Knife-Turtleford.

Community Members Rescue Frosty the Horse

James Thorsteinson: — Thank you, Mr. Speaker. One chilly Friday morning in early January, a wandering horse fell through the ice on a frozen creek near the resort village of Cochin. Cochin mayor, Mark Pattinson, and fellow residents were quickly on the scene to rescue the horse who locals have nicknamed Frosty.

Fortunately Frosty was rescued from the creek and was taken to the village shop to warm up. He was later transported to a nearby veterinary clinic for assessment. The horse was believed to have been trapped for hours as ice had formed on his body and he was in very poor condition.

Mr. Speaker, I am happy to report that, at last I had heard, Frosty is doing well and expected to make a full recovery.

What I think is so very special about this story is the efforts, not only in the initial rescue, but the way the fellow community members came together and ensured he had feed, blankets, and bandages. Some folks even offered financial assistance to cover Frosty's vet bill.

This is a good-news story that puts a smile on my face and this is what Saskatchewanians do when someone or something is in urgent need. Mr. Speaker, I ask all members to join me thanking Mayor Pattinson, Ed Scott, numerous others who helped save Frosty that cold January morning. Thank you.

Speaker Goudy: — I recognize the member from Regina Walsh Acres.

Credibility of Patient-First Health Plan

Jared Clarke: — Thank you, Mr. Speaker. Now sometimes it feels like we're just getting the same old same old from that tired, old Sask Party. But good news, Mr. Speaker. They've got a brand new patient-first health plan and it's got some exciting announcements.

It has some exciting announcements like a new hospital in Prince Albert and a long-term care home in Estevan. Sorry, Mr. Speaker, I must be reading that wrong. Those projects are years old, and it can't be that the Sask Party is so out of ideas they're recycling old, watered-down announcements. They're awfully quiet now, Mr. Speaker.

Now after all, this is their fresh, exciting, patient-first health plan and it is completely different from the patient-first health plan in 2015, Mr. Speaker, and the one in 2012. And they had one in 2009 too. Okay, well in this edition they promised to strengthen emergency room capacity. That's very exciting. Don't think too hard about the promise they made in 2012 to eliminate all emergency wait times by 2017.

This time, Mr. Speaker, this time they're on it, I swear. Yes, they make these promises every couple of years. And then yes, they

quietly give up on them and then trot out the same promises when enough time has passed and they think that the public's forgotten, Mr. Speaker. But this time, Mr. Speaker, I believe them. I'm just not sure Saskatchewan people do.

Speaker Goudy: — I recognize the member from Last Mountain-Touchwood.

Government Meets with Rural Partners at Convention

Travis Keisig: — Well, Mr. Speaker, it's another great week in Saskatchewan and the end of another great SARM [Saskatchewan Association of Rural Municipalities] convention. We heard loud and clear from nearly 1,400 delegates in attendance from 296 RMs [rural municipality]. As a government we had many opportunities to interact with community leadership and highlight the many investments we are proud to make in rural Saskatchewan.

Last week our Minister of Highways announced, in partnership with SARM and rural municipalities, $46 million rural integrated roads for growth program. And our Minister of Government Relations followed that up with an announcement by letting our municipal partners know that they will be receiving more than 392 million in municipal revenue sharing, the most ever invested and an increase of $30 million from last year. Since this government formed in 2007, $5 billion in unconditional grants to municipalities has been provided.

Mr. Speaker, our Minister of Justice is taking further action to protect law-abiding firearm owners by introducing amendments to the firearms Act. And finally, our Premier and our ministers of Health and Rural Health unveiled our ambitious patients-first health care plan. Mr. Speaker, this is a government together with our rural partners. Thank you to all the leaders of SARM for another great convention.

QUESTION PERIOD

Speaker Goudy: — I recognize the Deputy Leader of the Opposition.

SaskPower Rates and Power Generation

Vicki Mowat: — Mr. Speaker, we've asked the Sask Party government 10 times this spring when did the Premier know that power rates were going up. He said there was no consideration in December. Then the rate hike was announced in January. It doesn't add up.

When did the Premier know?

Speaker Goudy: — I recognize the Minister of CIC [Crown Investments Corporation of Saskatchewan].

Hon. Jeremy Harrison: — Well thank you. Thank you, Mr. Speaker. I answered this question out in the rotunda the other day. And the matter had not been considered, Mr. Speaker.

What I can say, and what we should be focusing on, is the fact that we have the second-lowest utility rate bundle in the entire country, Mr. Speaker. And we are committed to making sure that that continues.

Our SaskEnergy plan, energy security strategy, Mr. Speaker, lays out a path for the future, which is a path as we transition to nuclear to life-extend our existing thermal generation assets, Mr. Speaker, with an all-of-the-above approach to power generation here in Saskatchewan focused on reliability, affordability, and energy security, using the resources we have here in Saskatchewan to power our economy as we move forward.

Speaker Goudy: — Just wait one second. I'm going to mention there's some members that . . . Warning number one — in general for today I'll be a little tighter, and there'll be counting of . . . Yesterday was offside.

So today I recognize the Deputy Leader of the Opposition.

Vicki Mowat: — Mr. Speaker, I'll ask again. It's a simple question. We still haven't gotten an answer. When did the Premier know that power rate hikes were going up?

Speaker Goudy: — I recognize the Minister of CIC.

Hon. Jeremy Harrison: — Thank you. Thank you very much, Mr. Speaker. I'd addressed that both in the rotunda and in the House. What I can tell you though, Mr. Speaker, is that the NDP's plan is to — and they have demanded this repeatedly — to put the carbon tax back on your SaskPower bill, Mr. Speaker. That's something that we are not going to do.

In fact they've been very critical of the fact that we removed the carbon tax off of individual SaskPower bills, Mr. Speaker. Mr. Speaker, we are not going to be putting the carbon tax back on SaskPower bills. We're not going to be putting 1,400 people out of work by shutting down their place of employment, Mr. Speaker. And we're going to make sure that we continue to produce the power that will power our economy as we move forward.

Speaker Goudy: — I recognize the Deputy Leader of the Opposition.

Vicki Mowat: — Mr. Speaker, that's not the case. And he still hasn't answered the question. When did the Premier know that power bills were going up?

Speaker Goudy: — I recognize the Minister of CIC.

Hon. Jeremy Harrison: — Well thank you very much, Mr. Speaker. I've repeatedly responded to that question, Mr. Speaker. And what I will say is that in our energy security strategy we have laid out a very detailed and comprehensive plan about what the future of power generation in this province is going to look like, Mr. Speaker. And that will be moving to nuclear power generation, something that the members opposite have been very opposed to, Mr. Speaker, very opposed to.

In fact they were opposed to not just nuclear power generation, leaders in that party have been suing the government, Mr. Speaker, to shut down not just our coal facility but also natural gas here in this province. These are members who believe you can run a power system on pixie dust and their own self-righteousness. That's not the case, Mr. Speaker.

Speaker Goudy: — I recognize the Deputy Leader of the

Opposition.

Vicki Mowat: — Distraction and deflection, Mr. Speaker. When?

Speaker Goudy: — Before the minister responds, I'm going to pixie dust a little. Let's avoid that, doesn't sound . . . good debate words. But on the other side, I would expect that we're going to listen.

Minister.

Hon. Jeremy Harrison: — Well thank you very much, Mr. Speaker. And we of course are very proud of the major investments that we are making at SaskPower. In fact on the transmission side, Mr. Speaker, we've made some very, very exciting announcements and have been working with our partners across the country at the provincial level, and also with the Government of Canada, about what that future for transmission is going to look like, really which will lay the groundwork, Mr. Speaker, for significant investments into power generation, and as we move to nuclear, really an essential component to that, Mr. Speaker.

We are excited to talk about SaskPower. I'm really excited about the future for what this province is going to look like, and looking forward to as well what our investments into our power grid are going to enable by way of economic development. And there'll be more on that next week, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina South Albert.

Aleana Young: — Thank you very much, Mr. Speaker. Straight questions are supposed to get straight answers. The Deputy Leader isn't getting anywhere, so I guess I'll give it a shot. When did the Premier know? When was he informed that he would be hiking power rates?

Speaker Goudy: — I recognize the Minister of CIC.

Hon. Jeremy Harrison: — Well thank you. Thank you. Thank you very much, Mr. Speaker. As I said both in the rotunda and here in the Assembly, we don't actually talk about the days of cabinet meetings and those things. But, Mr. Speaker, when we had made the comments, we had not given consideration to what that application was going to look like to SaskPower. That's the reality.

But what I can tell you, Mr. Speaker, is we are making some very . . .

[Interjections]

Speaker Goudy: — Order, please.

Hon. Jeremy Harrison: — Well thank you very much, Mr. Speaker. As I said, we are making some very, very exciting announcements in the near future. And those will only have been enabled, Mr. Speaker, because of the fact that we actually have allocatable, dispatchable power here in this province which is entirely a function of the energy security strategy, which these members have been very, very opposed to, Mr. Speaker. In fact their plan would put 1,400 people out of work. It would devastate two communities, and it would imperil our ability to actually keep the lights on here in Saskatchewan.

Speaker Goudy: — I recognize the member from Regina South Albert.

Aleana Young: — Mr. Speaker, when?

[Interjections]

Speaker Goudy: — Okay. Sorry, I'm going to, I'm going to say . . . He had mentioned in his response — it may not be exactly as you'd like — but he had said, he had said that it was a cabinet meeting, timing of those things. That question has been asked six times. I think we can move on. If you want to bring that up in other places, the answer was . . . [inaudible interjection] . . . What is totally inappropriate is that when I am . . . [inaudible interjection] . . . Okay, so members need to respect the role of the Speaker.

An Hon. Member: — Which is neutral.

Speaker Goudy: — Member from Regina Elphinstone-Centre, I appreciate your passion, that you stand for the people and for the answers, but you need to respect the Chair of this Assembly. So I'd ask that we will move on in your questioning.

Member from Regina Walsh Acres.

Hospital Parking Fees

Jared Clarke: — Thank you, Mr. Speaker. Now we got no answer from that minister and no answer from the Premier about what he knew and when he knew it.

But there's also been no answers to why this Sask Party government is gouging cancer patients, forcing them to pay for parking. Dennis Ogrodnick has been fighting for cancer patients, fighting against this government's cruel choice to add parking fees. Now we've raised this issue again and again, and this government still refuses to listen.

So will the Premier finally scrap parking fees for cancer patients in Saskatchewan?

Speaker Goudy: — I recognize the member of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. Mr. Speaker, we understand that medical appointments and treatments can be stressful for patients and their families, Mr. Speaker. And the SHA [Saskatchewan Health Authority] strives to balance compassion and fairness and consistency in all of its policies, and that does include parking, Mr. Speaker, The SHA administers parking fees to help recover costs of maintaining parking facilities so that health care funding and resources can be directed to front-line health care, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — The word I would use to describe that

government is not "compassionate," Mr. Speaker.

Let's recap Dennis's story. Parking fees for cancer patients. There used to be no parking fees at the hospital in Prince Albert for parking fees. Then the Sask Party government started gouging patients for the privilege of going for chemo or radiation. Then Dennis started a campaign and the SHA tried to make it go away, scrapping the fees just for Dennis. But Dennis told them no, not until the fees were scrapped for all cancer patients.

[10:30]

So again, how much longer will Dennis need to fight this government to make parking free for cancer patients?

Speaker Goudy: — I recognize the Minister of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. Mr. Speaker, as I mentioned in my previous answer, the SHA tries to balance compassion and fairness with consistency across the province, Mr. Speaker.

But what I can say, Mr. Speaker, is within our patients-first plan that we introduced earlier this week, we're expanding diagnostic services for cancer patients across this province, Mr. Speaker, which means early detections.

Those are the investments that we are making in front-line health care for the people of this province, ensuring that we have the right care at the right time and in the right place, Mr. Speaker. And that's what we are doing, is we are trying to put those patients first by ensuring we're expanding services within this plan which has new and innovative ideas, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — Thank you, Mr. Speaker. Nickel-and-diming cancer patients makes no sense, and it is not consistent. In some communities cancer patients don't pay for parking, and in other communities, like Prince Albert, they pay for parking.

The Sask Party now operates a casino here in Regina with free parking, but it forces cancer patients to pay out of pocket for life-saving treatment. So going for your chemo or radiation treatment isn't a choice; it's a necessity. So why is it more affordable to go gamble at Casino Regina than it is to get cancer care in a Saskatchewan hospital?

Speaker Goudy: — I recognize the Minister of Remote and Rural Health.

Hon. Lori Carr: — Well thank you, Mr. Speaker. And, Mr. Speaker, I've already canvassed the parking and the policies that the SHA have throughout the province, Mr. Speaker. But what we are doing for the community of Prince Albert, Mr. Speaker, is we are investing just about $1 billion in a hospital for that community. That hospital will provide services for cancer patients, Mr. Speaker.

Mr. Speaker, it expands services. It also expands the number of acute care beds that we have within that facility, Mr. Speaker. So we are making investments to the front line for the city of Prince Albert, Mr. Speaker. And not just the city of Prince Albert, that facility services the entire North as well, Mr. Speaker. And that is why we have waived the community share, Mr. Speaker.

Speaker Goudy: — I recognize the member from Saskatoon Churchill-Wildwood.

Safety at Health Care Facilities

Keith Jorgenson: — Mr. Speaker, yesterday we were joined by SHA security officers. They came here to advocate after an RFP [request for proposal] was posted looking to privatize security services at hospitals and health care centres in eight different regions. Private security officers can expect lower wages, fewer benefits, and higher turnover.

When we asked the minister and the Premier if they would meet with these SHA officers, they were ignored. Why?

Speaker Goudy: — I recognize the Minister of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. Mr. Speaker, first of all I would like to clarify the statement that was just made. At no time did he ask me to meet with that group, Mr. Speaker.

Mr. Speaker, I think it's important to note that we take security very, very seriously within this province, Mr. Speaker. That's why we're actually expanding security services throughout the province to eight other facilities — one more thing that is in this plan, this patients-first plan — ensuring that we provide the security that's necessary in our facilities. Because everybody that goes to work in a health care facility should feel safe, Mr. Speaker.

Speaker Goudy: — I recognize the member from Saskatoon Churchill-Wildwood.

Keith Jorgenson: — You know who else should feel safe? Security officers when they show up for work. They're assaulted, on average, every day and no one on that side would meet with them. They're well trained, disciplined, and highly motivated, and they go the extra mile.

I don't understand why the minister wants to replace them. It isn't just a bad idea to privatize these services. It's actually a dangerous one, especially in a time when we have guns, knives, machetes, saws being brought into our hospital.

Why is the minister making our hospitals less safe?

Speaker Goudy: — I recognize the Minister of Community Safety.

Hon. Michael Weger: — Thank you, Mr. Speaker. Protecting the safety of residents in Saskatchewan also includes protecting the safety of workers in hospitals, Mr. Speaker. And so what we're doing is ensuring that we have a strong police force presence in the city of Saskatoon, in the city of Regina, and throughout the province, Mr. Speaker.

And what I've done to ensure that that's happening is, Mr. Speaker, I've gone on over 40-plus hours of ride-alongs with municipal police services throughout this province so that I can meet with them at their level and see what else we can be doing to ensure the safety of our residents in this province of Saskatchewan.

And on one of my shifts, Mr. Speaker, we did go in Saskatoon, and we did go in the area of St. Paul's Hospital in Saskatoon. And we also saw AROs, alternative response officers, on the streets as well. Their presence is there in that area. They're ready to respond and assist at any issue at the hospital, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina Elphinstone-Centre.

Operation of Urgent Care Centre

Meara Conway: — Thank you, Mr. Speaker. I will remind the members opposite that the people of Regina were promised a 24-7 urgent care centre because peak hours in emergency rooms are evenings and weekends. Now, Mr. Speaker, this urgent care centre here in Regina struggles to maintain bank hours, and it's just one recent example of a broken Sask Party health care promise.

But today I want to ask the Premier a question. It's March 12th. Can the Premier tell this House how many days this year the urgent care centre here in Regina, with their reduced hours, has been forced to close early due to short-staffing?

Speaker Goudy: — Sorry. Before you do answer, I am going to say as well, there are some fairly simple questions with some fairly pointed answers. And we know that the rule is we connect it to the question, and there's long preambles and things. But I am going to ask that we do do our best. When questions, specific questions are given, specific answers are given. Thanks.

Minister of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. Mr. Speaker, we are all fully aware of the new urgent care centre that has been stood up in the community of Regina. And we know that at times there have been staffing challenges in which there have been days that it is . . .

[Interjections]

Speaker Goudy: — Order.

Hon. Lori Carr: — That it has not been operating, Mr. Speaker. But, Mr. Speaker, that urgent care centre has had the ability to take 65,000 patients away from the emergency rooms here in the community of Regina, which has opened up space there to help with those emergency departments, Mr. Speaker. The urgent care centre is serving the purpose that it was meant to serve, to take those lower acuity patients that don't belong in an emergency room and be able to handle them there in that facility, Mr. Speaker. Thank you.

Speaker Goudy: — I recognize the member from Regina Elphinstone-Centre.

Meara Conway: — Well, Mr. Speaker, "stood up" is actually quite an apt term to use because the patients of Regina certainly feel stood up by this government. Because the answer to that question is 12 days — 12 days when the centre was forced to shut early or close entirely just this year, Mr. Speaker.

We've also contacted the centre ourselves and been told there's no point in even turning up after 10 a.m. to get care. By then the centre is so overrun with patients, and people turning up later will sit there for hours and then be turned away.

Now the Premier talks about opening another one in Saskatoon, and then another and another and a second in Regina, and they are spinning their wheels, Mr. Speaker. How exactly does he plan to do that when he can't even keep one urgent care centre open?

Speaker Goudy: — I recognize the Minister of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. Mr. Speaker, this is exactly why we can't take those members opposite seriously. Mr. Speaker, we are working on enhancing services and providing services for the people of the province. Mr. Speaker, yes, we are going to put a second urgent care centre in Regina, and we are going to . . . We have one in Saskatoon that's 75 per cent built, and we're going to do a second one there. And we're expanding to other communities . . .

[Interjections]

Speaker Goudy: — Members, we'll be listening to answers, please. Member from Regina Walsh Acres. Different ones, member from Cumberland. I can mention 10 names. But please.

Who's next? I recognize the member from Regina Northeast.

Jacqueline Roy: — Thank you, Mr. Speaker.

[Interjections]

Speaker Goudy: — The minister wasn't finished? The minister wasn't finished.

Minister of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. I am proud to talk about these centres that we're opening across the province because the members opposite would rather have us not open these so that we can't talk about the successes.

The members opposite would rather see us not expand services because that is exactly what we are doing, Mr. Speaker. And we will continue to do that, to put patients first, having the right care at the right time, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina Northeast.

Child Care Agreement with Federal Agreement

Jacqueline Roy: — Now, Mr. Speaker, the Sask Party government's botched child care deal is wreaking havoc for families. We're hearing from so many families each and every

day. First, families with six-year-old children attending YMCA child care facilities in Regina and Moose Jaw were told there would no longer be space for them as of June 30th. Then they were told there would be space. But wait, only if they paid full-time fees.

Why did this happen? Because that minister promised six-year-olds would be included in a new deal for affordable child care, and then he failed to deliver. Is that minister pleased with all the chaos and stress he is causing families?

Speaker Goudy: — I recognize the Minister of Education.

Hon. Everett Hindley: — Thank you, Mr. Speaker. We are pleased to have a better child care agreement for families and child care operators across this province, Mr. Speaker. One that has a number of enhancements to it, one of it being — as we've discussed multiple times — the expansion to include kids who turn six while they're in kindergarten, that taking effect on April the 1st, Mr. Speaker. And that is a benefit that will be helping many families, starting April 1st under the new enhanced agreement and for years to come as part of this five-year agreement, Mr. Speaker. And that is something this government is proud of and an important change that was negotiated into this agreement. Thank you, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina Northeast.

Jacqueline Roy: — Thank you, Mr. Speaker. Now, better doesn't mean less. All week we've asked this minister for some compassion or some degree of empathy for the pain that he is putting families through. We asked him to reverse course and fund affordable child care for all six-year-old children. That is, after all, what he promised.

Can that minister tell this House exactly, exactly how many families no longer have access to affordable child care after failing to deliver on the deal that he promised?

Speaker Goudy: — I recognize the Minister of Education.

Hon. Everett Hindley: — Thank you, Mr. Speaker. I will reiterate again that this is a changed agreement. It's a better agreement that takes effect on April the 1st, Mr. Speaker. And how many families would have been benefiting from this are all the families that have kids who are in kindergarten that turn the age of six after April 1st, which is different than what the current agreement presently has, Mr. Speaker, the one that the members opposite have been advocating for.

They simply advocated — as far back as a year ago, perhaps even further back than that — for us to just sign the exact same agreement that we currently have, Mr. Speaker, and we would not be having this debate here today. They disagree. They're saying no. But there's countless examples on the record, Mr. Speaker, where those members opposite were advocating for us to simply sign the existing agreement. The new agreement will actually benefit many more families across this province for years to come, Mr. Speaker.

Speaker Goudy: — I recognize the member from Regina Elphinstone-Centre.

Provision of Health Care

Meara Conway: — Mr. Speaker, my colleague and friend, the member for Regina Rochdale, has been by the bedside of her mother at Royal University Hospital. Her mother had a stroke and has dementia. That's hard enough, but she's laying in a hallway now for four straight days. My colleague is heartbroken for her mother and she feels helpless — no privacy, staff are overrun, and no end in sight to this substandard health care. How did health care in Saskatchewan get this bad?

Speaker Goudy: — I recognize the Minister of Remote and Rural Health.

Hon. Lori Carr: — Thank you, Mr. Speaker. Mr. Speaker, I'm sorry to hear of the experience that the member opposite's mother is going through. I can't speak to the specifics of her case, but when addressing capacity pressure in our hospitals, when and where you receive care is dependent on how critical the patient is, Mr. Speaker. It's determined by highly skilled nurses and doctors who work in the emergency room.

[10:45]

But what we're trying to do to address that, Mr. Speaker, is we have our capacity action plan, which is addressing the pressures that we have by adding more spaces to those hospitals, Mr. Speaker. As noted on page 6 of our patients-first health care plan, we're adding 146 additional hospital beds in Saskatoon alone, including 129 acute care beds. And that will help with pressures in the emergency room, Mr. Speaker.

Speaker Goudy: — I recognize the Opposition House Leader.

Nicole Sarauer: — Point of order, Mr. Speaker.

Speaker Goudy: — What's your point of order?

POINT OF ORDER

Nicole Sarauer: — Thank you, Mr. Speaker. During question period you ruled one of the member for Regina South Albert's questions as out of order. I would ask that, for clarity of the House, you explain specifically which rule her question violated.

Speaker Goudy: — So, repetitive questions in the Chamber that we would be moving on to another type of question, another question. That same question had been asked a number of times already from the member and from other members. But I will take your concern, and I will speak with the Clerks on whether I was founded in that ruling to move on in the questioning.

I appreciate your insight and your perspective. And I'm not going to be bold in saying that what I chose to do at that point, to move on, was the actual right thing to do. I don't have actually the rule book with me here at the moment. But I appreciate your question on that, and I will get back to us on Monday with more clarity. So thank you very much.

INTRODUCTION OF BILLS

Bill No. 615 — *The Provincial Health Authority (Banning Parking Fees for Cancer Patients) Amendment Act*

Speaker Goudy: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — Thank you, Mr. Speaker. I move that Bill 615, *The Provincial Health Authority (Banning Parking Fees for Cancer Patients) Amendment Act* be now introduced and read a first time.

Speaker Goudy: — It has been moved by the member from Regina Walsh Acres that Bill No. 615, *The Provincial Health Authority (Banning Parking Fees for Cancer Patients) Amendment Act* be now introduced and read a first time. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

Speaker Goudy: — Carried.

Deputy Clerk: — First reading of this bill.

Speaker Goudy: — When shall this bill be read a second time? I recognize the member from Regina Walsh Acres.

Jared Clarke: — At the next sitting of the Assembly.

Speaker Goudy: — Next sitting.

PRESENTING REPORTS BY STANDING AND SPECIAL COMMITTEES

Speaker Goudy: — I recognize the Chair of the Standing Committee on Crown and Central Agencies.

Standing Committee on Crown and Central Agencies

Colleen Young: — Mr. Speaker, I am instructed by the Standing Committee on Crown and Central Agencies to report Bill No. 29, *The Tailgating Act*, a bilingual bill, without amendment.

Speaker Goudy: — When shall this bill be considered in the Committee of the Whole on Bills? I recognize the Minister Responsible for Saskatchewan Liquor and Gaming Authority.

Hon. Warren Kaeding: — Thank you, Mr. Speaker. I request leave to waive consideration in Committee of the Whole on this bill and that the bill now be read the third time.

Speaker Goudy: — The minister has requested leave to waive consideration in Committee of the Whole on Bill No. 29, *The Tailgating Act* and that the bill be now read the third time. Is leave granted?

Some Hon. Members: — Agreed.

Speaker Goudy: — The minister may proceed to move third reading.

THIRD READINGS

Bill No. 29 — *The Tailgating Act/Loi sur les rassemblements d'avant-match*

Hon. Warren Kaeding: — I move that the bill now be read the third time and passed under its title.

Speaker Goudy: — It has been moved by the minister that the bill be now read the third time and passed under its title. Is the Assembly ready for the question?

Some Hon. Members: — Question.

Speaker Goudy: — Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

Speaker Goudy: — Carried.

Deputy Clerk: — Third reading of this bill.

Speaker Goudy: — Why is the member on her feet?

MOTIONS

Second Reading of Bill No. 612

Aleana Young: — Thank you, Mr. Speaker. Notwithstanding the government's agenda and what's published in *Orders of the Day,* I request leave to move the following motion:

> That the Assembly immediately consider second reading of Bill No. 612, *The Lower Power Bills and Car Insurance Act*.

Speaker Goudy: — Is leave granted?

Some Hon. Members: — No.

Some Hon. Members: — Yes.

Speaker Goudy: — Please rise.

[At 10:51 Her Honour the Lieutenant Governor entered the Chamber and took her seat upon the Throne. Her Honour then gave Royal Assent to the following bills.]

ROYAL ASSENT

Her Honour: — Pray be seated.

Speaker Goudy: — May it please Your Honour, this Legislative Assembly in its present session has passed several bills which, in the name of the Assembly, I present to Your Honour and to which bills I respectfully request Your Honour's assent.

Clerk: — Your Honour, the bills are as follows:

Bill No. 30 - *The Inter-jurisdictional Support Orders Amendment Act, 2025/Loi modificative de 2025 sur les ordonnances alimentaires interterritoriales*
Bill No. 42 - *The Saskatchewan Firearms Amendment Act, 2025*
Bill No. 29 - *The Tailgating Act/Loi sur les rassemblements d'avant-match*

Her Honour: — In His Majesty's name, I assent to these bills.

Speaker Goudy: — Please rise for the departure of Her Honour.

[At 10:53 Her Honour retired from the Chamber.]

Speaker Goudy: — Please be seated.

ORDERS OF THE DAY

SEVENTY-FIVE MINUTE DEBATE

Speaker Goudy: — I recognize the member from Moosomin-Montmartre.

Patients-First Health Care Plan

Kevin Weedmark: — Thank you very much, Mr. Speaker. Mr. Speaker, health care touches every family in Saskatchewan. Sooner or later every resident of our province will rely on our health care system. It might be the birth of a child. It might be the care of an aging parent. It might be an accident on a rural road or a sudden illness that brings someone through the doors of an emergency room late at night.

That's why it's important to make our health care system the best that it can be. And, Mr. Speaker, our government has unveiled a new document that charts the way forward on health care, and I was happy to be in Saskatoon Monday as the Premier and the Health ministers unveiled the patients-first health care plan. The announcement was made at the Saskatoon urgent care centre, a new facility which is under construction. It's now 75 per cent complete and will open next year. And it was fitting to have this announcement on the future of health care in Saskatchewan in a facility that will serve health care in the province well into the future.

As the Minister of Health explained on Monday, the patients-first health care plan is grounded in one firm commitment: that patients must be at the heart of every decision we make so that in Saskatchewan, people receive the right care in the right place at the right time. Mr. Speaker, there are so many aspects of this plan, which is a comprehensive new approach to health care in Saskatchewan, and I'll go over some of the main aspects.

One focus of the plan is expanding access to primary care, and part of that is expanding the role of nurse practitioners in the province. Mr. Speaker, nurse practitioners already provide outstanding care across the province, and we are expanding their roles. We introduced a new funding model that allows nurse practitioners to deliver publicly funded primary care through independent contracts. Because of the high level of interest, we expanded that model, and 23 nurse practitioner contracts were signed in just six months.

Those contracts alone have the capacity to attach more than 18,000 patients to a dedicated primary care provider. Under this plan, Mr. Speaker, our government will put no limit on the number of provincial nurse practitioner contracts, opening access to more providers to deliver publicly funded primary care across the province.

We will build fully functioning, nurse-practitioner-led primary care teams, allowing nurse practitioners to hire nurses, dieticians, occupational therapists, and other health professionals. And, Mr. Speaker, we will grow the number of nurse practitioners in the province by adding 26 more training seats, increasing training capacity by 45 per cent.

We will also strengthen emergency and urgent care capacity by enhancing nurse practitioner roles in emergency rooms and urgent care centres to reduce wait times and improve patient flow.

We will also support registered nurse career progression with $78,000 for training over two years with a return-of-service contract for those pursuing a nurse practitioner designation.

And we will improve care for seniors by giving nurse practitioners the same opportunities as physicians to provide care for long-term care residents.

Another focus of this plan is strengthening hospital and ICU [intensive care unit] capacity. Our health care facilities are the heart of our health care system, and adding capacity is important. Our government will complete and staff 69 additional beds at Saskatoon City Hospital, open 24 acute care beds and four ICU beds at St. Paul's Hospital, add six pediatric beds at Jim Pattison Children's Hospital, add 36 acute care beds and seven ICU beds at Royal University Hospital . . . [inaudible interjection] . . . That is a lot of beds. And open three new neonatal intensive care unit beds at Regina General Hospital. We will also complete construction on the Prince Albert Victoria Hospital addition, adding 57 acute care beds to that community.

Diagnostics is an important element as well of our health care system, and another focus of this plan is modernizing diagnostics. We will modernize laboratory medicine, shortening turnaround times and increasing the number of lab tests that can be performed in the province.

We have increased diagnostic capacity by more than 55,000 CT [computerized tomography] scans and 15,000 MRI [magnetic resonance imaging] scans per year since 2020. We've launched a mobile MRI unit and expanded PET/CT [positron emission tomography/computerized tomography] services. We are excited to have a new MRI machine in Estevan going live in July to serve patients in southern Saskatchewan. And we will continue expanding MRI, CT, and PET/CT capacity. We'll add new diagnostic capacity through expansions such as the Estevan MRI, and work towards our 2028 target which is 90 per cent of patients receiving diagnostic scans within 60 days.

Another key access is improving access to surgery. Last year alone Saskatchewan performed over 100,000 surgeries, a significant increase since 2020. We've also introduced robot-assisted surgery, bringing advanced procedures closer to home. And under this plan, our government will perform 450,000 surgeries over four years, targeting a reduction in wait times to 90 days.

We will expand the scope of publicly funded surgeries that can be performed through provincial partnerships with private surgical providers. We will accelerate recruitment of anesthesia professionals to support higher surgical volumes. We will launch an improved surgical specialist directory, expand pathways that focus on early treatment and stabilization to give patients more care options and reduce the need for surgery.

[11:00]

As well, EMS [emergency medical services] services are a vital part of our health system, and another focus is enhancing EMS and emergency response. Under this plan we will improve emergency response capacity, including additional investments in paramedic staffing, continued bursaries, and mental health supports.

Health care workers are key to everything we do in health care. And another focus of this plan is improving recruitment, retention, and training. There will be a streamlining of health recruitment by strengthening the mandate of the Saskatchewan health recruitment agency and giving it more responsibility over health recruitment in the province.

We will expand the rural physician incentive program to key regional centres. We will maintain and expand the rural and remote recruitment incentive for high-priority health care classifications. And we'll continue the graduate retention program and targeted physician and specialist incentives.

And vitally, Mr. Deputy Speaker, we will add 20 more medical school seats at the University of Saskatchewan College of Medicine, bringing the total number of seats to 128. That's more than doubled from 60 under the previous government.

And we will also add 10 more medical residency seats across the province, prioritizing Saskatchewan students. The additional 10 seats, Mr. Speaker, will bring the total number of residency seats to 161 spots that will be open this July.

And I have seen, Mr. Deputy Speaker, I've seen the difference that residency seats make. I've seen the benefits of adding those seats. In Moosomin, the southeast family medicine residency program has made a difference. It's brought some incredible residents from around the world to our province and has added to our number of physicians.

And I will never forget, Mr. Deputy Speaker, I'll never forget my experience at the College of Medicine white coat ceremony last fall where a medical student from the community of Churchbridge came up to me after the ceremony and mentioned that she went into medicine because there were new options for doing her residency in the local region.

Mr. Speaker, in this plan, importantly, we are prioritizing Saskatchewan students in medical training, setting the admissions target for the College of Medicine at 95 per cent Saskatchewan students. We're continuing to add training seats in high-demand areas. And we are expanding rural training opportunities to improve long-term recruitment and retention.

And to encourage young people to consider medical careers, under the patients-first health care plan, we are introducing and expanding enhanced health career pathways in high schools to grow the future workforce, collaborating with the Saskatchewan Distance Learning Centre and the school divisions.

Mr. Speaker, another aspect of this plan is modernizing care delivery and scope of practice. To improve access and reduce bottlenecks, we will introduce nation-leading scope expansion legislation across all regulated health professions. We will broaden the roles of nurse practitioners, pharmacists, speech-language pathologists, dieticians, optometrists, and other health professionals. We will further expand scope for nurse practitioners, pharmacists and paramedics, and other professionals. And we will continue to enable and support team-based primary care models.

Mr. Speaker, we will develop additional urgent care centres, including new centres in Prince Albert, North Battleford, Moose Jaw, a second in Regina, and in Saskatoon. It was great to have that announcement at the Saskatoon urgent care centre that's about 75 per cent complete now. The first urgent care centre in Regina, Mr. Deputy Speaker, has seen 65,000 patient visits so far, taking the pressure off emergency departments just as intended.

As part of this plan, we will also implement virtual care, including virtual primary care for unattached patients and remote monitoring tools. We will also expand the virtual physician program, which now supports 30 rural hospitals and has helped avoid more than 5,200 potential emergency room disruptions.

Safety is always a concern and, Mr. Deputy Speaker, another focus of the plan is improving safety and quality of care. Under this plan we'll enhance security services in at least eight more communities, and we'll conduct a province-wide safety and security review.

Mr. Speaker, another focus of this plan and an important focus for the future of health care is investing in modern health facilities. We will build new long-term care homes in Estevan and Watson. We will advance or complete major infrastructure projects, including the Prince Albert Victoria Hospital expansion; the new specialized 240-bed long-term care home in Regina; new hospitals in Weyburn, Yorkton, and Rosthern; long-term care facilities in La Ronge and Grenfell; the Esterhazy integrated health care facility; and several urgent care centres.

And, Mr. Speaker, one very important element of this plan is the reduction in the community portion of the capital cost of new health care facilities from 20 per cent down to 10 per cent. And I just want to remind you, Mr. Deputy Speaker, under the former NDP government it was actually at 35 per cent.

Mr. Speaker, there was a lot of consultation involved in this. I was there when the Premier met with the Grenfell health care foundation back in the fall and heard that the 20 per cent share was a very high hurdle for them. The people of Grenfell were so happy when work began on the long-term care facility last summer. But the local foundation, as local partners in other communities with new facilities, found the 20 per cent contribution challenging.

The Premier came out to Grenfell to meet with the foundation, and he heard from them and from other communities. And, Mr. Speaker, this government listened, this government heard, and this government acted. And Larry Parrott of the Grenfell health foundation, he actually went up to the mike at SARM yesterday and thanked our government for its action on that.

Mr. Parrott told us, he said, "The announcement by the province of Saskatchewan reducing the local community capital share from 20 per cent to 10 per cent is welcome news for small rural

communities such as Grenfell." And we heard the same thing from communities across the province. Mayor Dennis Helmuth from Rosthern, he said, "The 10 per cent reduction to municipalities for new capital health care projects is a very significant benefit and will help. It'll be a very welcome policy shift."

And we heard this from mayors across the province. We heard great things from Mayor Jeff Richards in Weyburn. Communities around the province are welcoming that it's going to make things easier for those communities that are working on new facilities now, and for all those communities that will be working on new facilities in the future.

So, Mr. Speaker, there will always be more work to do when it comes to health care, but this plan represents an important step forward. It's a plan that expands urgent care centres across Saskatchewan. It's a plan that strengthens primary care through nurse practitioners and team-based care. It's a plan that trains more doctors and health professionals here at home. And it's a plan, Mr. Deputy Speaker, that supports communities by making it easier to build the health infrastructure that they need.

All of these steps move us toward the same goal: a health care system where Saskatchewan people receive the right care in the right place at the right time.

And for that reason, Mr. Speaker, I move:

> That this Assembly commends the government's comprehensive patient-first initiative to improve access to care for all Saskatchewan residents; and further,
>
> That this Assembly supports expanding access to virtual care, increasing the number of urgent care centres, increasing the scope of practice for providers, and continuing to recruit, train, and increase the number of doctors, nurses, and nurse practitioners in this province.

Thank you.

Deputy Speaker B. McLeod: — It has been moved by the member from Moosomin-Montmartre:

> That this Assembly commends the government's comprehensive patient-first initiative to improve access to care for all Saskatchewan residents; and further,
>
> This Assembly supports expanding access to virtual care, increasing the number of urgent care centres, increasing the scope of practice for providers, and continuing to recruit, train, and increase the number of doctors, nurses, and nurse practitioners in the province.

Is the Assembly ready for the question? I recognize the member from Regina Elphinstone-Centre.

Meara Conway: — Thank you, Mr. Deputy Speaker. A pleasure to be on my feet to enter into this motion put forward by the member opposite.

In response to the comment from the member from Saskatoon Willowgrove, which is to ask why we're not clapping more over here, unfortunately you won't see this opposition throw any parades for this most recent iteration of the patient-first Sask Party health care plan. I have in my hot little hands here all four patient-first health care plans put forward by this tired and out-of-touch government since 2009. And unfortunately, you know, "patient-first" appears to be a buzzword that this government likes to trot out every few years.

But you know the people who put patients first every single day? Front-line health care providers. And those are the front-line health care providers, many of whom haven't had a contract in almost going on four years, Mr. Speaker, who haven't seen a pay raise. I was up in Saskatoon this week speaking to Olivia, a continuing care aide. Just a, like, delightful person. Just the precise kind of person that you would trust the care of your most precious loved ones to. And she has seen her pay go up $3 in 15 years, Mr. Deputy Speaker. This is unacceptable, and this is why people like Olivia are leaving health care altogether.

And you know, I would invite this government . . . I posted a picture of Olivia and I had talked a little bit about who she is and what she represents, and why what she was talking about this week in Saskatoon matters so much to the ability to function a well-run health care system. I would invite these members, go check out the comments from her colleagues, from the CCAs [continuing care aide] that have been around for 30 years — 30 years, Mr. Speaker — and have received a $4 pay raise. This is unacceptable — people who say, I loved my job so much, but it just became unworkable.

And for the first time ever, when a young person comes to me and says, should I go into health care? I say, absolutely not. These used to be good, well-paid, respectable jobs that people could get to provide for their families, to make their mortgage, to pay for their groceries, to have a good life, and do a job they are proud of and give back to their community at the same time. That is no longer the case in health care after 18 years of this Sask Party government, Mr. Speaker.

So when they stand up every day and say, we have no solutions, here's a solution: settle those contracts, Mr. Speaker. Get to the bargaining table with a financial mandate that will build a health care system that is deserving of the people that are holding it up each and every day. But unfortunately what we see from this patient-first plan is a total and absolute failure to consult with the very front-line health care workers who make up our system, Mr. Speaker.

And the Health minister, who . . . You know, finally it's nice to hear a little humility from that side. That's as close as we get to hearing from this government that they have failed. You know, a Premier who woke up on Monday and said, I guess it's time to start a conversation in health care. Well wow, Mr. Speaker, the understatement of the century, Mr. Speaker.

And the thing about a conversation is it involves a lot of listening, at least if you're doing it well, Mr. Speaker. But they have already signalled this new and improved patient-first review is hot off the press, and they have already acknowledged that they didn't consult front-line health care workers, and they have no intention of consulting them now. And we have a Health minister that went on the Evan Bray show and said that he thinks there's too much emphasis on consultation, on formal consultation, Mr.

Deputy Speaker. My God.

And we wonder why we're spinning our wheels. Same themes, same ideas recycled over and over and over and over — 2009, 2012, 2015, 2026. And people want to know, why is 2026 going to be the time that you actually deliver on any of these promises, Mr. Speaker?

Start listening. Listen to the people that are on the front lines, Mr. Speaker. That is the first step. And we keep saying it, but it means something because they are full of solutions. And for the Premier to stand up this week and accuse us of not having any solutions on our big, bold change health care consultation, well the thing with consultation, Mr. Deputy Speaker, is it is work. It is work and it takes time.

And sometimes it takes sitting down with stakeholders once, twice, three times, Mr. Speaker, to say, "Did we get this right? We're thinking of doing this. How would that affect you?" It's dynamic, Mr. Speaker.

[11:15]

And the fact that this 18-year-old tired and out-of-touch government doesn't understand that is the very reason that our health care system is collapsing around us, Mr. Deputy Speaker.

You know, I've been very clear that there is something good about this plan. This government has had a come-to-Jesus moment when it comes to nurse practitioners, and again I just want to give them a little slow clap for that, because this is something that other jurisdictions have been doing for decades.

The evidence has been there on the worth and the benefit of nurse practitioners for literal decades. In fact, back in 2009 one of their groundbreaking health care ideas was to fully utilize the full scope of nurse practitioners. It's only too bad that it took 16 years for this government to resurrect a really good idea.

Mr. Speaker, and when they started announcing these new positions for nurse practitioners, I was on the record right away. Mr. Deputy Speaker, I said, this is good. This is good. A little slow, they're a little slow to it, but this is good, and we need to do this at scale. And maybe this new patient-first plan is a signal that they recognize they need to do this at scale. Because I'm trying to give credit where it's due, Mr. Speaker. But in all honesty, the same themes that we saw in 2009, 2012, 2015 are here in 2026, but they've taken out any measurable goals.

And I'll give you an example: back in 2012 right here, the transformation and innovation patient-first plan. They committed to all people receiving necessary surgeries in less than three months. Now their target for 90 per cent of people by 2028 — lots of caveats — is three times that. Mr. Speaker, it's three times that. For diagnostics, for emergency wait times, for access to a family doctor, we see no measurable commitments, Mr. Speaker.

You know, I want to turn just quickly to virtual care because this is a corner that this government has tried to paint us into. We were extremely critical of the virtual emergency room program that they put in place in rural communities because that was not safe. CIHI [Canadian Institute for Health Information] says, "Only 10 per cent of emergency room visits are safe through virtual care."

That said, there is amazing things being done in Saskatchewan in virtual care. I think of the Virtual Health Hub, which my colleague and I had occasion to tour a few weeks ago. What's being done by Dr. Ivar Mendez and Whitecap Dakota Nation — that is virtual presence, virtual care. It is vastly different than this VIPER [virtual physician for emergency response] program that they put in place hastily because they had egg on their face, because we've seen 8,000 days' worth of emergency room closures under this Premier's tenure, Mr. Speaker.

So we recognize the benefits of virtual care. It needs to be done thoughtfully. It needs to be done with our partners who are doing this good work. And I reject that minister's accusation that we are not in favour of virtual care. It needs to be evidence-based and it needs to be safe for the people of Saskatchewan.

Mr. Speaker, just quickly on their record of privatization, because they're talking about expanding that. Wait times in Saskatchewan have not improved. In fact they have often gotten worse. Their dashboard is available to the public for all to see. These privatization schemes of theirs have not had results. All we have seen are big, lucrative contracts going off into their donors and going, for example, in the case of women who are sent to Alberta for basic breast care, to build up the GDP [gross domestic product] of Alberta.

Surely we can do better, Mr. Speaker. Surely we can do better. The women of this province deserve to get that care here in the public system by professionals who are getting salaries here, paying their taxes in Saskatchewan, supporting their local businesses here in Saskatchewan, paying their daycare fees here in Saskatchewan. That's what we need to be doing, Mr. Speaker, not building out a private system that benefits Alberta, Mr. Speaker.

So I will not be supporting the motion put forward by the member opposite. Thank you.

Deputy Speaker B. McLeod: — I recognize the member from Last Mountain-Touchwood.

Travis Keisig: — Well thank you very much, Mr. Deputy Speaker. Always an honour to be on my feet and take part in such a very important debate. Health care truly affects us all, whether we are requiring access to primary care for ourselves or a family member, visiting a loved one in a hospital room, or delivering necessities to a care home. Health care plays a role in each and every stage of our life and each and every community across Saskatchewan.

Health care is the largest part of our budget, Mr. Deputy Speaker. Saskatchewan residents rely on this government for quality health care that is accessible, dependable when we need it most. Our government has taken to the doorsteps of residents and met with health care professionals. We've listened to those who matter most — Saskatchewan people. We recognize the need to enhance access to health care.

Over the years we have made efforts to improve both health care services and the workforce. We introduced the health human resources action plan, which aims to stabilize the health

workforce by providing incentives, increasing training opportunities, and improving working conditions for health care workers throughout the entire province.

Just this week, Mr. Deputy Speaker, the government announced the patients-first health care plan. This focuses on several priorities, improving access and ensuring patients can receive surgical care in a timely manner so Saskatchewan residents can receive treatment closer to home.

This plan is building on progress that has been made in health care. It's important to find what works and what doesn't. This plan ensures that we are improving what works and making changes in areas that ensure residents get the best possible care, while strengthening the overall health care system in our province.

Mr. Deputy Speaker, it's essential to have a government that acknowledges our imperfections. We understand that there are still individuals in Saskatchewan that are having challenges to the care they receive when they need it. There's much work to be done, and this government is dedicated to ensuring that patients in Saskatchewan come first. And above all else, we are continuing to improve services and expanding access to care.

How are we doing this, Mr. Deputy Speaker? Well let's start with access to care. We are doing this through measures such as additional urgent care centres, nurse practitioner clinics, and virtual care that helps connect patients with providers sooner.

Nurse practitioners play a critical role in health care, Mr. Deputy Speaker, and we should be utilizing their skills and expertise more. They have the ability to assess, diagnose, treat, prescribe, and refer patients. They do an incredible job. And I know many people in Last Mountain-Touchwood who are already benefiting from their services and receiving care closer to home.

This government is working to increase the training capacity of family physicians, and in the meantime nurse practitioners are available to Saskatchewan residents for access to primary care. Launching the largest publicly funded nurse-practitioner-led primary care expansion in Saskatchewan's history is something to truly celebrate, Mr. Deputy Speaker.

Allowing nurse practitioners to hire RNs [registered nurse] or LPNs [licensed practical nurse] and essentially build their own teams to care for residents in a pilot program is an excellent initiative, Mr. Deputy Speaker. This approach will help reduce dependence on urgent care centres, emergency rooms, allowing patients to schedule appointments directly with the nurse practitioner for non-emergency care and ongoing health concerns.

That's going to lead me into my next topic, Mr. Deputy Speaker — virtual care. This targets patients who do not already have a family doctor. Again, implementing virtual primary care for residents without a doctor will prevent unnecessary travel and alleviate pressure on urgent care and/or emergency rooms. I have personally heard that being able to meet with physicians would be a valuable addition to reducing health care pressures. This would greatly benefit seniors living in rural Saskatchewan who may not want to travel to large urban centres. It also assists parents who wish to avoid loading their children into a vehicle for an hour or two drive to the nearest health centre for concerns that could be addressed through a virtual consultation with a provider.

We need to meet people where they are, Mr. Deputy Speaker. Having the option to access virtual care accomplishes this goal by making health care more accessible for all residents. We have over 1.26 million people in the province, Mr. Deputy Speaker, and as the government it is our responsibility to deliver this plan. And we're doing so by putting patients first.

We currently have seven urgent care centres operational or in the planning stages. These include the one in Regina. In Saskatoon it's nearing 70 per cent completion. Additionally we are planning centres for Prince Albert, Moose Jaw, North Battleford, and a second location in both Saskatoon and Regina. This is truly part of our commitment to a more accessible and reliable health care system, Mr. Deputy Speaker. Delivering the right care, the right place, and at the right time for every Saskatchewan resident remains a key priority for this government.

Now the question I know many are wondering — I've been personally asked this many times — how is the government plan to ensure we have the staff to run these facilities, Mr. Deputy Speaker? Well here's the plan. With the help of the Saskatchewan Healthcare Recruitment Agency, the SHA, and training expansions, more graduates are staying in Saskatchewan and more providers are choosing Saskatchewan.

While our universities and colleges focus on training the next generation of health care workers, the government is expanding training seats, increasing residency opportunities, and enhancing rural training. These efforts will ensure that our health centres are adequately staffed. Since April 2023 we've had over 2,700 nurses, graduates, hired in this very province, both in-province and out-of-province hires. As much as the opposition likes to lead residents in a direction that is sometimes not correct, students are staying in Saskatchewan and want to be in Saskatchewan, Mr. Deputy Speaker.

This government also, Mr. Deputy Speaker, will continue to develop and implement concrete plans for recruiting more health care workers. As a rural MLA [Member of the Legislative Assembly], Mr. Deputy Speaker, I've always believed in the importance of encouraging local young people in rural areas to pursue a health care career. I encourage them to go to school, come back home after completing their studies, and work near their family, work near their friends, work near their community that they know and have grown up all their life.

People are naturally drawn to community, Mr. Deputy Speaker. And we enjoy being close to our friends and family which can also be seen as our safety net. Consider individuals who grew up in Balcarres, Fort Qu'Appelle, or even Dysart. If they pursue a career as an RN or an LPN, what are the chances that they would feel more inclined to return to their home community, Mr. Deputy Speaker, support the people they know and care about?

I strongly believe that individuals are more likely to seek employment at a facility that they are familiar with, especially if their friends and family work there already. I know many LPN nurses who grew up in the area and are working back in their home communities.

Well, Mr. Deputy Speaker, how do we recruit? Well we are starting by working to get high school students in the continuing care aide program in high school. They can take the courses and begin working in an entry-level position. Maybe they, you know, truly plan to become a nurse, a doctor, or a pharmacist, a lab tech, or maybe they end up making a career out of being a continuing care aide. By partnering with the Saskatchewan Distance Learning Centre and school divisions, Mr. Deputy Speaker, we can assist all students in exploring careers in health care and preparing for lifelong careers in both rural and urban centres across Saskatchewan.

By putting patients first, this plan will provide the stability that we need in our health care system and will provide a resilient workforce in health. All four key sectors are covered: expanding access to care; improving recruitment, retention, and training; modernizing care; improving safety; and improving facilities and equipment. This government is committed to putting Saskatchewan people first and protecting the future of health care for everyone in our province today and generations to come.

Mr. Deputy Speaker, I see my time's almost up, but there's something very critical that we have to address always when it comes to health care. We can only address the issues in health care due to the strength of a strong and growing economy. It is thanks to our Premier and his team doing the hard work: going to China getting the canola tariffs eased; working with India selling uranium, selling more lentils. That is what's going to allow us to provide health care services to each and every Saskatchewan resident.

And that is literally my harshest complaint, Mr. Deputy Speaker, to the members opposite, is they never, ever have a vision on how to pay for anything, how to generate income and provide a strong and growing economy to the people of Saskatchewan that'll keep our province growing forward. Thank you, Mr. Deputy Speaker.

Deputy Speaker B. McLeod: — I recognize the member from Saskatoon Churchill-Wildwood.

[11:30]

Keith Jorgenson: — Thank you very much, Mr. Deputy Speaker. It's an absolute pleasure to be here today in the Chamber on the 75-minute debate. Mr. Deputy Speaker, I want to talk about something truly mysterious, something that defies the law of nature, bends time and logic itself, and was made of . . .

I'm so sorry. It appears I've brought my speech from the last 75-minute debate, Mr. Deputy Speaker. I'm so sorry, truly. But at least I know what it feels like to be the Minister of Health now, because after all, on Monday he showed up at a press conference with a 14-year-old speech. At least mine is only three months old. So please, please, Mr. Deputy Speaker, try not to be too hard on me.

Mr. Deputy Speaker, I have to tell you I'm an ambitious guy. I truly am an ambitious guy. I had the most ambitious plan to write a speech for today's 75-minute debate. I did. I did. I had the most ambitious plan of anyone in this Legislative Chamber, perhaps in the entire country.

But you know, Mr. Deputy Speaker, I'm under pressure. Truly I'm under pressure, you know. Yeah. And you know, just like . . . And again I feel like this is kind of like a bonding moment with me and the Minister of Health. I mean the Minister of Health has the most ambitious recruitment plan of anyone in the entire country. And we all know what that's gotten us, Mr. Deputy Speaker.

You know, I had the most ambitious speech-writing plan; he has the most ambitious recruitment plan. And here we are at a loss for health care workers and I'm at a loss for words, Mr. Deputy Speaker.

But let's get to the motion before us, Mr. Deputy Speaker. The motion reads that the Assembly commends the government for their retro patient-first initiative. You know, my first impression of this document is it is a very, very ambitious plan, Mr. Speaker. It was an ambitious plan in 2009 and it was an ambitious plan again in 2012. And it is still the most ambitious plan, Mr. Speaker.

You know, Mr. Deputy Speaker, the great thing about an unsuccessful plan is that you can use it again. So environmentally conscious. It's so ambitious. They were all so ambitious.

You know, I had an ambitious plan to write a speech. The minister has an ambitious plan to staff our health care system. Our Premier has an ambitious plan to fix health care. And you know how it goes — we don't have enough staff in our hospitals, we don't have a fix for our health care system, and I'm still at a loss for words, Mr. Deputy Speaker.

Mr. Deputy Speaker, yesterday we heard the Premier talk about a plan that was received so well. And he wants to be judged for a plan and not what he's actually done, Mr. Deputy Speaker. I'm going to say that again. The Premier wants to be judged for his plan and not what he's done. Ambition, intention, plans. Nowhere in the real world are we judged based upon our ambitions. But we're judged on our performance everywhere except for here, Mr. Deputy Speaker.

You know, this is so weird, Mr. Deputy Speaker. If my child doesn't do their chores but they had a really, really good plan to do their chores, do I judge them based upon their intention or his action? If I have a student who doesn't finish their homework, do I mark them based on the assignment that they intended to have done or what I can actually see in front of me?

If an employee at the legislative cafeteria doesn't make lunch one day, do we judge the staff based upon the menu? You know, write a review saying, yeah, menu looks great. Food delicious. No food. Best menu. Five stars. Really great menu . . . [inaudible interjection] . . . Well that's because she shows up for work and she actually gets her job done, unlike the Minister of Health.

No, Mr. Speaker . . . Okay, well it's nice that the member from Willowgrove has all kinds of solutions when it's not his turn to talk. No, Mr. Speaker, in the real . . . [inaudible interjection] . . . Aw. Well we love you too. No, Mr. Deputy Speaker, in the real world we judge people based upon results.

In the last 75-minute debate, I talked about Sask Party math: a math that's unique, that values self-esteem over numbers. Mr.

Deputy Speaker, it's like we have a new academic marking system just for the Sask Party, just used in this Chamber.

This Premier, this minister, they want to give themselves an A for a plan without delivering any results. You know, I don't know what that A would stand for, Mr. Deputy Speaker. What that A would stand for is "I almost completed the job." Mr. Deputy Speaker, five times this summer this government directed people between two closed hospitals. And according to them, we should commend them for that. Seriously.

Mr. Speaker, I want to break down the motion for a second — moved by my friend from Moosomin — apart and address it piece by piece. I want to start with one quote. The quote is attributed to the ministers of Health:

> When service is available close to home, families spend less time on the road, more time with their loved ones. Expanding the team-based model, we are ensuring that health care across Saskatchewan continues to be steady, dependable, meaning that more people can access high-quality care close to home.

You know, the first part of that quote talks about people being on the road less. Never, never, ever in Saskatchewan's history has the government forced people to travel further to seek care, whether it's people having to go to Calgary to get mammograms or Tammy O'Brien being forced to pay out of pocket to access care out of province. And ironically the much-heralded virtual care has people on the road more and more kilometres.

I want to just provide one quick example. We were at the Davidson fire hall. And virtual care has not only reduced the number of acute care beds at the Davidson hospital, it repeatedly forces ambulances — instead of driving 15 minutes — to drive one and a half hours one way, or three hours round trip, from Saskatoon to Regina, meaning when those ambulances go to Saskatoon and Regina, we have a rural area that has absolutely no ambulance coverage at all. Mr. Deputy Speaker, that is dangerous.

You know, I also recently spoke to a community that has a hospital but no ambulance base. And so when they're on virtual care, Mr. Deputy Speaker, and they dial 911, the hospital has to wait an hour and a half for an ambulance to show up at a hospital. That's insane. The people of Saskatchewan deserve better than that.

You know, there's another part of that quote that I want to look at. It says that we are ensuring that health care across Saskatchewan continues to be steady and dependable. Steady and dependable? Seriously on what planet would you have to be to make that reference about what's happening in our health care system right now? Dependable — when hundreds of rural hospitals are closed each year. And when patients, like a patient I spoke to in Saskatoon, had fluid removed from their brain in a hospital hallway. Or a dying man was evicted from a long-term care centre in Weyburn because he wasn't incontinent. And that's steady, and that's dependable.

Mr. Speaker, the last part of that quote that I want to quickly talk about is the last line, which says more people will have access to high-quality care in the communities that they trust. Mr. Deputy Speaker, every day, every day the people on this side of the Chamber talk to people who've completely and totally lost faith in their health care system, people in urban Saskatchewan and rural Saskatchewan. You know, I even talked to an SHA manager who very candidly told me that after a series of rural hospital closures like we've seen in Arcola, Broadview, Watrous, he said, I quote, "It can take many years for trust to return after local people have lost faith in their hospital." And this isn't me saying this; this is somebody who runs the system.

You know, after 18 — going on 19 — years of this tired and out-of-touch Sask Party government, they bring forth a motion again that they want people to commend them for a plan, when that plan has been introduced multiple times and has failed each time. And you know, a plan can be great on paper, but until people can actually show up at a hospital in rural or urban Saskatchewan and receive the care they need, the plan isn't worth the paper it's printed on.

Deputy Speaker B. McLeod: — I recognize the member from White City-Qu'Appelle.

Brad Crassweller: — Mr. Deputy Speaker, I want to thank you for the opportunity to address you today. Once again it's an honour and a privilege to be able to stand in this House and have good discussion, good debate around the things that are most important to the great people of this province.

Before I actually get into what I want to talk about in the debate today, Mr. Deputy Speaker, I actually need to go back — back to talk about some of the things that I've seen and watched this government do. Because I think to talk about some of those things and look at some of those things can give us a pretty good idea about the future and what I believe this government will accomplish.

You see, Mr. Deputy Speaker, not long ago this government was criticized for its trade offices around the world. We have nine trade offices around the world, so let's just talk about those for just a few minutes. Those came to be because there was a vision. There was a plan to say, we need to make some change, and we need to be ready for change. There was a commitment to diversifying our markets. We needed to be able to do more business with more countries around the world. And, Mr. Speaker, if you stop and take a look at that now and reflect on that decision, I think you would agree it was an absolutely brilliant move.

Fast-forward to where we have found ourselves with regard to trade and trade relationships. The past 15 months has been an interesting time to navigate, to say the least. Tariffs have created all kinds of challenges financially for every country around the world. Well today, Mr. Deputy Speaker, how do we feel about our trade offices? They were absolutely needed. And just think about where we'd be had we not taken those steps to open those trade offices around the world.

So a quick recap. The first trade office was established in China in 2010, but the last eight have been established under our current Premier: Japan, India, Singapore, UK [United Kingdom], UAE [United Arab Emirates], Mexico, Vietnam, and Germany, all since 2021, Mr. Deputy Speaker.

So why do I bring this up? I bring this up because there was a plan. I'm going to explain it to you. I bring this up because there was a plan, a plan that our Premier implemented when he created the Minister of Trade and Export Development, a plan that was to work at increasing our global reach, a plan to let countries know around the world that we have the food and the fuel and the fertilizer that they need and Saskatchewan can supply.

Here's what the Minister of Trade and Export had to say at the time:

> Saskatchewan is an exporting province, and it will be even more important to diversify and grow our export markets coming out of the global pandemic, ensuring a strong economic recovery here at home in the months and years ahead. These new trade investments and offices will expand our international network and enhance opportunities to increase the value of our exports.

How did that plan turn out? Did the minister's words ring true about that plan? Well, Mr. Deputy Speaker, I'd say it turned out pretty well. Exports in our province in 2020 were $30 billion. Exports in our province in 2025 were $83.6 billion. I'd say the plan is working and will continue to work as our province continues to grow.

Our Premier just played a key role in allowing our province and one of our great businesses, Cameco, to sign a $2.6 billion uranium deal. Again that plan is working. That plan will continue to work so that we can continue to grow our economy, so that we have the resources to be able to do the things that I'm going to talk about right now . . . [inaudible interjection] . . . You're welcome. You're welcome. You're welcome.

So today in our debate we have a plan laid before us. We have a plan that we can talk about, a plan I'm excited about. And as we've seen with regard to growing our economy, when our government has a plan, it's a game changer. The best part about this plan, Mr. Deputy Speaker, is that it puts patients first. A plan that our Premier has clearly said is not a declaration that the challenges have been solved, but it's a commitment to accelerate the pace of change, improvement, and innovation.

Mr. Deputy Speaker, there's a couple of words that are really important here that were talked about in this plan, and I want us to talk about them. The change and improvements and innovation . . . But these two words are this, first off: "commitment" and "accelerate." Two words I absolutely love.

Commitment is so important, and it's so needed in leadership today. And I am very proud to be a part of a government that is committed to the people of this province. Proud to be a part of a team that's surrounded by MLAs who are committed to the great people in each of our constituencies.

And, Mr. Deputy Speaker, again just want to acknowledge the incredible leadership we have in our Premier, in our Minister of Health, that we have in our Minister of Rural and Remote Health and Mental Health and Addictions. Incredible leaders, all of whom have a commitment to the people of this province that I would say is unrivalled.

"Accelerate" is another word that's a favourite of mine. I love speed, for one, but I love to see things get done. And this plan has a commitment to accelerate the pace at which things are moving.

So what are some of the things that are going to happen in this plan? We're going to modernize the scope of practice by empowering nurse practitioners and pharmacists and paramedics and others to do what they're trained to do. Because we believe that when every professional can contribute at the highest level, patients get faster assessments and better coordinated care. That's putting patients first.

[11:45]

We'll be implementing policies that unlock capacity. That's so key, Mr. Deputy Speaker. We'll modernize the scope of practice and staffing models, streamline recruitment, advance EMS and laboratory technology to speed up results and reduce barriers to care. That's putting patients first.

What are some changes and improvements that are coming? We're going to expand nurse practitioner-led access province-wide. No limit to the number of contracts for nurse practitioners interested in delivering publicly funded primary care.

Secondly, build fully functioning nurse practitioner-led primary care teams. Pilot team-based models that allow nurse practitioners to hire registered nurses, licensed practical nurses, dieticians, occupational therapists, and allied health staff.

Train more nurse practitioners annually. It's another part of this plan. We're going to grow the nurse practitioner pipeline by adding 26 more training seats in Saskatchewan, increasing training capacity by 45 per cent — 13 seats at the University of Saskatchewan, 13 seats combined at the University of Regina and Saskatchewan Polytechnic programs. That's putting patients first.

Let's talk about more changes coming with regard to recruitment. And aside from some of these facts, Mr. Deputy Speaker, since 2023, 2,710 nursing graduates hired in province and out of province. A net gain of 2,846 registered nurses since 2020. A net gain of 520 physicians since 2020, including this: 223 family physicians, 297 more licensed specialists, and 148 of those specialists added in 2024-2025 alone.

This plan is going to streamline health care recruitment. This plan is going to expand the rural physician incentive program and the rural and remote recruitment incentive. This plan is going to add 20 more medical training seats at the College of Medicine, increasing our seats from 108 to 128. This plan will also prioritize Saskatchewan students for medical school admissions with a target of 95 per cent — 95 per cent, Mr. Deputy Speaker. That's amazing. That's putting our students first, which will in turn put our patients first.

So, Mr. Deputy Speaker, there's so much in this plan that is exceptional, so much in this plan that when fully implemented will make a huge difference in the lives of not only our health care workers but in the lives of those who call Saskatchewan home. This truly is a plan that puts patients first. And I'm excited to watch and see what will be accomplished as we double down on our commitment to accelerate the pace of change,

improvement, and innovation.

Mr. Deputy Speaker, I just want to back up for a minute to what I started talking about. When you take a look at it, this government at the right time opened the right trade offices in the right places. And, Mr. Deputy Speaker, that had a monumental impact on this province's economy, which in turn has a great impact for the people of this province with regard to reinvesting those monies in health care and into education and into so much more.

Mr. Deputy Speaker, I believe with all my heart our Premier, our ministers of Health are about to do the same thing again, but this time with regard to health care. Because this plan is going to deliver the right care, at the right time, at the right place, and it's going to be a game changer.

I'm going to close here, Mr. Deputy Speaker, with the words of our Premier: "The patients-first health care plan is not a declaration the challenge has been solved. It's a commitment to accelerate the pace of change, improvement, and innovation." I love that statement: acknowledging we're not there yet, but also acknowledging we're going to step it up. We're going to have this commitment to accelerate the pace of change, improvement, and innovation for the great people of this province.

So, Mr. Deputy Speaker, I will support the motion brought forward by the member from Moosomin-Montmartre:

> That this Assembly commends the government's comprehensive patient-first initiative to improve access to health care for all Saskatchewan residents; and further,
>
> This Assembly supports expanding access to virtual care, increasing the number of urgent care centres [which are so vital when we hear the numbers that our minister just spoke of — 65,000 patients getting care in the urgent care centre in Regina], increasing the scope of practice for providers, and continuing [continuing] to recruit, train, and increase the number of doctors, nurses, and nurse practitioners in this province.

Mr. Deputy Speaker, I would close with this: God bless Saskatchewan, God bless you, and may God bless all of our current and future health care workers in this province who do such an amazing job of caring for the great people of this province. Thank you very much, Mr. Deputy Speaker.

Deputy Speaker B. McLeod: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — Thank you, Mr. Speaker. It's a pleasure to be on my feet. And you know, we're talking health care. And I know that the member prior to me wandered quite a bit there at the beginning of his speech, but I think the reality of health care in Saskatchewan today is that it's worse now than it has ever been. And when we look at the experiences of patients, when we talk to people in this province, I know that that statement is true.

I do know that there are amazing health care workers in this province who go to work every day and do everything they can for their patients, but the thing that they lack is a government with an actual plan to improve health care. I think of the ER [emergency room] nurses that we met with a month or two ago from St. Paul's Hospital, and I think of the one nurse. She's been a nurse for two years. You know what she said to us, Mr. Deputy Speaker? She said, I want to go home at the end of my shift and not hate my job. This is someone who's been a nurse, who wanted to help, who wants to help people, who wants to help Saskatchewan people. And after two years in the emergency room at St. Paul's Hospital, she's saying, I want to go home without hating my job.

There was a letter from 450 health care workers from RUH [Royal University Hospital] crying for help, asking to meet with this government, with the Health ministers, to find a solution. And yet today in question period we heard about our colleague, the member from Regina Rochdale, whose mom just had a stroke, and her mom has laid on a stretcher in the hallway in RUH for four days now.

This is not a big pat on the back for government here. This has been going since I've been an MLA, elected in August of 2023. These issues were front and centre that fall sitting — the issues of overcapacity at St. Paul's, at RUH, at Regina Pasqua, at Regina General. I've been an MLA for three years now. Where are the solutions?

But they've got a plan, Mr. Speaker. We heard that from the last speaker there. They've got a plan. And I'm not sure if he's referencing the 2009 plan or if he's referencing the 2012 plan or if he's referencing the 2015 plan or the 2026 plan. I'm not sure which one he was referencing because when he talked about like the trade offices and the work that they have and how they're there now, why didn't they follow the plan they had in 2009? Why don't they have zero wait times in Saskatchewan hospitals as of 2017? Why are there people lying on a stretcher for four days in RUH right now? . . . "You tell me" — that's what I heard from the other side. That's good.

I want to know why in this plan we don't have a deal for health care workers when we go into rooms and talk to health care workers and we hear them hanging on by a thread, that they don't have the emotional capacity to show up for another shift, but somehow they do. And sometimes they don't. How many nurses and doctors, continuing care aides, lab techs have walked away from health care in the last four years because they don't feel respected?

How come there are health care professionals in this province who have gone three years without a contract? Why are there health care workers in this province who have gone four years without a pay raise? We brought up the case of Olivia yesterday, a continuing care aide in Saskatoon. In her 15-year career she has gotten a $3-an-hour wage increase — in 15 years. These are health care workers that then go to the food bank on their way home from a shift.

The motion here that we're talking about, they talk about urgent care centres, and they're excited about the expansion of urgent care centres. And again, as we brought up in question period today, they can't keep the urgent care centre open 24-7 like they promised. So when is that promise going to come into effect? In the plan there aren't a lot of timelines or when these new solutions are coming. I don't know if Saskatchewan people believe them after having . . . This is the fourth edition of

their plan.

So again, the urgent care centre on many days won't take patients after 10 o'clock even though officially they're still open. They haven't closed officially, but they're telling people who come to the door, well we're not going to be able to see you today so you'll have to find care somewhere else. But we're going to put a second urgent care centre in Regina. We're going to put two in Saskatoon. We're going to add a whole bunch more. Who's staffing these urgent care centres?

I do want to say, as part of our health care consultation, we had the opportunity to tour the Virtual Health Hub in Saskatoon, led by Dr. Ivar Mendez, and that was a really exciting and cool opportunity, Mr. Speaker. And so I will give government credit for looking at virtual care and how it can be expanded and provide care for people in rural and remote communities. But the virtual care that they are working on and that they're presenting is very, very different from the virtual care that that government has implemented in rural hospitals, to prevent rural hospitals from being closed.

The other thing that I will agree with, with this plan and with this Premier, is that standing still is no longer an option. And I'm curious; I'm just fascinated that that quote is like on the first page of that health plan, that standing still is not an option. And it's like, what have these guys been doing for all this time, for the eight years that this Premier has been in office, for the 18 years that they've been in power?

I'll tell you, this team is not standing still. That's why we launched our big, bold health care consultation. That's why we've been out across the province, talking to every health care worker we can. That's why we've got our web portal, talking and hearing from patients, from community leaders, from unions, all the way across. We were in the Virtual Health Hub. We are talking to everyone, and the response to our team has been amazing.

There is hope. There are solutions in this province to stabilize and to fix health care, but this government doesn't seem willing to do it. Yes, they've got a plan, but they've had a plan since 2015, Mr. Speaker. They've had a plan since 2012. They've had a plan since 2009. And they've made these promises before, and I don't think Saskatchewan people are buying it this time either.

Deputy Speaker B. McLeod: — The 65-minute time period has expired, and the 10-minute question-and-answer period will begin. I recognize the member from Regina Elphinstone-Centre.

Meara Conway: — Thank you, Mr. Speaker. Although the Health minister did struggle a bit when he was asked what's new about this 2026 plan, he did talk about the expansion of nurse practitioners. I have a question for the member from Moosomin. Can he tell me whether the following quote is from the 2009 patient-first plan, the 2012 patient-first plan, 2015 patient-first plan, or 2026? "Nurse practitioners should be entrusted with the roles that are appropriate to their full scope of training."

Deputy Speaker B. McLeod: — I recognize the member from Moosomin-Montmartre.

Kevin Weedmark: — Thank you very much, Mr. Speaker, and thank you to the member opposite for the question. You know, nurse practitioners are a very important part of our health system, and they're going to be a much more important part going forward. And I just want to share a quote from the Saskatchewan Association of Nurse Practitioners about our new plan that was just released:

> What excites me most about today's announcement is the focus on collaborative, team-based, patient-centred care. From the nurse practitioner contract expansion to the emphasis on nurse practitioners as primary care providers to the use of nurse practitioners in long-term care, ER, and urgent care, it is inspiring to see the full potential and impact of nurse practitioners being supported by the province. This direct support creates more opportunities for an RN to train as a nurse practitioner while lessening the financial burden. In turn the development of a Saskatchewan-based workforce with the return-of-service agreements, built stability within the provincial health care system.

And, Mr. Speaker, I'm proud of that. Thank you.

[12:00]

Deputy Speaker B. McLeod: — I recognize the member from Lloydminster.

Colleen Young: — Mr. Deputy Speaker, to the member from Saskatoon Churchill-Wildwood: do you agree — and the rest of your colleagues, for that matter — agree with your colleague from Elphinstone-Centre that young people should be told not to go into health care in Saskatchewan? Is this part of the opposition's big, bold plan?

Deputy Speaker B. McLeod: — I recognize the member from Saskatoon Churchill-Wildwood.

Keith Jorgenson: — Oh, Mr. Deputy Speaker, you know, each one, each one of these patient-first plans talks about retention and recruitment. And somehow we continue to bleed hundreds and hundreds of valued health care professionals because this government doesn't value them, doesn't listen to them. Again, 451 people at RUH sent an open letter to this government, and do you know how many times this government went and met with them? Zero. So that's on them, not on us.

Deputy Speaker B. McLeod: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — Thank you, Mr. Speaker. To the member from White City-Qu'Appelle: can you tell the Assembly, when exactly did your government give up on the dream of keeping urgent care centres open 24-7?

Deputy Speaker B. McLeod: — I recognize the member from White City-Qu'Appelle.

Brad Crassweller: — Thank you. Thank you for the question. Mr. Deputy Speaker, the plan is this. We're going to continue to invest in people, invest in our facilities, invest in our training, and we'll keep improving our policies and our practices . . . I'm trying to answer you. We'll continue improving our policies and our practices that we can deliver to the people of Saskatchewan. And we can only do that because of the strength of our economy.

But thank you.

Deputy Speaker B. McLeod: — I recognize the member from Lloydminster.

Colleen Young: — Once again to the member from Saskatoon Churchill-Wildwood: did the NDP opposition choose to use an American health care consulting group? Is it because no one in Saskatchewan can take the NDP seriously, so they have to resort to using American consultants?

Deputy Speaker B. McLeod: — I recognize the member from Saskatoon Churchill-Wildwood.

Keith Jorgenson: — Mr. Deputy Speaker, you know what the people of Saskatchewan can't take seriously? A government that brings out a recycled report, hastily changes the name, the date on the front of it, and doesn't even bother to spell-check it for punctuation errors, and then tries to pass it off as fresh. That's what we can't take seriously.

And I'm glad you asked about the person that we've hired. She is a long-time resident of the city of Regina. Somebody who is an educator from here. And all of a sudden, because of the place that somebody's born, they're not allowed to have input into the future of our health care system? Shame on that government.

Deputy Speaker B. McLeod: — I recognize the member from Regina Elphinstone-Centre.

Meara Conway: — My question is for the member from White City-Qu'Appelle. Does she agree with her colleague that workers like the one who commented on a recent video about a CCA that had gotten a raise in three years, who said:

> I worked in health care for three months short of 30 years. I love my job but I left because the workload is brutal. Now when young people come to me and ask if they should go in for this, I do not encourage them.

Does she agree with her colleague that front-line health care workers like this should not be taken seriously?

Deputy Speaker B. McLeod: — I recognize the member from White City-Qu'Appelle.

Brad Crassweller: — I have to admit, I'm a little confused right now, Mr. Deputy Speaker. I would like to say this. The member from White City-Qu'Appelle would like to acknowledge that the patients-first health care plan is not a declaration that the challenge has been solved. It's a commitment to accelerate the pace of change, improvement, and innovation. And our Minister of Health and his team have been making changes, and they've been making improvements and being very innovative while they do it. And that's what they're going to continue to do. Thank you.

Deputy Speaker B. McLeod: — I recognize the member from Cannington.

Daryl Harrison: — Thank you, Mr. Deputy Speaker. To the members from Saskatoon Churchill-Wildwood: how is Saskatchewan supposed to take the NDP opposition seriously when they have four different Health critics, yet they have come up with exactly zero ideas for health care and they must resort to talking to American health care consultants?

Deputy Speaker B. McLeod: — I recognize the member from Saskatoon Churchill-Wildwood, and I remind all members that we'll listen as the answers are given.

Keith Jorgenson: — Now thank you so much, Mr. Deputy Speaker. I'm just feeling the love from the members opposite here. You know what I and the people of Saskatchewan can't take seriously? A government and a Premier who, after 18 years in power, has the audacity to bring out a report and preface it by saying that we want to start a conversation with the people of Saskatchewan. Really? After 18 years?

And again, we're talking about somebody who might have been born in the United States but has lived for a very, very long period of time right here in the city of Regina, is an educator who's well known, and an expert in this. And all of a sudden she's not allowed to provide input or to talk about the future of health care because of her passport? Really? Really? Is that the best that you can come up with?

Deputy Speaker B. McLeod: — I recognize the member from Regina Walsh Acres.

Jared Clarke: — Mr. Speaker, I would take Dr. Cheryl Camillo as an expert on our team every day of the week over that Minister of Health and over that Minister of Rural and Remote Health and any member on that side of the House. She is a professional and has been doing work in health policy for a long time, Mr. Speaker.

But to the member for White City-Qu'Appelle: at what point did the government think that standing still was no longer an option when it came to the crumbling health care system?

Deputy Speaker B. McLeod: — I recognize the member from White City-Qu'Appelle.

Brad Crassweller: — Once again I want to thank the member opposite for the question. We're putting patients first. We're consulting with patients, with health care facilities, health care workers. And I will stand behind these two ministers all day long because they are some of the best.

And one thing is a 100 per cent guarantee: we're not consulting with anybody from the USA [United States of America].

Deputy Speaker B. McLeod: — I recognize the member from Yorkton.

David Chan: — To the member from Saskatoon Churchill-Wildwood: what do you have to say to rural and remote communities after your party has continuously attempted to block and ban virtual physicians and virtual health care options which would benefit these rural, remote, and northern communities so greatly?

Deputy Speaker B. McLeod: — I recognize the member from Saskatoon Churchill-Wildwood.

Keith Jorgenson: — Mr. Speaker, in this Chamber today and

dozens of times in the media, I repeatedly said the same thing: our caucus supports an appropriate use of virtual care. There's a place and time for it. Delivering a baby is not it.

And what you guys don't want to talk . . . Oh, well it's good that the Premier decided to heckle. You know, again we're using the example of the community of Davidson, where virtual care, when there's no physician in that hospital, it forces ambulances to drive to Regina and leave the entire highway . . .

Deputy Speaker B. McLeod: — The 75-minute debate has expired. I recognize the member from Regina South Albert.

Aleana Young: — Thank you very much, Mr. Deputy Speaker. I seek leave to make an introduction.

Deputy Speaker B. McLeod: — Please, I recognize the member.

INTRODUCTION OF GUESTS

Aleana Young: — Thank you very much, Mr. Deputy Speaker. To you and through you to all members, I would like to welcome a guest who has joined us here in the gallery — a close friend of mine and many members in this Assembly — Deena Kapacila.

Deena is originally from Prince Albert and, gosh, I don't know how long I've known Deena — a long time. She's a close friend, Mr. Speaker, and she was integral in helping me in the lead-up to the 2020 election campaign, door knocking with a very pregnant lady, letting me run canvasses out of her backyard during the pandemic, and allowing me to play with her two beautiful pug children, Mr. Speaker, Oshi and Bower.

Deena tragically left Saskatchewan to work in Alberta and then Vancouver, Mr. Speaker, but I have glorious news for this Assembly and for this government who's overseen the first population decline in a generation. This bright, brilliant young person is looking to hopefully move back to Saskatchewan to continue her strong advocacy and work in the labour sector. And I desperately hope that can come true, Mr. Speaker. She's a bright light in Canadian politics and certainly someone we hope to have back here in Saskatchewan.

It's my pleasure and my privilege to welcome my good friend, Deena, to this — hopefully once again soon — her Legislative Assembly.

PRIVATE MEMBERS' PUBLIC BILLS AND ORDERS

ADJOURNED DEBATES

SECOND READINGS

Bill No. 606

[The Assembly resumed the adjourned debate on the proposed motion by Jared Clarke that **Bill No. 606 — *The Provincial Health Authority (ER Closure right-to-know) Amendment Act*** be now read a second time.]

Deputy Speaker B. McLeod: — I recognize the member from Saskatoon University-Sutherland.

Tajinder Grewal: — Thank you, Mr. Deputy Speaker. It's my pleasure to be on my feet to enter the debate on Bill No. 606, *The Provincial Health Authority (ER Closure right-to-know) Amendment Act*. I will start by thanking my friend and colleague, the member from Regina Walsh Acres, for introducing this important legislation.

This is a very simple, straightforward, and common-sense bill. This bill is simply asking the government to change the legislation so that Saskatchewan Health Authority publicly discloses when a rural hospital or any other health care facility is closed.

When I was preparing for my remarks, my first thought was, why we are debating on this? Isn't it simple? Mr. Speaker, I will confess that I have many conservative friends that've been in agriculture for my whole life. I know that they listen to me whatever I say. Hey, conservative friends, I'm talking about common sense today.

Let's talk about the problem first. There's an increase of 800 per cent in hospital closures during this Premier's time in office. We do have data on how many rural hospitals or health care facilities have closed during the last six months, last one year or two years. But I don't want to bore you about that. I will talk about common sense today.

Just imagine during a critical situation, you are in pain. And you drive for an hour or two going to a health care facility. And then you see a piece of paper and see the facility is closed. How you will feel? And then you drive another hour or two, go to the next health care facility, and you again see a piece of paper saying the facility is closed. How will you feel?

This could be you, your parents, or your kids. I'm not talking about hypothetical situations. This is happening here in Saskatchewan now.

The member from Regina Walsh Acres is proposing a simple solution. If any rural hospital or health care facility is closed, put that information on a website or app. Then the public can see which facility is closed, which one is open. This is not only important for the patients but also for the emergency medical staff and other health care professionals who are part of the emergency response team.

It's very easy to put the information on the website or the app. When a person is basically first printing the piece of paper then putting it on the facility, I think it's much easier and much faster and much simpler to put that information on the website.

When I was going through the North, I was shocked to know that SHA was publicly, was publicly disclosing the closure of hospitals, and then they stopped doing this. My question is why? Why was this stopped? Who is responsible for this? The Minister of Health, the Minister of Rural and Remote Health, or the Premier? Who is responsible for this change in policy? That's my question.

I saw another proposal that SHA will publicly disclose at 4 p.m. which facilities are closed or open. Really? Does that make any sense?

[12:15]

Just imagine the Highway Hotline updating their website every day at 4 p.m. The snowstorm came at 6 a.m. in the morning, and Highway Hotline is updating that information at 4 p.m. And then you know which highway is closed, which highway is open, safe to drive. This doesn't make any sense.

The situation is very similar here, Mr. Deputy Speaker. If you or your loved ones are in critical condition, you want to know which health care facility is open and which one is closed. The timing is critical.

I can give two examples, Mr. Deputy Speaker. My friend, my classmate, is a very healthy style person. He does everything by the book for a healthy lifestyle — walking, go to gym, healthy eating. And one day he was on his walk and he felt weird on his left arm. He came home, talked to his wife. His wife took him to the hospital emergency room. And they found out he was going through a heart attack, and later they found out that his three arteries were blocked. He was operated on immediately. Now it's more than four years he's living a normal life. The message here — help on time. Timely help.

Second example, Mr. Deputy Speaker. My friend, he's running a heating and cooling business in Saskatoon. And one day he was installing a furnace in somebody's house; then he start feeling weird. And he talked to the owner that I'm having this kind of symptoms. And luckily that owner of the house was familiar with the health conditions, heart conditions. He immediately took him to the hospital, and he was going through a heart attack. He was operated on right away, and now it's more than 10 years he's living a healthy, normal life. Once again, the message is that timely help.

Mr. Deputy Speaker, I can share many incidents where people didn't get the timely help, and they died. All I want to say, this is a matter of life or death. We must take this very, very seriously. And the majority of the members on the other side, on the opposite side, they're representing rural Saskatchewan. I'm not sure why they are not taking this very seriously. Maybe they are not taking care of their voters, or they're taking their voters for granted.

This whole week we are listening about patients first, and we're hearing from the government that they are very excited about this whole plan, patients first. And this bill is all about patients first. I'm not sure why we can't pass this bill right now.

I want to know, I want to challenge the members from the opposite if anybody can tell me or us, what's the downside of passing this bill? What's the harm of passing this bill? If not, let's do it. I hope that common sense prevails. All the members should vote in favour of this bill, and this legislation will save lives.

And with that, Mr. Deputy Speaker, I move to adjourn the debate on Bill No. 606, *The Provincial Health Authority (ER Closure right-to-know) Amendment Act*. Thank you.

Deputy Speaker B. McLeod: — The member has moved to adjourn debate. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

Deputy Speaker B. McLeod: — Carried. I recognize the Government Deputy House Leader.

Hon. Lori Carr: — Thank you, Mr. Deputy Speaker. I move that this House do now adjourn.

Deputy Speaker B. McLeod: — It has been moved that this Assembly do now adjourn. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

Deputy Speaker B. McLeod: — Carried. This Assembly now stands adjourned until Monday, March the 16th at 1:30 p.m.

[The Assembly adjourned at 12:19.]

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Minister of Intergovernmental Affairs

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