

EVENING SITTING

COMMITTEE OF FINANCE

Consolidated Fund Budgetary Expenditure
Health

Ordinary Expenditure — Vote 32

Item 1 (continued)

Ms. Atkinson: — Thank you very much, Mr. Chairperson. Mr. Chairperson, I have a question to the Minister of Health, and it has to do with his budget document. Page 47, item no. 19, indicates that there is a payment to the Saskatchewan Property Management Corporation. In this case, Mr. Minister, could you give me, in as much detail as you possibly can, exactly what are we paying the Saskatchewan Property Management Corporation for and what is the purpose of this item?

Hon. Mr. McLeod: — The SPMC (Saskatchewan Property Management Corporation) money, the property management corporation money is for, almost exclusively, office space or the space that's occupied by the Department of Health buildings or offices throughout the province. A very small portion of that is for mail services, courier services, that kind of thing that are provided by property management corporation throughout government.

Ms. Atkinson: — So we are paying money over to the Saskatchewan Property Management Corporation for the rental of space from private companies or from government office buildings. Is that correct, Mr. Minister?

Hon. Mr. McLeod: — That's essentially correct; that's right.

Ms. Atkinson: — And on page 48, item number 24, I note once again grants to hospitals. There's an item called repayment of principal and interest on capital loans from the Saskatchewan Property Management Corporation. Once again we have an item here for \$4,575,600. Can you advise the House and the people of Saskatchewan what exactly you are paying for to the property management corporation?

Hon. Mr. McLeod: — The property management corporation has been introduced as the vehicle through which the hospitals of the province will finance their construction projects. So, in other words, it's almost like a banker role. The property management corporation plays that role with the hospitals, and so these payments that are to the property management corporation are the payments for the, you know, the annual payment toward the construction costs for the year in question.

Ms. Atkinson: — Mr. Minister, can you give us a copy of what facilities are going to be constructed this year in order that we may know what this \$4.5 million is being used to pay?

Hon. Mr. McLeod: — The \$4 million, just to clarify and I think it's important that you . . . What you will need in order to find out where that \$4 million is, is a list of

projects which are complete for which these are the payments, sort of the amortization payments, the annual payments, which I am willing to provide to you so you will see where the \$4 million is gone and for which projects. Is that what you're looking for? Okay, I'll undertake to provide that to you. I'm not sure when, but we'll get it to you as soon as we can.

Ms. Atkinson: — Mr. Minister, I'd appreciate if we could have it within the next couple of days. I don't think it would be that difficult to get it. And then I take it then that we're not really paying for initial construction costs. You led me to believe that we were, that we're paying for payments over a period of time so that these loans or debentures or whatever can be repaid.

On page 49, once again we have another grant to special care facilities for the repayment of principal and interest on capital loans from the Saskatchewan Property Management Corporation. The figure here is \$409,500 — page 49. Could you tell the House what this particular payment to the Saskatchewan property Management Corporation is for, Mr. Minister?

Hon. Mr. McLeod: — Exactly the same principle what's in this case relating to special care facilities. And to anticipate your next question, I can provide a similar list to which these dollars apply.

Ms. Atkinson: — Mr. Minister, I gather that the people of Saskatchewan were paying out these kinds of payments last year, only last year this particular budget allocation was located under Supply and Services. Am I correct?

Hon. Mr. McLeod: — Just to explain how the system worked prior to the advent of the property management corporation, if I understand your question, I think that's what you want.

In the past, prior to this property management corporation coming into place, capital construction of these kinds of facilities, hospitals or special care home facilities would have been straight grants in the Department of Health in large lumps during the period of time of the construction. That was the case. The way it now works for these, plus with the property management corporation, and as you will know it applies in health facilities, it applies in education facilities and some others, the financing is done through that corporation. The payments that you see in the Health budget as it relates to health facilities, both special care homes and hospitals, is paid on this basis — on an amortized basis — so that you have an annual payment spread out over a period of time. I don't know if that explains it, but I think it does.

Ms. Atkinson: — Well thank you, Mr. Minister. Just what I was trying to point out here is that last year this particular item was included in the Supply and Services estimates. This year you have included this item under the Department of Health, and then you argue that Health has received a budgetary increase over last year.

If that were, in fact, the case, Mr. Minister, we would have had to have had these three particular items included in

the estimates for Health in the year 1986-87, and you didn't do that, Mr. Minister. So when you argue that there's been a \$36 million increase, that's not true, Mr. Minister. Not true at all, because these three items that total some \$16 million were not included in last year's budgetary estimates; they were included in this year's budgetary estimates. So really what we have here is some more jiggy-pokery with the books.

Now I want you now to turn to page 126. Page 126 is for the Saskatchewan Property Management Corporation, and here, Mr. Minister, it outlines the 1987-88 capital expenditures by sector, and one of these sectors is Health. The budgetary item this year for Health is \$66,527,000. The year before, Mr. Minister, in the year 1986-87, your department claims to have spent, or your government claims to have spent \$75,440,000. There's been a cut in this capital expenditure segment from last year versus this year, and I'm wondering if you can explain to me why the reduction.

Hon. Mr. McLeod: — You're referring now to blue book, page 126, Saskatchewan Property Management Corporation? Okay, just for clarification.

What the reflection there is the differentiation between last year and this year. It's a simple thing to explain in a sense that there's . . . This will always relate to the requirement of the cash flow, especially under the new system. This will relate to the cash flow requirement for capital construction under the property management corporation system. That's what we expect this year to spend and that's what will be the requirement according to the capital projects which are under way in the province now. I don't know what more I can say on that except that just tell you that the cash flow will vary from year to year. It won't be the same each year.

(1915)

Ms. Atkinson: — Well, Mr. Minister, we have heard from a great number of communities about your promises prior to the 1986 election where you promised a nursing home here or hospital there. They thought they had some sort of arrangement with the Department of Health. And lo and behold, after the provincial election, after you find out that you've overestimated your deficit for the year 1986-87 by some \$800 million, that they no longer will have funds from the Department of Health to go ahead with some of their capital projects, even when communities have gone out and raised the money that was necessary in order to come up with their share.

Now, Mr. Minister, you say in your budget book that in 1986-87, you spent \$75,400,000. Was that figure actually spent, Mr. Minister?

Hon. Mr. McLeod: — I'll give you a . . . Last year we spent 70,947,845 of what was estimated. And just let me give you some examples of how this works. And I think you know them, but I'll just reiterate this. It will depend on the stages of construction that any given project is at in terms of the cash flow and when it's required, and whether it's in this year or last year or whatever.

A couple of examples: Regina hospitals, which say, I'll

use in the aggregate, but for the most part this will deal with the General Hospital because that's where the greatest construction program is. Last year the estimated expenditure at Regina hospitals was 11.5 million. The actual expenditure was 15,841,180 and this year's estimate is 7.215 million. And that will vary, as I've said, with the stages of construction and how the construction rolls along.

An example, in your own city of Saskatoon, the estimated last year was — this is for the Saskatoon Cancer Clinic — estimated last year was 2.5 million. The actual was 6,667,113. This year, given the way in which the project is, we expect that it will be 4,416,157 — fairly precise numbers. Wascana Rehab is a similar cash flow kind of a change. Last year it was estimated to be 6 million 7. In fact, it was 3 million 779. This year it's expected that it will be 12,821 million. So they vary to a great degree, depending . . . in the same project.

Ms. Atkinson: — So, Mr. Minister, will you send over that document so that we can see that that amount, in fact, was spent? Will you agree to do that?

Mr. Minister, I recall in the spring of 1985 when your government brought down its budget, if I call recall, Mr. Andrew called it the most intelligent budget ever, a budget in which he raised . . .

Mr. Chairman: — Order. Order, please. I would remind the hon. member to not mention members' names directly but by their position please.

Ms. Atkinson: — My apologies, Mr. Chairperson. I agree, I'm not supposed to use a person's last name.

But anyway, in the spring of 1985, the minister of Finance, the member from Kindersley, brought down a budget and he called it the most intelligent budget ever. It was a budget where he raised a lot of taxes. We all recall the flat tax. We all recall the used-car tax and a number of other taxes.

But also in that budget there was a commitment, Mr. Chairperson, to the introduction of a health capital fund. A capital fund of some \$300 million that was going to be given to the people of Saskatchewan over a five-year period. This was one of the four corner-stones, the Partnership for Progress, if you will.

Now I recall, Mr. Minister, that there was a great deal of hoopla and fanfare and there was even a little paper put together, *Partnership for Progress*, working together to build a stronger tomorrow. And it talked about health care and how much money we were going to spend on health care.

When that health capital fund was announced that year, there was to be a five-year fund of some \$300 million. Can you tell us, Mr. Minister, what has happened to that health capital fund of some \$300 million, and what did we spend the money on, Mr. Minister?

Hon. Mr. McLeod: — Mr. Chairman, I apologize to the House for taking some time to put this together but I want the answer to be as clear as I can make it. The question as I

recall from some time was to do with the announcement of what we've called the Partnership for Progress sort of program which went forward and was projected an expenditure of \$300 million for a five-year program of health care facilities.

I would just say to the hon. member, I'll just give you some numbers here. Now in '85-86, the first year of that, there was . . . these are actual numbers in '85-86 as it relates to the hospital construction side, 34,758,378. In '86-87, 69,700,000. In '87-88, the year which we are reviewing here, is an estimated number, but I would say to the House, fairly accurate, 69,188,114, that's in the hospital sector.

In the long-term care sector, the number averages about 5 million per year. And I will undertake to provide the member with actuals on that, and the people tell me they don't have the actuals for the years, but it's about 5 million a year, which put in those three years, about \$15 million. And I want to emphasize that on the long-term care side, that's an estimate by me now, which is fairly accurate, and we'll have that number for you.

So the total of that is, in the first three years of that program, is, I believe, about 174 million — about \$174 million, the number that I gave you as it relates to the hospital sector, and add to that 15 million, \$189 million . . . about \$190 million in those first three years.

Ms. Atkinson: — Mr. Minister, in your health capital fund budgeted for 1985-86, there was a budget allocation of \$36.9 million. But when you check your own Public Accounts, your own Public Accounts for the health capital fund, Mr. Minister, only \$6.6 million was spent. Not \$34 million on hospitals, not \$5 million on nursing homes, but \$6.6 million. That was in your own Public Accounts. I would ask you just to check your figures and check with your officials again to make sure that the information that you are giving to the people of this province is accurate.

(1930)

Hon. Mr. McLeod: — If the member would turn . . . Have you got a copy of the Health annual report ending March 31, '86? The annual report of the department? I would refer the member to inside the front cover on that table, on the inside of the front cover which is the "Table 1, Saskatchewan Health Services Expenditures 1984-85 and 1985-86 by Saskatchewan Health, Health Commission, and the Cancer Foundation." If you look at the bottom row of figures under B, capital, where it says, \$41.050 million, that's the 34 million that I referred to earlier plus whatever the amount . . . And I don't know what else might be in there, but certainly the amount that was there for special care homes, which I said I would give you an accurate figure of in a while. Okay? It's very close to that unless there is . . . And I'll check with these people to see if there is anything else that should be included in that, but that's the number.

The other thing is that the \$34 million which I gave you, 34,758,378 is the amount of public money expended, taxpayers' dollars expended on health care facilities in the '85-86 year. There were some of those dollars, on

some of the larger projects, were converted to the new system, to the new system of loan agreements with the property management corporation, but it does not diminish the fact that the dollars were in fact spent on those health care facilities. Okay? And that was the transitional year. That's what I'm saying, I think '86-87 was transitional in some of the larger projects which flow through a period of some . . . of several fiscal years. Some of their projects were converted to loan agreements over the life of the project.

Ms. Atkinson: — Well, Mr. Minister, I have *Public Accounts* here for 1985-86. This is *Public Accounts* for 1985-86, and if you turn to page 32 of *Public Accounts*, and we look at the health capital fund, Mr. Minister, the original estimate was \$36.9 million. There was a special warrant, Mr. Minister, of \$4.15 million. Then there was the revised estimate, Mr. Minister, to \$41.05 million. And then, Mr. Minister, there comes an item called expenditure. And expenditure, Mr. Minister, was \$6,593,088. Then there is another item, Mr. Minister, which says underexpended, \$34,456,912.

Now, Mr. Minister, something's wrong here. We have a revised estimate in this *Public Accounts* that appears in your department's annual report, and the revised estimate is \$41.050 million. But if you look at what actually happened, that wasn't spent. Only \$6,593,088 was spent.

So, Mr. Minister, your annual report obviously is wrong. Obviously it's wrong. *Public Accounts*, Mr. Minister, is the record of what actually was spent in any fiscal year and we have it right here. So I would ask you to once again check with your officials to see what, in fact, was spent. And do we have another example of someone trying to cook the books?

Hon. Mr. McLeod: — The discrepancy between the numbers that the member speaks of . . . And I'll just go through this explanation once again. I had said that some of the money which was expended on capital projects in 1985-86 was converted to loans under the new system, which I described a few moments ago. And that's the difference between, I believe, the 6 million and some-odd dollars that you talked about there and the 34 million which I outlined as what was spent on health facilities.

I refer you back to the Health annual report, where, in the table that I referred you to earlier, under the notes below capital, on the same page that I referred to you earlier — number five, subsection 5 or whatever we'll call it, it makes the notation. It includes: construction projects funded by Saskatchewan Health and project loans advanced through the Saskatchewan Property Management Corporation. So the payments over . . . of the amount between 6 million and 34 million would have been paid by the property management corporation in that year, and then subsequently converted to the loan structure which is now in place for all projects.

Ms. Atkinson: — Well, Mr. Minister, I mean this is another example of trying to figure out what exactly you're doing with our books. This is the record of what was spent. You set up a health capital fund. Your

government set up a health capital fund which said, Mr. Minister, that you were going to spend \$300 million on capital construction of health facilities over a five-year period.

One would expect, Mr. Minister, in the year in which it was announced, and that was 1985-86, that the health capital fund would appear in *Public Accounts* and appear in your annual report, and we wouldn't start messing around with the Saskatchewan Property Management Corporation.

Health capital fund, Mr. Minister, was a creation of your government. It was a creation for a five-year program, Mr. Minister. It only appeared in your budget estimates for one year. It only appeared in the *Public Accounts* of this province for one year and that was the year of 1985-86.

Mr. Minister, as far as I'm concerned, and until you can show me otherwise, you spent \$6.6 million on the health capital fund in 1985-86 and then the fund disappeared, even though there was so much hoopla about how you were going to spend \$300 million on capital projects over the next five years.

Then, Mr. Minister, you budgeted in 1986-87, which was an election year, Mr. Minister, \$75.4 million, and you spent \$71 million. Mr. Minister — another shortfall of some \$4 million. You've estimated in 1987-88 to spend \$66.5 million. Mr. Minister, that's a total of \$143.5 million the way I do figures and the way I'd balance books — \$143.5 million. Five-year program — we're now getting well into three years of that program, and, in fact, you haven't even spent half of that money.

So this is another example of how you create these funds and then you simply . . . Somehow they magically disappear, Mr. Minister, they just disappear. You say you're spending all of this money but there's nothing to show that you are, Mr. Minister.

Some Hon. Members: Hear, hear!

Ms. Atkinson: — It was only two years ago, Mr. Minister, that you put together this health capital fund. It was to be a five-year program. Are you prepared to state here today in this legislature that you will keep that promise of \$300 million over the next five years if you consider those five years to be '85-86 and onwards, Mr. Minister? Will you keep your promise to spend \$300 million on capital projects for health facilities in this province?

Hon. Mr. McLeod: — Just a couple of points, because I want to clarify well, and frankly I understand what you're saying as it relates to the way, because of this transition to property management corporation. But regardless of your resistance to change that this system will bring about, you will like . . . I believe that, that you as a legislator and all of us, once the change is there, you'll like the results of the change.

The people in the hospital sector, the people in the school sector like the results of that change, while the change itself and the transition during that change is somewhat difficult. And I recognize what you're doing because I have sat in an opposition bench and tried to get all of

these details in this kind of a circumstance before.

But I will say to the member to go back to the question as it relates to the *Public Accounts* documents, and on page whatever it is, 32, under the subvote 62 — are you following me there now? — under subvote 62, under the various categories, one to seven . . . (inaudible interjection) . . . Okay. What I will undertake to do to show you the expenditures that have been made under those categories, and where they've been made, I will provide you with a list of those expenditures so that they will show that they do add up to the amount that I had said before, the — what is it? — 41 million or whatever. Okay? So I'll undertake to provide you with that list, which our people will undertake to pull together, and make sure that you have that list so you can see where it comes from.

But I just want to reiterate again, the numbers and the discrepancy in the number is that some of that money came from the property management corporation in the form of a conversion to a loan agreements by the various hospitals or facilities, boards, and that you'll see that the fact is and the bottom line of all of this is that the public or the taxpayer of Saskatchewan, whose dollars we're here to scrutinize and so on, were spent on health care facilities to the level which I have outlined.

Ms. Atkinson: — Well, Mr. Minister, you know all I can go on is *Public Accounts* for 1985-86. It was your government that created the health capital fund, and you just finished telling us a few minutes ago that you had spent some 36 or \$41 million in that year. And, Mr. Minister, it's true that there was an estimate that your government would spend some \$41 million in that year and that is provided under the health capital fund in *Public Accounts*, which is the real document of what you spent in that fiscal year. And, Mr. Minister, it says expenditure, and it says, Mr. Minister, that you only spent \$6.5 million — that's all your government spent.

So all I'm telling you, Mr. Minister, is that this health capital fund that your government created was a phoney fund — phoney. It was to spend some \$300 million over the next five years, and it was released with a great deal of fanfare. In fact, the former minister of Health even got it into the budget document, this health capital fund. There was a lot of money spent on a flashy little paper that was presented to the people of this province showing how much money you people were going to spend on health care facilities. It was all smoke and mirrors; it was all fluff; and it really didn't get spent.

And I want to talk about another little fund that you created, and it's called the patient care fund. And that little fund, Mr. Minister, was announced in February of 1986 by the former minister of Health, the member from Wolseley, and he announced a new patient care fund of some \$100 million, and it too was supposed to be a five-year fund. He even got it mentioned again in the spring budget. He got it mentioned, another \$100 million for a patient care fund. I would be interested in knowing, Mr. Minister, what happened to that money. What have you done with it, and where did it go?

Hon. Mr. McLeod: — Okay. I'll come to the patient care fund in a moment, but I just want to . . . The member said

earlier, all I can refer to is the *Public Accounts*, and I went through . . . What I said is, I understand there's a bit of a maze here and I wanted to walk through it because I think it's important that we both understand it, if we both want to, I will add. Okay. So there's the *Public Accounts* which you refer to.

Now annual report 1985-86, on page 37, I will refer the member to '85-86 annual report, page 37, there is an appendix B titled, "Provincial contributions for construction renovations '85-86," and there is a list of every payment for construction and renovation to every facility in this province that received those — '85-86. I'm sorry, the annual report, Saskatchewan Health, Saskatchewan Hospital Services Plan. Okay?

And there's a full page. There is another portion of a page with a total. The grand total for payments from April 1, '85 to March 31, '86 — 34,800,000 with the detailed expenditures at every hospital and every facility in the province. And I can go through the whole list and read it. Okay?

(1945)

So what I'm saying to you is, the *Public Accounts* will show the grants. The *Public Accounts*, by the nature of the *Public Accounts*, does not show the loans or the money that was converted to loans through the SPMC, does not show. That's by the nature of the way public accounts are. They're the grants. But the money is right here. The money is right here and it's in. So like I say, I'll walk you through that.

Let's go one step further. Saskatchewan Health annual report, 1986, year ending March 31, '86, Saskatchewan Health page 50, table 34, construction program as it relates to the continuing care branch which will be the long-term care facilities, and you will see them all listed there, the grant paid. And it totals 5,915,926.

And it starts with Arborfield, a new 36-bed facility; Big River, a new 30-bed facility; Dalmeny, nine new and 27 replacement beds; Duck Lake, new 30-bed facility; Eston, 22 replacement beds; Foam Lake, 10 new and two replacement beds; Goodsoil, 12-bed integrated; Lampman, 19-bed integrated facility; Lucky Lake, 12-bed integrated facility; Meadow Lake, 25 replacement beds; Melville, 30 new and two replacement beds; Nokomis, 12-bed integrated facility; Rabbit Lake, 12-bed integrated facility; Rose Valley, 12-bed integrated facility; Saltcoats, new 30-bed facility; Saskatoon Lutheran Sunset Home, two new and 78 replacement beds; final payments on prior years' projects, and so on.

So all I will say to the member, despite some of the things that you've been saying — and I once again recognize that it's difficult to go through this maze of the various places where these are reported — but they are there and they are there to be reported. And I will say to you that with the new system, the change that I referred to, which I don't think that we would be wise to resist the change itself . . . I understand the consternation as it relates to how the change takes place in a difficult transition time.

But that transition, and I think has been well explained in

some other departments and I think certainly — in fact I know this — that the people in the hospital sector, people in the various third-party bodies out there who use the property management corporation for their financing vehicle are very happy with the change. I'm sure that when times goes by, when we do this again next year, you will see that we won't have to go through the same maze to find out where things are reported.

Ms. Atkinson: — Well, Mr. Minister, thank you for that information. Mr. Minister, the information that you just gave me in terms of construction program 1985-86 for continuing care does show up in *Public Accounts*. The figures that you gave us do show up. The figures show that \$6,250,000 was spend and that is accurate. It was contained in your annual report and it's now contained in *Public Accounts*.

But, Mr. Minister, there's also a further grant that shows up — grants to hospitals and health centres — and that figure shows up as \$433,088. But then there was a budget allocation to the Saskatoon Cancer Clinic, and Saskatchewan rehab centre, and Saskatoon hospitals construction program, and a grant to University Hospital, and grants to the Regina hospital regeneration for the General Hospital and the Pasqua Hospital, and yes, there is an estimate for all of those things.

But, Mr. Minister, they don't show up in *Public Accounts*. They don't show up. You estimated \$41,050,000 to be spent in that health capital fund. The only thing that shows up, Mr. Minister, is \$6,250,000 for special care facilities and \$343,088 for grants to hospitals and health centres. All of the other things that you've just talked about don't show up. Why wouldn't they show up in *Public Accounts* which is the real record of what was spent in 1985-86?

Hon. Mr. McLeod: — The simple explanation for that is that as it relates to the continuing care side, that the transition for the continuing care facilities into the property management corporation did not take place at the same time. It is a very small amount of money compared to what takes place in a hospital sector as you will know just from looking at the numbers.

I want to thank you for reading the list of all of the good things that are happening to the various facilities in the province. I appreciate that, so will the people in those communities.

So I'll say that, you know, once again there's a little more I can add expect to say that the explanation, as I've said, is that continuing care was not into the property management corporation structure and the transition did not take place at the same time. It, as I understand it, is now involved with the property management corporation. That's right, I've had it confirmed. And as I've said before, I predict you will like the results of change while you may not like the change or the process of change. That's a human frailty, frankly.

Ms. Atkinson: — Well, Mr. Minister, I love change and there's lots of changes that are going to take place in this province when we're elected in 1990.

Some Hon. Members: Hear, hear!

Ms. Atkinson: — Now, Mr. Minister, I asked you about this other phoney fund that you've created, a fund called the patient care fund. And this fund was announced in February 25, 1986. And this fund was to create 500 additional nursing positions, and it was to substantially increase patient care staff, and it was to provide for new equipment, and it was to reduce waiting times for surgery. These were the three goals of the fund. And, Mr. Minister, I asked you before, what happened to this fund? What have you done with it, and where did it go?

Hon. Mr. McLeod: — Okay. The patient care fund that the member refers to was announced as a five-year one, as you have said. It was set up as a \$40 million operating plan to review and address areas where operating deficiencies rose between the time that it was set up and the last baseline review, which means the review of all of the payments to hospitals and so on which had been done in '80 and '81. Year one of the fund was in '86-87 and \$12.9 million was made available in '86-87.

The top priority was to adjust service volumes. And just to give you some examples: increase the average daily census; increase out-patient visits at the hospitals, so we can increase that aspect because it's more efficient; to establish a proper volume base. These volumes included one that I know is close to your heart and is close to everyone's, and that's the waiting list in Saskatoon; and some surgical initiatives there.

In addition, supply expenses were separately enriched, and new programs of high priority were commenced. And I'll give you an example there. Regional ultrasound pathology program at Melfort; regional computer pharmacy system. A second staff person on nights was provided to rural hospitals, and the member will be aware, and I think all members will, of the issue that had been raised there as it relates to some of the smallest hospitals where nurses felt very isolated being only one nurse on staff over the night-time hours.

And some adjustment was made to remuneration to pathologists and radiologists because there was some difficulty in those two specialty areas. So there was an adjustment to remuneration in that area. And 418 new positions were added to hospitals across the province.

Ms. Atkinson: — Mr. Minister, I understood that \$18.4 million was supposed to be allocated for this patient care fund. I gather that you only spent \$12.9 million of that patient care fund. And as the minister said, we want this program to go straight to the heart of the matter, and that's patient care, and that's what this program will do.

Well, Mr. Minister, I can assure you that this program has not gone straight to the heart of the matter, and we have more stress in our nursing homes and hospitals than ever before. We have nurses that are thinking about getting out of the field altogether because they can't take the stress of underfunding and understaffing. We have health care workers that in essence go to work sick because they don't want to leave their colleagues short-staffed because those facilities can't afford to bring in casual help or temporary help to take those sick people's position. And,

Mr. Minister, the situation is critical.

Now I'm wondering, Mr. Minister, I note in your estimates this year we don't have any budget item called patient care, and I'm wondering, Mr. Minister, if you are no longer committed to patient care. The three main goals of that fund were to be to reduce waiting lists for surgery, to provide new equipment and diagnostic services, and to substantially increase patient care staff, including the provision of about 500 additional nursing positions. With the deletion of the fund from your budget, does that mean that you are no longer committed to patient care?

Hon. Mr. McLeod: — The numbers that I quoted to you earlier, and I quoted the number 12.9 million that was in the hospital sector, and then you came back and mentioned the number 18.4. If you add the special care homes to that, which is 5.5 million it does add to 18.4. So that's where it is and that's the explanation for that, so 18.4.

(2000)

And I just want to point out to you that the annualized amount . . . let's take the hospital sector, \$12.9 million, so if you . . . (inaudible interjection) . . . Now I want you to understand this, so don't shake your head at me like that. You can't listen when your head is shaking. If you include last year's, the annualized effect of the additional funding is 17.87 million in the next year because the patient care fund was implemented part way through last fiscal year and it amounted to 12.9 million, the annualized effect. In other words the effect that those positions that went into place . . . No, it's not hard to understand if you really try, if you really try.

The annualized effect is that that will be a cost of \$17.87 million this year - 17.87 — what was last year 12.9 million, and now when it goes through a full year because the 12.9 was spent over a period that did not include the total fiscal year. So the annualized effect is 17.87 million and that is in the system for this year. Those positions . . . As you've said, we haven't included anything in the budget for the patient care fund, when in fact the patient care fund and those positions that were put into place, or those improvements that were put into place in 1986-87, are still in the system.

In other words the funding is still in the system, and the funding that we gave to the individual hospitals in order to hire their staff. Whatever their need was in individual circumstance, we did the funding which is as the system works, and you know that, and they will have those . . . That same funding is available to them this year to make sure they maintain the same positions in their system.

Mr. Atkinson: — Well, Mr. Minister, you had budgeted \$18.4 million in 1986-87, but you only spent 12.9 million.

An Hon. Member: — No.

Ms. Atkinson: — Well you just finished telling me that it was 12.9 million because you didn't amortize it over the year and you weren't looking at it for the full year. What is it? I'm talking about patient care fund for hospitals and

nursing homes and whatever else you want to include. Give us the full figures, Mr. Minister.

Hon. Mr. McLeod: — Well I thought that's what I did because I said 12.9 and add the plus sign, 5.5, and that's 18.4. And the 5.5 is for the special care homes sector. You will know . . . and according to your own critic's position, you've got hospitals and your colleague deals with the special care homes. In our case, I deal with both. Okay?

So 12.9, 4.4, adds to 18.4. And then I gave you the annualized numbers when I gave you the explanation, so that you would see what it means to annualize that and what it costs the system when those new positions are in place and in place for the total fiscal year. Okay, the 12.9 annualized is 17.87 million; the 5.5 annualized is 10.4 million. Okay, and the total of that is, what, 27, 28 million or something in that order, and that's what will be in the system this year according to what was in the system last year.

Mr. Atkinson: — So \$28 million this year is in the system for the "patient care fund." I would ask, Mr. Minister, where does this figure appear in your estimates? Under what budgetary item?

Hon. Mr. McLeod: — No. Understand what I'm saying here. It does not show, patient care fund, this much money. What I'm point out to you, what I'm pointing out to you, because . . . Well let me go back one step: \$40 million that was announced, or thereabouts, okay, over a period of time will be spent over a period of five years. That's what we said. We are now in year two of that, so we have three more years to go, okay. That's step one.

Okay, now step two. We spent in the first year, '86-87, 18.4 million, which I have indicated to you how that was spent and in two sectors. I have said that if you take those numbers that were spent in the two sectors in 1986-87 — just so you know how this system operates — once the new positions are in place and the funding level is provided to the hospitals for these new positions, that funding level becomes part of the baseline of the hospitals budget, and this year, come to the one that we're dealing with now, will include the funding for the positions that were added in a special way, last year. They are included.

So it's not an accurate statement to say that the patient care fund has been deleted or abandoned or any of that, because the money that was put through the patient care fund is put into the budget, it becomes part of the baseline, and is now annualized and will be there this year, and will be there next year, and the year after that.

Now as far as the total of \$40 million goes — \$40 million which was a commitment of a patient care fund for special, you know for being able to respond to special needs — that was there, the commitment was there for that amount or thereabouts, and that commitment is still here. That was a five-year program; we are in year two. I remind you we have three other years beyond this year's estimates. I hope to be able to discuss them with you for two or three years.

Ms. Atkinson: — Well, Mr. Minister, how do we know that this money has gone into the baseline of

departments? Your government set up the health capital fund. It was to be a five-year fund. It's there for one year and the fund vanishes, Mr. Minister, never to be seen again.

Your government sets up the patient care fund in February of 1986. That fund was set up in response to the Saskatchewan Union of Nurses and their concerns about critical staff shortages in this province. And once again, Mr. Minister, the patient care fund, announced with a great deal of fanfare; press releases; included in the budget; the former minister of Health made it appear as though somehow it was going to be an ongoing budgetary item; but once again, Mr. Minister, this fund is a one-year fund prior to the election and it vanishes into the air, Mr. Minister.

Instead of addressing the real problem here, Mr. Minister, instead of addressing concerns about critical shortages of nursing personnel and other health care workers in hospitals and nursing homes, instead of starting to resolve the problem, your government sets up a phoney fund, a fund called the patient care fund. And all of a sudden after the election, it disappears.

There were a great number of concerns about the lack of capital funding for projects around this province and your government sets up another phoney fund, the health capital fund — another phoney fund. We've seen this pattern over and over and over again. There's a problem. Instead of addressing it, you set up a phoney fund, and it soon disappears.

Mr. Minister, I don't know how anybody except perhaps Mr. Lutz, the Provincial Auditor, can understand how you people keep the books. You're moving budgetary items around. You create the impression that you've increased funding to health care this year when that's not true. You've moved items out of Supply and Services and over into Health and you do it in department after department after department, and you say you've increased the budget. And that's not true, Mr. Minister.

In the Department of Health, there's been a budgetary decrease of \$18.6 million. You say there's a health capital fund and it disappears; you say there's a patient care fund and it disappears. All of these funds disappear and yet they're announced for a five-year period. They disappear. They're scrapped, Mr. Minister.

You play politics and you have no policies. You play politics with people's lives; you play politics with people's concerns; but you won't come up with any clear policies on what, in fact, is going to be happening in health care — real policies on health care in the next five years.

You say you're committed to medicare. Well we've seen your commitments, Mr. Minister. You did in the prescription drug plan to such an extent that people have to pay up-front costs for drugs, and there are people making decisions about whether they put groceries on their table or whether or not, Mr. Minister, they pay for their prescription drugs. We've seen a betrayal of medicare in this province like we've never seen before, and it's come from you, Mr. Minister, because of your

lack of vision, because of your lack of policies.

Mr. Minister, just come clean. Tell us what happened to the patient care fund; tell us what happened to the health capital fund. Admit they were phoney funds, Mr. Minister. We'll never see the money; we'll never see your promises of \$300 million here and \$100 million there. We can't find those nursing positions that you say were created, and if they're there, Mr. Minister, tell us in what hospitals and what nursing homes you created these positions.

Hon. Mr. McLeod: — I just want to . . . First of all, I think I will resist the temptation, resist the temptation to tell the member a little story about her own penchant for stretching things.

The member asked a while ago, where is this. And I'll just walk you through another little book here, the *Estimates* which we're to discuss tonight, '87-88, on page 48 and on page 49. You ask where does the patient care fund show up. The *Estimates* on page 48 under Health, item number 22 under vote 32, payments for hospital services. And at the bottom of the page you will see under the double asterisk:

A portion of this subvote was included in the vote Health — Patient Care Fund in 1986-87. The 1987-87 Special Funds estimates have been reallocated to reflect the transfer of this activity to the vote Health in 1987-88.

Just so you know that the patient care fund was acknowledged; the patient care fund was there; and the patient care fund has been transferred and it's in the regular estimates of Health — in other words, annualized; in other words, as I have explained it.

If you go to the other page 49, just beside it, you will see under item 31, grants and allowances for special care services — which is the other portion, the special care side . . . And you will find under the triple asterisk at the bottom of that page:

A portion of this subvote was included in the vote Health — Patient Care Fund in 1986-87. The 1986-87 Special Funds estimates have been reallocated to reflect the transfer of this activity to the vote Health in 1987-88.

And I would just say to the member, as I have said to you before, I know it's a maze to walk through to some extent. But I know this as well: in preparing for these estimates, it's a maze that you might have thought about walking through and you didn't. And that's totally up to you; you can do that how you would like to do it. But I would say to you, that is the case; it's there.

You've stood here and said, there is no patient care fund; it's one that's disappeared — and to use your kind of inflammatory language, a phoney fund and all that sort of stuff. And it's the kind of thing which you have a real penchant for doing. Phoney kinds of funds, is the kind of thing that you say. You say, phoney funds.

What I'm telling you is that I want to go through these

estimates in a sincere way with you because it's important to do that. And you always come back and you say, you took away the drug plan, and once again you said that. The drug plan is still in place. There is a drug plan in place. But, I mean, we can argue about that.

The fact is, this \$1.2 billion, \$1.2 billion that is being spent by the public of Saskatchewan on their health care system, is an extremely important department and it's an extreme amount of money. There's no question about that. In the times and the circumstances that we all find ourselves in, it's extremely important that we deal with this in a serious way. And we will, and I intend to do that.

There is more to the Health budget than whether or not a supplementary benefit like the drug plan is changed — far more to it than that. I would ask you to, sure, say what you like about the drug plan; say what you like about the dental plan, the two things which you are talking about. But please deal in this legislature in a serious way with the Health estimates of this very large and very important department. And if you do that, I'll undertake to continue to give you and walk you through the various books and so on that you need walking through, and we'll go through it in a reasonable way. And that's the undertaking that I'll continue to give you.

Mr. Atkinson: — Thank you very much, Mr. Minister, for the patronizing lecture. Now, Mr. Minister, let's talk about item 22, payments for hospital services.

Mr. Minister, if you take into consideration your 1986-87 estimate and you include your supplementary estimates, Mr. Minister, we only see a \$3 million increase to hospitals. Yet, Mr. Minister, you advise us that there is going to be about \$28 million going into the patient care fund — even though it's disappeared — but going into the patient care fund, and somehow it's been included in payments for hospital services. With an increase of \$3 million, Mr. Minister, if you take into consideration what was actually spent last year in '86-87 and you compare it to this year, there's only a \$3 million increase. What happened to your patient care fund, Mr. Minister?

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Hon. Mr. McLeod: — The specific answer to the member, '86-87, the numbers we have used, the printed Estimates in '86-87 when it was 513 million, whatever, that includes patient care money. I just want that to be noted. And '87-88, the estimates of 523,666 whatever, that's there, also includes that annualized amount that I talked about. That includes . . . Well, what is the annualized amount?

An Hon. Member: — It's 17.8.

Hon. Mr. McLeod: — It's \$17.8 million, okay. Just so that you know that we're comparing as we said yesterday when we went through somewhat a similar discussion, so we compare apples with apples, okay? Both are the estimated amounts.

Ms. Atkinson: — Okay. Well, Mr. Minister, then it looks like we've got another cut here. If you take your estimated 1986-87 numbers for hospital services, it's 513,313,690.

If you add on the \$7,700,000 from your supplementary estimates, the money you had to spend in addition to what you estimated for 1986-87, what we've got, Mr. Minister, is a total budget for 1986-87 of about \$520 million . . . 521 million, I should say. Yet, Mr. Minister, the year '87-88, you had budgeted \$523,666,300.

It gets a bit complicated to explain this. In your patient care fund for last year, you allocated about 12.9 million. This year for hospitals, you're allocating 17.8 million, which is a difference of about \$5 million. There should be an additional \$5 million for '87-88 going into hospital services, but that hasn't happened, Mr. Minister. There's only an additional increase of \$3 million, or one-half per cent, Mr. Minister. There's a \$2 million shortfall, Mr. Minister. Where is this patient care fund?

Hon. Mr. McLeod: — A couple of things. First of all, in the hospitals, in the whole sector, in keeping with the total of the restraint practices which we asked the public sector to do all over, we have said to them, you know, increase your efficiencies, cut back on your administrative costs, and many of them have accomplished some great things there, some efficiencies.

You will know as well . . . You will know as well that the salaries . . . because we've had the public sector two years with zero, so there is no provision for an increase in salary. And you will know, I believe that salaries account for something in the order of 80 per cent of all of the costs of the hospitals, of the hospital sector. So it's 80 per cent for salaries, which is an horrendous number.

And so those kinds of restraint measures which are across the public service, and certainly do include the hospital sector, will have some significant impact in terms of the amount of moneys that are available to the hospitals to do their, you know, to operate in the normal way.

Mr. Atkinson: — Mr. Minister, you didn't answer my question. Mr. Minister, I think I've shown very clearly that there isn't a patient care fund. It doesn't exist. You say that there is a patient care fund included in the budget item for hospital services, but I've shown you that there isn't. If you were so proud of that fund, Mr. Minister, you would have it in your budget as an additional item. And that patient care fund, Mr. Minister, was announced for very specific reasons. The Saskatchewan Union of Nurses clearly showed the public how our hospitals were understaffed and how our patients in our hospitals were not getting the kind of care that they are entitled to under a quality and accessible medicare system.

There was a lot of political pressure placed on your former minister of Health and on your government, not only by the Saskatchewan Union of Nurses, but by a number of health care professionals and other health care workers as well as the public.

So there was a great deal of fanfare around this press release because you people thought you were going to have a spring 1986 election. The press release was dated February 25, 1986. There was a big announcement of \$100 million, a five-year program to do three things: it was to reduce waiting lists and waiting times for surgery; it was to provide new equipment and diagnostic services;

and it was to substantially, Mr. Minister — and I use your word, substantially — increase patient care staff including the provision of about 500 additional nursing positions. Now you talk about restraint, Mr. Minister; I'm talking about the quality of care in our hospitals and in our nursing homes, Mr. Minister. And quality care has to do with nursing care and other kinds of care, Mr. Minister.

The \$100 million that you so proudly announced prior to what you thought would be a spring election does not exist, Mr. Minister. There are no provisions, Mr. Minister, in this budget for that patient care fund. It was a phoney fund; it was a figment of your political imagination and your government's political imagination. It had nothing to do with improving the quality of health care in our province. It had nothing to do with that; it had everything to do with politics. It has disappeared, Mr. Minister. You can't explain to this House or to the people of this province where this so-called money has gone to in this budget.

Mr. Minister, I conclude, and the public must conclude, that it has disappeared. We have a patient care fund that doesn't exist. It was a phoney fund. We have a health capital fund that doesn't exist. It was a phoney fund, Mr. Minister.

We have a great deal more to say about hospital understaffing and nursing home understaffing, but my colleague, the member from Regina Rosemont, has a few questions for you.

Hon. Mr. McLeod: — Just a couple of things, because it goes back to the fact that I have said — my predecessor in this portfolio has said — in the patient care fund announcement that it would be there and it would be in the order of \$40 million over a period of five years. I've said to you tonight that it's there over a period of five years. Okay?

Let me just reiterate some of the things which I said earlier and try to say. Four hundred and eighteen total staff have been put into the system — 418 total staff — those are still there; 242 nursing staff positions, still there — or 242. I'm told that's what was funded in the various hospitals around the province. Equipment purchases, still there in the hospitals, some of the ones that I outlined earlier here; the money for specialists, pathologists and radiologists that I talked about, still there in the system, continuing into this year, still there.

Now the second staff position in the rural hospitals, which was a pressure point as I said to you before, still there and in the system now — still there. It's not as though, you know . . . and this is why you either lack the understanding or you don't, and I don't believe you do. I think, it's you choose to show this lack of understanding to try to present whatever it is for your own means.

And I understand this is a political forum, so, you know, I'm not too sensitive to it. I know this is a political forum, but it's also a forum to do the reasonable business of the folks as well, so I'd ask you to think about that for a moment.

So the member has, you know, talked at some length, frankly, about the various things that are not happening in the Health department. I have said that we're spending this 1.2 billion — talking about that amount of money in this kind of a circumstance, at this society, and this jurisdiction of a million people find themselves in.

Let's just go back and talk about some of the things that have been added to the system over a period of just a very few years since we've come into office in this government. Transfer of ambulance services and northern health services and all those kinds of things into one department, that's an extremely important thing and has been seen as that across the province, including the continuing care coming to Health.

(2030)

The extra billing of patients by physicians is gone, thanks to this government, and eliminated with the signing of Saskatoon Agreement II.

A new mental services Act was passed which ensured that the rights of the mentally ill were adequately protected. Done here, by this government, not in the 11 years that you folks were there. And you'll always say, oh, we had everything done. We had reached nirvana as it relates to health care; that's your position. That's the position of the old Democratic party. That's the position of your old party.

The full implementation of the program has been temporarily delayed pending completion of the review of health services. The 275 million, five-year construction program was implemented in '85-86 to regenerate and expand hospital facilities around the province. Those expansions, and I mentioned them last night and earlier, expansions close to home for you as a matter of fact, were expansions which were necessitated by the legacy that you left in some good years with some high prices in potash and in oil and in wheat and in all of the other commodities that this province so depends upon. You left a legacy, and I hear the chirper here from Saskatoon South, former Health minister, part of his very personal legacy of leaving, leaving those facilities done.

So since 1982, over 660 new nursing department positions have been funded for hospitals around the province. Six new CT scanners have been provided to the six base hospitals which will greatly improve access to new technologically sophisticated imaging services.

A total of 1,700 special care home beds constructed and approved for construction since 1982. And it's on and on — chiropody program, ambulance services, cancer treatment services, greatly strengthened by developing a new funding formula. A new cancer clinic in Saskatoon; a new community therapy program has been implemented to provide physiotherapy and occupational therapy to rural residents, which is something that just didn't happen. I mean, the rural for you guys was the rural, you know, you didn't worry about that, right? You still don't. You still don't. You're a very, very backward looking party in a forward looking province, frankly.

New initiatives to deal with alcohol and drug abuse, all of

those kinds of things have been done. So for the member to stand in her place and say these things have not been done, there's no money being spent on health care, health care is falling apart, and so on, it is just not the case. It is just not the case. And I'll just say to the member, please come back to reality and look forward — dare to look forward. Change won't really hurt you. Step into the future; you'll find that you might like it. You might like it.

Mr. Lyons: — Thank you very much, Mr. Chairman. Mr. Chairman, I'd like to ask several questions of the minister. And I'm not going try to be . . . even pretend to try to be partisan or political in the questioning. So I hope the minister will bear with me.

It has to do with the construction, or lack of construction, or lack of funding, or maybe lack of funding, of the announced Pioneer Village special care facility in the constituency of Regina Rosemont. And I want to first of all refer this to the minister, Mr. Chairman.

It was an announcement from the Government of Saskatchewan information services entitled: "Health '85 to '94, additional special care home projects announced." And it goes on to say:

Health Minister Graham Taylor today announced additional special care home projects as part of the five-year, \$300 million health capital fund unveiled in the new provincial budget Wednesday.

Then it goes on down, and I won't read the whole thing; it says:

In 1984-85, 328 beds were brought under construction. A further 438 beds were planned for '85-86. The majority of these projects were announced last year but the '85-86 program has been expanded. The additions include a new facility in Duck Lake, and integrated facilities in Nokomis, Goodsoil, and Rabbit Lake. The remaining years of the program will continue to reflect four main principles.

And it goes on:

And for '86-87 approvals begin for the construction of about 330 beds. Highlights include a new special care home in Lumsden, and development of an integrated facility in Dinsmore, Gainsborough, Mankota. As well, work will begin on a project to completely replace St. Anthony's Home in Moose Jaw. Other communities will receive more beds, including Yorkton, Tisdale, and Santa Maria home in Regina.

For 1987-88 and '88-89, the last two years of the program, 22 communities have been identified. The details of these projects will be worked out in consultation with the communities involved, Taylor said.

Now, Mr. Minister, one thing that is noticeable by its absence in this list, and I want you to clarify for us and for the people of Saskatchewan tonight, is that just prior to

the last provincial election, Mr. Gordon Dirks, then the member of the Legislative Assembly for Regina Rosemont, also minister who was responsible for Sask Housing Corporation, also the minister for Social Services and the minister for Urban Affairs, made a commitment to the people of this province that there would be funds provided to the tune of \$9 million for the replacement of the single dwellings and the single dwelling units at Pioneer Village.

Now part of the problem that I have in dealing with this and dealing with the estimates for this year is that I can't find any reference in the Health estimates to moneys for Pioneer Village coming through the Department of Health — coming through either the health capital fund or anywhere else.

So I guess my question to you is . . . Well, first of all, is it the intention of the government . . . And you as a member of Executive Council know very well that Mr. Dirks made that commitment for the Pioneer Village home in Regina; you know very well that he made that \$9 million commitment. Is that commitment going to be carried out through money provided out of the health capital fund or continuing care branch or some other method out of your department or, in fact, is that \$9 million commitment going to be carried out through Sask Housing or through some other mechanism of government?

Hon. Mr. McLeod: — To the specific on Pioneer Village: it is without question anything that's done there and anything that has been talked about there was under the purview of Saskatchewan Housing Corporation as a housing project.

As it relates to the special care home section of Health in this budget, either in the past or even at the present with the ones that were announced there — and you've read out the lists of the ones that were announced — I can say most of those are completed, I think, and many of them are, at least the ones that were in the prior year.

The ones that relate to Regina for the member from Regina: Santa Maria, 48 beds, is, as we all know, under construction, very near completion now; and Salvation Army, 30 beds; for a total of 78 beds in Regina, as it relates to these estimates which we're dealing in Health. Any questions you would have as it relates to the project, or lack of project, or whatever, as it relates to Pioneer Village or anything that was said, should be directed to the Saskatchewan Housing Corporation.

Mr. Lyons: — Well, Mr. Minister, I can appreciate that particular response; however in the health capital budget, in the health capital fund that you talk about, you list a great many of these homes to which you've already referred to.

I guess I'm trying to get from you some sense of whether or not the commitment is going to be met because it was my understanding that only part of the commitment, and that part of the commitment that was related to the individual dwelling units at Pioneer Village as opposed to expansions to the special care home; and because of the ownership of Pioneer Village, that in fact it's a facility that's owned by the city of Regina and it's the largest

facility of its kind in North America, that in fact the departments which were responsible for Pioneer Village included Health as well as Sask Housing Corporation.

Now I believe that's true in terms of the actual special care units, if I'm not mistaken on that. I see you're nodding your head, and I assume that's correct. So is there any part of the funding of that \$9 million . . . Can you tell us when that commitment is going to be made in terms of your department? And, in fact, will that commitment be carried out?

Hon. Mr. McLeod: — I just want to tell you that when I say that your best questions in that area, those same questions should go to Sask Housing for this reason.

At no time has there been a discussion with the, as far as I'm informed, for the city of Regina, the board there, as it relates to special care home expansion at Pioneer Village. There was an enriched housing project or some related housing project which was strictly that — a housing project — but not related to an expansion or whatever of the special care home facility which would come under the purview of Health. That was not discussed. At no time was it ever in our plans or was it in, as far as I know, in the plans of the people there, in terms of coming forward with a formal proposal to the Department of Health. So the questions are not placed in the proper place in the scheme of things, and I would say, ask the questions of the minister of the Saskatchewan Housing.

Mr. Lyons: — Well, Mr. Minister, I want to make sure that I'm clear with what you're saying because it's my understanding that it's part of the overall negotiations. I recognize that it's certainly complex and that it takes in a number of areas, that its part of those overall negotiations. Special care needs and continuing special care needs were being discussed with the minister, not only before the election. I understand after the election as well that the negotiations between the board of Pioneer Village and the government were ongoing. Part of those discussions related to the special care needs part of the house, and I'm wondering if . . . Okay. Let's pose the question this way: has there been discussions between Sask Housing Corporation and your ministry as to Pioneer Village? Have there been any discussions between those two as it relates to Pioneer Village, because I know there have been discussions between representatives of your government . . . (inaudible interjection) . . . Well you say Sask Housing, but because of the special care component I understand that in fact Sask Health has to be involved in it.

Maybe the Minister of Urban Affairs can correct me if I'm wrong on it. You know, I'm certainly not trying to split the issue up. If, in fact, Sask Housing can handle the whole thing and they intend to honour the commitment, then be that as it may.

Hon. Mr. McLeod: — Okay. As I said earlier, the question should go to Sask Housing. There have not been, I'm told, discussions between Health and Sask Housing because whatever has been discussed there — and our people are aware that Sask Housing has had some discussions, or so you say, with our government — it's through the auspices of Sask Housing.

So Sask Housing, I believe, has had those discussions, but I can't speak any further than that for the minister of Sask Housing. They've had discussions with whoever is responsible — somebody related to Pioneer Village, I would think. But it's related to the housing component, which would be an enriched housing thing. That's all I can say.

But it's certainly never been included in our program, you know, the program that you quoted from. Pioneer Village at no time was included as a special care project in our program, and no consideration for heavy care for Pioneer Village has ever been on the books in, you know, the last term or this term or any other time, and no proposals or requests have come forward regarding heavy care, which is what we deal with in this department, heavy care level 3, 4, whatever.

Mr. Lyons: — Just one final question because I didn't find whether it was clarified in my own mind. Have there been any discussions of any kind between the special care branch in terms of the heavy care level 3 and level 4 care and Sask Housing? Has any of your officials been talked . . . had those kind of discussions to raise the issue of special care at Pioneer Village?

Hon. Mr. McLeod: — No, they haven't had discussions regarding special care beds at Pioneer Village with Sask Housing, regarding special care beds, which is what is our purview here. Okay?

Mr. Lyons: — Just because you've narrowed the answer down in regards to special care beds, has there been . . . Let's just say, has there been any discussions on special care facilities between, any discussions between Department of Health and Sask Housing as regards to Pioneer Village? Just so that we're clear on that.

Hon. Mr. McLeod: — Well I'm informed, to the extent that our people know anything about this, anything that was talked about was enriched housing, and that's really all I can say — okay? — because that's all there is to it, I think.

(2045)

Ms. Atkinson: — Thank you, Mr. Chairperson. Mr. Minister, I'd like you to now talk about the Saskatchewan hearing aid plan. I note from your budget estimates that there has been about a \$600,000 decrease in the budget for the Saskatchewan hearing aid plan in comparison to the previous year 1986-87.

You will recall, Mr. Minister, in the spring that we received a document that indicated that your department was contemplating the possibility of eliminating persons between the ages of 17 and 64 years from the plan. And I'm wondering if this decrease in the budget is a reflection upon that potential policy decision.

Hon. Mr. McLeod: — As it relates to the hearing aid plan, we lost one of our . . . First of all the professional people, the audiologists, are very hard to come by in terms of hiring them and we've . . . As you will know, they're trained, a number of them are trained, the closest place is

in Minot, I believe.

We lost one of those positions through the early retirement program which went across government. There were four vacant positions in that and the vacancies I guess — well, in fact, I know — were caught in that process of when vacant positions were deleted. And vacant positions in the hearing aid plan have been something that have been there for a long time just because of the circumstance that I told you earlier. They're hard to hire, people in this area.

We have an estimated reduction in the number of hearing aids, and it's just, you know, always an estimate; it will change from year to year. We made some changes, one which means something in the order of \$100,000 in that the hearing aid plan used to provide, used to have batteries available, and they would buy their batteries for the hearing aid from the plan, from the government plan. And what we've said is that those batteries should be purchased from the local pharmacy and so on, and that's the case now, and that's what it will be the case. And, you know, the adjustment is being made in that area, and the plan continues with the coverage that has been there and carries on.

Ms. Atkinson: — Mr. Minister, you still haven't explained to me why there is a budget decrease of some \$600,000. Can you explain to me what that \$600,000 has been lost to?

Surely that entire budgetary item can't have been lost to your decision not to provide batteries to hearing impaired persons on a cost basis, Mr. Minister. Surely that's not the entire reason why we've had a \$600,000 reduction in the budget.

Hon. Mr. McLeod: — The numbers that I have is . . . As I said, I pointed out the staff reductions and vacancies and the retirement thing — it's about \$175,000. The batteries which I related to you, which we don't no longer buy, that's \$100,000. And the inventory of hearing aids, the number of hearing aids, is cut down by about \$300,000. Okay. And that means that, you know, just to put that into perspective in terms of the number of people who are served by the plan and so on, it's about 4,000 hearing aids a year. It's about 4,000 hearing aids a year at about . . . This is the cost at about \$200 each is what the cost to the hearing aid plan is. So that's — what's that? — \$800,000. You know, just so that's in perspective in terms of the amount of money spent on hearing aids themselves in a given year. Okay. So what's that? Three, four, \$575,000, you know, in rough numbers, is the sort of numbers that is there.

Ms. Atkinson: — Mr. Minister, in your annual report you indicate, and I can only go on the annual report for the year ending March 1986, but there is no direct charge for hearing tests to Saskatchewan residents. Hearing aids, batteries, and related accessories are sold at SHAP, which means the Saskatchewan hearing aid plan, at direct purchase cost.

So, Mr. Minister, I interpret that to mean that your cost is passed on to the purchaser or the consumer, the consumer requiring those accessories or those hearing

aids or those batteries. So I fail to see how you can possibly be saving any money by no longer purchasing batteries or purchasing certain kinds of hearing aids that you passed on to the consumer at cost. I fail to see how you're losing any money or saving any money in that regard, Mr. Minister.

Hon. Mr. McLeod: — Just so the numbers that are there in terms of the hearing aid plan are the numbers as I said for inventory of batteries under the former system, and therefore, for inventory of hearing aids themselves and all of those things, the revenue which comes from the sale of those does not show up in that number. Okay? And that never has. I mean, that's the way it always is.

I'll just refer you to the books, the blue book on page 9, budgetary — where is it now? — budgetary expenditures on page 9 under Health. That goes with the revenue which comes from the sale of hearing aid batteries, hearing aids, themselves, and so on goes into that pot of revenues. Okay? But the numbers that are reflected in the other one that you refer to under SHA, the hearing aid plan, the reductions there are basically inventory reductions in terms of the number of hearing aids.

And some of it, I admit, is how many do we believe that we can, you know, will be able to process and so on in the year with the staff that's available to us. And there's no question, as you have seen before. We are and we continue to try to hire the audiologists which are required, the professional people required, and they are not available. They are very difficult. And we have programs, and have had over a period of years and will continue to have them, programs to train the people and ask young people to enter this field, because it is a field of opportunity for young people who want to enter it. It's a master's program following a bachelor's degree, and the master's program is at Minot, the closest one. Just a little commercial for young people who may want a good career.

Ms. Atkinson: — Mr. Minister, it's quite obvious that you're no longer providing services to hearing impaired people in this province to the extent that you used to. You used to provide batteries at cost to hearing impaired persons. They now have to go to the pharmacy or the grocery store. I understand that the batteries were available at approximately \$2 — that's my information — and they're now paying between 5 and \$8 depending on where they purchase those batteries.

Once again, Mr. Minister, you have cut back on services in the area of health care to persons who have hearing impairments. And, Mr. Minister, it was a valuable service that you provided to the hearing impaired in our province by providing those batteries. And you weren't losing any money, Mr. Minister, because you were providing those batteries at cost. And I guess my question to you is this: why would you decide to eliminate that particular service to the hearing impaired in this province at this time?

Hon. Mr. McLeod: — Well, two things I just want to correct to you. When I referred . . . I said page 9, I meant page 14. Just to go back so that's clear in the record — page 14 under Health, Consolidated Fund, summary of budgetary revenue by department.

What the member says in terms of the batteries, it was a change in the process. And we have, you know, the hearing aid plan. You try to run it in an efficient way and it's important that we do that with a reduced staff. But it's important as well that you understand . . . and I am having reports of people being able to buy their batteries cheaper or at the same costs, so I don't think there's a problem there. And I say that because I have a letter just the other day which I'll share with you, of someone said, I bought my batteries cheaper at the drug store — than what they were available before. So the cost of batteries for the hearing aids is not what I believe to be the problem, and I don't think that it is a problem. And the people with the batteries or who are in need of them are not saying that it's a problem, I would say that to you. So that's a change. That's a change, but it's not an onerous one. And I just said before about the inventory and the number of aids themselves that we will buy or the number of batteries.

But we remain committed to providing services for people who are hearing impaired in our province and obviously it's an important area in terms of people who need that service in order to function in a normal way.

Ms. Atkinson: — Mr. Minister, you indicate that you are saving some \$300,000 on hearing aids, and I'm wondering what kind of hearing aids you have eliminated from the program. And what will hearing impaired persons, most of whom are the elderly, where will they now have to go to get those hearing aids, and will they be able to get those hearing aids at cost or was the process prior to the elimination of certain kinds of hearing aids?

(2100)

Hon. Mr. McLeod: — There's no elimination of hearing aids or kinds, I am told. There is no elimination of any particular brands or kinds or whatever, so that's not an elimination. The 300 is the cut-down of inventory across the piece of the number of hearing aids which we think we will be processing, and that's always an estimated amount. But you have to deal with how many do we think we'll be able to process in a given year. The normal year is about 4,000 people served by the plan in a year, 4,000 hearing aids per year at about, in terms of the cost to the plan, about \$200 at \$800,000.

Ms. Atkinson: — Well, Mr. Minister, the population in Saskatchewan is ageing, so I have to presume that as a result of that, the population of people requiring hearing aids must be increasing as well. How would you arrive at the conclusion that you should lower your inventory for hearing aids by some \$400,000, which is a drastic decrease, Mr. Minister, if in fact the population is ageing and therefore the requirement or the necessity for a hearing aid is probably increasing with that population ageing?

Hon. Mr. McLeod: — Okay. You know, I hear what you're saying in terms of the ageing population and the need, or the perceived need, and I think it's probably true, that there would be. But I just would say to you that we have an intention and we believe we'll serve about the same number of people; I believe I said about 4,000 a

year. We have a couple of things . . . Every year there's another 4,000 people out there who are served and who have their hearing aid and so on. That's added, plus others who will go to other private dealers and so on in the province, and some do that.

But I would say to the member, as well, when we went through the process in Health and then throughout the whole of government, this was an example of one where when you get into it and really start looking at it. This is an inventory control measure. There was a whole batch, I guess you could call it, or whatever you call a group of hearing aids, but a whole batch of them were there. And what we've said is, look we'll serve the same number of people or very close to it. We do not need to spend this extra \$300,000 on increasing the inventory because we have a significant inventory. And there was a significant inventory there. And you will know, having been a public servant at one time in your life, in another kind of public service, you will know how the budgets work and so on. There was a significant inventory. We said, look, through an inventory control measure, we don't have to spend this \$300,000; we can provide the service. We believe that's the case.

Obviously if the audiologists and the people are able to process people — and they are — at the same rate, and if there is a need or if there is an increase or if there's a need for more hearing aids, well I suppose there's an adjustment can be made. But I don't believe, and we don't anticipate now, and we're well on into the fiscal year, we don't anticipate having to make a major expenditure in that hearing aid side, for the inventory side.

So you know, it's a small example of a very large process in terms of going program by program, and inventory by inventory, shelf by shelf, if you will, and see just what is available in the various warehouses of government and what isn't. And we found that there was a significant inventory there.

Ms. Atkinson: — Mr. Minister, when four vacant positions were deleted, were any of those positions for audiologists?

Hon. Mr. McLeod: — Three of them were audiologists.

Ms. Atkinson: — Well that's very interesting, Mr. Minister. When I look at your Department of Health report for the year ending 1986, each year, Mr. Minister, even though the population in this province is ageing, each year, Mr. Minister, the kinds of services to people and the numbers of people using those services is decreasing.

Right now, Mr. Minister, people in this province are waiting 9 months, 10 months, 11 months, 12 months to get an appointment with the hearing aid program, and I suspect, Mr. Minister, the reason why you've taken this \$300,000 worth of inventory out of the budget on hearing aids is because you're anticipating that people will get so frustrated in their wait for a hearing aid that they will go to private enterprise. Mr. Minister, you know what they're paying for a hearing aid in private enterprise? They can pay anywhere from \$800 to \$1,200 to \$1,500 for a

hearing aid that your plan should be providing, Mr. Minister.

You say there is a problem attracting audiologists to this province. Well I'd like to know when the last time it was that you advertised for an audiologist? If it's such a big problem, Mr. Minister, what are you doing to recruit audiologists, and why, Mr. Minister, are you deleting — deleting — audiologists from the hearing aid program, Mr. Minister, if it's such a big problem? If it was a big problem you'd be out across this country recruiting audiologists to start dealing, Mr. Minister, with that 8, 9, 10, 11 or 12-month waiting list. That's the problem, Mr. Minister. Why would you delete three audiologist positions, and why don't you go out and recruit? I know of an audiologist that left this province because he couldn't get a job.

Hon. Mr. McLeod: — Well I'll say to the member, we have advertised and it's an ongoing advertisement. We have . . . I can provide the advertisements to you. We have just hired an audiologist for Regina that's coming from Winnipeg — just hired very shortly ago. We are now advertising for an audiologist, and I'm glad you raised it because if anyone is watching who knows an audiologist, who is an audiologist, who wants a good position with the Department of Health, please apply to be an audiologist in Saskatoon. We want those people to provide the service, for some of the reasons that you outlined.

So, sure, and the advertisements are ongoing and those advertisements have appeared across the country in the major publications and so on, and in the professional ones, I presume. But in any case, that's going on, and, sure, we're looking for another one in Saskatoon, and we have just hired one recently for Regina from Winnipeg.

Ms. Atkinson: — Mr. Minister, we're getting calls from the North Battleford area, we're getting calls from the Swift Current areas about the 9 to 12 or 13-month wait to get in to see the hearing aid plan. And I'm wondering . . . You tell me you've just recruited an audiologist from Winnipeg. It seems as though you might be on the right track in terms of recruiting personnel. Why would you delete three positions, Mr. Minister, from the budget? Why wouldn't you aggressively go across this country and try and attract audiologists to this province so that we don't see the privatization of yet another health care service?

Because, Mr. Minister, when you're hearing impaired, you don't want to wait 12 or 13 months to get in to see the hearing aid plan. You want your problem to be dealt with immediately, and people are going to the private sector for their hearing aids and they're paying a great deal of money.

Hon. Mr. McLeod: — I've have just said . . . I've just said, we advertised, we advertised extensively. We were successful, thank goodness, for one to come to Regina from Winnipeg. We are advertising on a continuing basis for the vacancy in Saskatoon. We have not been successful.

Now that's not something that's unique to Saskatchewan. That's not unique to Saskatchewan. If these people were

available elsewhere, we would go in and aggressively try to bring them from wherever they can go, they can come from, where there's no question. But the member says, why would you delete the three positions in the budget if you need these audiologists? And I say to you that we are actively pursuing audiologists, have been for some time for two positions. We now have been successful in one; we are unsuccessful in the other one up to now. Okay?

So there is no use, I will submit to you, when you know the history and the availability of audiologists to have positions. We could put 20 positions in, to use your logic. We could put 20 audiologist positions into the budget. If there are not people to fill the positions, there's no reason to have them in the budget for the sake of numbers.

But I will say to you that we are actively pursuing audiologists. I recognize the North Battleford area is one that you said, and I am familiar with that. We need to fill the one because it seemed to be more acute in Saskatoon. And we are searching now and I hope as a result of our discussion that somebody comes forward. If that's the case, and if you know somebody in that business, tell me about it, that's what I'd say.

Ms. Atkinson: — Mr. Minister, you say there's a problem in North Battleford. I am wondering if you have advertised for an audiologist in the North Battleford area.

Hon. Mr. McLeod: — Put it this way, if we find an audiologist, if we have a whole run on applications, okay — you have my undertaking in this — if there are many applications, if there are two applications of very qualified people for the Saskatoon positions which has been extensively advertised, you can rest assured that we will direct the second one to North Battleford.

Ms. Atkinson: — Well, Mr. Minister, I think we'll go on to another area. And I'd like to ask you about the Saskatchewan aids to independent living. Can you give us an update on what is happening with that program in terms of that program transfer to the Saskatchewan Abilities Council?

Hon. Mr. McLeod: — As you will know from the announcement that we made some time ago, the Saskatchewan Abilities Council — for those who don't know it by that name, but certainly it's been that way for some time — the former council of crippled children and adults, is now in charge of the equipment portion of what was the Saskatchewan aids to independent living in the Department of Health. And that equipment portion means mobility equipment — wheelchairs, walkers, canes, crutches, those kinds of equipment items; environmental equipment, which means, you know, within the environment, the home environment, the grab bars at bath-tubs, and so on, for people who are handicapped.

That took effect on September 1, and it's now administered by the abilities council. I think, and well I'm very confident in saying here, that it's been a very positive move, seen as very positive move by the users of this equipment. The system that the abilities council has through a system of depots around the province, the people of our province are now served from four

locations and soon to be five. They are served now from Yorkton and Swift Current and Saskatoon and Regina, and they're working on a depot at Prince Albert. Under the SAIL (Saskatchewan Aids to Independent Living) program, as you will know, when it was administered directly by the Department of Health, there were only depots in Saskatoon and Regina.

So there's no question that this is a positive move. It's seen as a positive move and this equipment is available to people, in fact, is more readily available than it was under the program or the former system.

Ms. Atkinson: — Mr. Minister, can you tell me how many employees at SAIL were given their lay-off notices?

(2115)

Hon. Mr. McLeod: — Okay, there were twelve, and as far as we know up till now, there were five of those have been picked up by the abilities council.

Ms. Atkinson: — Mr. Minister, can you tell me what kinds of things that the five that were picked up by the abilities council used to do at SAIL? What were their positions?

Hon. Mr. McLeod: — I believe medical equipment technicians is what the term that was used in the public service description of them — medical equipment technicians and stock clerks. I think three or four of them are medical equipment technicians and stock clerks and that type of thing — people who handle the inventory and move it around and whatever.

Ms. Atkinson: — Mr. Minister, in your budget estimates for the year 1986-87 you had 19 person-years. In your estimates for 1987-88 there were 18 person-years. It looked as though one position was deleted, Mr. Minister.

An Hon. Member: — Eighteen, you said?

Ms. Atkinson: — Eighteen. Yet you're now telling me that 12 employees were laid off by your department. I'd like to know if you can explain the discrepancy between what your budget book says and what you're now telling me, Mr. Minister.

Hon. Mr. McLeod: — As I said, the program took effect on September 1, so the blue book which came down in the budget had to show it as it existed and so on, that was 18. I have told you about 12 that were deleted, and in the revised book now, that 18 will be changed to six. There are six people who are still with the Saskatchewan aids for independent living program.

Ms. Atkinson: — Fair enough, Mr. Minister. But the dental plan, the budgetary item for the dental plan did take into consideration some of those lay-offs. So I guess I don't share your view of the budget book.

Now, Mr. Minister, I understand that 140 items used to be supplied by the Saskatchewan aids to independent living. As you say, some of those items included hospital beds, walkers, canes, crutches, environmental equipment, etc. Can you tell me how many items will now be supplied by the abilities council? How many items?

Hon. Mr. McLeod: — Individual items?

Ms. Atkinson: — Individual items will now be supplied by the abilities council?

Hon. Mr. McLeod: — I am informed that the abilities council carries the same list of items that were carried under the program as it was constituted under the aids to independent living program.

Ms. Atkinson: — Okay then. So then I'm to understand that the abilities council, in essence, does the work of the old SAIL program. Now there's still six employees left at the SAIL program. Can you advise the House what those employees are now doing?

Hon. Mr. McLeod: — Well the abilities council, as I said, took over the mobility equipment, that type of thing. Okay? So the people who remain in SAIL continue to operate the remainder of the program which includes a whole series of things: paraplegia program; the congenital anomaly program; the cystic fibrosis program; the renal disease program; the ostomy program; the home hemophilia program; aids to the blind; home oxygen; nutritional supplements.

So there's various programs there for people who have special and very unique sort of problems and those are covered under SAIL because, you know . . . And I go back to when we've had this discussion as it relates to the drug plan, cystic fibrosis drugs, which are just huge costs and so on. Well they're continued, and this is where they are covered from, under the SAIL program. And those six people are there now to conduct the remaining programs which I've just outlined.

Ms. Atkinson: — I take it, Mr. Minister, that the remaining staff people administer the special benefit program for handicapped or disabled people who are disabled or handicapped because of specific diseases. Is that so?

Hon. Mr. McLeod: — That's a good description of it, I would say.

Ms. Atkinson: — Okay. Can you advise me, Mr. Minister, what kind of contract you've entered into with the abilities council? Can you advise us whether or not the abilities council paid for the equipment that was turned over to them, and how much are they being paid to run that portion of SAIL that they now have authority over?

Hon. Mr. McLeod: — The arrangement that we have with the abilities council was that we've turned our inventory over to them, to the abilities council. In essence, they will be the administrators of that portion of the program, that mobility portion of the program. There is a budget provided in the Department of Health through SAIL for purchase of the equipment and replacement, so on, as it goes on. And they will undertake to do, and they have undertaken to do the repair portion which is, you know, a part of the same mobility program in terms of the repair of equipment as it comes in or as it needs repair and sending back out.

I've had reports, now, from people who have said the

repairs are done so much more quickly by the people at the abilities council and the turn-around is excellent. And it may be because of the better arrangement for terms of a depots spread around the province; it may be because of, you know, they're just on to it; or it may be because they have some very motivated people which, I believe, they have. And I would be remiss to say, if I did not say, that this repair program, for example, and much of the other work that's done there in terms of inventory and so on, is handicapped themselves and who now have very meaningful work in conducting this program.

So it's a win-win situation, certainly for us and the government or the public sector sort of thing to say, here's a program which can be administered very well by the abilities council, in fact, administered better than what we were able to do. And here's a program where they, through the good work that they do and various other areas as well and have done for a good long time, they've been able to add this to their list of very worthwhile work that they do. So, like I say, I think it's a win-win situation for us all and certainly for the handicapped of our province.

Ms. Atkinson: — Mr. Minister, you didn't answer the question. I'm wondering how much money the abilities council will be receiving from the Department of Health to administer this program, purchase equipment, and repair the equipment. Can you give us details on what the yearly contract will be between the Department of Health and the Saskatchewan Abilities Council?

(2130)

Hon. Mr. McLeod: — Okay, we estimate, and I say estimate, but the annualized cost in terms of a full year's cost would be about \$1.1 million or 1 million . . . Yes, about \$1.1 million a year, which we would turn to the abilities council for the various costs that they incur and so on, which includes the purchase of new equipment and whatever else. There's very many things in there, their operating costs and administration and so on.

Ms. Atkinson: — Tell me, Mr. Minister, what you anticipate your department's annual costs will be to administer that portion of SAIL that has not been turned over the abilities council.

Hon. Mr. McLeod: — If you turn to your Estimates book on page 46, and I believe you're there now — the aids to independent living. If you look at the number \$4.5 million, and I said 1.1 is for this part that's transferred — that's our estimate. And so we believe that with that taken off, that the estimate would be 3.49 million, which is the difference there; 3.49 million would be what it would cost for the total program of what remains in terms of these special needs and so on. Okay?

Ms. Atkinson: — So, Mr. Minister, are we just talking about this year, or are we anticipating that your portion of the program for next year will be in the neighbourhood of \$3.5 million, Mr. Minister?

Mr. Minister, are you telling this House then that your portion of the program SAIL, and I guess, as I understand

it, that's the special benefits services for disabled persons and handicapped persons — that that program costs about \$3.49 million in this fiscal year, and that the universal equipment services that's been turned over to the abilities council costs about \$1.1 million per year. Is that what you're telling me?

Hon. Mr. McLeod: — Yes. The answer is yes. But just to clarify — a little over 3 million of that — what did I say it was? — \$3.49 or whatever — a little over 3 million of that is for actual benefits, not the administration and so on. Just to make it clear, but I think you knew that.

Ms. Atkinson: — Mr. Minister, there has been some indication and some concern expressed from persons who have disabilities and who require the services of SAIL, and I guess now the Saskatchewan Abilities Council, that there may be some user fees introduced. Now as you know, at this stage wheelchairs, ambulatory aids, environmental aids, and respiratory equipment is lent to people on a free loan basis. In addition, any preventive maintenance and repair services for SAIL equipment, or now the abilities council equipment and privately owned equipment is done at no cost to the individual.

In addition, Mr. Minister, there used to be cost to the individual for the manufacture and repair of prosthetic and orthotic appliances which were manufactured in provincial workshops. I'm wondering if we can still count on that equipment being provided to people at cost. And can we still count on the old policy where equipment was loaned to people, Mr. Minister?

Hon. Mr. McLeod: — You know, what I'll say is yes. The program, as I said, is transferred as it is and as it was. The abilities council provides the same list of benefits as were provided before. And you know, obviously we'll, on an annual basis, talk to the abilities council.

And I would hope — and, in fact, I know already — they're looking at the system and saying, here we think this would work better, and this would work better, and whatever. That's fair ball; that's kind of what we wanted to happen. Who better to administer this than that group who has a good reputation, so we'll continue to discuss with them the way in which they see it running well and serving people well. But as far as the system goes now, it is exactly the same as what it was except administered by a different body.

Ms. Atkinson: — Mr. Minister, do you anticipate any user fees to individuals or repair fees to individuals? Or do you anticipate that prosthetic and orthotic equipment, or appliances, will be provided to people in the future at cost and not at cost-plus? Do we have your assurances, Mr. Minister, that we'll have no type of user fees or cost-plus to our disabled community?

Hon. Mr. McLeod: — What I'll say is, I don't anticipate any major changes, but I would say to the members this: I can't say on into the future for ever and ever. I never would say that because I do want to talk to the abilities council about this. I do sincerely want to talk to them

about how this will work. There has been discussion around for a good, long time, frankly, about some of the items — the very small items, the cheaper items and so on — there's been some discussion about that for some time. There has been no decision about that, and I can't anticipate if or when a decision would be taken on something like that. But as it now stands and in terms of these estimates, no, I don't anticipate that to happen.

Ms. Atkinson: — Mr. Minister, I guess what we've just heard from you is a warning, another warning that there is a possibility, there is a potential on the part of your government to introduce user fees to the disabled community, user fees for the loan of the equipment, repair fees for the repair and maintenance of the equipment. You're not unequivocal in your statement, Mr. Minister, and I guess we will have to see in the days ahead what your plans are.

This was one of the fears of the disabled community, Mr. Minister, that with the turnover of this program from SAIL to the abilities council that there was a potential for user fees, or repair and maintenance fees, to the disabled person. I am hopeful, Mr. Minister, that before you implement any kind of policy or program change that you consult the disabled community in this province because you didn't consult them prior to your decision to turn over the universal equipment services to the abilities council.

Now I want you to know, Mr. Minister, that I, as the Health critic on this side of the legislature, support the work of the abilities council. I do not support, Mr. Minister, any kind of attempt on your part to transfer from our collective good, or from all of us, onto the individual, any kind of user fees, Mr. Minister. And if you anticipate implementing any kind of user fees, Mr. Minister, I would suggest that you consult with the disabled community because they will tell you that they cannot afford any additional costs.

As you know, Mr. Minister, many people in the disabled community aren't working, they're not employed, Mr. Minister. Many people in the disabled community, Mr. Minister, are living on disability pensions, or they may be living on social assistance, or they may be living on low incomes. And I can tell you, Mr. Minister, that they cannot afford any kind of user fees, any kind of repair and maintenance fees, any changes to the system that would add economic pressure onto themselves.

Mr. Minister, I would ask you to assure this House that, before you change anything, you will consult with the disabled community and you will bring those changes before this legislature so that those changes can be dealt with in the form of the legislature and not behind closed doors.

Some Hon. Members: Hear, hear!

Hon. Mr. McLeod: — I can say without, you know, carrying it out too long, but this move was made . . . the move that we made in terms of dealing with the abilities council was made in the interests of the disabled community — in the interests of the disabled community . . . (inaudible interjection) . . . Now the member says from her seat it was made to save money. If saving money is

one of the benefits, I don't apologize for that either. But I'll tell you that the move to the administration of this mobility program by the abilities council — a very reputable organization with a good network around the province and with an excellent concept of the needs of the disabled community, of which you just spoke.

So the move was made in the interests of that disabled community. The move was made in a spirit of building partnerships with the people out there. This partnership between the Government of Saskatchewan and the Department of Health and the abilities council is an excellent one, one which they said they were unable to ever bridge with the former administration that was here. We were very pleased to be able to accommodate that partnership building process, and we will continue to do that kind of thing throughout the term of our administration.

So all I can say is that it was done in the interests of the disabled people. They have received it well, and it's a positive story that I would be proud to tell anyone in the province.

Ms. Atkinson: — Mr. Minister, I just want to go back to a statement you made earlier that five people were hired by the Saskatchewan Abilities Council. I have a statement from the Saskatoon *Star-Phoenix*, August 13, 1987, where Mr. Wallace advises us that the council has hired six SAIL employees and two medical equipment technicians from the school dental program. He says that that leaves four from SAIL who will be without jobs at the end of the month because of the transfer. Other employees who would have been laid off have found jobs with other government departments.

Mr. Minister, can you confirm this press story or can you give us additional information?

Hon. Mr. McLeod: — Our people say they believed, coming in, that there were five, but if there are six, that's good. I mean, we're pleased about that and if there could be more, that would be good too. But you know, I gave you the number five because there was how many we believed had been there or are there, in fact. But if it's six, you know, we won't quibble about it. I know for the extra person it would certainly mean something, but that's the case as I understand it.

Ms. Atkinson: — Well I would presume, Mr. Minister, if I'm receiving information here in the legislature, that it would be accurate information. I would hope that you and your officials would be able to give me accurate information, Mr. Minister. I think that you should try and do that.

I'm wondering if you can tell me what happened to the other seven employees that were laid off by SAIL?

Hon. Mr. McLeod: — If you go back and if you review the record tomorrow, because when I said five, I said, we believe that there are five that are hired and that's exactly right. We still believe that. If there are six, that's excellent. I mean, there's no question about it.

But we don't have a running tally on whether the other

people are. I'm not sure of what they've received in the line of employment. I don't know that. But I do know that the abilities council took those that they were able to use and, of course, the abilities council had people, their own clients and others that they have been searching for work for, and those people are now employed in the system. So that's a decision that they should take, and frankly, it's a decision that is theirs to take.

Ms. Atkinson: — Well, Mr. Minister, I presume Mr. Wallace is with you today, and I presume that the information that you're giving me should be accurate.

Now, Mr. Minister, I have one final question as it relates to the abilities council and SAIL; can you tell me whether the abilities council has taken over the repair and maintenance of rocking beds which are needed to keep people breathing, or is that still under the auspices of SAIL?

(2145)

Hon. Mr. McLeod: — I don't believe that this piece of equipment that you've mentioned is on the inventory of things which are provided by, or were provided by, SAIL and is provided by the abilities council. I don't believe that this piece of equipment, a rocking bed as you describe it, is a piece of equipment which was provided by SAIL under the . . . or is now provided by the abilities council. I don't believe it's provided by either. I don't think that that type of equipment is provided, but I can confirm it.

Just to clarify the point, the Mr. Wallace that you mentioned is not here with us; he's not part of the officials here . . . (inaudible interjection) . . .

Mr. Chairman: — Would the member please rise and ask her questions.

Hon. Mr. McLeod: — If the member from Regina Centre, could I just ask you to . . . only because of where you're now located, just between us, we were having a very excellent discussion here, and you just happened to be right between us and it's . . . I can't speak for the member, it may not be difficult for her, but it's difficult for me with you right in the line of sight all the time.

Anyway, I would say to the hon. member, I just sent the executive director, the executive director has just gone out to make a call to confirm the status of that piece of equipment, so he'll do that now and we'll get back to it if you like.

Ms. Atkinson: — I made a mistake. I made a mistake. I believe SAIL doesn't provide the equipment. I understand that SAIL is the only group authorized to repair it. And so I'm wondering who's now authorized to repair rocking beds, that assist people in maintaining their breathing. Is that now looked after by SAIL, or is it looked after by the abilities council? I'm sorry about that, Mr. Minister.

Hon. Mr. McLeod: — Okay. If the member has, and I believe you may have there, if you have a particular circumstance of one of these, because I'm aware of one, I believe in Saskatoon, where someone has — they're a

rare piece of equipment, but somebody has salvaged one from one of the hospitals that needs repair, and they're . . . But if you have some details on that that you'd like to provide, we'll try to run it down and have someone repair it; and it probably would be under the abilities council, but I won't speak for them. But we'll do the best we can to be sure that someone does, or there's something done for it.

Ms. Atkinson: — Mr. Minister, with the rocking bed there has to be someone on call 24 hours a day, because if the equipment breaks down in the evening, it has to be repaired immediately or it will endanger the person's life. And I guess I'm wondering who's now responsible for the repair and maintenance of those rocking beds. Is it the abilities council, or is it SAIL? If it's the abilities council or if it's SAIL, is there someone still on duty 24 hours a day to look after that kind of situation, Mr. Minister?

Hon. Mr. McLeod: — I'm informed that under the former process under SAIL, we've never had anyone on call 24 hours a day, and I don't believe the abilities council has now. The circumstance that surrounds this one issue, if you are referring to that one issue, and you are indicating the one issue related to the one bed in Saskatoon, that's the circumstance that I laid out to you.

An Hon. Member: — No.

Hon. Mr. McLeod: — No? Okay, well in any case we are aware of one problem which has been brought to our attention by a nurse in the home care system who's brought this to the attention of the department, and there's some work being done on that now. But I can, without reiterating more, and we can maybe talk about it, the particular circumstance, in another forum, which I would be pleased to do. But our people will confer more about this, and if you have other things . . .

But we don't have 24-hour people, and I don't think the abilities council will have people on call 24 hours a day. It is a very rare kind of occasion, so if that's the case, there may have to be some kind of arrangement made, but whether that's made by the government, or made by the people involved, or whatever, that's a case that we could talk about.

Ms. Atkinson: — I understand the previous arrangement under SAIL, Mr. Minister, there was someone available if these rocking beds happened to stop functioning and required repair and maintenance. But we can discuss that at some later time.

Just a final question on this whole issue of SAIL. We've been advised, Mr. Minister, that now that the abilities council has taken over the equipment aspect of SAIL, that there will now be a \$200 deposit on wheelchairs and that clients will be charged \$35 for repair and maintenance. Now some people have advised us of that, and I'm wondering if you can confirm or deny that, Mr. Minister.

Hon. Mr. McLeod: — There have been, as I said before, there have been a range of discussions surrounding all these kinds of things as we went through that budget process, which was a very long and arduous thing, as I said before.

The system is in place, the same as it is now. I certainly don't confirm any of the numbers that you've reiterated. I wouldn't confirm any of those numbers, I won't say that something like that will not be contemplated or could not be contemplated for the future. So all I'll say to you is no, it's not happening now, as far as I know.

Ms. Atkinson: — Mr. Minister, as far as you know — I don't know what that means. Can you check with your officials to see whether or not there's a deposit on wheelchairs now? And can you check with your officials to see whether or not there is an hourly rate for repair and maintenance of SAIL equipment, which is now the abilities council equipment?

Hon. Mr. McLeod: — The circumstances you outlined do not apply to SAIL equipment. The abilities council, I'm told, is offering their services to other institutions and so on who will have this equipment. It's not SAIL equipment. They will offer their services in terms of a repair depot and so on, and they may well charge for that. But they do not charge on SAIL equipment or former SAIL equipment which they now administer. So there's no charge for the maintenance as you said.

And what was the other one that you asked about?

Ms. Atkinson: — Deposits.

Hon. Mr. McLeod: — Deposit — no deposit on SAIL equipment, as I said earlier.

Ms. Atkinson: — Mr. Minister, just a brief comment. I have heard some concern expressed from some Regina hospitals that they're having to order equipment from Saskatoon. It appears as though the depot here may not be up and running, so they're having to order some wheelchairs and some equipment from Saskatoon, and it's taking a while for the equipment to get down here. Now that may just be as a result of the change-over from SAIL to the abilities council, but I'm wondering if you've had any feedback, similar feedback, Mr. Minister, that there seems to be some problem with getting equipment into the Regina area?

Hon. Mr. McLeod: — The main depot in all of the system is in Saskatoon. And the depot, the five depots around the province which I mentioned earlier, are in that system. We're not aware of a problem. Like you say that you've heard this from someone on a particular case or whatever, we have not heard about that. We have not heard that there is a problem. There may be some transitional problem involved in this. But no, we don't see it as a major problem — maybe in circumstances, a few pieces of equipment in a particular hospital, but I don't think it's acute, and I think that it will certainly be solved in short order by the abilities council?

Ms. Atkinson: — Apparently, Mr. Minister, there is a problem with occupational therapists getting wheelchairs into the Regina area, and there is also some concern that the equipment isn't as well maintained as it might have been. And that may be due in part to the transfer over from SAIL to the Saskatchewan Abilities Council.

But, Mr. Minister, if you would, I'd appreciate it if you could keep your eye on that over the next month or so just to make sure that we do not have a problem developing in terms of getting equipment down to Regina and that the equipment is properly maintained.

Hon. Mr. McLeod: — I will do that. I would say that under the old system where we had two depots, Regina and Saskatoon, but Yorkton, Swift Current, P.A., North Battleford, the other places didn't have the option. So under the present system and the new one under the abilities council, they have Saskatoon as the main depot. Saskatoon is the main depot, and that's one, rather than one in Regina and Saskatoon which are both considered main depots, I guess. And I know you won't disagree with Saskatoon being the centre of things in Saskatchewan for anything, so you and I can agree on that.

And I think with that, Mr. Chairman, I would ask that the committee rise and report progress and ask for leave to sit again.

The committee reported progress.

The Assembly adjourned at 9:58 p.m.