

The Assembly met at 10 a.m.

Prayers

ROUTINE PROCEEDINGS

INTRODUCTION OF GUESTS

Mr. Hagel: — Thank you very much, Mr. Speaker. It is my pleasure this morning to introduce to you, Mr. Speaker, and through you to the members of the Assembly, 47 grade 12 students from Peacock High School in Moose Jaw who are seated in your gallery, Mr. Speaker.

Following the question period this morning, Mr. Speaker, they'll be taking a tour of the Legislative Building on this day, one day prior to the celebration of the 75th anniversary of the building, and I will be meeting with the students at 11 o'clock for pictures and refreshments.

Mr. Speaker, I know that the members of the Assembly will join me in wishing that the students from Peacock in Moose Jaw will find today's visit both interesting and educational, and I ask all members to join me in extending a warm welcome to them.

Hon. Members: Hear, hear!

ORAL QUESTIONS

Public Consultations on Free Trade

Mr. Tchorzewski: — Thank you. Mr. Premier . . . My question is directed to the Premier, Mr. Speaker, and, Mr. Premier, yesterday you announced a series of consultations on the proposed free trade treaty with the United States. The so-called public consultations are by invitation only. Can you explain why you refuse to create an all-party committee of this legislature which would hold true public hearings open to all Saskatchewan people around the province?

Will you agree to do that at this time, Mr. Premier?

Hon. Mr. Andrew: — Mr. Speaker, the government announced that we would have meetings across the province, meeting both with the sectoral groups that are affected by trade, whether it's in agriculture, in the resource sector, the manufacturing sector, and we will also have meetings open to the general public, for the general public to have their information, have their time to advance their pros and cons to the trade deal, just as we did in the . . . prior to the agreement, where we had hearings across the province and everybody had an opportunity to speak at those particular meetings.

The direct question asked by the member from Regina North East, Mr. Speaker, about using an all-party committee — quite frankly at the beginning of this session this side of the House started out with all-party committees as it related to the rules, and quite frankly those committees absolutely broke down. They were totally partisan in their way. They were not prepared to co-operate in any meaningful way, and that's . . .

Mr. Speaker: — Order, please. Order, please.

Some Hon. Members: Hear, hear!

Mr. Tchorzewski: — Supplementary to the Premier, Mr. Speaker. Mr. Premier, maybe you placed them, but I don't think I saw any ads advertising this so-called public meeting that you and some ministers had with some people in Regina yesterday. Can you inform the House when those ads were run and if they were run to inform the public about this public meeting?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, yesterday was simply a meeting with a number of people. It was not the beginning of the particular meetings to be held across the province by various cabinet ministers; that is to start next Wednesday. Those will be advertised in the paper.

And I would hope that when they are advertised in the paper, and widely advertised in the paper, the member will not change his mind, number one, and say you shouldn't be advertising; and number two, I would hope that he would attend some of those meetings and speak his piece beside . . . in front of a lot of other people that might question the seriousness of his . . . some of his concerns.

Some Hon. Members: Hear, hear!

Mr. Tchorzewski: — A new question to the Premier, Mr. Speaker. Mr. Premier, just how much of a sell-out this so-called free trade deal really is has been shown in recent days by statements that have been made by some Americans. President Reagan, in speaking to American business people about the deal, described it, and I quote to you: "a new economic constitution for North America."

An American industrialist by the name of William Randolph Hearst Jr. wrote an editorial in a number of major American newspapers over the weekend, and he was gloating about how this free trade deal will move Canada an important step closer to annexation by the United States. That's what he said.

Is this, Mr. Premier, why you're afraid to hold public hearings in Saskatchewan, true public hearings? And are you afraid that the real extent of the sell-out of this deal, which this deal represents, will come out for all Saskatchewan people to see if you held true public hearings?

Some Hon. Members: Hear, hear!

Hon. Mr. Devine: — Mr. Speaker, I believe that Canadians are going to get a real education in political philosophy over the next few months, when every single item that's raised by the NDP, or people who are afraid to trade, applies absolutely squarely and firmly on the views that are in place, Mr. Speaker, in Cuba — absolutely the same as Cuba. Don't trade . . . I mean, this is the Castro culture, Mr. Speaker, the Castro culture that we see over there.

Some Hon. Members: Hear, hear!

Hon. Mr. Devine: — I mean, don't trade with United States; don't worry about your income; you can't leave Cuba; you can't go back; you're afraid to lose your culture . . .

Mr. Speaker: — Order. Order, please. Order, please. Order. I recognize the member . . .

Hon. Mr. Devine: — Mr. Speaker, let me just say, the views . . .

Mr. Speaker: — Order, please. Order, please. Order, please.

I will give the Premier the opportunity to wrap up his remarks in a few seconds.

Hon. Mr. Devine: — Mr. Speaker, let me just say the socialist views that we hear apply readily to Cuba. Cuba is under a socialist government; their view of the United States and their view of Canada is exactly what the NDP are trying to perpetrate on the people of this country. Canadians are not going to act like Cubans. We are going to be fair traders and free traders world-wide whether you like it or not.

Some Hon. Members: Hear, hear!

Mr. Rolfes: — Mr. Speaker, my question is to Howdy Doody . . . I'm sorry, to the Premier.

Mr. Speaker: — Order, please. Order, please. Order, please. The member for Saskatoon South is using terminology in this legislature, directed against another member, which I'm sure he realizes should not be used and I wish to bring that to his attention.

An Hon. Member: — What's your authority?

Mr. Speaker: — Order, please. Order, please. Order, please! Please sit down. The member from Quill Lakes is directing remarks from his chair at the Chair. I remind the member for Quill Lakes that that is not acceptable and will not be permitted.

Mr. Rolfes: — Mr. Speaker . . .

Mr. Speaker: — Order, please. Order, please. I'm reminding the member for Quill Lakes the second time. The challenges directed at the Chair from his seat will not be accepted.

An Hon. Member: — It wasn't directed at the Chair. How do you know that?

Mr. Speaker: — Order, please. Order, please. I am reminding the member from Quill Lakes for the third time that he is not to direct challenges to the Chair from his seat. And this is the last time he will be given that warning.

Mr. Rolfes: — Mr. Speaker, first of all, let me apologize to the House and to the Premier . . .

An Hon. Member: — Not to the Premier.

Continental Energy Pact

Mr. Rolfes: — Yes, I want to apologize to the Premier.

My question is to the Premier and it deals with the continental energy pact that was signed or included in the free trade treaty. Mr. Premier, this portion of the treaty guarantees the Americans total access to all Canadian energy, including coal, gas, and hydro power, at less than market value prices and in times of energy shortages.

Mr. Premier, you told this . . . this particular part of the free treaty energy . . . free treaty pact is a very important part for Saskatchewan, and you told this House, Mr. Premier, that those things were discussed fully with all the premiers, and yet Premier Ghiz, Premier Pawley, and Peckford denied this, said that it was not discussed; it was done in secret.

Mr. Premier, can you tell this House why there is such a discrepancy between your view of what went on and the view of Premier Pawley, Premier Ghiz, and Premier Peckford?

Some Hon. Members: Hear, hear!

Hon. Mr. Devine: — Mr. Speaker, I can say to the hon. member, on June 30 a complete briefing was provided officials with respect to energy and the possibilities of a separate energy chapter in a slide presentation, and on July 7 the same information was provided to the premiers. On September 13 officials got another slide presentation and on energy, agriculture, alcoholic beverages — U.S. pressing for an energy chapter because we wanted access to energy and they wanted guarantee of supplies. September 14 the first ministers got the same slide show on energy, on the fact that they wanted a separate chapter in energy.

We knew that we wanted to have access to the United States market, and access to the United States markets means the United States wants some security of supply. When you do business with any of your customers, you say, I would like to have your business, I will provide continuity of supply.

So for anybody to say that we have not been briefed on energy when the province of Alberta and the province of Saskatchewan have almost a hundred per cent of the oil and gas in western Canada, if not all of Canada, is a little interesting.

Secondly, Mr. Speaker, if I could say that P.E.I., P.E.I. wants it both ways. They don't buy oil from Canada; they buy it from Venezuela and Mexico and other people. And when it's very expensive, they want it cheap from western Canada. Now if they want national security and they want oil from the west then they can . . . pardon me, they can invest in western Canada energy, Mr. Speaker, like anybody else should. They can't have it both ways, and Ontario can't have it both ways. It's about time they realized that.

Some Hon. Members: Hear, hear!

Mr. Rolfes: — Supplementary question to the Premier? It's rather strange that three other premiers, Premier Ghiz, Premier Pawley, and Premier Peckford, let me remind the Premier, have a different version of what went on, and it's our Premier that has his own version of how this whole thing was discussed in full.

Mr. Premier, the problem is . . . the point still is that we have given the Americans complete control over our energy — complete control over our energy. Even in time of shortages we have no right, we have no right to charge fair market price for our energy. Mr. Premier, you've sold out the Canadians, you've sold out Saskatchewan, and you've given away our energy.

Some Hon. Members: Hear, hear!

Mr. Rolfes: — I ask you, Mr. Premier, how do you consider that standing up for Saskatchewan rights and for our energy in the future here in Saskatchewan?

Some Hon. Members: Hear, hear!

Hon. Mr. Devine: — Mr. Speaker, I believe that all Saskatchewan people would be very surprised to see the energy critic for the NDP defending Ontario against western Canada so that they can have cheap energy. He knows as well as I do, the former leader and the former premier of the province, the late Tommy Douglas, would not stand in his place there and defend Ontario against western Canada. But he's doing it — he's doing it. You want to fall into the arms of Ontario. You want to give them cheap gas and cheap energy when it's . . . (inaudible interjection) . . . That's Bob White's view. And he's defending Bob White against Westerners, against Saskatchewan people, Mr. Speaker.

I will say we have signed an agreement that said that we can have access to the United States market, and we will not discriminate. We have full sovereign control over our energy. We can turn the tap. We have the constitutional ability, Mr. Speaker, to turn the tap on potash or turn the tap on oil or energy, and we can and we will, Mr. Speaker. All we've said is that we're going to have fair market access to our neighbour to the South because they're big customers, but he'd rather defend Ontario.

And I'll campaign with you or against you any place in this province, Bob White versus Saskatchewan and the NDP.

Some Hon. Members: Hear, hear!

Mr. Rolfes: — Supplementary question, Mr. Speaker. Mr. Speaker, I want to tell the Premier of this province that I'd much rather stand up for Canadians than Americans, and give the Americans . . .

Some Hon. Members: Hear, hear!

Mr. Rolfes: — . . . and give the Americans full access and full control over our energy, particularly, Mr. Speaker, in times of shortages. And I say to the Premier again: you have not safeguarded the interests of Saskatchewan people. All you have done is said, me too, to Brian Mulroney. And it's about time, Mr. Premier, that you

stand up for the rights of Saskatchewan people and our energy problems here.

Some Hon. Members: Hear, hear!

Hon. Mr. Devine: — Mr. Speaker, he's run out of questions. He didn't ask one; he just made a statement. I will just say, Mr. Speaker, finally, I will go with you, my friend, I'll go with you any . . .

Mr. Speaker: — Order, please. Order, please. Order, please. The member has asked his question and the Premier is attempting to respond. Let us allow that to go forward.

Hon. Mr. Devine: — Mr. Speaker, the hon. member can join me in any community that produces oil in this province, any community that is in the energy business, and you and I can talk to them whether they want access to the United States market for their oil. You can ask them that, and do you know what they'll say? They'll say, we will market into the United States; the biggest customer we have is the coke refinery in Minneapolis. And you have put the binders on and the clamps on the oil industry for decades, Mr. Speaker.

The NDP are not trusted by the oil patch; they're not trusted by people in energy; they're not trusted by people in agriculture, because number one, they don't understand it, and number two, they'd sooner be in the pocket of Ontario than they would stand and defend Saskatchewan people and Saskatchewan energy interests.

Some Hon. Members: Hear, hear!

Saskatchewan Investors' Representation in Alberta

Ms. Smart: — Thank you, Mr. Speaker. My question is to the Minister of Consumer Affairs, and it concerns the Alberta lawyer whom the Government of Saskatchewan hired to keep track of the Alberta public inquiry into the collapse of First Investors and Associated Investors. My question: has the Government of Saskatchewan instructed this lawyer to assist Saskatchewan investors who come before the inquiry, and will the government's lawyer provide any advice or assistance to Saskatchewan investors who travel to Edmonton to be heard by the inquiry?

Some Hon. Members: Hear, hear!

Hon. Mr. Lane: — Mr. Speaker, this is the same question that was asked several months . . .

Mr. Speaker: — Order. Order, please. Order. It seems that hon. members ask ministers questions but immediately interrupt them. I don't think we can have an orderly question period if we follow that method, so I would once more ask for the co-operation of members to ask the minister to reply.

Hon. Mr. Lane: — Mr. Speaker . . .

Mr. Speaker: — Order, please. Order, please. Unfortunately the member for Regina North East is once

again interrupting, and I ask for his co-operation.

Hon. Mr. Lane: — Thank you, Mr. Speaker. This hon. member has asked this question several months back and obviously forgot the answer. The lawyer represents the government of the province of Saskatchewan; we made that abundantly clear.

If the hon. member understood anything about the legal profession, she may know that many of the investors already have their own lawyer, and for another lawyer to begin giving advice would be contrary to the code of ethics. And I'm surprised that the hon. member doesn't know that.

We've set out on numerous occasions, Mr. Speaker — I know it's been a long session and costing some \$90,000 a day, but it's not a justification for repetitious questions, Mr. Speaker, that the hon. members had answers several months ago.

Some Hon. Members: Hear, hear!

Ms. Smart: — Supplementary question, Mr. Speaker. This Government of Saskatchewan is paying for that lawyer to be in Alberta to go to the public inquiry. That lawyer is being paid out of public funds. The lawyer that the people have hired, the investors have hired, is only being paid by the few people. And so if this government's lawyer is not going to be available to Saskatchewan investors to advise them before they testify at the Alberta inquiry, I want to ask you this: has the Saskatchewan government's lawyer been in contact with these investors who lost money in this affair to get their input; and has he asked them what questions they want answered by the Alberta inquiry, and what issues are vital to them, to the investors who've lost their life savings in this collapse of these companies?

Some Hon. Members: Hear, hear!

Hon. Mr. Lane: — It's unfortunate, Mr. Speaker, that the hon. member persists in showing ignorance of the legal position of the various investors. Some will be making allegations of misrepresentation. Others will in fact simply be asking for compensation. The reasons for the investors' investment in the Principal Group of companies will vary, and there are several different reasons, some of them contradictory, one to the other. So to have the government representative try and give advice to the conflicting interest, I think, frankly, would be both improper and unwise.

As I've indicated on several occasions, repeating over and over and over again, Mr. Speaker, the lawyer is representing the interest and advising the government and the province of Saskatchewan, Mr. Speaker. I know that the hon. members are asking for a bail-out. They were opposed to a bail-out in Pioneer, but . . .

Mr. Speaker: — Order. Order.

Some Hon. Members: Hear, hear!

Ms. Smart: — Another supplementary, Mr. Speaker. Mr. Minister, this inquiry in Alberta is being held on behalf of all the investors because you wouldn't hold a public

inquiry here in Saskatchewan. Saskatchewan investors deserve to get to Alberta, and they deserve to get support. And they deserve funding from this government to make sure that their concerns are heard at that public inquiry. So if the lawyer is not available to the Saskatchewan . . .

Mr. Speaker: — Order, please. Order, please. Order, please. Order, please. Order! The hon. member is submitting a preamble to a supplementary and I am sure that she realizes she's getting a little too long.

Ms. Smart: — New question. Whose interests is this government lawyer representing then, and who is he there to protect, the investors of the Government of Saskatchewan?

Some Hon. Members: Hear, hear!

Hon. Mr. Lane: — One, he is not a government lawyer, he is a lawyer retained by the province of Saskatchewan to represent the interests of the Government of Saskatchewan at the hearings. Secondly, as we've debated several months now, Mr. Speaker, we indicated that to hold a public inquiry at this time is simply duplicating what is going on in the province of Alberta and, I believe, a serious waste of taxpayers' money.

Thirdly, the Government of Saskatchewan has indicated on several occasions there will not be a bail-out. Fourthly, we do not intend to use taxpayers' money to send people to appear in the province of Alberta, and I've made that clear on numerous occasions. I don't know why the hon. member is not listening.

Some Hon. Members: Hear, hear!

Ms. Smart: — I have a new question to the minister. Obviously the people . . . Saskatchewan investors are being muzzled. But my question involves Premier Getty saying recently that his government would cover the cost of investors in these two companies if the Albert inquiry reveals government negligence.

My question: has the Government of Saskatchewan written to Premier Getty demanding that any such payments be made to Saskatchewan residents as well as Alberta residents, using the Pioneer Trust example as a precedent? And do you have a commitment in writing from Premier Getty that any payments to investors will be made to Saskatchewan investors and not just Alberta residents?

Some Hon. Members: Hear, hear!

Hon. Mr. Lane: — That's the third time, Mr. Speaker, that that question has been asked by the hon. member, and I just can't understand why she is not listening to the answer. I indicated back in August that I had written to the provincial treasurer of the province of Alberta, one, setting out what the province of Saskatchewan had done with regard to out-of-province investors in Pioneer and expecting that we were asking for the same consideration to be applied to Saskatchewan investors as a result of the Principal. I've indicated that on several occasions. We have not received a response, Mr. Speaker, but we have stated the position that we believe that the same

consideration should apply to out-of-province investors in the Principal case, as Saskatchewan honoured in the Pioneer Trust matter.

Some Hon. Members: Hear, hear!

Effects of Free Trade on Steel Industry

Mr. Goodale: — Thank you, Mr. Speaker. My question is for the Premier, and again on the matter of free trade. I would like to know the government's intentions for dealing with the serious problem in the draft Canada-U.S. free trade deal that was identified by Mr. Roger Phillips, the chief executive officer at Ipsco Steel. He points out in his concern that U.S. law defines "dumping" to include both unfair predatory pricing of export products and simple depressed market pricing caused by cyclical market swings. And surely, Mr. Premier, you must agree with Mr. Phillips that there is a difference between those two, and they ought to be treated differently.

Will you concede that Mr. Phillips does have a valid concern with respect to this point, and would you indicate precisely what steps you would be pursuing in terms of the final legal text of this agreement to have that very serious problem rectified, which if unrectified could be a critical failure in this deal as far as Ipsco Steel is concerned?

Hon. Mr. Devine: — Well, Mr. Speaker, the dumping laws in the United States and Canada are virtually identical. We have the same law as Americans and we apply them against each other. The particular problem that applies to Ipsco and to potash in many cases is the constructed costs that have to be designed and produced when you have a unique situation that you don't sell an awful lot of your product in your domestic country. That raises a problem when we run into a cyclical variations in prices. It happens in steel, and it happens in potash, and it is not fair.

Mr. Phillips has made the point that we should reconstruct that to either average it over some time or get national treatment so a firm in Canada is given the same treatment as a firm in the United States. And we would like to see that happen.

Now we have three choices. We can leave it as it is, which is unfair. I don't think we should do that. Secondly we could get it changed immediately, but that's impossible. I mean Americans and Canadians will not change their laws overnight. I mean it's difficult enough, you know, to modify constitutions and have a trade package in general, let alone change all specific laws at once. So the third option is to change it over time and accept a mechanism today that would allow us to harmonize our laws, our dumping laws and our countervail laws, over the next three years, five years, seven years, to make sure that in fact they are fair and they do meet the requirements of the industry. Mr. Phillips would like it changed immediately. So would I. I don't think we can, so it will take some time.

Some Hon. Members: Hear, hear!

ORDERS OF THE DAY

GOVERNMENT ORDERS

COMMITTEE OF FINANCE

Consolidated Fund Budgetary Expenditure Health Ordinary Expenditure — Vote 32

Item 1 (continued)

Mr. Koenker: — Thank you, Mr. Chairperson. Mr. Minister, yesterday afternoon just before 5 o'clock, I asked you a question about Sherbrooke nursing home, and you indicated that the . . . my question had to do with the number of level 4 patients in the home, 38 per cent of them being level 4 — 125 individuals classified as level 4. And you told me that in '86-87 there were an additional full-time equivalent staff added to Sherbrooke home, of 4.2.

Now I find that rather remarkable. Perhaps that is the case, and I don't doubt that that's true. I simply hold up for your consideration, information from Sherbrooke home itself that says in the last five years the shortage of full-time equivalent staff has never been higher; that in fact, for '86-87 the number of full-time equivalent staff short is 11.6 — 11.6 staff short — in spite of the 4.2 that you say were added.

Something isn't adding up here, and I think that the staff and the administration of Sherbrooke home know what it is. What isn't adding up is government support for heavy duty care. Level 4 care places a heavy load on staff time and laundry staff, nursing staff, the whole works. We have a situation in which Sherbrooke home has 38 per cent of its residents at level 4, and they need to be funded to take care of those people, and they're receiving nothing for it.

What solution can you offer to homes like Sherbrooke, which places it essentially at the largest level 4 home in the province, and yet it isn't getting funded for that?

Hon. Mr. McLeod: — Yes, as we completed yesterday's estimates we were discussing this issue and there's no question you've . . . what you have identified in the case of Sherbrooke is what we all must identify and what has been identified across the province. And just let me give you a little bit of a number to show the trend. In '81 about 50 per cent of the system were in what we'll call light care or in level 1 or 2 — about 50 per cent of the people. And presently it's about 20 per cent of people are in level 1 or 2 which would mean, you know, the 80 per cent level or somewhere in that order at higher level or heavier care.

With the recognition of that sort of trend, and it's obviously a marked trend, you know, we've been identifying that over a period of time. And Sherbrooke has shared in that, maybe not to the extent that they would like or that other individual homes, whether they be in Meadow Lake or in Sherbrooke in Saskatoon, may not have received that kind of recognition that they would like to. But I would commend them, frankly, for the way in which they're able to cope with heavier care and the way they're . . . and it is coping to some extent.

Let me just give you some numbers to show that these numbers have not been static and that there has been increasing funding based on the trend that you identify. Total positions since '83-84 have been 422 more full-time equivalent positions funded by continuing care branch for an annualized cost — and I emphasize annualized — an annualized cost of \$9.7 million added.

That's a significant dollar amount and obviously it's directed at a significant trend, the one that you identify. But we're aware of the trend that you identify. Sherbrooke people are doing and continue to do an excellent job in the face of this trend which is really going; we know that.

And obviously there are many ways to look at this and many factors to consider, and one of them being home care and all of the other kinds of things we must do. But you cannot diminish the fact that — no one can; I mean I can't, you can't — diminish the fact that heavier levels of care are required as we come into this population trend that I mentioned yesterday to several of your colleagues and to yourself, about the fact that we have the highest percentage of people in our province who are 75 and over.

Mr. Koenker: — Well I certainly agree with you that we can't diminish that fact, and I certainly won't diminish it. I think we're talking the same language in recognizing the problem. My concern is the solution. And that's why I question you about it.

Do you not agree that to have level 4 people in nursing homes is more cost efficient than to have them in hospitals, that there are any number of level 4 patients presently in hospitals who could and should be in nursing homes if level 4 funding was available for the nursing homes?

I know for a fact that Sherbrooke has been very co-operative and supportive of the co-ordinated assessment unit in Saskatoon that admits patients to their home on the basis of priority need. This has meant, in fact, that Sherbrooke home, of all the homes in Saskatoon, has willingly accepted a far heavier work-load than they would have needed to accept had they not been part of this co-ordinated assessment unit.

And so the problem becomes a problem of not only recognizing the increased demand for care but that the government itself has some responsibility, some obligation to provide for that care, particularly when it's more cost efficient vis-à-vis hospital care.

Can you give some assurance to homes that you will be regularly increasing funding for level 4 care that is presently being done in homes such as Sherbrooke, for which they aren't being paid? Can you give some assurance that you're going to tackle this problem in consultation with them and come up with a solution in terms of more adequate funding? We don't expect things to change overnight, but something's got to be done.

Hon. Mr. McLeod: — Well I can give you the assurance that — yes, the assurance that I've given you just a few moments ago — that we recognize the need that you've identified as it relates to Sherbrooke home in Saskatoon,

as I must identify it in the widest context, across the province in all of the homes that are there, both rural and urban.

And I just say to you that, you know, your point that says, had Sherbrooke not accepted the heavier-care people through the district, you know, the co-ordinating committee and so on, they would have been better off.

But obviously I don't believe you, at least I certainly hope you're not suggesting that that's what they might have done. They don't suggest that's what they might have done because it's, you know, it's not a . . . that wouldn't be the responsible position to take, and they certainly do take responsible positions in this. I gave you the numbers in terms of the number of more staff, the number of dollars added over a period of some time.

There will always be debate, I suppose, as the nature of this forum sometimes. The debate will be, you say we're not spending enough, and we say we're spending as much as we can, and that will go on and on.

But the key point here is, and I think you've rightly identified it, is that we have to identify that there is heavier care. We have, and we have responded, and I'll give you the assurance that through the formula system that's set up which is based to a large extent, or to some extent certainly, on the level of care that needed to provide, that there will be increasing funding as the years go on because the trend line that we've identified that's happened over a period of some years, is also projected to increase in the same way. So we recognize it, and yes, there will be increasing funding as the years go on now to identify that.

Mr. Koenker: — I would just, to add to that, that I hope that that funding would be done in consultation with the homes and their boards and administrators, and not just unilaterally.

On a slightly different matter, I raise the question of funding for operating staff for the therapeutic pool at Sherbrooke home. This pool was completed and ready for operation on May 11 of this year — May 11. The home has been told a year ago, in June of 1986, that the provincial government would provide funding for operating costs at the pool, and this spring they were notified that that simply was not the case — that operating costs for '87-88 were being reviewed and that funding would not be available.

Meanwhile, Sherbrooke has commenced use of the pool. It's only reasonable since it's there, to begin using it. It's meant that they've had to pay for a half-time physiotherapist and a full-time activity attendant. My question is: are you aware of this problem at Sherbrooke home with respect to the therapeutic pool? And secondly, what are you prepared to do about honouring the commitment that was made to the home to fund the operation and the staffing for this pool? As a matter of fact, what it has come down to in Sherbrooke home is that they are going to the local school and asking for grade school children to come and help out with the elderly using this pool.

(1045)

Now there may be a place for that in the larger scheme of things, but I think it signifies the kind of problem that they're up against when they have to employ grade school children to come in and bail the provincial government out for lack of funding for a therapy pool that was built by the home — not by government money; by the home — and was promised government operating funds and now doesn't have it. What can you say to Sherbrooke about this situation?

Hon. Mr. McLeod: — Okay, just a couple of points to your comments. First of all, the initial comment about whether the funding levels on an annual basis would be done in consultation. The answer to that is yes, because that's how it's done every year and there certainly won't be a change to that. We have ongoing consultation in various homes who have put in their requests, and their requests are looked at based on the criteria that are set forward by the Department of Health in the continuing care branch.

And I just want to come back now to the therapy pool, and just so we put this into perspective. I commend the people at Sherbrooke who say that, look, therapy pools are important to the operation out there, in terms of the kinds of therapy that would be available, in terms of keeping the people more mobile, in terms of all of the kinds of things which no one can dispute.

What we must do in the difficult task we have of allocating the dollars is to keep a provincial perspective on all of this to say, just how can we set up our funding formula, and will the funding formula for Sherbrooke be different than it is for other homes across the province who give care to people who are classified at the same level, level 4 let's say, or level 3. So we have to keep that provincial perspective.

I want to tell you now that when Sherbrooke made the decision and came to the department for saying that they wanted to include the therapy pool in, we said, fine. But we also said there will be no assurances and there never were assurances given that they would have funding at the total level for the operation of that. So they needed to know that because of that provincial perspective I just gave you.

Some portion of the therapy staff that deals with that pool are funded because that was put into the system when we talked about the overall therapy positions or therapy staff at the Sherbrooke home. And I just say that . . . All I can really say is that while I commend them for going that route, which is on the leading edge, frankly, of the way in which people in heavier care should be dealt with, it's an area that we can't just fund on the basis of someone having built it and still maintain any credibility of keeping a provincial perspective on how people in all parts of the province who are in need of this kind of care are treated.

Mr. Koenker: — Well, Mr. Minister, I say, and I think there's no doubt about it, that the Sherbrooke people say you reneged on your commitment to funding the operating costs of that pool. And I'll simply leave it at that.

It simply isn't true to say that there never were assurances for funding at the total level. There were promises made by your department to Sherbrooke to funding of the pool. I will leave it at that.

I want to move on to another promise that was made for funding at Sherbrooke home, and this promise was made a year ago, a year and a week ago on October 8, 1986, when it was announced during the provincial election that there would be a regeneration project funded at Sherbrooke home. Construction is now in limbo, now that you've won the election. And my question to you is: when will you honour your commitment to Sherbrooke home, your election commitment that you've reneged on, and give them an idea of when they can commence construction on their regeneration project?

It's one of the few homes in the province to have four-bed wards. And I think that's almost an obsolete concept in terms of home care these days. There's obviously a crying need for regeneration there. They're being asked to cope with less staff in terms of their level 4 care as we've talked about. You've got the sick and the elderly with no privacy, further demands on staff. What kind of assurances can you give to Sherbrooke home that they're going to see you honouring your commitment to them?

Hon. Mr. McLeod: — Well, Mr. Chairman, yesterday when I was talking to the member's colleague from Moose Jaw, and we talked about, in that case, St. Anthony's Home in Moose Jaw and the recognition of the need. The answer is very similar here, although I want to point out that the need at St. Anthony's and the reason it was up on the list from Sherbrooke is because, frankly, the need is greater at St. Anthony's because of the age of the place and so on. So that is just a fact. That's not to diminish the fact that there is a need of some upgrading at Sherbrooke.

In terms of today's standards and so on, and the kinds of standards that we have in Saskatchewan that we've adopted and that are standards that we're proud of for setting certain standards, and asking people to aspire to them and move up to them so that there is the best care for these people . . . I should also point out, just in a comparative sense, they're the highest standards that exist in this country anywhere. And in Sherbrooke, obviously, although it was, you know, it's not that old, is certainly in need of some upgrading to meet those standards. But the point that I made — the points that I made yesterday regarding St. Anthony's and some other deferrals were just the very facts that some deferrals had to take place.

The home that you now speak of was on the list for 1988-89 for replacement, 120 replacement beds or upgrading of 120 beds. Those are not easy decisions to make. These deferrals . . . And the reason that the '88-89 list of projects received a letter which said, you know, you are deferred — and you will notice again, and I emphasize once again, there was nothing that . . . They were not cancelled. They were deferred because those which were ahead of them on the list, like St. Anthony's, which was . . . and Montmartre and Cabri and some others that were mentioned were seen to be of greater need, and they will be built before Sherbrooke. But that

does not diminish the fact that there's some need there, and you and I are in agreement on that. It's just a matter of timing, and it's a matter of the fiscal circumstance of the province, and that's what it's based on.

Mr. Koenker: — All I can say, Mr. Minister, is that I urge you not to sacrifice the people who have built this province, the pioneers and the elderly, on the altar of the deficit, and I urge you to argue powerfully with your cabinet colleagues for increased spending in this particular arena. We owe a debt of immense gratitude to these people, and I think that as representatives responsible for public resources we can hardly go wrong in funding adequate care for the elderly in spite of a deficit budget. We owe them a debt, and we have to pay that debt before we look at the deficit itself.

Hon. Mr. McLeod: — I wish you hadn't chosen words like "sacrifice the elderly," and in your words, "the people who built the province," and so on. It's not an appropriate suggestion to make, no. It isn't, and it is for this reason.

I went through this yesterday, and I won't go through it in all detail unless you would like me to read the whole list. But the kind of commitment that we have had and that we continue to have for the building of more than adequate but certainly excellent care homes for our elderly in this province is a commitment that, as your colleague said, he congratulates us for every bed that we built. Thank you.

And all I can say is it's not a matter of, and I don't want to get into that, of who is to be congratulated and all that sort of stuff. You and I should at least be able to agree on this — and I think frankly we can — is that there has been a tremendous commitment over the last few years for the building of homes, a tremendous commitment in terms of the numbers — 156 beds in '82-83; 115 in '83-84; 328 in '84-85; 412 in '85-86; 162 in '86-87.

Those are tremendous numbers when you start to think of what the costs are, but they still don't address the chronic need that's there, and we recognize that. And we're trying to do that. And we're doing everything that's humanly possible with the funds available to us to continue that commitment. And you know, I give you the assurance that we will continue that commitment. It's one that we take very seriously, and we will continue that commitment to our seniors, whether they be in Saskatoon, or, as I've said before, in all of these communities.

And there's two pages of all the communities where the seniors, to use your terms, who have built our communities in our province and who have contributed so much, are so very, very well looked after by excellent staffs in all of those places, including Sherbrooke, the one that you mentioned.

So sure, the commitment is still there. I hear what you're saying. You're disappointed in the deferral; I'm disappointed in having to announce the deferral. Don't think that's an easy thing to do, to send a letter of deferral. It is not. And all I'm saying is that we will continue that commitment.

I am pleased to say to the hon. member that we have been able to maintain and more than maintain the funding for health care that was there last year. That's tremendous accomplishment in the face of some very difficult fiscal circumstances for our total province.

Mr. Calvert: — Mr. Minister, I would like to continue in this same vein of questioning. My colleague from Saskatoon has just raised the issue with you of the commitment made to Sherbrooke, and you've been discussing that. Yesterday in our conversations we talked about the number of special care institutions that have been delayed or deferred or put on hold, however we describe it. The number yesterday I think was seven. Today we're talking about Sherbrooke.

I ask you, Mr. Minister, in our conversation yesterday we did not mention the town of Liberty. Was a commitment made in the community of . . . I'm sorry, Imperial . . . the community of Imperial. Was a commitment made to the community of Imperial, and has that commitment been deferred or delayed or put on hold?

Hon. Mr. McLeod: — Imperial is on the list for 1989-90, a 10-bed integrated facility, which means some nursing home beds built onto their hospital — '89-90. And they've received the deferral letter which we talked about yesterday which means that it's deferred to a date that I can't be definitive about, but certainly we recognize the need there as well.

(1100)

Mr. Calvert: — So the list continues to grow, and there may yet be other projects which have been deferred that we haven't raised here in the House. Mr. Minister, your reasoning in this House for deferring these projects, to quote you, has something to do with the fiscal circumstance of the province, which I again find interesting that the argument does not apply to other projects being undertaken by your government, and other spending announcements by your government. Apparently this fiscal circumstance of the province does not apply to the home improvements grants; it does not apply to that long list that we've so often gone through in this House — patronage and grants to out-of-province interests. Apparently it doesn't apply to a highway going through Melfort, and yet it does apply to the deferment of nursing home construction.

Mr. Minister, I'm going to leave it to MLAs who represent their own constituency to be lobbying you in terms of the nursing homes and the continuing care centres in their own constituency, just as my colleague from Saskatoon just has done. I do not want to leave this subject without lobbying you further in terms of St. Anthony's Home in Moose Jaw.

We have agreed, you've agreed, everybody agrees that the need exists in Moose Jaw for a new St. Anthony's Home. There's no debate about that. The current building is falling down, as you know. As you also well know there is a substantial waiting list in Moose Jaw. There's a keen demand for the beds that would be provided in a new St. Anthony's Home, so the need is not debated.

You've also said in this House during these estimates that you remain committed to the project, that the project is going ahead. You've assured us of that on several occasions. You have not given us a time line. You have not said whether it will go ahead next year or the next year or the next year. Mr. Minister, I want to again today lobby you to have this project go ahead immediately, to go ahead in this budget year.

And if we can just set the partisan politic aside and look at this as reasonable individuals, by my calculation, Mr. Minister, if you defer this project — and I understand it's a project valued somewhere between 11.5 and \$12 million — if the project is deferred one year and we use an inflation rate of about 3 per cent, to be conservative and use an inflation rate of about 3 per cent, then in a year's time that same project is going to cost another \$345,000. If the project is deferred two years, then we can look at a \$700,000 increase.

And so it seems to me, Mr. Minister, it makes some good financial and economic sense to go ahead with the project now and save that extra cost in terms of inflation. It makes some good sense, Mr. Minister, to go ahead with the project now because much of the funding that's committed locally, that has been raised in the community of Moose Jaw and around Moose Jaw, that tremendous response we saw to the St. Anthony's funding raising drive — we know that much of that is not money in the bank collecting interest. We know that much of it is committed money. And there is some concern — and you will understand the concern — that some of that committed money may be lost if the project continues to be deferred year after year after year.

Mr. Minister, you know and I know that initiation of that kind of a project, a massive project for the community of Moose Jaw, would serve to create a fair bit of economic spin-off. It would create job creation. You know those benefits.

So with those arguments in mind, Mr. Minister, will you reconsider your decision regarding St. Anthony's Home in Moose Jaw, that that project may go ahead in this fiscal year?

Hon. Mr. McLeod: — A couple of comments. First of all, to your general comments prior to the St. Anthony's specifics which we'll get to.

You mentioned Imperial, and I replied that it was on the '89-90 list, and then you made some comment that the list continues to grow, and so on, from yesterday. Now I want you to be very clear; your questions yesterday related to the deferrals of '87-88, and I responded to them fully. So there are other projects which have been on the list and who have received letters which have said that they're set back in '88-89, '89-90.

I would say, you've said that you will leave it to the MLAs to lobby on behalf of their own projects, and that's fair and they do that. In the case of Imperial, which you mentioned as well, the member from Arm River has been talking to me on many occasions. The particular one you mention I'm very aware of because it happens to be the home town of my wife and she has relatives there, and so

on, some of whom even work at that hospital, and so on. So I can assure the member from Moose Jaw, and I can assure all the members of the House, I hear about the Imperial project on various occasions, most of which are happy occasions when families meet, but sometimes this subject does come into the conversation, just by the nature of what I now do.

But anyway, there are many projects that are the same, and it's because of that kind of contract, whether it's in my own riding or there, that I do have a good understanding of what goes on in the communities in terms of the raising of funds and the committing of funds and the pledges and all of the kinds of things that must go on at the community level.

And now let's go to the specifics of St. Anthony's. The answers will be the same as the answer was yesterday. I understand what you're saying and what you're doing in terms of, you know, please change your mind and I'm pleading with you on behalf of my people, and all of that. And I recognize that for what it is. But I want to point out to you that I cannot do that. The decision was made, and it was a difficult one but a responsible one at the time. As I've said yesterday, the commitment is still there and the recognition of need is still there.

You know, and I want to point out another thing, and this is one that is important to because you say, please change your mind and please do this now. But I want to point out that the reason that we're even talking about St. Anthony's and that they do have an expectation that there will be a home and so on is because of the very commitment that I spoke of earlier, of this government and my colleagues. That commitment is what put St. Anthony's on the agenda in terms of having a new home.

I mean, this home that is dilapidated, and it is in severe . . . in a situation of ill repair and so on, was not built in 1982. I mean, it was built a good long number of years ago, and was not given a regeneration project or discussed . . . a regeneration project was not discussed with them prior to the commitment of this group — our government which I have talked about before.

So just to put that into perspective and then to say that we still have the commitment, we very much recognize the need for people there in Moose Jaw. And we recognize as well the population ratio in Moose Jaw, and there's a significant ageing population ratio in Moose Jaw. We say across the province that it's high, but it's certainly above the provincial average in Moose Jaw, and we recognize that as well.

Mr. Calvert: — Mr. Minister, I don't accept it when you say to this House that you can't do it. You can do it, Mr. Minister, you can do it.

This very week we've seen you respond, in a fashion, to the hospital waiting list in Saskatoon. To a crisis situation you have responded in a fashion. You said to this House the other day that there will be an extra million dollars put into this response. So you can do it, Mr. Minister, when there is a crisis; when there is a need, you can respond. I submit to you that you could respond to this request.

Let me warn you, Mr. Minister, that the Moose Jaw city council in a meeting this week passed a unanimous motion to again come to the Premier and to yourself requesting a reconsideration of St. Anthony's Home. Mr. Minister, what will you be saying to those people when you meet them?

Hon. Mr. McLeod: — I refer . . . once again, I cannot change it, and because I must . . . while it's legitimate for you to have very much a Moose Jaw South perspective, and I like very much to have a Meadow Lake perspective on the world at times, I'm not given that luxury. I have to have the provincial, the Saskatchewan perspective from border to border on all four of our borders. And we have that perspective very much when it relates to the building and the construction and the funding and the staffing of special care homes across this province.

I have said to you and acknowledged along with you — we've come to an agreement, and we do agree — that there is a need and there will be . . . the commitment will be honoured. You say that we're meeting with the board — I'm not sure of the date that you're referring to or the paper or whatever. But whenever I meet with city council or board or whoever in Moose Jaw, I can assure you, what I'll be saying to them is the same as what I've been saying to you here in the House. You're the representative of people in Moose Jaw. They are representatives of people in Moose Jaw. They will not have a different story from me than what you have. It's a very clear message that I have for you and that I will have for them, and it is recognition of need. The commitment continues.

We continue to be committed to the seniors of all of Saskatchewan, including those in Moose Jaw. And there's little more that I can add, except to just ask you to recognize that when we deal with these things, you know, as a cabinet, and I as a minister of this department, have to have that provincial perspective. And we do very much take that seriously.

Mr. Calvert: — Mr. Minister, it seems to me we're not going to make much progress on this, so then let's just maybe look at it in a little different perspective. Mr. Minister, you will know that some years ago St. Anthony's offered something in excess of 180 beds before the closure of the third floor. You will know that your commitment to St. Anthony's is to replace the current 160 beds.

If you are not willing then to go ahead with the project this year, would you be willing to broaden the commitment a little bit? Now that the project has been deferred, would you look at restoring, let's say, at least 180 beds at St. Anthony's Home, rather than the 160 you are now committed to?

Hon. Mr. McLeod: — Mr. Chairman, the questions that the members asks are questions that have been asked by the board of St. Anthony's when I met with the representatives of their board, and so on, the administrator.

What I will say to the member is that I understand their disappointment. I understand yours, which you express on their behalf, and so on. But the position will be the

same. The commitment is there for the project as it was developed in its final analysis to this unfortunate deferral.

I understand the disappointment, if that's what you want me to say. Yes, I do understand disappointment. I feel disappointment, as you feel disappointment, but there's nothing more that we can do. I mean, you're . . . It won't serve the committee well, it won't serve any of us well if you . . . you know, for you to beat on this any longer, because the fact is the commitment is there and it will carry on.

But that's all we can . . . That's all I can say. And there's nothing really more that I could add as it relates to the specifics of St. Anthony's.

Mr. Calvert: — Mr. Minister, I moved our conversation in a new direction there, and I'm not sure you've addressed my question.

You've recognized that the city of Moose Jaw has the highest percentage of seniors anywhere . . . of any community in this province, and therefore of perhaps any community in this nation. You've recognized the desperate need in Moose Jaw and the surrounding area for nursing home beds. You are replacing a facility. You're commitment is to replace a facility that once offered 180 beds. You're replacing that facility with one that will offer 160 beds. I'm asking you, Mr. Minister, to review that commitment and again provide to the citizens of Moose Jaw and district a facility that offers the 180 beds we formerly had.

Hon. Mr. McLeod: — The decision as it relates to 160, 180, that was a decision that was come to certainly with the board. The board agreed with that and very much are in agreement as far as I've been informed by everybody, and certainly didn't indicate to me that they were changing their view as it relates to how the new project would be constituted. That's not the issue. The issue is when can we start, and I understand that. But that's the issue and, you know, the answer is as it was.

(1115)

Mr. Calvert: — Mr. Minister, I'm raising a new issue. The issue is the number of beds needed in the city of Moose Jaw. How can you justify then rebuilding with fewer beds than used to exist? How do you explain that? How do you explain to the people of Moose Jaw that we need 20 fewer beds than we did in the early 1980s?

Hon. Mr. McLeod: — Mr. Chairman, St. Anthony's is now 157 beds. I'm told the number of beds in Moose Jaw in the special care facilities are: 39 at the Grafton Gage lodge; 103 at Pioneer Housing; 157 now at St. Anthony's; and Extencicare 127, for a total of 426 beds in that city. So you know it's a substantial number, there's no question about that. So the issue that we've been discussing as it relates to St. Anthony's is the state of repair of that St. Anthony's Home and the need for replacement, which we both recognize, and it's just a matter of when, now. Okay.

Once again, I must take the responsibility of looking at

this in a provincial perspective, which we are. And certainly you are doing your duty in terms of looking at it in the terms of Moose Jaw, and we will continue to be sensitive to the needs of citizens of Moose Jaw, as we are elsewhere.

Mr. Calvert: — Mr. Minister, then just one further question in regard to St. Anthony's Home. And I do want to point out, in your listing of the beds available in the city of Moose Jaw, you will well know that Pioneer Lodge and the Grafton are not available to level 3 and 4. And the need in Moose Jaw currently is particularly for level 3 care, and you know that, Mr. Minister.

May I also point out that the 157 beds that currently exist at St. Anthony's are fewer beds than existed in the early 1980s. You know that. You know that 180-some beds existed there before we had to close the third floor because of the condition of the building.

Mr. Minister, if you will not reconsider your decision for this budget year, will you then assure the House, assure myself, and assure the community and district of Moose Jaw, that the St. Anthony's project will go ahead in the next fiscal year?

Hon. Mr. McLeod: — A couple of points, the latter part first, if you will. I can't give you the date at which this will start. I'm just not in a position to be able to do that. I'm hopeful, and that's all I could say, and that's exactly what I've said to the board.

I want you to know, though, and I think you should know as a representative of Moose Jaw, that you mention Ina Grafton, which is light care, and that's true, but Pioneer Housing, which is . . . Pioneer Lodge, which is predominantly light care, has been asked in the past and has been told by the Department of Health and continuing care that if they were to convert to heavy care, which we would encourage them to do, frankly, because they have facilities which are legitimate for, I'm informed, are legitimate — could legitimately be used for heavier care, and they have chosen not to do that.

That makes it difficult in the big numbers that are there. And they have a letter from the former minister of Health saying, convert to heavier care, and they have not done that. And you know, I understand it's a bit of a local issue, and so on, but once again, in a provincial perspective, with the trends that I was talking to your colleague from Saskatoon Sutherland about, in terms of the district co-ordinating committees and how they will co-ordinate and how they will try to make sure that the care that's available is to those most in need of care, and that is obviously the level 3 and 4 people, that the decisions that are made should be along that line.

So you know, and that commitment still stands that was there before, that if you convert to more, you know, if you would have more level 3 and 4 people, you will have the staffing, funding, and so on to accommodate that. The choice has been to, well it's, you know, I don't know what the basis of the choice is, but the choice has been not to do that. But the numbers are there, and the potential for more heavy care beds is there now, without any other projects.

Mr. Calvert: — Mr. Minister, I'm fully aware of the efforts of your government to pressure the Pioneer Housing people. I am fully aware of the very valuable service they are providing in the care that they are now offering to levels 1 and 2 in their home. So it's not just that easy to say that Pioneer Lodge should become a level 3, 4 institution. It's not just that easy.

Mr. Minister, if we might move then back into a more provincial concern. I had opportunity to ask that day the Acting Minister of Health in this House if he would confirm for me that on November 1 of this year the fee for residents of special care homes in the province will jump to \$596. He did not do that for me. He said he would get back with that information, and I haven't yet received it. Will you confirm that the fee as of November 1 in Saskatchewan will be \$596?

Hon. Mr. McLeod: — Yes, I will confirm that, that the rates as of November 1 will be \$596 and that the minimum disposable income of someone who's on maximum OAS (old age security), GIS (guaranteed income supplement), and Saskatchewan income plan will be \$103.47.

Mr. Calvert: — Mr. Minister, if I can, let us just review the fee increases that have happened within this calendar year — and we're not even through a full calendar year. In May the fees you levied on residents of special care homes were raised by \$73 in one jump — \$73. That was a 15 per cent increase in one jump. We came then to August 1, and some small increase in pension incomes. What happened? The fees in special care homes went up another \$6. So we went from May to August, from \$509 up to \$588, and now we're jumping them again come November 1. Mr. Minister, by my calculation that's roughly an 18 per cent increase.

I ask you: how do you justify an 18 per cent increase in the fees paid by the residents of special care homes and nursing homes in this province? How do you justify that, Mr. Minister?

Hon. Mr. McLeod: — The points have been made on many occasions, and I'll just go through them again with the member. When a standard resident charge was instituted in 1981 the resident charge was 85.7 per cent — 85.7 per cent — of what was then the maximum of the OAS, GIS, and SIP (Saskatchewan income plan), okay, which is the amount available to those most in need.

In November of 1987 when the fee will be \$596 the resident charge will be 85.6 per cent of maximum OAS, GIS, and Saskatchewan income plan. You know, the . . . (inaudible) . . . And that's a very legitimate comparison to make and a very legitimate sort of ratio to develop because the pension plans, as you will know, will roll along and change with rates of inflation, etc.

The resident charge, in other words, in 1981, in July of '81, the minimum disposable income was 14.2 per cent of what the people received from the three levels of pension, and in November it will be 14.7 per cent of what the residents will receive on these three pensions, benefits.

So we are keeping very much with that sort of trend. And we believe it's appropriate to do that, and it is. I mean, I want to remind the member of the following thing, and it is this: we talked a bit a while ago about the standards that are available in this province and that are there and which we are, frankly, proud of. And all of us as citizens of Saskatchewan should be proud of the fact that we care enough to have very high standards for these people who live in heavy care.

We have those high standards, but those high standards bring with them a cost, and we don't begrudge that. We say, that's fair ball. But the costs of a heavy care bed in Saskatchewan will vary, but it's between 2 and \$3,000 a month for each bed, the cost, 2 to \$3,000 a month, which means that the residents will pay approximately 20 per cent of the cost of their housing and their care, and that the government, which is obviously the people of Saskatchewan, will pay 80 per cent.

Now by anyone's stretch of anyone's imagination, that is a very legitimate and a very reasoned approach to take in setting these fees. That's the approach that we've been taking for a number of years, and while there is some consternation among administrators and out in some of the homes who say, well you know, I wish they wouldn't go up quarterly because it's a concern, and so on, the fact is that's how the pensions change, and these fees are tied. And I can't think of a more legitimate thing to tie them to than to the maximum available to a single person on OAS, GIS, and SIP.

So we've been through it before. That's the rationale behind it, a very reasoned and rational one. And there is little more I can add, Mr. Chairman.

Mr. Calvert: — Mr. Minister, you're saying that these increases are somehow tied to pension income. This year, by my calculation, the fee increase has gone up 18 per cent. You jumped at 15 per cent in one jump in the month of May. That wasn't tied to anything except your desire to take more money from these individuals.

Mr. Minister, let's go back to that May decision. How did you arrive at that \$73 figure in the month of May? How did you arrive at that figure, that raise, at that time?

(1130)

Hon. Mr. McLeod: — Mr. Chairman, he asked a specific question as it relates to — when was it May you were referring back to? The principle here is as I outlined it in terms of percentage of OAS, GIS, that sort of thing. The disposable income had, well I'll say crept up and so on that we set the principle that it should be about \$100 a month. Looking at it very carefully, and then frankly in some discussion with people who run these homes and who know the circumstances of the people, who say that there is a . . . you know, if disposable income goes to a — you know, quite a high level, I mean, these people have certain needs, and I recognize them, in terms of the costs that they will incur.

And they are the costs that people will incur — they'll want to buy a little present for their grandchildren, or

they'll get their hair cut or their hair done. In most of these homes that's done right there at a very subsidized rate. They have drug plan protection, as you know, so they have very . . . And it's just a matter of equity in terms of their relationship with the rest of the community, frankly. They're at less financial risk, if you could use that term. They're very well looked after. Remember, we're talking now of heavy care people. And a hundred dollars or thereabouts is a very fair and reasonable amount for them to have as disposable income.

It's not a matter of the government saying, look, we want to go in and grab people's personal money. That's not the case at all. We're talking about here, as I've said, we're talking here about total care for people who are receiving that total care for about 20 per cent of the cost of what it costs to deliver that total care. And that total care includes very excellent housing, and so on.

So those are the numbers, those are the ratios that I outlined, and I believe that it's an equitable system, and it's one that we will continue to operate under.

Mr. Calvert: — Well here's where we disagree, Mr. Minister. You suggest that it's quite equitable and quite fine and quite fair that seniors and the disabled in our province who are now housed in special care homes should have at their disposal \$100 a month. Prior to May they had significantly more than that, but you've scooped it all up and left them now with, your figure is, I think, \$103 disposable income.

Mr. Minister, let's talk about that just for a few minutes. I think it was in 1983 you initiated this quarterly increase plan. And if my understanding is correct, in 1982, four years ago, the disposable income for residents of special care homes was about \$100. Is that so, Mr. Minister?

Hon. Mr. McLeod: — I would say to the . . . in July of '81 when your former government brought this program into place, it was \$65 disposable income — \$65, not 103.47 as it is now.

So just let's be sure that we . . . And I want you to think as well, we talked a bit about the standards that are available and we have them and I mention them again. Let's just do some comparisons of what is the case in the rest of this country, who are . . . where people are eligible for similar benefits in the federal government because the pensions are similar.

An Hon. Member: — I didn't ask that.

Hon. Mr. McLeod: — No, but . . . I know you didn't ask the question, but in order to give a very complete and full answer, I'm going to give you this information because it's important that you have it.

In Manitoba the fees are \$579 for a 30-day month — if you want to talk about confusion now — and for a 31-day month, they're \$598. Okay, so very similar to our costs. That's at present, not November 1, but at present, which ours are lower.

In Alberta the charges are 426 and up to 616, based on the type of accommodation and whether it's in single

accommodation and so on. And you will know we have by far the highest ratio of people who are in single accommodation, and that's part of the standards which I referred to earlier.

In Ontario the fees range from \$645 a month to \$1,107 a month.

I mean our fees are very legitimate and our fees are fair and are compassionate and they're understanding of just what the needs of people are. And they're 100, a little over the \$100 mark in terms of disposable income. And people who run these homes will tell us time and time again that at \$100 a month many, if not most, of the residents of those homes will have money in the bank, so to speak, from the funds which they are receiving from government sources, either provincial or federal. But they're very, very highly subsidized; fair ball. WE recognize that they will need to be. But it's 20 per cent is what the individuals are required to pay. We think it's very fair and equitable, and we'll continue with that system.

Mr. Calvert: — Mr. Minister, in terms of your comparisons, let me just say this. I have grown up in this province believing that we were the pioneers in health care, not the followers, not those that would just be in the pack, but that we would be the pioneers and the leaders.

Mr. Minister, you indicate . . . You didn't answer my question: how many dollars people had disposable in 1983? But it was in the neighbourhood of \$100. Mr. Minister, we're four years away from that now and you're still saying it ought to be \$100.

I think the people of this province ought to know precisely what happens to that \$100 disposable income for residents of special care homes in this province. As you indicated, those residents understandably will want to buy a Christmas present for their grandchild — understandably. They understandably will want to have their hair cut. Mr. Minister, that has to be paid out of their disposable income. Mr. Minister, you know that while your new drug plan does not apply, the dispensing fees do, and there are many, many in special care homes who may require eight, nine, 10 prescriptions a month, and so they're looking at the better part of \$50 right there to pay for their dispensing fees. Mr. Minister, you know that in some special care homes in this province the cost of incontinent pads are not provided by the home, and that must come out of the \$100 disposable income. You know, Mr. Minister, that if a resident of a special care home wants a new pair of pants or a new dress, that must come out of that disposable income.

In May of this month you took from the seniors and the disabled in special care homes in Saskatchewan, you took from their disposable income a substantial amount of money, Mr. Minister. And I think that's a shame. I think that's a real shame.

Mr. Minister, you are trying to address your fiscal problems by attacking those who are most vulnerable to attack and who cannot really defend themselves. Residents of special care homes have no choice but to pay. They simply can't move out. What the landlord says

you must pay, you must pay. I say that you're trying to solve your financial problems in the wrong places, and this is one of them.

Mr. Minister, I want to move then to another area of your responsibility, another area that's very important to the care of seniors and disabled in this province, and that's the area of the personal care home or the private care home. Mr. Minister, many of us in this province were assured that in this calendar year we would see legislation in this House dealing with the personal or private care homes. Mr. Minister, my question is simple: will we see that legislation in this session?

Hon. Mr. McLeod: — Still at the last point and you . . . You know, I have to take exception to your use of the word "attacking those most vulnerable." I mean it's an unfortunate choice of words that you use. And I mean it becomes part of the . . . I know you have in your arsenal — all of you — all of you come in with an arsenal of various words. So one of your colleagues says "phoney," and you say "attack," and others, I mean, none of those things are appropriate. None of them. They aren't. They aren't appropriate at all.

All I'm saying to you in a sincere way is that that program as it relates to the fees is a responsible way to deal with it. It's responsible and it puts us right out there, as you say, and keeps us right out there in front of this country. But the comparative figures are reasonable to give you just so that you can see that we remain and continue to be out there in front. And certainly as it relates to the standards that we have, we're out in front. And I talked about that to your colleague and to you a few moments ago. All of those things are important, and it's important that people who have the kind of standards and the single rooms and so on are really important.

Another thing that should be mentioned — and it is important to mention — assets of the individuals are not at risk when they go to a special care home in this province as they are in many others. People who have accumulated some assets over a period of time and find themselves in need of care and so on, their assets are not put at risk by the government coming in and saying, here, we've got this, and we'll take the farm and so on. That's not the case. And I just want you to know that because it's an important point to many seniors who have worked hard for what they have and what they've been able to accumulate over a period of some difficult years in many cases, and some good years, we should say.

As it relates to the legislation, I would say that, yes, we are contemplating the legislation as it relates to regulating of private care homes or personal care homes or whatever the term is. That legislation will not be in this session, but we are in a consultative process as it relates to that. But it will not come forward in this session.

Mr. Calvert: — Mr. Minister, this issue of the personal and private care home legislation does concern a fair number of people in our province. You've just said it's not going to come forward in this session. Can we expect it then in the next session of this legislature?

Hon. Mr. McLeod: — Yes, there's a possibility of that in

the next session following this one.

Ms. Atkinson: — Thank you very much, Mr. Chairperson. Mr. Minister, over the last several days we have taken you through your health care spending priorities for the Department of Health, and it's become really clear, Mr. Minister, that your priorities for Health in this province are misdirected, misguided, unfounded, and heartless.

We have spent a good deal of time talking about how you have betrayed the people of this province when it comes to health care spending. We have pointed out to you that you cut our health care budget by \$18.6 million this year alone. We have pointed out to you that fee increases for recipients of home care in this province — most of those recipients are senior citizens and disabled persons — those fees have increased by some 66 per cent.

We have pointed out to you, Mr. Minister, how your heartless and cruel policies have impacted upon those people who have to rely upon nursing home care in this province — fee increases of 18 per cent, leaving those individuals with very little money to look after their day to day physical and personal needs.

We've pointed out to you, Mr. Minister, how your prescription drug plan, your new prescription drug plan has hurt Saskatchewan people — people who are sick, disabled, and the elderly. We've pointed out to you over and over again in this legislature how your health hospital policies are impacting upon people who need to get into hospital. We have waiting lists in this province, particularly in the city of Saskatoon, that match none in this country. In fact, I note yesterday morning, Peter Gzowski, when discussing what's happening here in Saskatchewan, couldn't believe that there would be over 11,000 people waiting to get into hospitals in Saskatoon.

We have pointed out to you that any kind of limitations on chiropractic care or physiotherapy care in this province would be detrimental to the overall health of people who have chronic back and muscle problems, and you gave us some assurance that there would not be limitations on visits to those two professions. And we have pointed out to you time and time again how your overall health direction is hurting Saskatchewan people.

But, Mr. Chairperson, we have not yet discussed, we have not yet discussed your decision to eliminate the school-based children's dental plan. On June 11 of this year you undertook, Mr. Minister, to fire 411 dental workers in this province. You undertook them . . . You undertook to fire them in such a way, Mr. Minister, that the people of this province could not believe what they were witnessing on television.

We had understood that human resource professionals in the civil service had been specially trained on how to dismiss the more than 2,000 civil servants that your government fired this past year, but it's pretty obvious by the way you fired those dental workers that there was no training involved. We had dental workers in this province herded into hotel rooms and other town halls across this province and fired by people who were sent there to do a dirty job.

There were people in the Health department who were sent out that had no idea what they were doing, Mr. Minister, and they weren't very happy about having to do your dirty work, Mr. Minister.

An Hon. Member: — The Premier's dirty work.

Ms. Atkinson: — And the Premier's dirty work. We had those dental workers come to this legislature on June 26, and they sat all around us in their uniforms, and we presented name after name after name in this legislature of persons across this province that were opposed to your changes to the children's dental plan — over 16,000 names, Mr. Speaker.

We introduced those dental workers in this legislature. And when they stood, they began to cry. And what did your members over there do? They hung their heads in shame. And you, Mr. Minister, you and your Premier didn't even have the courage to come here and face the music. And they will not forget that, Mr. Minister. They will not forget that you didn't have the courage to come here and answer their questions and answer the questions of the official opposition.

Mr. Minister, with your decision to change the children's school-based dental program, we have seen the elimination of 578 school-based dental clinics in our province. Mr. Minister, that is 392 school-based clinics in rural Saskatchewan in 330 communities. Rural Saskatchewan now has to look forward to 93 dentists in 71 communities. And you said, Mr. Minister, and your Premier said, that you were doing this because parents wanted their children to go to dentists. And that, Mr. Minister, is simply not true.

There have been studies after studies after studies done in this province showing your Department of Health and your people at the dental plan that the children's dental plan in this province was the very, very best of quality, and that there was a significant number of parents, I believe 90 per cent of parents surveyed in the most recent survey, that supported that dental plan — that supported that dental plan, Mr. Minister. So when the Premier of this province gets on television and says, parents wanted a change, that's simply not true, and the people of this province don't believe it.

That program, Mr. Minister, came around for a very, very good reason. It came about for a good reason. In 1968 there was a survey done in this province that indicated that children, Saskatchewan children, had the worst dental health in this country — the worst dental health in this country. And a decision was made by our government, an NDP government, in 1974 that we were going to do something about that.

As a result, Mr. Minister, the school-based children's dental plan was implemented in a most responsible fashion. Mr. Minister, that program became the envy of people around the world. People from all over the world came to Saskatchewan to see how we were able to have a program of that quality and that significance, Mr. Minister. Mr. Minister, it was a preventive program. And in this day and age when you're worried about escalating health costs, how in the name of sanity could you

possibly decide to do in a program that was preventing people from going to the dentist, because they had healthy teeth? How could you do that, Mr. Minister?

Mr. Minister, there are people all over this province, and I know you will disagree with this, particularly people in rural Saskatchewan that are opposed to your changes in the children's dental program. They are opposed to your privatization of the children's dental program and the firing of 411 workers. Many of those workers, Mr. Minister, lived in rural Saskatchewan, and many of those workers, Mr. Minister, were women. And many of those women went into dental therapy because it was a good program, and it provided them with the opportunity to work in rural Saskatchewan. And you, Mr. Minister, have taken away that opportunity. At a time when the farm crisis is at its worst — and I say it's going to get a lot worse by next spring — at a time when the farm crisis is at its worst, those women were able to provide off-farm income in the support of that family farm, and you, Mr. Minister, have taken that away, and you have taken it away because of economic reasons, I guess. You say that it was economically driven, that parents wanted their children to go to dentists, and that's simply not true. And I ask you, Mr. Minister, I ask you to explain to the people of this province, in these estimates, why you decided to change the children's dental program and fire 411 women in this province.

Hon. Mr. McLeod: — Well, Mr. Chairman, we've been through this on several occasions. I just want to reiterate for the member again the changes to the dental plan — even with the changes to the dental plan there will be dental services provided to children five to 13 years old, which is roughly from kindergarten through grade 8. Those services will be provided to those children by dentists in dentists' offices. That's the case.

That will be an excellent program, and the member will stand here and for, I believe, the first time in . . . throughout these estimates has said something about rural Saskatchewan, or very much about rural Saskatchewan. The member says, at a time when the farm crisis is at its worst — and when I say, farm crisis — when she says, the farm crisis is at its worst, there's no question that that's a very large indicator of the kind of circumstance that the province finds itself in, obviously because a good deal of it, a very major portion, is driven by agriculture.

So we have decisions to make as it relates to all of the departments of government, and we looked at this Department of Health and said, we have some supplementary programs, one of them being the dental program. How can this program be offered where we can, one, save some money? But it wasn't totally fiscally driven, and I've said that before and I want to say that again. This program will now be provided by professional dentists in professional dentists' offices.

And the one other point that needs to be made once again, and very clearly: the member says these services were available to people in all of the small communities around the province, and always leaving the impression, Mr. Chairman, that places that you're very familiar with — in Shellbrook and other communities and smaller

communities in your riding and in others around that we all represent — is that these dental therapists were there, is that these dental therapists were there in the community for ever, and every day, and it was service to the community every day. Those dental therapists, as far as the visits to one child to a dentist would be, or to a dental therapist for that matter, would have been for the most part one day of a year — one day out of a year is when most children would have their check-up and so on. And then some with other circumstances may have one or two other visits. That's the case, and that's the way it will be now.

And so the member raises these issues about, well it's not convenient to take the child to the dentist. I submit to you — and as I have this faith in Saskatchewan people, who say, as long as I'm not burdened by the cost for my children 5- to 13-years old, I can certainly on one day of the year, being a caring parent, take my child to the dentist. And caring parents in rural and urban Saskatchewan will take their children to the dentist. And there's increasing evidence all the time that that will be the case, that that is the case, and that will continue to be the case in this province.

The other point, and the one that should not be lost on the member or on anyone else who represents rural Saskatchewan, is that we now have, and we will continue to have, an increasing number of communities that will have dental services available to those communities where there has not been dental service for, in some cases, a good number of years and, in many cases, ever — ever.

And those dental services that will be available on Main Street of the community of Cut Knife and of Big River and Blaine Lake and a whole series of others which I will agree to give to you in a few moments — read to you — are services which were not available before, and are services which are available not only to the children who are registered under the dental plan but to the community at large, including adolescent young people, and including the adult population of those communities who have not had dental services in their communities heretofore and will now have them.

Let me just give you a run-down on some of those — an updated list because this list continues to change: Big River, a satellite location. These are now dental services in communities where they were not: Big River, Blaine Lake, Cupar, Cut Knife, Debden, Delisle, Dysart, Earl Grey, Edam, Ituna, Kelliher, Lestock, Lipton, Maidstone, Paradise Hill, Porcupine Plain, Radville, Raymore, Southey, St. Walburg, Turtleford, Waldheim, Wolseley. All of those have now got satellite locations of dentist who are there to serve the people on a basis that was not there before.

So that's a success story, Mr. Chairman, and what I'm saying to the member is that that list will continue to grow as communities and as people register with the various dentists of the province. And there's little more that need be said about this except to say that that was the decision that was taken.

Any time there's a change, any time there's a change, I'll

say to the hon. member, she either resists change at all occasions, as all of her colleagues have throughout these estimates of all my colleagues' departments and including this one. They resist change. It's the nature of the old democratic party to resist change, Mr. Chairman. They do resist change. They don't want to see change. They love the status quo. Hang on to the past, look forward to the past, is what they say to themselves.

(1200)

Well, Mr. Chairman, we must look forward. We must deal with the here and now — the facts of the here and now. We are doing that. We have made some difficult decisions. We have the courage to make them. We have the courage to carry them out, and they are decisions which are for the benefit of our people across the province, regardless of how remote the community is that they may live.

Ms. Atkinson: — Well, Mr. Minister, I appreciate your lame response to my opening remarks on this issue, and I say lame response, Mr. Minister, because you can't justify it. Mr. Minister, in your remarks you neglected to tell the people of this province that 14- to 17-year-olds have been eliminated from the program. They will not have access to your dental services as you define them. At a time when parents are already hard pressed to put out greater and greater amounts on their children, you, Mr. Minister, have decided to change the children's dental program to such an extent that 14- to 17-year-olds are no longer included in the program.

And I think you recognize, Mr. Minister, as a parent, that this is the age group where children are growing. It's expensive to feed and clothe children in those age categories. Parents are hard pressed financially these days, particularly parents in rural Saskatchewan. And those teenagers, Mr. Minister, are no longer covered by your changes to the children's dental program.

And, Mr. Minister, the people in rural Saskatchewan and working people in cities, when they have a decision to make — do I take my child to the dentist for preventive care, which will cost between 75 and \$100, just for preventive care, Mr. Minister — when they a decision to make, Mr. Minister, they are going to put food on their table, and they are going to clothe their children. And, Mr. Minister, they will go to the dentist when there is a problem — when there is a problem.

Now, Mr. Minister, by changing the children's dental program and eliminating 14- to 17-year-olds, can you advise us how much money you expect to save the taxpayers of this province by changing that aspect of the program?

Hon. Mr. McLeod: — Mr. Chairman, in looking at the . . . Let's go back to the process that has to be done and that had to be done in terms of dealing with this year's budget. And with whatever department, but certainly here in the Department of Health, we had to say where . . . And you know we went through this, and the member and I have had discussions before about, you know, how long it was to bring the budget in and all of those kinds of things, and we went through a long and arduous process. One of

the things that we had to look at when you ask, program by program, line by line in a budget, what is the circumstance now? What was the circumstance at the time that this program, whatever it is? Now we're talking the dental program; let's just zero in on that.

The fact is, the member has said that there was a time in our province's history not many years ago when we had poorer dental health than the rest of the country. But frankly, the rest of the country, all of Canada, there was . . . at that time had poor dental health as well. And there's been a trend across the country everywhere of that happening, of being an increase in the dental health of children.

So what would the member suggest that we do then? We look at the program in the here and now and in terms of projecting into the future, and we say — to use what they have said and what she has said on several occasions — is, we'll maintain the status quo then. There were an average of five decayed or missing or filled teeth per child back in 1976, let's say, and it's down to less than one decayed, missing, or filled tooth now. Now you say, keep the status quo, maintain all of the people that are there, even though the need isn't as great. That's what you say. Just maintain that because there's been a good job done so everybody stays and we just mark time there and carry on.

Or do you say, what is the need that this program was set out to do, and what was the circumstance when it was put into place? How many dentists were there in Saskatchewan at the time, for example? Very few, very low number. Have new dentists been graduating from our own college of dentistry at Saskatoon at the University of Saskatchewan? The answer is yes, new dentists are. There's an availability of dentists, more professional dentists, to deal with the public of Saskatchewan. There's no question that that's true. That's a changed circumstance.

So we said, we will look at all of these changed circumstances. And if we were to start now, which is what you must do, and look at this and say, what would be the best plan that could be in place to serve the needs of the here and now and on into the future? And those needs are: the foundation must continue to be laid in those younger people between . . . through eight years of their life from five to 13. Those foundations will continue. And there's a dental hygiene program in the schools where we continue to emphasize the need for good habits and all of the kinds of things that must happen in personal care where persons of whatever age will take responsibility for how they look after themselves, and obviously when they're very young parents have a major role to play in this.

So we said, what is the need as it relates to adolescents in our province? And we have some choices to make. You talk about choices that families will make. I suggest to you that families who have children who have excellent dental . . . or structures are there and excellent dental habits, and so on, over a period of five years, will have far reduced needs for adolescent care. And that's statistically shown.

So we say, what are the needs of our adolescents? You've heard the Premier say this on many occasions, and I've said this on several occasions.

We have major dollars going into something which is extreme concern to parents of adolescents, and that is the abuse of substances and drugs and alcohol and all of that sort of thing. And we've said that. Now the member will sigh and say, well I'm talking about the dental plan; I'm not talking about drugs and alcohol. I'm talking about the dollars that are available to spend, the people that are there to serve, regardless of their age — and there's an age group that we are now discussing, the adolescent group.

And that adolescent group has significant needs in terms of education, in terms of knowledge about some of the new things in the here and now. And they are alcohol and drug abuse; they are a knowledge and awareness of this deadly disease, AIDS. They are these kinds of things which we all better be, must be, very aware of. Those are the concerns that we have to have.

And we say, so where's the appropriate place to put the money if there is this pot of money for adolescent people? And it is drug and alcohol abuse, and it is in some of their education programs, and it is in some of those other things.

So that's the decision that we took. We believe it's a responsible one. Children will have an excellent care from dentists across this province, most of whom, or many of whom, have been trained at our own university and dental college. And we will have, without question, the best dental plan and continue to have the best dental plan for children, so those foundations can be laid that there is in this country — without question.

Ms. Atkinson: — Well, Mr. Minister, the primary general objective of Saskatchewan children's dental program was to improve dental health amongst Saskatchewan children by making preventive and operative dental services readily accessible so as to encourage high utilization by eligible children. That was the primary objective.

Now you didn't answer my question in terms of how much you're going to save. You didn't answer that question. I know you don't like to answer questions when it comes to money matters, because I don't think you have a handle on it — don't think you have a handle on it.

Mr. Minister, can you advise this House . . . I note that in May of 1983 you made a decision to change three high schools — I believe it was four high schools in Saskatoon — over from dental clinics to private dentists. They were moved over to the private sector, and some adolescents were removed from the school-based children's dental plan. Can you advise me what the utilization rate was when you made that change?

(1215)

Hon. Mr. McLeod: — I just . . . The member referred to, and I'm just trying to clarify this: you said four schools in Saskatoon, specifically? Because the answer that I have for that is that I don't — there are no statistics as it relates to those four schools or the individual school or anything

like that. So could you clarify your question in terms of what you're trying to get at.

Ms. Atkinson: — Maybe I'll put it in the broader perspective. Adolescents in this province for some time now have been enrolled in the dental program, but the service is provided by private dentists. I'd like you to tell me what the utilization rate is, or was, for those adolescents who got — whose service — dental service was delivered to them by private dentists.

Hon. Mr. McLeod: — If I could refer you to the — and it probably is the . . . Is it the annual report of '85-86 you're referring to?

An Hon. Member: — That's the latest one we have.

Hon. Mr. McLeod: — Okay. The '85-86 annual report, page 11, the adolescents — and that is the ones that are referred to under private practice, is the utilization rate, 77.56 per cent. And just to anticipate your next question, the dental plan, 90.08 per cent. Okay.

But I want to point this out. It's clear that even when adolescents and children and all of them were in the plan where they were in the school and so on, the utilization rate in terms of the need for care beyond the one look in the mouth in a year was lower, and significantly lower, than it was for the younger children, especially after they'd been into it for a number of years and much of their restorative care and those kinds of things had been done in the first years in the children's side of the program.

Ms. Atkinson: — Well, Mr. Minister, there was a report done in 1981 by our province, before your people took over as government, and that report looked at utilization rates across this country.

And, Mr. Minister, where dentists across this country provided the services to children, there was a 20 per cent lower utilization rate. Saskatchewan had the highest utilization rate in the country because of the way we deliver the program. Other provinces, and I'm thinking of three in particular, had a 20 per cent lower rate. Their utilization rate was only about 70 per cent.

Mr. Minister, I anticipate with your changes to the private sector that the utilization rate of children — or, pardon me, of children and adolescents, I guess, because 13-year-olds are included — the utilization rate is going to go down. And isn't that the real reason why you decided to do in the prescription drug plan — because you thought you were going to save some money? And how does that help Saskatchewan children have good teeth, and how is that a preventative service?

Hon. Mr. McLeod: — You know, we will be into highly speculative things here now, but I want to . . . You know, the member predicts that there will be a lower utilization rate. I want to say very clearly that the thinking behind the change has nothing to do with us thinking that there will be less children going to the dentist. That is not the case.

Let me just quote something to you from the Ministry of Health in British Columbia:

Ministry of Health in the province of British Columbia estimates that 90 per cent of 208,800 of the school-age children are seen by a dentist in that province.

And they have a system whereby children . . . any services that are provided are provided by dentists in dentists' offices, as our program is now constituted.

So you know, that's a number that's there for . . . now whether B.C. people, you're suggesting, are different than Saskatchewan people or whatever. I don't know that. But I will say to you that I am very confident that when Saskatchewan people know — of all income levels — know that they will not be encumbered in any way by any cost by having to take their child to the dentist, that they will in fact take their children to the dentists in the best interests of their children.

We have to have the confidence that parents will do that. I believe parents will do that. I'm sorry I can't take them by the hand and say, here mom and dad, bring Johnny and let's go to the dentist, but I will encourage them to do that. And I believe very sincerely that caring Saskatchewan parents will take their children to the dentist when they know very well that they're covered.

The number that I've read to you from B.C. would indicate that people there do go to the dentist when they don't have to pay the cost, and I believe that our people will do the similar thing.

Ms. Atkinson: — Well, Mr. Minister, when you decided to close four high school, school-based dental programs in May of 1983, there was an indication that the use of private dentists would lower the utilization rate by 15 per cent.

The executive director at that time, Michael Lewis, indicated that dentists would make every effort to ensure that there was follow up, and that young people were provided with notification of their need to go to the dentist.

And, Mr. Minister, based on the evidence that we have, and we can only look at the evidence that was done in D.W. Lewis's report in 1981, there is a lower utilization rate in those provinces that have a similar system to ours, and that lowering of the utilization rate is by some 20 per cent. The dental therapists advise, on the date that they were fired by your government, that only about 30 or 40 per cent of those enrolled in the plan got the service. They advised that dental workers saw about 90 per cent of the younger children enrolled in the program. But nevertheless you have just done in an excellent program — a program that was recognized by people across this country and, in fact, around the world. A program that did have . . . it was a good quality service.

There was a study done in 1976, I believe, that showed that dental therapists had, in many instances, a superior service to those in terms of the services provided by dentists on some categories of dental work. Now, Mr. Minister, how much money do you expect to save by changing the school-based children's dental program to a private dental program?

Hon. Mr. McLeod: — I'll get to the number this time. I have it here. The number is 5.5 million in terms of a saving, an annualized saving, with the dental plan as it's not constituted compared to as it was. The point that I want to make, and that I want to clarify for you, because you are, I believe, suggesting — and, you know, that's fair I suppose — but that the transition to private practice dentists of the adolescents was something that we began in '83 or whatever. That was not. That started in 1981. I mean that began under the jurisdiction of your government, frankly, so . . . and it started year by year, moving one in, one age group at a time over to private practice dentists, in the adolescent group. And that was done.

So you've mentioned four Saskatoon schools who perhaps moved in one particular year. But that was a transition across the province for adolescents, with the exception, I believe, of the North — with the exception of the North where there are very unique problems in terms of the location of professionals in those communities.

But the number is 5.5 million that the member has been asking for, Mr. Chairman.

Ms. Atkinson: — Mr. Minister, I think that there'll be a number of groups of people affected by your changes to the children's dental program, and that there'll be a number of groups that will be affected to such an extent that there will be a lower utilization rate. What impact do you think your changes to the children's dental plan will have on rural Saskatchewan?

I note under your privatized adolescent program that rural children were asked to travel no more than 50 kilometres. I'm wondering now with your new program, with your new program, how you justify the distances from Pierceland to Meadow Lake, 143 kilometres; Pierceland to Paradise Hill, 102 kilometres; Neilburg to Unity, 71 kilometres; Leader to Kindersley, 85 kilometres; Consul to Maple Creek, 87 kilometres. How do you anticipate this extra distance that has come about as a result of your changes? What sorts of problems do you anticipate in terms of utilization now, Mr. Minister?

Hon. Mr. McLeod: — I went through the lists of various places, and there are others that will be added to this list as time goes on, in terms of dental services being available to people. It's interesting to me, and I want to put this on the record so that I can speak to my people in Pierceland to show what you . . . The people of Pierceland will not go to Meadow Lake for services, as they never have. They go to Grant Centre in Alberta. They're very close to the border, and they go to Grande Centre.

Paradise Hill people who will now have dental services in their community, because I've read them out on the list, but Paradise Hill people will go to Lloydminster, in any case.

Pierceland people do not travel, at a normal rule, to Paradise Hill; it's not a trading pattern that's there and never has been. But, you know, to stand and read that from a glance at the map shows that it's not how the relationship between these communities that are there.

And it's important to make that point because it's important for all of us as legislators of Saskatchewan to understand Saskatchewan in a total sense.

Neilburg, you mentioned, going to Unity. I would suggest the people of Neilburg would go to Lloydminster as well. I would say it's not very long from now that people of Neilburg will probably have some dental services in their community. I would hope that that's the case, and I believe it may be.

So I go back again, Mr. Chairman, to the fact that all of those communities which I listed earlier, a few moments ago, will now have dental services not only for the children five to 13 years old but for the adolescent and for the adult population in those communities. And if one on one hand can argue it's important to maintain the viability to whatever extent possible of small rural communities, which is something we're committed to and which you talk about often, but people out there have spoken to you in a couple of elections in a row in terms of your commitment or feeling or understanding of rural Saskatchewan.

If it's important to have the viability of rural Saskatchewan maintained, it's important to have as many services as possible in rural Saskatchewan — as many services as possible on the main streets of our communities. And I submit to you that a dental office, whether it be a satellite office or whether it be an actual dental office with full-time service, is an excellent addition to Main Street, Small Town, Saskatchewan. There's no question about that. We'll continue in our efforts and in conjunction with the college of dental surgeons of the province to be sure that there is an increasing number of communities that have those dental services which are important to the people of all ages, not only the children.

Ms. Atkinson: — Well I just note, Mr. Minister, that Pierceland used to have a dental clinic in their community. They no longer do. Neilburg used to have a dental clinic in their community. They no longer do . . . (inaudible interjection) . . . I'm talking about a dental clinic, a children's dental clinic in Neilburg, Saskatchewan.

Mr. Chairman: — Order, please. Order, please. Order. Order, please. Let the member please ask your questions, and then we'll give ample opportunity to reply. We'd like to get everything recorded, as much as possible.

(1230)

Ms. Atkinson: — Thank you very much, Mr. Chairperson. I notice that the members get a little touchy. I'm just pointing out that the people in these communities used to have access to clinics in their communities, and the Minister may say, one day a year, but at least it was one day a year. Now they don't have anything in their communities — absolutely nothing. And the Minister can stand here and talk about how all these dentists are going to go out into rural Saskatchewan and provide services to communities, and there have been people in rural Saskatchewan, Mr. Minister, that have been trying to get doctors in their communities, and they can't attract them. They can't attract them.

So I'm going to wait and see how many doctors permanently — or dentists, permanently locate in those communities that you so proudly talk about. Every solitary new dentist that you've talked about is a satellite clinic, a one-day-a-week operation, and those of us that come from rural Saskatchewan know all about satellite clinics and satellite law offices and all of those kinds of things. And I note that the member from Wascana gets a little touchy, and he should, because I know the member in Wascana's not very popular, not very popular with his constituents these days, not popular at all. In fact, he doesn't even walk down the street, because no one will talk to him, Mr. Chairperson.

Now you talk about all these satellite clinics, and the people in rural Saskatchewan knows what happens when these satellite clinics come in. People start going to the dentist or the doctor, and shortly after they've had some time to get used to going to that particular professional, in some cases, Mr. Minister, they move on. They move to Saskatoon or North Battleford or to a larger centre. So we will wait and see, Mr. Minister, how many of those dentists that you so proudly talk about will locate permanently in rural Saskatchewan because rural people know what the history has been when it comes to attracting doctors.

Now 411 people were fired. They were fired by your changes to the children's school-based dental program, and you, Mr. Minister, said in the press that about 150 of them would be picked up by private dentists. I'd like you to advise the people in this province how many of those workers, most of whom are women, how many of those people have been hired by the private dentists?

Hon. Mr. McLeod: — Let's go back a little bit, Mr. Chairman, because the member says, and she uses the communities — and I did, on the previous answer, point out to her about where Neilburg is and where Paradise Hill is and where Pierceland is. And in relationship to trading centres and so on, it's important that a member of the legislature, even though she be from Saskatoon, does know something outside the boundaries of Saskatoon.

Mr. Chairman, she uses an example, and I believe it was Neilburg or whatever, but it doesn't matter whether it's Big River or Blaine Lake or Cupar or Cut Knife or Debden or Delisle or Dysart — and if I'm going too quickly, if you're trying to follow the old map with your finger there to know where these communities are — but it is important that you get to know where these communities are. Most of these communities are communities that are represented by these members on this side of the House who know rural Saskatchewan well, and it's because they know rural Saskatchewan well — it's because they know rural Saskatchewan well that they're here representing those rural people. And people have some trust in them because they know that when they stand in the House and talk about . . .

When the member from Cut Knife-Lloydminster says Neilburg, he knows about where Neilburg is and where they trade and where they go. He knows that they don't . . . And I happen to be the member for Pierceland and Paradise Hill and those communities, and I know that

they don't, neither of those communities will go to Meadow Lake to trade.

And you say, in Neilburg they had a dental service. And I said to you, let's be . . .

An Hon. Member: — She said they had a dental clinic.

Hon. Mr. McLeod: — You said they had a dental clinic, that's right, a dental clinic in the school. For all of the people, I ask you? No, for the children. What about the adults of Neilburg? Did they have dental services there before? No. What about the adults of Big River? Did they have dental services before? No. Do they now? Yes, they do. They will have dental services for people in those communities of all ages. That's a significant improvement.

You say, the member says, oh, they had this dental clinic in the school. The dental nurses — I want all members to know this, and everybody in this committee should know this, even though there's a misleading suggestion that this dental clinic that was there in the school in Big River prior, was there on a daily basis year around. That's the suggestion when they say, they had dental clinic service.

They had dental clinic service when the therapists visited, and children in those communities that came from their homes surround Big River and in Big River saw that dental therapist on the average one day a year — one day. Okay. And she makes fun of the fact, she makes fun of the fact that Big River people will now have access to a dentist on a one-day-a-week basis. And I say, one day a week is 51 times more than one day a year.

And that's the sort of thing and just sort of little bit of simple math, and that's an important thing for you to know. And on those day . . . one day a week, on the Thursday or the Tuesday or whatever day it is, or if it's one day every two weeks or three weeks, it's a marked improvement over what was there before.

And for that person who lives in that area on the farm or wherever, or in the saw mill at Big River, which is now operated by Weyerhaeuser Canada — very successfully, I might add — when that person needs some dental work done, he can now, or she can now get it done in Big River and not have to drive to Prince Albert. That's the case — will not have to drive to Prince Albert. And I say that because from Big River it's very likely they would go to Prince Albert; that would be the normal trading pattern in that area. And that's something that you should know as well.

So the points that you make, while you will say them many times . . . and you begin, I believe, to believe your own rhetoric, which is always dangerous. You are beginning to believe your own rhetoric. That's a very dangerous thing for you to do. You repeat it enough times to yourself that you will walk out into the real world from under this dome and start to believe that what you say here is actually the fact out there in that world. Well it is not.

And I would ask you and I would urge you and some of your other colleagues who will smile, who are from

Saskatoon, within the boundaries of your city — go out into Saskatchewan. Go out into rural Saskatchewan, into the communities represented by these members, where the people trust these members, who understand them and know them and know their aspirations and know their rural . . . know about Main Street and the kind of services we want on our main streets of our communities.

And the people will say, we would like to have these dental services on our Main Street as we like to have other services on our Main Street, and we'll try the best we can to maintain viability, and thank you for helping us to maintain that viability in rural Saskatchewan.

Some Hon. Members: Hear, hear!

Ms. Atkinson: — Well the minister once again has his little cheer-leaders behind him. He has his little cheer-leaders. But I just want you to know, Mr. Minister, that the people of this province aren't cheering you. They're not cheering you at all.

Some Hon. Members: Hear, hear!

Ms. Atkinson: — Mr. Minister, they're waiting in great anticipation for the next provincial election so they can boot you all out.

Some Hon. Members: Hear, hear!

Ms. Atkinson: — Now I notice that the minister gets a little defensive and the minister gets a little emotional, and he waves his arms and he gets very disturbed by what I have to say.

And, Mr. Minister, I'd like you to table all of your thank you letters from rural Saskatchewan, all of your thank you letters, thanking you and your colleagues for doing in the children's dental program. I would ask you now, Mr. Minister, to table your thank you letters so that we can all see how popular you are in rural Saskatchewan.

Some Hon. Members: Hear, hear!

Ms. Atkinson: — Well I notice that the minister hasn't tabled any thank you letters, and I suspect that he hasn't tabled any thank you letters because he doesn't have many. If he was so proud of his changes to the children's dental program he would have no problem tabling those letters.

But the minister, in his irrational discussion a few minutes ago and his flailing and his defensiveness, forgot to answer the question. And the question was: how many of the 411 dental workers that you fired, Mr. Minister, in such an inept and cruel way, have been hired by the private dentists?

You indicated to the press approximately 150 would be hired, and I'd like you to table today and advise the people of this province how many of those workers, those women, have been hired by your private dentists.

Hon. Mr. McLeod: — The number that we have hired . . . I want to say to the member that I'm very confident that that number will be achieved, that 150. I believe that that

number will be achieved. To date it's nowhere near that. We have 35 therapists who are now hired. The enrolment process has been going on since September 1, the enrolment process in the new plan, and two-thirds of eligible children have now been enrolled. And the reminder letters are going out to the remaining third, which means that to now there are more than 90,000 children in the province who are now enrolled in the plan through the private dentists of their choice.

So we have 35 of the therapists who have now been hired, and as the expanding offices, and these offices that I have pointed out to you are the ones that have been committed to and so on, and those offices will be there. And as those offices open some of them at least will be staffed by people who were former therapists, who are not in the number that I've given you but who will be in the increasing number. And I'm very confident, and the College of Physicians and Surgeons have assured me that they are very confident that that 150 number will be achieved. And I might add as well there are 30 people who are in training as hygienists which means an upgrading of their training from therapists to hygienists.

Ms. Atkinson: — Well, Mr. Minister, when you announced the changes to the children's dental program in June, you assured the people of Saskatchewan and you assured those women that 150 of them would be taken up by private dentists. And that, Mr. Minister, hasn't happened. We've had regular contact with dental therapists. Very, very few of them have been hired by private dentists.

And you talk about 30 in the dental hygienist course, Mr. Minister. My colleague from P.A. wants to ask you a few questions later in this discussion about what in fact has happened at the course at Wascana, because we're getting word from dental therapists all around this province that they can't get into the program, they can't get into the program. I know, Mr. Minister, that there isn't the need for all of these dental hygienists that have been talked about. The minister of advanced education advised us of that earlier in these estimates this past summer.

Mr. Minister, what arrangements have you made with the dental therapists to retrain them in other fields, in fields other than dentistry? As you will know, these people are trained for a particular specialty. They took a two-year course at Wascana and they were trained specifically to work in the children's dental plan, Mr. Minister. Can you advise us what arrangements you've made with those women for retraining in other fields and whether or not, Mr. Minister, you're prepared and your government's prepared to help and assist in the retraining financially of those women?

(1245)

Hon. Mr. McLeod: — Okay, I just want to reiterate the numbers — and I gave you the number that have now been hired. I want you to be very, very clear on this. The registrations are obviously still going on. Two-thirds of the people have now registered in terms of their children registered with the dentist of their choice. It's obvious, at least it's obvious to me and I believe it should be to you,

that the dentist, whoever it is in the individual office out there, will see the number of registrations that he has, or she has, in their office before they determine the staff requirements that will have. And obviously many of them will have increasing staff requirements.

They've assured us of that and as this thing breaks out in terms of who has the children registered with them, that's how the determination of the people hired and where they will be hired will be made. So that's the case; up to this date, 35 have. I know that there's a good number to go. We're very confident. Both the college of dental surgeons and ourselves are confident that we will achieve that other number.

As it relates to the retraining program, the only one available and the one that I had said before that would be available through help from us, would be the upgrading to hygienist level, and there is there, and will continue to be there. Whatever number is in there for this year, and the number for next year, and whatever, those hygienists will be trained and the costs of the program are borne by us for the people who were in our program before and who are affected by the down-sizing which took place.

Ms. Atkinson: — Mr. Chairperson, I think the minister has confirmed some of our worst fears. And the minister earlier said that only 66 per cent of parents have enrolled their children in the school-based — or in the new children's dental program. We will wait with some anticipation to see how much higher those figures go.

As I said earlier, when you compare our former children's school-based dental program to three provinces across this country that have a private dentists' program and that's the way they provide the service, the utilization rate is 20 per cent lower than the utilization rate under the old children's dental plan, and under the old children's dental plan there's about a 90 per cent utilization rate. In three provinces that I refer to, the utilization rate is 70 per cent.

So I will wait with some anticipation to see whether or not the minister's new children's dental plan will live up to the expectation of the earlier plan where we would provide a good preventive service to children in this province where they would have access, easy accessibility to that service in order to prevent future dental problems down the road. So we will wait with some anticipation. I now would like to turn it over to the member from Assiniboia-Gravelbourg.

Hon. Mr. McLeod: — I would like to just for a moment respond briefly. When I said that as of now, and from the 1st of September to now we have two-thirds of the children, the eligible children, are registered. That's a significant number when you're given the time frame that we've talked about here, from September to now, mid-October.

You will know, I believe you will know and other members will know that the children will be eligible to be registered at the time that their parents will go into the dentist. Some parents will say, well, we will be to the dentists and we'll take the four kids to the dentist in the month of December and make their appointments, and at

that time they will register them.

because there's been no determination.

I mean, some of that will go on, but certainly the two-thirds . . . and that number is increasing all the time as people register. And there will be a reminder letter going out to say, register if you have not done so, you know, to those who have not done so. So I anticipate a very, very much higher number than that. And while the member will say, oh, only two-thirds are there, I would say, don't hold your breath for the number to stay at that low a number. It will be much higher, significantly higher. So I can only say to the member, we'll agree to disagree on this one.

The committee reported progress.

The Assembly adjourned at 12:59 p.m.

Mr. Goodale: — Thank you, Mr. Chairman. I have a number of questions for the minister this afternoon relating to chiropractic services in the province of Saskatchewan, which I hope you will be able to respond to. The minister will know from the blue book, it is difficult to determine precise information about the government's exact allocation of funding for chiropractic services in the province of Saskatchewan.

I wonder if the minister could tell me specifically, from the figures in the blue book, what is the specific amount that has been committed by the Government of Saskatchewan for chiropractic services in the province of Saskatchewan for the 1987-88 fiscal year? And how does that number for the current fiscal year compare to the actual spending on chiropractic services in 1986-87?

Hon. Mr. McLeod: — I don't have the — I'm not going to have the exact numbers, as you know, and from looking at the last annual available to you, the number that we don't break down by specialty area and so on.

But I will say to you as I said to our colleague from the official opposition, there certainly was a good deal of discussion about, and there was some discussion about, a capping of the number of visits. There is continuing discussion with the chiropractors and with the profession in the province in terms of how we can deal with an escalating sort of cost of chiropractic services.

And what is the most appropriate way to do that? And I think that we've come to this agreement — I think it's fair to say we've come to this agreement between the profession and ourselves and the department, that the capping at a certain number, even though that's done in every province in the country, may not be the most appropriate way to go, and that we would go to some other way to deal with this. And we haven't come to a determination on that. They haven't, nor have we. There will not be agreement within that profession in terms of the direction to go, but I'm trying to deal with their executive and some other member of . . . their long-standing members of their profession.

So I, in anticipation of the sort of the direction your questions will go . . . and I may be taking some liberty to do that. I don't want to do that and I know we're short of time. But the answer, the specific answer is that. I don't have the exact dollar that's been allocated, but I can tell you that there is likely to be some change in terms of the way chiropractic services are paid for. But to give you a definitive answer on that kind of change, I can't give now