

The Assembly met at 2 p.m.

Prayers

ROUTINE PROCEEDINGS

INTRODUCTION OF GUESTS

Mr. Kowalsky: — Mr. Speaker, in your gallery, I recognize two constituents of mine who I present to this Assembly: a former member of the Assembly who sat in the government side, Mr. Paul Meagher, who represented the seat that I now represent; and business associate Boris Mamchur. Welcome to the Assembly.

Hon. Members: Hear, hear!

Hon. Mr. Hepworth: — Mr. Speaker, I'd like to introduce to you and through all members to you, to all members of the Legislative Assembly, the president of the University of Saskatchewan who I see in the far gallery today. I had the chance to meet with him this morning. I'd like all members to join with me in welcoming President Kristjanson to the gallery.

Hon. Members: Hear, hear!

Mr. Prebble: — Thank you very much, Mr. Speaker. Mr. Speaker, I'd like to, on behalf of members on this side of the House, join with the Minister of Education in welcoming President Kristjanson to the Assembly today. It's a delight for all of us to have the president of the University of Saskatchewan with us to view the proceedings. I'm sure that all members will want to join with me in giving him a second welcome to this Chamber.

Hon. Members: Hear, hear!

Hon. Mr. Tusa: — It is also my privilege this afternoon to introduce to the House, a group of 20 grade 5 students from the school in Cupar. They are accompanied by Mrs. Daradich, Mrs. K. Daradich, Mrs. Clark and Mrs. Schwartz. I look forward to meeting with these students after question period at about 3 o'clock, to have drinks and to discuss this afternoon's session. I would ask all members to please welcome these students to our Legislative Assembly.

Hon. Members: Hear, hear!

ORAL QUESTIONS

Billing of Government Departments for Services Not Rendered

Ms. Atkinson: — Mr. Speaker, my question is to the Acting Premier. Mr. Premier, is it policy of your government to have advertising agencies overbill for services, or bill for services that are never rendered, and set that money aside for an election fund?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — That is not the policy of this government, and has never been, and did not happen.

Ms. Atkinson: — New question. Mr. Minister, you will know that a former employee of SGI (Saskatchewan Government Insurance), Carl Shiels, has alleged that the Lights on for Life program was being billed a \$4,500 monthly consulting fee from Dome Advertising for services never rendered, and that when Mr. Shiels questioned this, it ceased. In a court of law, under oath, Mr. Shiels testified, and I quote:

"I told Grant (Gibson) in as much detail as I could remember of the meeting that I'd had with Det Rinker, the account executive for Dome, and with Suzanne Hart (of SGI). And I told him that Det Rinker had even said, quite frankly, it's just money going into a campaign fund."

How do you explain that, Mr. Minister?

Hon. Mr. Andrew: — I explain it in two ways. I think, first of all, first of all I think you have to look at the court case from which you report, which one Carl Shiels was dismissed because of sexual harassment against a female employee.

Now you say, what was the judgement? I would ask the Opposition House Leader to read carefully that case and within your own mind determine whether or not there was grounds for dismissal for sexual harassment. And I think that you could easily look at that, number one. So obviously Mr. Carl Shiels advanced this other argument, Mr. Speaker.

Our view, and the view that we saw, was as follows, Mr. Speaker: that there was some significant resistance by SGI to go forward with the Lights On For Life program, a program that has some 93 per cent acceptance in this province; a program that I believe adds significantly to the safety of the driving public; something significantly resisted by management in SGI, later to find out that in fact it in fact worked very, very well. And that was in fact an individual was put in there to assist in the development of that program.

What was done, Mr. Speaker, was done properly. The program unfolded properly, and Dome was paid for work that they provided.

Ms. Atkinson: — New question to the minister. Mr. Minister, from your answer it appears to me that you are saying that this is simply sour grapes on the part of Mr. Shiels, but at least one Court of Queen's Bench judge disagrees with you. In a judgement on the Shiels unfair dismissal suit against SGI, which Mr. Shiels won, I note Mr. Justice MacLean said the following, and I quote:

I think it likely, too, that a contributing factor in the plaintiff's dismissal was the attitude he adopted with respect to the accounts of Dome Advertising Ltd.

The plaintiff testified, and I accept his evidence, that his superior was upset with the way he handled the matter, and perhaps too, because the superior himself has approved payment of similar

invoices when perhaps he should not have. In any event, I think it likely the plaintiff rocking the boat the way he did, contributed to his dismissal.

Surely, Mr. Minister, you're not suggesting that Mr. Justice MacLean is also practising sour grapes.

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, I'm not for a minute suggesting that Mr. Justice MacLean is practising sour grapes. Obviously he looked at the case. It was a question of fact. He took the interpretation of the facts as he saw them. Now that's point number one.

Point number two is, I don't think by any stretch of the imagination, even from the members opposite, that they would not agree that one Carl Shiels was clearly a disgruntled employee looking for revenge. I don't think there's any question about that, Mr. Speaker.

Mr. Speaker, I would suggest . . . Mr. Speaker, I would suggest that the reason for Mr. Shiels dismissal was — the reason for his dismissal was the fact that a female employee of the government, or of SGI, complained of sexual harassment my one Mr. Shiels, and that brought forward the dismissal of Mr. Shiels. He then commenced action on this basis.

What I can say to you, Mr. Speaker, having reviewed the matter with the people within SGI, the service that he complained about, Mr. Speaker, the service that he complained about was in fact done; that program was launched; that program worked very effectively; that program was accepted and continues to work well, Mr. Speaker, and provides a positive safety element to the Saskatchewan motoring public. That is something they're against, Mr. Speaker. That program has worked. That program was put in place by Dome, and I would suggest to you that that was a very good program.

Ms. Atkinson: — New question to the minister, Mr. Minister. I'd also like to quote one further reference from the transcript. And in this case, Mr. Shiels is talking to Grant Gibson, his immediate superior, and vice-president of SGI, and I quote:

He said, "Well, yes, Carl, I know. It's a very delicate matter. We have to be careful how we handle that." He said, "That's only the tip of the iceberg in comparison to what's happening on the commercial side" (meaning the commercial side of SGI).

Mr. Minister, what is happening on the commercial side of SGI; and for that matter, Mr. Minister, what's happening in all the other Crown corporations and government departments? Answer that question.

Hon. Mr. Andrew: — Mr. Speaker, what is happening, what is happening on the commercial side of SGI? The member from Indian Head-Wolseley just presented the annual report last week, and what is happening is, I think, was some \$11 million profit, one of the largest profits ever gained or earned by SGI. So that's what's in fact happening on the commercial side of SGI, Mr. Speaker.

Mr. Speaker, at the question with regards to the Lights On For Life campaign, what happened is the Dome advertising put in place a proper advertising scheme, something that SGI did not think was important, did not think that they should do because they were somehow in the commercial business and should provide nothing but the commercial service.

What this was is preventative, Mr. Speaker. It was a positive campaign. The program was put in place; it received positives from all people, Mr. Speaker. Some 90 per cent of the population of the Saskatchewan accept that, and I believe it's a proper and adequate program to help save lives on the highways of Saskatchewan.

Some Hon. Members: Hear, hear!

Mr. Shillington: — Thank you very much. A new question. I want to say as an aside, Mr. Minister, that the member from Saskatoon Nutana was being very charitable when she described your approach as sour grapes. It's apparent what we have here is an honest man who blew the whistle on you, and for that you tried to destroy his career with the allegations . . . (inaudible) . . .

Some Hon. Members: Hear, hear!

Mr. Shillington: — And I am outraged that you would repeat the remark after he was found not guilty in court.

Some Hon. Members: Hear, hear!

Demand for Public Inquiry

Mr. Shillington: — I wouldn't expect such comments in a barroom, much less an Assembly. My question, Mr. Minister, though, has to do with the allegation that was made. And I want to remind the Attorney General, the Minister of Justice, that these allegations were made by someone who was a respected career public servant and who made them under oath. He alleged public property was being diverted for private use through false and fraudulent means. That's a classic definition of criminal fraud, it demands a public inquiry, and I ask you: will you not give us a public inquiry on this?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, the member from Regina Centre says that Mr. Shiels was found not guilty in court. Now you are a lawyer, sir, and you should know that this was a civil action, and you don't get found guilty or not guilty in civil actions. You learn that in first year law school, Mr. Speaker, but for the member opposition, you do not . . . are you not found guilty or not guilty.

He can say that that one Carl Shiels is an upstanding, long-term civil servant, Mr. Speaker. I can tell you, the female employee of SGI who brought this complaint against one Carl Shiels did not — did not — manufacture some suggestion that she was sexually harassed by one Carl Shiels. The members opposite are perfectly prepared to stand up and read the judgement. I would suggest to the members opposite they also read the facts as presented in the judgement and cast your self . . . and ask yourself, Mr.

Speaker, and ask yourself, Mr. Speaker, whether or not one Carl Shiels is such an upstanding citizen.

Mr. Shillington: — A new question, Mr. Speaker. Mr. Minister of Justice — and I have difficulty saying those words in this discussion — I want to read for you a short paragraph from Mr. Justice MacLeans' decision:

The plaintiff testified, and I accept his evidence, that his superior was upset with the way he handled the matter, and perhaps too, because the superior himself had approved payment of similar invoices when perhaps he should not . . . In any event, I think it likely the plaintiff rocking the boat (in) the way he did, contributed to his dismissal.

Mr. Minister, it would be alarming enough if this were the first time it happened, but it isn't. It's apparent in a previous case that Dome Advertising and the Conservative Party of Saskatchewan share the same pockets, and the tax dollars which go to Dome Advertising are taken out of those pockets by the Conservative Party of Saskatchewan.

I refer you to Bruce Cameron's allegation, his letter. I gather about the end of April, in which he said that Smail Communications had contributed to the dog and pony show, and with their much larger share of government revenues Dome Advertising should do better.

Surely, Mr. Minister, in view of the fact that this is the second time the allegation's been made, a full public inquiry is warranted.

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, I would have thought that did the court come to the view, as the member opposite would suggest, did the court come to the view that somehow this money was being stripped out by the Conservative Party, he would have taken some action then. And I don't think he said that.

Mr. Speaker, Dome Advertising provided a service to the government, and I would suggest, in the case of Lights On For Life, a good service to the government, Mr. Speaker, and to the public, Mr. Speaker. And I can say to the hon. member opposite, the Conservative Party of Saskatchewan does not need to stoop to that type of measure in order to raise money as we do, as we do raise money to fight campaigns, Mr. Speaker. We were not part of that, Dome was not part of that — innuendo by the members opposite. The court does not suggest that, Mr. Speaker, and the member from Regina Centre is famous for his innuendo, Mr. Speaker. This one has as much validity as the last one he raised with SGI four to five years ago.

Mr. Shillington: — New question, Mr. Minister, it's not innuendo. It was the basis upon which the judge made his decision that this plaintiff was wrongfully dismissed and was entitled to \$33,000 in damages.

Mr. Minister, we have, as I stated in my earlier question, a situation that falls within the classic definition of fraud — public property being diverted to private means by false

and fraudulent means. Will you, Mr. Minister, undertake to have the RCMP (Royal Canadian Mounted Police) investigate this as they should, and will you undertake to report to this Assembly when you have the RCMP reports?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, as the hon. member knows, as a lawyer, or should know as a lawyer, at any time any individual who is alleging a criminal offence or criminal activity, does not have to raise in the legislature. The hon. member . . . if you are suggesting there that there is fraud and it's a clear case of fraud, I ask you: why would you, as a lawyer and an individual, not do what is your duty and bring that to the attention of the RCMP? Everybody has an obligation to do that, Mr. Speaker, and certainly a member of the bar has a responsibility to bring what he claims to be a blatant fraud to the attention of the RCMP.

I ask the member why he, as a practising lawyer, has not in fact done that?

Mr. Shillington: — I'll tell you why, Mr. Minister, because the RCMP report to you, and I have no belief at all that you will deal with that report honestly.

Some Hon. Members: Hear, hear!

Mr. Shillington: — Mr. Minister, I assume the RCMP are investigating this. I ask you again: will you undertake to report to this Assembly when you have the RCMP report?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, I believe what the hon. member has just indicated is the RCMP in this province are biased, that they would not properly report to the Attorney General, Mr. Speaker. That's exactly what I heard him say — the RCMP is biased . . .

Mr. Speaker: — Order. Order. Order, order. We have several people trying to answer the question. The Minister of Justice.

Hon. Mr. Andrew: — Mr. Speaker, if the hon. member said what I thought I heard him say, which is that the RCMP are biased in this province and that he would not have any opportunity if he was to present that case to them, that we would somehow close it down or shut it down, that is a very, very serious accusation against the RCMP, Mr. Speaker, a very serious accusation against the RCMP.

I would hope the hon. member would: (a) clarify that; and (b) apologize to the RCMP for such statements.

Mr. Shillington: — Well, Mr. Minister, we saw you attack Carl Shiels in an attempt to deflect this issue; now we see you doing the same thing with the RCMP.

I said quite clearly that I trusted the RCMP to investigate this in an even-handed fashion. What I don't trust is you to report the matter in an even-handed fashion.

Some Hon. Members: Hear, hear!

Mr. Shillington: — And I ask you again, are you going to do your duty as this province's chief law enforcement officer and report to this Assembly when you get the report?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, I take it the hon. member has backtracked and said . . .

An Hon. Member: — No, I don't think he has.

Hon. Mr. Andrew: — Well maybe . . .

Mr. Speaker: — Order. Order, order, order. Order, order. Order, order. Order.

Hon. Mr. Andrew: — Mr. Speaker, I say to the hon. member, I say to the hon. member, if he alleges fraud in this particular case, I ask the hon. member why he has not taken that to the law enforcement authorities immediately. Mr. Speaker, I ask why that has not been done. Mr. Speaker, they have had this case for some two months now, and why, if he is genuinely concerned that there has in fact been a criminal fraud here, why he has not reported that to the authorities, Mr. Speaker? I asked that in a very, very serious way, Mr. Speaker. I think he is has not responded to that; I think he simply only looks, Mr. Speaker, to bring to the question period so he can obtain the headline, and the headline is what he is interested and not justice of this province, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Shillington: — Mr. Minister, your behaviour today leaves a cloud hanging over the entire government with respect to this issue. Mr. Minister, are you prepared to call Mr. Shiels to the bar of the Assembly and have him submit himself to questioning by both sides of the House so that we may know where the truth of this matter lies?

Some Hon. Members: Hear, hear!

Hon. Mr. Andrew: — Mr. Speaker, the question before this was to . . . by the hon. member, alleging criminal fraud against Dome Advertising, criminal fraud against Dome Advertising. Now if the member is looking for criminal fraud charges, Mr. Speaker, criminal charges, now he shifts and says, could we have Carl Shiels in front of the bar, Mr. Speaker. I ask how genuine you are, looking for justice in this particular case, Mr. Speaker . . .

An Hon. Member: — We're going to find out.

Hon. Mr. Andrew: — Yes, you're going to find out, Mr. Speaker, and I wonder if you would also wish to rehear the entire case, rehear the entire case — all the evidence — that is before the court in this wrongful dismissal case.

Discrimination Against Single Employables

Mr. Prebble: — Mr. Speaker, my question is for the Minister of Social Services. We've just seen how this government, Mr. Speaker, has lots of money for their friends at Dome Advertising. I'd like to ask a question

about how you treat the poorest of the poor in our society — single employables on social assistance who in 1984 you but by more than \$200 a month, leaving them in dire poverty.

The minister will be aware that on Friday a Saskatchewan Court of Appeal's decision on the Murray Chambers case found that your government had indeed discriminated against single employable welfare clients; that you've violated the human rights code of this province, and that you owe every single employable \$55 a month for every month in the last four years that you discriminated against them and that they were on social assistance.

My question to you is this: in light of this court decision, will you now issue a cheque to each social assistance recipient for the \$55 a month that you have illegally taken away from each of these persons?

Some Hon. Members: Hear, hear!

Hon. Mr. Schmidt: — Well, Mr. Speaker, first of all the member opposite is not very wise in his calculation of how the world functions. He hasn't noticed that last January I changed the policy, and that this case has now come out, and we'll deal with Mr. Chamber's victory in court in the appropriate manner. But the policy was changed last January, and he hasn't noticed yet.

Secondly, there is an 8 per cent monthly turnover at Social Services so that people are coming and going off of the rolls. And if the member is truly concerned, I'm sure he will send over \$150 to pay his share of that cost that he proposes to spend. And maybe he should pay the \$150 for his wife and children, so he should probably send over about \$600 to this side for his share. And we will all try to do that for everybody in Saskatchewan.

We will look at the situation. We will pay people enough to live on. But the member opposite has to remember we are dealing here with single employable adults in Saskatchewan, and we will provide them the essentials. But if you want to live better than the essentials, you have to try to find a job.

Mr. Prebble: — Supplementary, Mr. Speaker. Mr. Minister, what we were talking about here is your government's responsibility to uphold the law of this province, to respect the human rights code.

The courts have found that you have discriminated against single employable social assistance recipients, and what we are asking, Mr. Minister, is: are you prepared now to provide the back payments that the court is requiring back to 1984? Are you prepared to do that? Are you prepared, in other words, to give these people who you've treated so unfairly, fair treatment for once?

Some Hon. Members: Hear, hear!

Hon. Mr. Schmidt: — Mr. Speaker, our policy since 1984 has been different. We've been providing jobs for these people, and since they now have jobs, they don't need the back pay.

Exodus of Farm Families

Mr. Upshall: — Mr. Speaker, my question is to the Acting Minister of Agriculture. Lately I've seen some very disturbing reports on the exodus of farm families out of . . . off the farms, and farm workers — 17,000 gave up agricultural work in Saskatchewan in the last year. And, Mr. Minister, I don't believe this is a very positive, well thought out program that you're putting out. I don't know why you're maintaining it, and if you don't stop to maintain it, the drought situation in Saskatchewan this year is going to amplify that; we're going to see even more people.

Mr. Minister, my question to you is this: will you now agree that a unanimous resolution from this legislature is necessary to convince the Mulroney government in Ottawa that we need immediate action now.

Some Hon. Members: Hear, hear!

Hon. Mr. Hepworth: — Well, Mr. Speaker, relative to the report about 17,000 farm families leaving the land, I don't think it takes a rocket scientist to figure out that with the downturn in the global agriculture economy, coupled with the effects of the drought, that there is significant hardship in rural Saskatchewan.

I think one has to be careful how one interprets those results. To merely suggest that there are somehow 17,000 fewer farmers today than there were six months ago would be wrong, because what this includes, of course, is people who work for implement dealers and fertilizer dealers. Even the hired hands and their entire family are counted as statistics, as I understand it.

Having said all of that, there is no question that rural Saskatchewan has been buffeted in every which way. The course of this government has been clear, and the course in the future will be of the same, Mr. Speaker, in that we stand four-square behind the farmers, the federal government has stood four-square behind these farmers, and we look to their continued support behind Saskatchewan's farmers, Mr. Speaker.

MINISTERIAL STATEMENTS

Changes to Saskatchewan Crop Insurance

Hon. Mr. Hardy: — Mr. Speaker, as you know the severe drought conditions which have plagued Saskatchewan this year have prompted the governments of Saskatchewan and Canada, through the Saskatchewan Crop Insurance Corporation, to make a number of moves designed to allow farmers greater flexibility in dealing with the current crisis.

These changes are also focused on dealing with the immediate problem of providing the much needed feed for Saskatchewan cattle owners. In this regard I'm pleased to announce that spring seeded crops will be allowed to be taken for fodder or feed, and will be adjusted in the same manner as the fall seeded crops.

Therefore, retroactive to June 20, full coverage comes into effect and customers will be allowed to use the crop for feed or fodder, and appraisals will be carried out in the

following manner. First, a pre-harvest appraisal will be completed. Customers can accept this appraisal and settle the claim, or if the crop is subsequently harvested, the pre-harvest appraisal becomes void and harvested production will be deducted from insured productions guaranteed.

Second, customers may leave check strips in the field to base appraisals on a later date. It will be the customer service office manager's responsibility to ensure the completion of pre-harvest claims in a timely manner before or near the normal swathing times. If the customer has grazed or cut for feed without notifying the customer service office, he must do so immediately. In other words, Mr. Speaker, if he's already cut it, he must do so immediately.

We will appraise the field based on: (1) check strips, if any were left; (2), adjacent fields if similar conditions exist; (3), if (1) or (2) above are not possible, we will determine an appraisal based on whatever methods are required to make that determination subject to the approval of supervisor of claims and customer service office managers.

Land that was seeded to a spring crop that was cut for feed, grazed, or fallowed by cultivation or chemical allow, if needed for weed control, Mr. Speaker — and I repeat that, chemical fallow, if needed for weed control — prior to July 11, will be eligible for summer fallow coverage for 1989 crop year.

I believe that this change in policy will provide producers with another option when making the management feed decisions. It will also help to at least partially alleviate the serious feed shortage problems. We are considering a number of other changes, and further announcements will be made shortly.

Again, Mr. Speaker, I would just like to urge all contract holders who wish to exercise this option, or those who have any questions or concerns of any Saskatchewan Crop Insurance Corporation matter, to contact their local customers' office as soon as possible.

Thank you, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Upshall: — Mr. Speaker, we're into a little bit of a game here called an announcement a day. I don't know if it's for government advertising purposes or what the purpose is. But I'll tell you, we still are seeing these dribbles coming out and the lack of a complete package for farmers.

I don't see too much new in this and I don't see the necessary monetary support these farmers will need. I don't know why this government continues to consult and to try to formulate a program on June 27 when we've been into this thing for months. It just . . . it amazes me.

And I just don't know why they continue to come out — daily announcements. What's that do for the farmer who's sitting out there who has a number of things that he has to consider? Because tomorrow he's going to find out

something else, the next day something else. These decisions have to be made now in many cases. They have to have all the ground rules in place before they can make those decisions, and the government is not giving this to them. It's a dribble a day.

And I just don't know what these farmers are going to think. In fact, I do know, because they're calling me every day saying, what's going to happen? What about this and what about that? And I'd say, you're at the mercy of the government to make up their mind in these decisions.

And I just hope, and I would just ask this government, please come out with a total package so all the farmers know exactly what the ground rules are. Would you do that for them?

Some Hon. Members: Hear, hear!

MOTION UNDER RULE 39

Severe Drought Conditions

Mr. Upshall: — Mr. Speaker, before orders of the day, I rise pursuant to rule 39 to seek leave of the Assembly to move a motion on a matter of urgent and pressing necessity.

I'll just take a moment to explain to the Speaker the issue, and to indicate the nature of the motion itself.

The issue is the severe drought conditions that are now causing extreme hardship to Saskatchewan agriculture. The exceptionally dry conditions over the past weeks and months are now being compounded by a wave of very high temperatures and wind.

While this drought is most severe in Saskatchewan, it is not restricted to Saskatchewan and clearly calls for immediate action by the federal government. Farm families and rural communities can no longer wait. Their situation has been underscored by media reports today, or over the past 12 months as I have mentioned, 17,000 Saskatchewan people left agriculture to find work elsewhere.

I believe that all members of this Assembly will agree with me that the situation is desperate and urgent. I believe that we can approach it in a non-partisan way.

Therefore, Mr. Speaker, I see to leave to move a motion along the following lines:

That this Assembly urges the Government of Canada to announce and implement immediately, in full co-operation with the provinces, a comprehensive drought relief program to respond to the severe drought conditions affecting Saskatchewan and other parts of Canada, and threatening Saskatchewan farmers and rural communities.

Finally, Mr. Speaker, I noted that the Premier appeared to respond positively to such a request. In the *Hansard* I can quote, on page 2459:

... I won't rule out the possibility of committees or motions in the House as ways of extending the message to the federal government ...

Therefore, Mr. Speaker, I seek leave of the Assembly to move that non-partisan motion to send a clear message to the Government of Canada.

Some Hon. Members: Hear, hear!

Leave not granted.

MOTIONS

Substitution of Names on Standing Committee on Public Accounts

Mr. Tchorzewski: — Mr. Speaker, with the government's denial of that motion, I want to deal with another matter. And I've passed a copy over to the acting, acting, Acting House Leader, or is it the Acting Deputy Premier, that I want to move the following:

That the name of Mr. Lingenfelter be substituted for that of Mr. Rolfes on the Standing Committee of Public Accounts.

Moved by myself and seconded by my colleague the member from Prince Albert.

Motion agreed to.

ORDERS OF THE DAY

GOVERNMENT ORDERS

ADJOURNED DEBATES

SECOND READINGS

The Assembly resumed the adjourned debates on the proposed motion by the Hon. Mr. Klein that Bill No. 60 — **An Act to amend The Urban Municipality Act, 1984** be now read a second time.

Mr. Upshall: — Thank you, Mr. Speaker. Mr. Speaker, I rise today to say a few words about the effect of extending store hours, including Sundays.

Mr. Speaker, what is happening here is that we're moving to centralize the economy. We're doing away with ... we're potentially doing away with many of the local shopkeepers, many of the local jobs. What we're seeing is a draining of funds from rural Saskatchewan into urban areas. And up till now those funds have been necessary, Mr. Speaker, to maintain the facilities, to maintain the services in rural Saskatchewan.

Another problem that we could run into, Mr. Speaker, and already it's becoming evident, whereby we can see shopping as being a form of entertainment, where in rural areas the family will go and do their Sunday shopping and maybe go out for something to eat, and thereby just moving the dollars from that rural community into the city. And I think that is a dangerous precedent to be set in rural Saskatchewan.

We also have the situation where we are going to reduce or potentially reduce the number of jobs in smaller communities, because when those funds are drifting out of the local community, there will no longer be the need for the local shopkeeper, because of the loss of revenue, for him to have extra staff on so he can employ those people in the local areas who need jobs. And I'll tell you, we need them badly in rural Saskatchewan, because many people who are out of work . . . the farm economy is bad, there's need for many farmers and farm men and farm women to find employment off the land, off the farm.

These local shops could very well be a place that these people can find employment because the need is there; the economy is working if you keep the local dollars local.

So we have a loss of sales, we have fewer employees, therefore we have a loss of business. And with that loss of business goes the loss of services needed to maintain those businesses. And this goes right through the whole rural community. We have a great strain on these communities, Mr. Speaker. We have a great strain on them to maintain their local identity due to a shrinking population.

When you have people who are moving out of their communities, and dollars are tight now and these people will be looking to get the best deal they can get, but what happens is we're losing the autonomy, we're losing the businesses, we're losing the support services, and this runs right through.

With fewer people it affects all sectors. It affects the education system where they may not need as many teachers. It affects the hospital system whereby the services and the number and quality of services . . . or quantity of services aren't necessary.

We're seeing a great, tremendous pressure now being put on rural post offices. And this type of a situation, Mr. Speaker, will add to that pressure because those people in those communities will not have as many dollars floating through their community as they once did have.

Mr. Speaker, it doesn't matter whether it's the local co-op association or whether it's the local independent business man; these people will be affected. And I just don't say that on my own because they have been talking to me and I'm sure they've been talking to the member over there who's pushing this through.

And they're very concerned, and I do not take their concerns lightly, Mr. Speaker, because they have to look after their business, they have to look after their livelihood, and they're concerned, they're genuinely concerned about the local strength of business, the local economy, and they're scared that that's being undermined here. And when that's being undermined by this government, it shows me the lack of support that this government has for local communities in rural Saskatchewan.

Mr. Speaker, we've seen in some cases where a town did not have the support from the local residents. And I'll tell

you, those towns aren't there any longer. Fortunately it's very, very few, because the support has to come from the local farmer or from the local business person to his community in order to maintain that community.

(1445)

And as I said, Mr. Speaker, we are in tough economic times. People are forced into going wherever they can. They will pay slightly higher, they have been able to in their local communities if that's necessary; many times it isn't. But they are now looking to stretch their spending dollar as far as they can. If that includes combining some of their entertainment with some of their businesses as shopping, then that is going to directly affect the local business community in small towns.

As I said, Mr. Speaker, people are being pressed, pressed hard to be very frugal with their spending dollars. And the decision made to combine shopping with entertainment is very, very scary in my books.

So, Mr. Speaker, also we must look at this as an assault on the family. I think Sunday traditionally has been the day of rest. Traditionally we have had one day during the week which we could take off and spend out time going to church and with the family in the local communities, and providing ourselves with a day that we can sit back and get ready for the next week to come.

I think, Mr. Speaker, what it is, we're beginning to see an attack on the quality of life in rural Saskatchewan. When you start looking at the whole economic situation of rural Saskatchewan, the few dollars that are there, the pressure that they're being put under, and now adding to this is another attack on keeping that family, keeping that far, keeping that business, in a local area.

Mr. Speaker, Saskatchewan has been built up over the years on a number of people supporting their local communities and, where necessary, going out to a larger community to get services that will not support themselves in small communities.

But what we're doing here is throwing it wide open. We're having an open market in Saskatchewan whereby on Sunday you can go anywhere you want and do your shopping and bypass your local store. And I don't think that is very . . . and I don't think that's what we want. I don't think that's what the people in this province of Saskatchewan have worked for over the number of years and have built up an economy right from the local level right through to the large towns and cities in Saskatchewan.

So, Mr. Speaker, as I say, the economic pressure the families in rural Saskatchewan are under, combined with the fact that they have to stretch their dollar as far as they can, combined with the fact that the people in rural Saskatchewan are telling me and our side of the House, and I'm sure the minister, that they don't want this wide open game to go on on Sunday. Because if that happens, Mr. Speaker, you will see the face of this province change very drastically. And I don't think they want that, and I'm sure that we don't either, Mr. Speaker. Thank you.

Mr. Lyons: — Thank you very much, Mr. Speaker. I rise to take part in this debate, along with my other colleagues on this side of the House who are opposing this Bill.

My other colleagues have given a fine account of the content of the Bill and some of the effect that it will have on people in this province, both in terms of the ward system and how the ward system will be destroyed and people's democratic right will be taken away from them on the one hand; and also by the imposition of a measure on the municipalities which will undermine the fabric of commercial life in this province and particularly give an effect which is detrimental to rural Saskatchewan, to small towns in rural Saskatchewan, to the shopkeepers and the owners of small businesses in rural Saskatchewan, and as well, in urban Saskatchewan, those family-owned businesses which we put under hardship.

But you know, Mr. Speaker, my other colleagues have spoken about that. I don't want to speak about that today. I want to talk a little bit about the political operation which is behind this, because it's a conspiracy, Mr. Speaker. It's a conspiracy to hijack democracy in this province, and it's a conspiracy to hijack city hall. And I want to point out to the people who are watching and in the galleries, who the members of that conspiracy are, and how in fact they're working that conspiracy.

First of all, Mr. Speaker, let's name the members of this political conspiracy to hijack democracy and to hijack city hall. Well we have such actors as the chamber of commerce, both in urban areas like the Regina chamber of commerce and the Saskatoon chamber of commerce, guided by and working in conjunction with the Saskatchewan chamber of commerce. That's one of the actors.

Then we have the Saskatchewan Business Alliance, a group of business people in this province, closely aligned with the Progressive Conservative Party, who in fact are demanding that their taxes be cut and that the taxes that they want cut be passed along to property owners in this province, both in terms of the individual tax that property owners pay, and also the education tax portion of the tax. Here we have Conservatives who are demanding the end of that taxation system, a cut for business tax. We don't see them demanding a cut for personal income tax or a cut on taxes for people on lower incomes, but for their business. That's another act of the Saskatchewan Business Alliance.

Thirdly, we have the Progressive Conservative Party of Saskatchewan who began to orchestrate this kind of deal throughout the province.

Fourthly we have the member for Qu'Appelle-Lumsden who's part of this conspiracy, joined by his colleague, the member for Regina South, the Minister for Urban Affairs.

And those are the major actors in this conspiracy to hijack democracy, to take away the ward system, and in fact, to do a political operation in this province. It's a conspiracy, a conspiracy based for one reason only. The urban people of this province have kicked their political butts out of office.

We had the Minister of Urban Affairs who ran like a coward out of the seat that he originally ran in, in Regina North, who took and hightailed out into the south to try to find a safe seat there. In fact, despite the fact and despite the effort and despite his running and hiding, he was almost defeated in that seat in south Regina.

So we have . . . so we have here, Mr. Speaker, a conspiracy to try to do through the back door which the PC Party of Saskatchewan was not able to accomplish through the front door, to try to gain the representation on the representative organs of power, by people.

And, Mr. Speaker, the Minister of Urban Affairs sits there and chatters from his seat, and I'm glad he's sitting here listening to this because his reaction shows what I'm saying is the truth. His reaction . . . by his reaction, he knows that what I'm saying, exposing this political operation, shows indeed the kind of person that he's up, and the kind of political operation that the PC Party of Saskatchewan is trying to do.

And people say, well that's all very well; this may be partisan, political rhetoric that I can use words like conspiracy to hijack democracy, and that's rhetorical. But let's deal with the concrete facts, Mr. Deputy Speaker, let's deal with the concrete facts of how that conspiracy is working here in Regina, and it's not too very long ago that we've seen the outlines of the conspiracy coming to fruition.

First of all, we have a long series of ads placed in the Regina *Leader-Post* by the Saskatchewan Business Alliance, false ads, ads which the city council in this city have proven to be false ads, alleging a number of facts. One is that the city of Regina and the city council are somehow responsible for a higher taxation structure here in Regina than in other places like Saskatoon or other cities.

Secondly, they're trying to paint the impression that it is because of the overspending of the city council that's resulting in this high tax; that somehow the city council is spending money in areas in which services are not being provided and that there's a whole pile of fat which has accumulated at city hall, which somehow needs to be cut out.

And we've seen the Saskatchewan Business Alliance and the Regina business . . . its Regina arm, putting these ads in the *Leader-Post*, trying to build this impression, supported by statements, supported by statements from the Minister of Urban Affairs who is saying things to match what the Saskatchewan Business Alliance is saying, trying to leave the impression that somehow Regina city council is not responsible or Saskatoon city council is not responsible for spending. In fact, that was the original rationale that the minister was putting forward to do away with the ward system — that in fact representative democracy is too costly for the people of the city; that because councillors are elected to represent wards, that somehow they're not concerned with the overall spending of the city as a whole.

So we have the chorus — Minister of Urban Affairs on one

side, Saskatchewan Business Alliance on the other — trying to paint the picture that somehow urban democracy, as we know it, is too costly for the people of this province.

Secondly, we then go from that build-up scenario where the SBA (Saskatchewan Business Alliance), this business alliance, is trying to paint the full picture, to another couple of interesting political developments. We have the mayor of Regina, Mr. Larry Schneider, say that he's not going to run for mayor again. What's he going to do? Why he's going to seek the Progressive Conservative nomination in the new riding of Regina Wascana — right?

He's going to seek the PC nomination in the city of Regina Wascana, and he's doing it so he can open the way for the hijacking of city hall and the campaign and the high-priced political campaign to come, headed by the SBA, headed by the chamber of commerce, and orchestrated out of the office of the Minister of Urban Affairs.

When October comes, you will see this minister and this government involved in the Regina election and the Saskatchewan election up to their twitching noses. They'll be involved in that.

And who do we have that's going to replace — who's going to lead the Conservative charge on city hall; who's going to be the master conspirator? Who's going to be the master conspirator to run to take control of city hall? None other than Gordon Dirks, the former member from the constituency I have the honour to represent.

Here's Mr. Dirks, who made a recent announcement that he's going to run as mayor for the city of Regina; promising cuts in taxes, promising better services, promising no layoffs; no job loss; promising better and more efficient government — the same kind of phoney baloney rhetoric we heard in 1982. We find Gordon Dirks and the Progressive Conservative Party of Saskatchewan trying to re-hijack Regina city hall, trying to do by the back door what they can't do by the front door.

The people of this province and the people of the city, though, Mr. Deputy Speaker, will not be fooled. We heard the rhetoric of lower taxes; we heard the rhetoric of better service; we heard the rhetoric of more efficient government in 1982. And what have we got?

We have got a deficit; we have got a province which is lying in financial ruins; a province which is taken to the brink of bankruptcy; a province which has suffered climbing — double — the unemployment rate; a province which has seen the development of mass poverty, headed by the government represented by the Minister of Urban Affairs, partly responsible by the person who now claims, Mr. Gordon Dirks, that he is going to provide to the city of Regina what he and his government couldn't do for the province of Saskatchewan.

Mr. Speaker, the people of this city will not be fooled twice. You know, there's an old saying — fool me once, shame on you; fool me twice, shame on me. The people of this city will not be saying after the October election,

shame on me. They will not allow the Progressive Conservative Party of Saskatchewan to hijack Regina city hall. They will not allow the Progressive Conservative Party of Saskatchewan to hijack Saskatoon city hall. They will not allow the Progressive Conservative Party of Saskatchewan to hijack city hall in Prince Albert.

We have here the member from Prince Albert and the member here of Prince Albert-Duck Lake, and they're sitting here on this side of the House because the people in Prince Albert rejected the PC Party of Saskatchewan, and they're going to do it again in the municipal elections. We have here — if we need to look any further, the by-election in Eastview and the member who — my colleague my who sits beside me, the member from Saskatoon Eastview, now sitting in the seat because the people of Saskatoon rejected the PC Party of Saskatchewan. We have here in Regina eight out of the 10 MLAs from this city, because the PC Party . . . the people of Regina rejected the PC Party of Saskatchewan and they're going to reject the conspiracy to hijack Regina city hall come October. You mark my words, Mr. Speaker; you mark my words.

They're trying to steal in the back door what they can't get by coming through the front door. You know, there's a saying, Mr. Speaker, that, you know, if democracy would change anything, they'd abolish it. Well that, Mr. Speaker, was what the Minister for Urban Affairs is trying to do. He is taking away the democratic right of citizens to have their own representation by electoral division.

He is taking that right away for one reason and one reason only; he and his ilk can't get elected in this city, and if he'd call a provincial election right now, the Minister for Urban Affairs wouldn't be sitting there, the member for Regina Wascana wouldn't be sitting there. And if you need any further proof, we have here on the front benches the new member for Regina Elphinstone, who received the highest provincial record when it came to percentages of popular vote in the history of this province, because the people of Regina don't want you; they don't want Gordon Dirks; they're not going to have the business-dominated SBA dictate what city hall will do and what they won't do. And come October, as I said, Mr. Deputy Speaker, come October the PC Party of Saskatchewan will be rejected in the municipal elections, and I predict that they won't get one member on the city councils anywhere across this province if they open up, run under their true colours.

(1500)

Mr. Deputy Speaker, I could go on. I want to say two words on the other issue which is contained in this Bill, and that's the question of store hours. The critic for small business, the member for Prince Albert-Duck Lake, has spoken quite eloquently on what will happen to small businesses throughout this province when this Bill is passed. We've seen it in Ontario; we've seen it in rural Ontario when Sunday shopping has been allowed in certain areas, particularly the area of North York. We see what happened to the surrounding small businesses there. They've gone out of business.

We don't have to look very far. We can look to Weyburn.

We can look down to Weyburn to see what happened with the Safeway stores and the Safeway workers and the families of the Safeway workers in Weyburn. Why? Because people from Weyburn were coming in to Regina to shop at Superstore on a Sunday ... (inaudible interjection) ... Well, once again, Mr. Speaker, the Minister of Urban Affairs sits there chirping away. He's had his say and I'm hopeful that he will allow myself and other members of the Assembly to have their say. I know he doesn't like what I'm saying.

I know he doesn't like the reaction that small businesses throughout the province have given him, the hundreds and hundreds of letters that have come in to him saying he's crazy in what he's doing; that it's a crazy Bill; it's a lunatic action, because it will undermine small business in rural Saskatchewan. It will undermine small business, it will undermine the work habits and the life habits of people who work in the stores, who will now be forced to work on the ... what was generally accepted as a common day of rest in this province.

There was not the freedom of choice for small business to remain open or to remain closed. There's not the freedom of choice for workers to go to work or not to go to work, unlike in Ontario in which the Bill there that would allow for municipalities to open. And the municipality of North York passed an ordinance which said that workers who did not want to work on a Sunday could not be coerced or harassed into going to work, but in fact could stay home.

We don't see that kind of protection for working people in this Urban Affairs Act. No, all it is is the Minister of Urban Affairs and the PC Party of Saskatchewan giving in to their big-business friends in order to finance their political operations like the hijacking of city hall here in Regina — trying to grease the skids for their own political reasons.

Mr. Deputy Speaker, I have a fair bit more to say on the issue, but I know other members would like to get into it, so at this point in time I will wind up my presentation.

(1513)

Motion agreed to on the following recorded division.

Yeas — 29

Duncan	Toth
McLeod	Johnson
Andrew	McLaren
Berntson	Hopfner
Lane	Petersen
Smith	Swenson
Swan	Martens
Schmidt	Baker
Hodgins	Gleim
Gerich	Neudorf
Hepworth	Gardner
Hardy	Kopelchuk
Klein	Saxinger
Meiklejohn	Britton
Martin	

Nays — 22

Rolfes
Lingenfelter
Shillington
Tchorzewski
Koskie
Thompson
Brockelbank
Mitchell
Upshall
Simard
Kowalsky

Solomon
Atkinson
Anguish
Hagel
Lyons
Calvert
Lautermilch
Trew
Smart
Van Mulligen
Koenker

The Bill read a second time and referred to a Committee of the Whole at the next sitting.

(1515)

The Assembly resumed the adjourned debate on the proposed motion by the Hon. Mr. Klein that Bill No. 61 — **An Act to amend The Local Government Election Act** be now read a second time.

Mr. Tchorzewski: — Mr. Speaker, as I indicated in my remarks on the day the Bill was introduced, this Bill in many ways is consequential to the Bill which we have just dealt with. Our position on the provisions in the Bill that deal with the abolition of the ward system and not giving the municipalities even the opportunity to choose the ward system if they so choose. On the basis of those provisions, we will be opposing that Bill as well, but we're prepared to let it go to committee at this time.

Motion agreed to, the Bill read a second time and referred to a Committee of the Whole at the next sitting.

MOTIONS

Extended Sitting Hours

Hon. Mr. Berntson: — Mr. Speaker, I move, by leave of the Assembly, seconded by the Minister of Justice:

That notwithstanding rule 3, this Assembly, from Tuesday, June 28, 1988 to Thursday, June 30, 1988, both inclusive, meet from 10 o'clock a.m. until 10 o'clock p.m., with a recess of two hours from 12 o'clock noon and further recess two hours from 5 o'clock p.m. until 7 o'clock p.m., and oral question period of 25 minutes shall be at 2 o'clock p.m. each day.

Motion agreed to.

COMMITTEE OF FINANCE

Consolidated Fund Budgetary Expenditure Health Ordinary Expenditure — Vote 32

Item 1 (continued)

Ms. Simard: — Thank you, Mr. Chairman. I just want to make a comment, Mr. Chairman, on the way that these estimates have been conducted, and in particular on the fact that this is the third time we're up in this legislation on

health care estimates when we could have finished these estimates off some time ago by dealing with it as one package. What the government has chosen to do instead is to bring up the estimates, leave them aside for another week, bring them up for a half a day, leave them aside for several days more.

And what it's done is it's caused a lot of disjointedness in the estimates, Mr. Chairman. I find I'm in a position of having to repeat myself and put forward the line of argument that I was using at the beginning of the estimates each time. It's wasting the time of this Assembly, and the only thing I can conclude from it, Mr. Chairman, is the fact that the government is deliberately attempting to cause these estimates to be disjointed and is attempting to try to get the upper hand by calling them at different times, as opposed to dealing with them in one block.

An Hon. Member: — Chaotic climate.

Ms. Simard: — Well, yes, it's a chaotic way of managing the legislature, Mr. Chairman, and I want my concern on record.

Now there were some things that were left over from the last day that we dealt with estimates, and I would like the minister's response to those. There were two specific questions that were left over from last day, and they were: the per diem of the members of the task force, number one; and the question on community health services in the North.

Hon. Mr. McLeod: — Just a quick comment. I want to clarify just a couple of things; I won't get into it in a big way. The member makes reference to the fact that we've been here, I guess, now the third time. I've seen that happen on many occasions prior to this, and it's not something that's unusual in the House. And I guess what I would say . . . By all means, you know, repeat what you feel you must and so on, and I will try not to. But I want you to know that it wasn't any kind of . . . There was some agreement, I think, between House leaders on how we will conduct these, and so on, so I don't think that it's anything that we need to dwell upon.

As it relates to the task force and the rates of pay for commissioners, the chairman will be paid \$3,500 a month. The members will be paid \$1,250 a month. And that's just been by agreement, and we'll pay them on a monthly basis, and that's determined that in the case of the members of the commission — and they're not sure at this stage just how many days of the month that would require, so we're paying them \$1,250 a month for commissioners through the duration of this. Some months, obviously it will be more days, and some months it may be three or four or five days. So that's what we're doing; that's by agreement with all of them, and so those are the numbers.

As it relates to the Prince Albert health region — you were saying about community health services in the Prince Albert region — let me just go back through this. I'll go back a couple of years. In '86-87, the approved number of positions was 34.9 in that region. In the present year, under these estimates, the approved number is 34.2, so

it's very similar to where it was.

In the '87-88 year, because we had some . . . with the early retirement problems and some of the things that went on there, we had a number of people in community health, as we did in mental health services, that took that early retirement, and we were short of folks there and we had a lower number. But that number is back to where it was in '86-87 and is projected to continue at about that level — 34 people. So it's 34.2 now; it was 34.9 two years ago; it was 29 last year.

Ms. Simard: — With respect to the per diems, Mr. Minister, is there also an annual sum that is payable to the members of the commission, and are their expenses also payable?

Hon. Mr. McLeod: — Yes. Over and above that comes expenses and travel accommodation. Those kinds of things are paid over and above this amount which is, in effect, a per diem, but it's based on a monthly number, is what I've been given here. Okay?

So they get expenses, travel, and accommodation over and above the \$1,250 a month, which they will receive in lieu of a per diem, as you and I both understand per diem.

Ms. Simard: — Is that the sum total of the remuneration being paid to the task force members?

Hon. Mr. McLeod: — We expect that to be the sum total. If something — I should say this though, I want to clarify it — if it comes to the stage where on particular months that they are working almost full time on this as commissioners, you know, for . . . there may be some adjustments made, but that is the intention that we have, and by agreement with the members of the commission.

Ms. Simard: — So what do you estimate the total cost of the health task force to be for the province of Saskatchewan?

Hon. Mr. McLeod: — Approximately \$1.7 million.

Ms. Simard: — Mr. Minister, we also talked a bit at the closing of the estimates, the last day, about speech pathologists at Wascana. The point has been made to me that the service at Wascana is a consultative service and not a therapy service, and so parents who are not getting adequate speech therapy in the school system because of lack of funding, who have contacted the Wascana hospital, are not being serviced with speech therapy. There is a consultative service at the Wascana hospital. And we find a situation where I have parents, for example, with whom I've been communicating who are having to pay for private speech therapists in order to supplement what is available in school.

Now can you confirm that that's the case, Mr. Minister, and if it is indeed the case, can you tell what plans your department has to make sure that this service is available for children who need speech therapy, and that adequate and complete comprehensive medical services with respect to speech therapy will be available for children in Saskatchewan?

Hon. Mr. McLeod: — Well let me just go through the way . . . the circumstances as relates to Wascana. And I say by way of prefacing my remarks, I know of the case, I believe, that you're referring to in the sense that I believe you've written me a letter about a particular case and I have . . . you have either received my response or it's on its way to you, because I can recall signing the letter to you.

Here's the circumstance: the Wascana Hospital provides consultative and treatment services for pre-school children and for adults — consultative and treatment services. As it relate to school-aged children, the Wascana Hospital has entered into contractual arrangements with the school boards of Regina for assessment and for consulting services. And so a child who is of school age and is part of the school system, once assessment is done through Wascana, the people employed by the school boards or teachers who may be working with these children on their special needs will then have consulting services done by Wascana, all of which is covered.

(1530)

Now there are cases — not many, but there are cases where parents will have an expectation of a service beyond what the school board gives through this contractual arrangement, and that service is not covered . . . I mean, if they want to take service which is beyond the service which is covered by the Department of Health. And that's been a long-standing process, and continues.

Ms. Simard: — Mr. Minister, the service beyond is needed; it's required by the child; that's why the parents are searching for it. Because of the lack of staff, because of underfunding for staffing levels, the staff is unable to meet the demand that's out there, Mr. Minister, and that's why we raised the question with you in that particular correspondence that you're referring to.

So my question is, once again: assuming that the problem is one of staffing and the fact that the staff is unable to meet the demand that is there, will your government be reviewing this situation and ensuring that there's adequate staff? Because there are speech pathologists out there in Regina and Saskatchewan, Mr. Minister, who are prepared to help. Will the government be ensuring that these children receive the services that they need? It's not an extra, frivolous, frilly-type service; it's a needed service, and it's been identified as needed.

Hon. Mr. McLeod: — Well, as to your request that we review this and continue to review it, the answer to that is yes, we will.

But as to your statement, in a very blanket type of statement that these services are needed above and beyond what is provided, in the broadest general sense, let me say to you that there's a disagreement. And there are, you know . . . and I don't want to get, in this forum, into the particular circumstance of the one case. But cases like this, there is a divergence of opinion within the profession. The consultants that are on staff for the school board, for example, as well as the assessment consultants that work at Wascana, don't always agree that there's a

need for the further service, which, in a circumstance like this, a parent may say, well look, there has to be more service. And, you know, they become distraught in the circumstance and so on. I understand that, and I know you do.

So we have to be very, very careful that we don't just make a blanket statement and say there is need for a greater service, because the professionals within a school board don't necessarily agree that there's a need for that added service. While although they . . . and I know in this case that you know that to be the case.

Ms. Simard: — Mr. Minister, there are opinions with respect to the particular case, and I'll deal in the particulars, but I know that it applied to other people in the province. There are opinions on file that indicate the service is needed, that further therapy would result in an enhanced treatment of the child, Mr. Minister. So I believe it is very important that you not pass these off. I believe it is important, Mr. Minister, that you not pass these off by simply saying the school board says it's not needed.

I want you to give me your undertaking that you will take another closer look at this situation, because I think that you have passed over it too lightly, and look at the opinions out there that are saying in this particular case that this child needs further therapy and would greatly benefit from further therapy beyond what the school system can provide. Would you please take another look at that file for us, Mr. Minister?

Hon. Mr. McLeod: — I don't want you to characterize what I'm saying as passing this off, because it's certainly not my intention to do that. And as I say to you, we will look at this, continue to review the need for this service.

The first thing that I will say, and I want it to be clear here, and we all must understand that what we're talking about here is a very highly specialized service. There's no question that that's the case; it's not something that's dealt with in terms of a . . . so I didn't want to give the wrong impression that it was some sort of broad generalization could be drawn here.

And the second thing is — and I think you know this as well — I do know what you're speaking of when you talk about the need for specific services and so on, and we'll look at that. We'll continue to review it, and I say that very . . . I choose those words carefully when I say we will continue to look at it, because that's exactly what we are doing, and have been doing for some time.

So the service is there. To a large degree the service is there, and there is some divergence of opinion — there's no question that that's the case — a professional divergence of opinion as it relates to which services are needed beyond what is provided. And we will continue to review it because I know, even from another life before this political world, what it means to deal with the families of children in need of this service, and so on. And I know that you're aware of that as well.

So, yes, we'll continue to review it, and we're cognizant that this is a very highly sensitive area for families

certainly.

Ms. Simard: — Well, Mr. Minister, what is happening is that the speech therapists that we have who cannot find work that's publicly funded in Saskatchewan are having to set up private practice and are supplementing the services that are available. It's another example of your government underfunding health care services that are needed, and pushing health care service towards privatization — another example.

And as you will recall, Mr. Minister, in the opening remarks that I made in these health care estimates two weeks ago, or two and a half, three weeks ago — I forget exactly how long ago now — I indicated at some length that what this government is doing is slowly eroding the basic principles of health care. They're eroding accessibility to health care; they're eroding the comprehensiveness of health care programs that are available; they're eroding the public funding of health care; and they're eroding the universality of health care. And we went at that at some length, Mr. Minister, and this is just another example.

Now I also want to thank the minister for acknowledging in the estimates last time that there has been a substantial transfer of funding from other budget areas into the health care budget to the tune of \$260 million in this particular budget.

Now we're not complaining about the fact that items may have been moved into the health care budget, Mr. Minister. That is not our complaint, but when you move \$260 million from other budgets into the health care budget, which is something like 20 per cent of the budget this year and which is over 50 per cent of the increase in health care costs since 1982, and turn around and claim that you're spending these enormous amounts of money with respect to health care, Mr. Minister, I suggest to you that that is highly misleading to the public and is not the truth of the matter.

With respect to . . . but I have some very specific questions, Mr. Minister, on the property management corporation, because under subvote 60 and 61, I believe it is, grants to hospitals and grants to nursing homes, we see a very substantial increase, which is loans being paid to the property management corporation, loans with interest.

Now, Mr. Minister, did those . . . are some of those payments money that has already been allocated to the Department of Health from the Saskatchewan Property Management Corporation as grants for . . . or as capital funding grants?

Hon. Mr. McLeod: — The answer to the question is that the money has not been appropriated to Health in any other way prior to this. The process is that the moneys that are here in this budget are moneys which are being paid to SPMC on behalf of the specific hospitals, as it . . . it's their payment schedule for this year, if you will, for . . . to SPMC for the loans which have been advanced to them through SPMC's budget. Okay? So that's . . . it has not been appropriated in another time through this department.

And the one point I wanted to make just before I sit down as it relates to a former question — more of a comment than a question. Your comment about speech therapists and about speech therapists out there supplementing the services that are being eroded and so on, let me just say to you that we are actively recruiting, and on an almost a continuous basis, speech therapists. Speech therapists are being hired and recruited within the Department of Health almost on a continuous basis, so it's not something that, you know, where the door has been closed and they're forced to work in some other circumstance. That's not the case as it was characterized.

And I hope that the answer as it relates to SPMC was clear, but we'll . . . we may want to get into that a little bit.

Ms. Simard: — Okay. Mr. Minister, in the budget this year we have, under capital projects, SPMC, Health, 62,975. Now with respect to last year, does any of that same payment show up now in subvote 60 and 61? The capital funding for health projects under SPMC, does that show up, Mr. Minister, in subvote 60 and 61 of this year?

Hon. Mr. McLeod: — If I could just walk you through this. Are you referring to page . . . or would you refer to page 117 of the blue book, please. Okay, on page 117 where . . . this is the Saskatchewan Property Management Corporation, capital projects, under Health, for '88-89 there is an amount there of 62,975,000. Now that amount of money is appropriated in this budget to property management corporation. That's the amount of money that's in this estimate that is estimated to be going out in the form of loans in the health sector. That's both the hospitals and special care homes. Okay?

Now if we go back to page 48 of the same book, items 22 and 30 on page 48 will give you the amount in this particular budget. In the case of item 22, which is grants to hospitals, repayment of principal and interest on capital loans from the Saskatchewan Property Management Corporation, in this case \$15,936,000, that's the estimated amount that is going to pay on behalf of hospitals to the property management corporation. That's the amount that's being paid this year from Health.

And in the case of item 30, it's 788,700 which is going to the property management corporation as this year's payment schedule for special care homes. Okay?

Ms. Simard: — Yes, Mr. Minister. And if you look at page 117, you'll see that there's 66,527,000 allotted in '87-88.

Now as I understand it, subvote 60 and 61 are to pay back at least a portion of that, is that not correct, Mr. Minister?

(1545)

Hon. Mr. McLeod: — Yes, the way you characterize it is substantially correct — '87-88 on page 117 is 66.527 million. And the amounts that I cited to you before — what I call item 22 and 30, but they are certainly subvote 60 and 61 — those amounts, and let me just go through this, when the payments begin, the repayment schedule begins upon completion of the project. So if there's a smaller project in terms of a renovation, some of those

kinds of things, so some portion of that amount. \$15 million, whatever it is, some portion of that for projects that have been completed could be part of the payment schedule of that amount that was shown in '87-88. Others . . . the remainder of it is for payment schedules on projects from prior to that, prior to '87-88, and the payment schedule goes on as it's amortized out over a period of years.

Ms. Simard: — So indeed, Mr. Minister, some of that money has been already granted to the Department of Health, and already granted . . .

An Hon. Member: — No.

Ms. Simard: — Yes, it's already been granted by the Saskatchewan Property Management Corporation to the Department of Health. And what is happening is the Department of Health is now paying back to Saskatchewan Property Management that capital funding at an interest rate, and I wonder, Mr. Minister, what that interest rate is.

Hon. Mr. McLeod: — Just to clarify this, page 117 and all that's illustrated on page 117 on behalf of Saskatchewan Property Management Corporation, is in effect a statement. It's a statement of the amount of money which is, first of all, borrowed by property management corporation, and then advanced, in the case that we're talking about here, advanced to the health sector boards, like the City Hospital board or University Hospital board, or whatever. And that's just a statement, of how much money was advanced to them.

That money that you see, '87-88, 66 million on page 117, does not and was not in the illustrated or part of the budget of the Department of Health prior. The Department of Health comes into this after the third party has been advanced its money, and once they've received their money and the payment schedule is established, then the money comes . . . it becomes a budgetary item in the Department of Health in terms of the repayment schedule that's required to pay the particular loan that went to the hospital board from SPMC. So that's not an amount of money that was in there.

Secondly, your question was, what's the interest rate. The interest rate is one which fluctuates, and it's based on what SPMC is able to borrow the money at, and that will change as time goes on. But they will still be in a position to borrow the money in a better circumstance than will any hospital board.

Ms. Simard: — Mr. Minister, how far back does this 15 million go? These grants, what capital funding does that cover, and how far back does that go in time?

Hon. Mr. McLeod: — I'm informed that we're into . . . this budget that we're dealing with here represents the third year of the repayment schedules, as I outlined them before, and it's really the fourth year of advances going out from SPMC to the health care sectors — well all of the sectors, but in this case the health care sector. Okay?

Ms. Simard: — Does that 15 million then just refer to the advances received in the last three years or four years, the

period you just referred to? Does it only refer to that, Mr. Minister?

Hon. Mr. McLeod: — For the most part that's true, it would go back three years. I'll just give you a couple of . . . or one example where there can be some exceptions to that. The Regina General Hospital burns unit is one that's here that has some portion of it in this repayment schedule this year. That burns unit was under construction in '84-85 and went over a period of time. And the first repayment that we have . . . the first repayment schedule for that unit began in May of '87 which, as I said before, would indicate about the completion of the project.

So some projects which were under way or which had begun prior to the SPMC coming into being, as we now understand it, could have gone back beyond the three years, and the advances would have been made on that basis. But for the most part, the three years . . . the most part of that repayment schedule amount that's there, the 15 million or whatever you referred to, is for the three years. This is the third year.

Ms. Simard: — Will you then correct your earlier statement, Mr. Minister, that that money was never allotted to the Department of Health in the past? Because what you are just saying is that some of that funding was capital funding paid to the Department of Health prior to this new fandangled SPMC scheme that your government has thought up for the purpose of skimming money from departments, with special interest rates, into the Saskatchewan Property Management Corporation, something totally unheard of, taking money from one pocket into another, padding budgets to make them look like they're larger than what they are — by charging the Department of Health interest to make it look like this budget is much larger than what you say it is.

And now you're also telling me that it goes back to capital funding that was granted to the Department of Health prior to this scheme even being implemented, Mr. Minister. Would you please correct your earlier statement that none of this money was ever allotted to the Department of Health in the past?

Hon. Mr. McLeod: — I want to clear this with the member, because it's not any kind of . . . you know, the way you characterize this as some kind of double counting or whatever you might want to call it. It's not that. I gave you the example of the burns unit, because it was an example, one of the very few examples that had begun at that stage that took longer to build and so on. And that example was there because it was caught in a transitional period between the operation of SPMC and the way in which it was done prior to that. There's a couple of examples.

But for those moneys that were advanced prior to the coming into force of the property management corporation, the property management corporation paid out the Department of Health for that amount.

And all I can say to you is that in any of these things there will always be — it wouldn't matter what it is — there will

always be some projects which are caught in that transitional period. And some of them were. But that's not how, you know, it's not how it is now, certainly, and we carry on with the process, and it's a very straightforward process as it now works.

Ms. Simard: — Would the minister please tell us how many of these projects were caught in the interim period, how much of that 15 million? And also, Mr. Minister, I want to ask you what the range of interest to the Saskatchewan Property Management Corporation is. You say that it fluctuates, but you haven't given me the range of interest as to what these hospitals and these nursing homes are paying to the Saskatchewan Property Management Corporation for their grants from the Saskatchewan Property Management Corporation.

(1600)

Hon. Mr. McLeod: — Okay, the interest rate range, at least I'm informed, is . . . and we're just going through the sheet here, but to clarify it, it is the government's rate. SPMC gets the money at the government's rate. The projects range from about 9.3 to 11.5, and it's the government's rate as they go into the market-place to borrow money. So that's the circumstance there.

Ms. Simard: — Mr. Minister, I'm wondering why the government would be charging hospitals which are publicly funded and which you fund for operating purposes, and special care homes. Why would you be charging them interest on the capital funding that you give them to build their buildings? Could you tell me that please, Mr. Minister.

Hon. Mr. McLeod: — Well first of all, this issue was debated in a full way when SPMC was set up. But just to be sure we understand this, as a project will go on, a particular hospital may spend in one year \$30 million and on the same project spend 70 in the next year, depending on the construction schedule. And the way this process works, you know, the interest is then paid, according to that construction schedule, by the hospital.

But let's be very clear on this. Even under the system, before this SPMC came into being, under the former system, the government on behalf of the taxpayers in the public sector, borrowed the money and paid the interest over a period of time anyway. So under this system, the government still pays the interest. For you to characterize it as though the hospital is forced to pay this interest is not the case.

I mean, we pay principal and interest in this amount which is allocated to the Department of Health for the repayment schedule. We pay both principal and interest, and we do pay the interest. So for you to say that, well, we're somehow charging the hospitals interest, what we're doing is . . . But the government pays the interest, in any case, and would under the old system as they do under the present system.

Ms. Simard: — Mr. Minister, you guys sure have some game going there, I'll tell you. Here you have a government corporation that you set up, the Saskatchewan Property Management Corporation.

You'd give the hospital moneys in order to pay the capital funding back and the interest to the Saskatchewan Property Management Corporation. I would like to know what you've got going with that Saskatchewan Property Management Corporation and how fat its coffers are getting, Mr. Minister.

But I think this is absolutely ridiculous, the way you've worked out this scheme. The fact of the matter is, is that these hospitals and these nursing homes are paying interest to a Crown corporation established by the Tory government, Mr. Minister. This interest is going back into the government coffers. It's not being used for health care, Mr. Minister.

Now the other thing is that we referred to the fact that there was a reallocation of budget funding over a course of a number of years, and in 1988-89 this comes to some \$260,000,020 of the health care budget. I think, Mr. Minister, that the evidence is overwhelmingly in . . . shows the fact that you have been padding your health care budget in one way or another and attempting to let the people of Saskatchewan think you're spending much more on health care than indeed you actually are on a comparative basis.

Now you had said to me you would tell me what portion of that \$15 million are these sort of projects that got caught in between, and I still haven't heard your answer on that, Mr. Minister.

Hon. Mr. McLeod: — Well first of all, a couple of things. Because you stand there in your theatric way and say that we've got some kind of a game going there, let me just make sure that you understand, and I know some of your colleagues have come to understand, that this is a system which has worked in other places.

The province of Manitoba under an NDP government in fact was one of the leaders in this area. They did this, British Columbia did this. The province of Quebec has a similar system.

All the system is is what has been done for many years in the private sector, is to amortize the payment schedule over the useful life of the project and so on. That makes eminent sense, and the government borrows the money on that basis and the hospital gets their money on the basis of the repayment schedule. You don't hear hospital boards complaining about this. They think it's a good system, and they do think it's a good system.

Let me just give you a couple of examples of it, just so that you don't stand here and suggest that there hasn't been, under this system or any other system, the way in which rural hospitals and urban hospitals have been helped over a period of time here.

Let me just give you these numbers, Mr. Chairman. The provincial assistance to hospitals, rural and urban, now rural and urban hospitals in the six-year period 1976-77 through 1982-83 — that's a six year period — \$112,239,180.

A similar six-year period from 1982-83 through 1988-89, including the budget which we are now considering

rural and urban hospitals, provincial assistance — 241,326,482. Quite a comparison from 112 million in that former six-year period to \$241 million in that latter six-year period, Mr. Chairman, just so the member does not stand here and characterize this new system as some system whereby funding and assistance is being withheld from the hospital sector, because that's absolutely not the case. In fact, quite the contrary.

As it relates to rural hospitals alone, Mr. Chairman, and that's something that the members ask little about, their interest is not there . . . But the rural hospitals . . . provincial assistance to rural hospitals in that former six-year period, '76-77 through '82-83, was 13,139,574, just over 13 million, Mr. Chairman. And in a similar six-year period, from '82-83 through '88-89, this budget which we're now under consideration, that amount is 54,991,380, Mr. Chairman.

From 13 million to almost 55 million. The difference in the help and assistance from the province to rural hospitals, Mr. Chairman, a record which we are extremely proud of and which we continue to, you know, to operate in that sense.

So I just don't want the member to characterize our motives in any way, according to some of the suggestions she was making earlier.

Ms. Simard: — Mr. Minister, I find this a rather interesting statement coming from a minister who commissioned a report that dealt with the closure of rural hospitals, Mr. Minister. I find that a rather interesting statement.

We also know, Mr. Minister, that you have played around with these figures. You still haven't told me what portion of that \$15 million was accounting before. And I think there's a reason why you're not giving me that information, Mr. Minister, because you were wrong when you stated that that money had not been allotted to the Department of Health at an earlier time in an earlier budget; that you made the statement that some of it had been allotted under this new scheme. And I'm prepared to accept that. But you almost made the statement that some hadn't, and you're not prepared to give me the percentages obviously, Mr. Minister.

The fact of the matter is, there is \$260 million in this year's budget that was not in earlier budgets back . . . prior to 1983, Mr. Minister, or '82. We're not complaining that it's in the health care budget, but for you to suggest that you've been increasing spending by that amount, by that 260-million-plus, is simply not fair, Mr. Minister. And I think that until I see how you break down your figures in details, there's no way I'm going to believe what you say when you come in this House, because we have found that we cannot accept your figures on face value, Mr. Minister.

Now I want to talk somewhat about drugs, the prescription plan, Mr. Minister, and I'd like to direct your attention to that. The fact of the matter is, as I indicated before, this government has been attacking health care at an unprecedented rate that we have ever seen in the history of Saskatchewan. They've been attacking the basic principles of health care, universality, accessibility,

comprehensiveness, and public administration.

They've set up a task force to attempt to cover up, to attempt to cover up the fact that they've created a health care crisis in this province. They commission a report on rural hospitals, which report, by clear implication, points the government in the direction of the closure of rural hospitals, and by clear implication points the government in the direction of considering the free market system with respect to rural hospitals, the obviously . . . failing to understand the very foundation and fabric of Saskatchewan society with respect to the provision of health services in rural Saskatchewan and across Saskatchewan in urban and in rural Saskatchewan.

The fact that the free market system does not drive our medicare system, Mr. Minister, has to be driven home to you. This government has decimated the school-based children's dental plan, and has so substantially altered the prescription drug plan in Saskatchewan that we find seniors and women and men in urban and rural Saskatchewan having to make decisions between buying groceries or buying needed medication.

Fourteen years ago, Mr. Minister, under the leadership of Allan Blakeney and the Saskatchewan New Democrats, a world-class, top-notch prescription drug plan for the men and women and children of this province was established in order to ensure that every person, regardless of how fat their pocket-book was, would be entitled to needed medication, would have access to needed medication.

And this, Mr. Minister, is a preventative program as well as being an acute care program. Because if people like diabetics, for example, require and are covered for the needed medication, we prevent illness down the line. Many people who take drugs today to control their blood pressure, for example, will not cost the health care system further down the line more money.

But what we see is this government launching a \$2 million advertising campaign which they characterize as a preventative health care approach. And we have no complaint with preventative health care approaches. We believe that we need this approach to health care. But when you cut back on prescription drugs so that people who need medication in order to prevent their illness from becoming serious, in order to keep them out of hospitals and thereby costing the medicare system even more, Mr. Minister, one wonders about your sincerity with respect to preventative health care, Mr. Minister.

We find that under this PC prescription drug plan, something like 60 per cent of Saskatchewan families will now pay 100 per cent of their drug costs, Mr. Minister; and a further 30 per cent will pay 50 per cent of their medication expenses; and the remaining 10 per cent, those requiring more than 20 prescriptions a year, will pay 34 per cent, Mr. Minister.

Under this PC drug plan, there's an estimated, according to the information I have, Mr. Minister, 50,000 families who will pay up-front costs in excess of \$500.

For example, a moderately severe asthmatic will require approximately \$150 per month in prescribed medication.

That is for one person, but because asthma tends to run in families, some families will be saddled with up-front costs two to three times that amount, Mr. Minister. And I say that's causing these families a personal hardship, but it's the legacy of this government, obviously.

(1615)

And with respect to women, Mr. Minister, women and prescription drugs, there's a direct and immediate impact on the health care services required by women in this province through the reduction of the prescription drug coverage by the PC government. The information shows that women receive an average of seven prescriptions per eligible female beneficiary as compared to 4.6 per cent for eligible male beneficiaries. Although representing something like 54.8 per cent of the active beneficiaries, they receive something like 60.3 per cent of all prescriptions, Mr. Minister. In other words, women receive more prescriptions under the prescription drug plan than men do, and therefore are being more severely hurt under the circumstances, Mr. Minister. And I hope that you're aware of that.

I also want to comment on the fact that I have heard from doctors, and I know my colleagues have also heard from doctors, the fact that teen-age pregnancies are rising in this province as a result of the fact that you've taken oral contraceptives off the prescription drug plan, Mr. Minister. Teen-age pregnancies are rising as a result of your PC policies, Mr. Minister. And you may be trying to save money on the prescription drug plan, but I ask you how much money is there in terms of human suffering as a result of those short-sighted, ill-advised policies, and how much it's going to cost the government in order to help these young mothers bring up and support their children in the future. And I have been told, Mr. Minister, that this is a direct result of the fact prescription drugs are no longer free to many of these young women, or oral contraceptives, rather than the prescription drugs.

I think it's important to note that seniors are another group of citizens in Saskatchewan who access the prescription drug plan and whose accessibility to the plan is being undermined and destroyed by this government, inasmuch as many seniors are having to make a decision as to whether or not they're going to put groceries on their table or buy needed medication, Mr. Minister.

It's a direct attack; your prescription drug plan is a direct attack on women and men and children in this province, and on seniors, Mr. Minister. And I'm just wondering, Mr. Minister, if you can tell me who the winners are in your prescription drug plan, the one that has caused so much suffering in Saskatchewan to date.

Hon. Mr. McLeod: — A couple of things, Mr. Chairman. The member just continues to use numbers that are a long way out of whack. She said the other day in this House, and she said again today . . . I believe she used the number 50,000 families. I believe you said 50,000 families who would have a net cost of \$500 a year, whatever, which is . . . nothing could be further from the facts.

The facts are that about 600 families across this province have a cost of more than \$500 a year, a net cost. So I just

wanted to be sure that the record is set very straight on that because there's a very clear difference between 600 and 50,000, as is characterized and as is sent around the province by the NDP opposite. And there's a very major difference between those two numbers.

As it relates to the issue of the oral contraceptives, and the member says that we took them off the drug plan — that's not the case either. The fact is oral contraceptives are included on the drug plan, but people must pay their deductibles.

And it's not fair as well to say that teen-age pregnancies in this province are as a result of the cost of oral contraceptives, because as you will know, I think, we have a high rate and have had for a number of years, a good number of years, a high rate of teen-age pregnancy in Saskatchewan. We had that all throughout the period of time when the oral contraceptives were there at varying rates and up to 3.95 only. And so the other issues which contribute to teen-age pregnancy are the issues which cause that to be the case, and certainly I don't believe that you're being fair to suggest that it's because of the drug plan.

Mr. Chairman, the member continues to make some . . . well I think the only way to say it is that she makes fun of, and she has done here now since . . . A few days ago she asked a question when I was here, asked the question regarding the potential for a life-styles program to be launched in the province. At that time I said that, yes, it was our intention to launch such a program of positive, preventive health care, and that was done on Saturday.

The member at that time suggested it wasn't a good idea, and frankly, it was only that member, I think, and all of her colleagues — just those people here, the NDP opposition, and one editorial writer in the *Star-Phoenix*, who's been chastised by the public health association since. But those are the only people in the province who have said . . . who are involved in the health care sector, who have said that this healthy life-styles program is not what is necessary.

Let me just quote a few things that are being said around the province, Mr. Chairman, as it relates to this program. And I would ask the member to set aside some of the venom which continues to roll from her, you know, whenever anything is suggested, whether it be positive or negative.

Mr. Chairman, here's what is said by the Saskatchewan division of the Canadian Cancer Society:

Your "Everyone Wins" campaign to be launched in Saskatoon on (June) the 25th is very exciting and should help to motivate the people of Saskatchewan to make responsible decisions on their personal health and lifestyle choices.

And it goes on. There's a whole . . .

It will indeed be our privilege and pleasure to work with you and your staff in this very valuable health promotion project for the province . . .

Saskatchewan Registered Nurses' Association, they say:

The current health care system places considerable emphasis on sickness and curative treatment . . . the Saskatchewan Registered Nurses' Association believes that Saskatchewan must move beyond traditional patterns of health services and that it is essential to reallocate human and financial resources to the prevention of illness and the promotion of wellness . . .

And etc., etc.

We have another statement by the dietetic association agreeing with the program, one from Sask Sport, one from the Saskatchewan Public Health Association:

The Saskatchewan Public Health Association (SPHA) exists to promote individual and community health. One of our most important objectives . . .

And so on.

We look forward to working with the "Everyone Wins" campaign to assist us in pursuing this objective.

The Saskatchewan Institute on the Prevention of Handicaps — it just goes on; Saskatchewan Safety Council; Saskatchewan Medical Association; College of Medicine, University of Saskatchewan; Canadian Mental Health Association, Saskatchewan division; life and health insurance committee; the chiropractors' association; I mean, you name it, Mr. Chairman, they are all there. They all say this is exactly the direction we should be going.

And if I might say so to the member opposite who chose not to come, I really wish you had set aside your partisanship for just one day and take your responsibility as health critic and as one who is interested in the health promotion in this province to come to the launch. Because I can tell you that a good number of people, some of whom . . . who very openly say that they are supporters of yours, frankly, in a political sense, some of them will say, I'm supporters of theirs and I was very disappointed, indeed upset, with the way in which the member characterized promotion of healthy life-styles that is being . . . that was launched on Saturday in Saskatoon. And I think it's fair, Mr. Chairman, to pass it on to the member because I'm sure she will be hearing it from some of her own supporters, and certainly her leader will be hearing about it from some of those same people.

Ms. Simard: — Mr. Minister, let me just say, first of all, on the 50,000 families, I am quoting from a letter that was written in the *Pulse* magazine with respect to changes in the drug plan by a doctor in Regina claiming that under the new plan more than 50,000 families will pay up-front costs of more than \$500, Mr. Minister.

And I take it you're suggesting that this doctor is . . . and this is an estimated amount . . . that this doctor is not correct. I take it that you're suggesting that, Mr. Minister.

With respect to your life-styles program, Mr. Minister, I note that you cancelled the life-style program that the New Democratic government had implemented, the Feeling Good program, when you came to power. You cancelled it, Mr. Minister.

Now with respect to our portrayal of life-style programs, Mr. Minister, we have repeatedly said that we strongly support preventative health care. What we don't support, Mr. Minister, is self-serving advertising on your part and gala events that waste the taxpayers' dollars when there's needed people out there who need that money, Mr. Minister.

We don't argue with preventative health care programs, but we argue with you wasting the taxpayers' dollars through gala events, Mr. Minister, and through expensive self-serving advertising which this government has been doing at an unprecedented rate over the last several years.

Now you haven't told me who the winners are with respect to your prescription drug plan, Mr. Minister, because you can't tell me who the winners are because people are losing under your new prescription drug plan.

Are you going to correct the wrongs that you have levied on the people of Saskatchewan, Mr. Minister, by returning to the prescription drug plan that we had before you made your cut backs? Are you going to do that, Mr. Minister?

Hon. Mr. McLeod: — No, just one more comment as it relates to the healthy life-styles program. You mentioned the program Feeling Good, which I will say was a good program. It was a two-year program, and it had run its course, and it was a . . . And it probably should have, there should have been some form of that continued.

Feeling Good program dealt with two things, fitness and nutrition, and only those two things. And that's . . . (inaudible interjection). . . No, it's very true, I mean, the program and the criteria for the program. I see the former minister saying that that's not the case, but it is the case. It dealt with fitness and nutrition in a very good way, and both of them were dealt with well.

An Hon. Member: — It was very successful.

Hon. Mr. McLeod: — Both of them were dealt with successfully, as I hear the former minister of Health saying. I know he was proud of the program and should have been. He should say to his colleagues not to oppose another program that is similar in those two narrow areas and which includes five other areas, including mental health area and some other . . . (inaudible interjection). . . Mr. Chairman, the member says about advertising; advertising is obviously one aspect of this campaign, and in the other program, advertising was the only aspect of the campaign.

This program also includes a major grant to the University of Saskatchewan for epidemiological research, and it also includes community grants for community development project which can tie into the whole theme of healthy life-styles and in the kinds of things that community groups, or communities at large, can do to promote the

healthy life-styles which we all must address as a wider society as we go on.

Now as it relates to the drug plan, you have heard us talk before, and I have said to the member before about the potential for the new card which is coming. And I know that the member has, as well, characterized this, because she will always do that, in the partisan sense and say, oh yes, well that's just some . . . I forget to use her words; if I can just quote for a moment, Mr. Chairman — some Tory scheme, or some kind of a . . . you know, I'm not as theatrical as that, but I could . . . you know what I'm speaking of.

So all I will say to the member is, the plastic health card which is coming will solve one of the difficulties of the drug plan administration, and that is the necessity to pay up front the total amount. And if we can . . . But it will still maintain two principles, one being the deductible amount, and it will still maintain the need to pay 20 per cent . . . for the individual to pay 20 per cent of the cost of the drugs.

But with the card and its capability, the citizen, the consumer, will have the opportunity to present that card, and if the deductible has then been paid, the card will be computer readable. That will be determined right there at the drug store and the person can then, at that stage, pay only the 20 per cent. And I'm sure that will alleviate some of the concerns that have been raised by people for, you know, for some period of time.

Ms. Simard: — Mr. Minister, with respect to the plastic cards, I note that you made the announcement with respect to plastic cards during the by-elections in Saskatoon Eastview and Regina Elphinstone, and I note it didn't do you any good in those by-elections either, Mr. Minister. The fact of the matter is . . . When were those by-elections? — back at the beginning of May, and now we're at the end of June, almost two months later, and we still haven't seen anything with respect to these plastic cards. And as the months click by, Mr. Minister, there are people suffering every day.

Now it appears to me that you wanted to make that announcement during the by-elections, Mr. Minister, because you were hoping that it might reduce your loss, for example, in Saskatoon Eastview. But it didn't do you any good, Mr. Minister. And we haven't see those plastic cards yet. And we're waiting with bated breath. We hope that they'll be coming along soon. But I am pleased that you've at least acknowledged that your scheme was wrong to that extent, Mr. Minister.

Now I'm asking you: what are you going to do with respect to those individuals who can't afford the 20 per cent up-front costs — and don't tell me that social assistance pays for them, because there are people who fall between the cracks, who aren't on social assistance, who cannot afford the 20 per cent up-front costs — what are you going to do for them, Mr. Minister?

(1630)

Hon. Mr. McLeod: — Now I just want to put this into perspective as well, Mr. Chairman. The member says,

what are we going to do, and I will say to her that with the review panel that we have in place, the drug benefits review panel that was put into place back in — when was it? — in August of 1987, where people are able to get various benefits depending on the circumstance that is presented, I want the member not to get away with, and she should not get away with, being able to say that there are all these thousands of people out there who are in difficulty. Because it comes from the same sort of source as what we just heard here — 50,000 people she was saying a while ago, and it turns out that the number is somewhere in the order of about 600 . . . 610 or 12.

So there's a very great difference between that, and there's a very great difference between the reality out there in our society, with a drug plan which was essentially copied from the province just to the east of us where the demographics are very much the same, where the people have very much the same sort of livelihood as our people here in Saskatchewan, and where there are no problems with people being able to pay the 20 per cent.

I just say to you, Mr. Chairman, there are not problems with people being able to pay the 20 per cent. And if there are for individuals because of a particular circumstance, they are able to come forward to the drug benefits review panel.

We've had . . . she mentions this great number, you know, and it's always characterized as in the thousands, in the many thousands, out there who are suffering because of the . . . to pay the 20 per cent, and I will say to you that it's not the case. And we've had about 1,700 people who have come forward to the drug review panel, and they've been . . . and it's been well publicized, people know that it's there, all pharmacists know that it's there. And about 1,700 people have come forward; not all of those have been approved, but the panel has met a number of times, 22 times, and they've gone through the various proposals that have come forward and they're given benefits, varying benefits, to a number of people.

So I just want to clarify, Mr. Chairman, while the members opposite will lay this out in a very different way, the facts are not as they are presented by the NDP opposite.

Ms. Simard: — Obviously the minister is unaware of the seriousness of the problems that are out there with respect to people who are unable to obtain prescription drugs. He's totally unaware and he's exhibited that on numerous occasions in this Assembly and outside this Assembly. He has absolutely no real knowledge about what's going on with respect to prescription drugs and the difficulties that people are having paying for these drugs, including the 20 per cent, and just how many people are falling between the cracks and are unable to buy their prescription drugs.

I want to take the minister back, however, to the question of oral contraceptives, because here I want to illustrate how his facts are very unclear and susceptible to a different interpretation. He said oral contraceptives were on the prescription drug plan. We were talking about teenagers and teen-age pregnancies, and the fact that the medical profession . . . And I have spoken to several

doctors who have indicated to me that they have patients who come into their office who are pregnant . . . And they are pregnant; they are young girls who are pregnant because they have been unable to get oral contraceptives, either because they are living on their own and they can't afford them or they're living with their parents and they're afraid to tell their parents they are on oral contraceptives.

Now with respect to oral contraceptives, the cost, I understand, according to the information I have here, it's \$15 a month or \$180 a year, minus the deductible of 125, which leaves us some \$55, and 20 per cent of that has to be paid as well by the person needing the oral contraceptives, Mr. Minister. And you just told this House that oral contraceptives were covered under the prescription drug plan.

Now they may be listed on the *Formulary* or listed in what is covered, but the fact of the matter is there's no access to them by many teenagers in this province, Mr. Minister. And you better realize that. I want you to admit that there isn't access to these drugs by many teenagers and I want to know what you're going to do about it.

Hon. Mr. McLeod: — The point I would make here is that, and the member will know, and I know . . . I believe we'll agree that there's a . . . As I said before, the issue of teen-age pregnancy has a lot more, you know, there are a lot more social factors involved with that than the cost of contraceptives, and I think you will at least acknowledge that much.

The case in our particular province of teen-age pregnancy, teen-age births are dropping significantly and they've been dropping on a trend line for a number of years. Teen-age birth rates in Saskatchewan are dropped, and they have dropped as well. Let me just give you some numbers here. Back as far as — I won't go all the way through all of the years here, but just the trend line — in 1976, there were 2,274 teen-age births in Saskatchewan — 1976, 2,274. That's at a time, remember, when the drug plan was in place and the contraceptives were at a much cheaper rate, and the teen-age birth rate was 47.9. In other words, 47.9 births per 1,000 young women of between 15 and 19 years of age. In 1986, 10 years later, the teen-age births, the rate 1,800 and the rate per thousand is 46.5 per thousand.

So while that trend is on a downward trend, and we're glad to see that it is, the factor if we were to take your assertion to its logical conclusion, one year ago we began to charge the deductible level for the oral contraceptives. And to take your assertion to its logical conclusion there should have been an increase, a dramatic increase, in the number of teen-age births and that's not the case. So I just want you to be sure of that.

Ms. Simard: — Mr. Minister, do you have the figures from June of last year to this year, in particular the last say two or three months? Do you have those figures, Mr. Minister?

Hon. Mr. McLeod: — We don't have them but I will provide them to the member and I'll tell her that the belief is — and when we have them together because they come together at a certain stage of the year — the belief is

there is not a marked increase.

Ms. Simard: — Well, Mr. Minister, the comparison obviously has to be made over a period of when you cut back — which was when? — last May, June of 1987, to these months and the following months in the years to come. That's obviously where the comparison has to be made, Mr. Minister.

I'm concerned about it because doctors have spoken to me about it, Mr. Minister. That's where my concern generates from, Mr. Minister. And if they're concerned about it, I'm going to be concerned about it and I believe you should be concerned about it, Mr. Minister, and not be passing it off lightly.

Now I would like to know . . . and I should also say that I recognize there's far more than simply oral contraceptives with respect to the issue of teen-age pregnancies and birth control in the province. But certainly when you make birth control pills inaccessible to teenagers, you aren't helping the problem, Mr. Minister. I think you would have to at least admit that, Mr. Minister.

I would like to know, Mr. Minister, as I understand the volumes of prescriptions increased by 4.9 per cent last year, but the cost of the plan increased by 22 per cent. And I believe that information comes from the annual report on the prescription drug plan. Could you please advise me what the reason for that is?

Hon. Mr. McLeod: — I believe the member has characterized it well, in that the number of prescriptions — if you're referring to the annual report of '86-87, page 22, is that right? — for the number of prescriptions was 5,714,957. That was an increase over the year prior; there was no question that that's true — and the increase in cost was based on that increased utilization, which was significant, but also based on the cost of material, which is another factor, obviously, in the increasing cost.

Ms. Simard: — It's my understanding, Mr. Minister, that the cost of drug material accounted for roughly 80 per cent of this total increase. Is that not correct?

(1645)

Hon. Mr. McLeod: — I don't have the actual . . . the number. We'll dig it up and they'll do the calculation. You say it's 80 per cent, but let's say it is. I know it's a significant number is attributed to the rising cost of drug material.

Ms. Simard: — Well, Mr. Minister, our calculation shows it is 80 per cent, but you know, I would like to see what your calculation says.

Hon. Mr. McLeod: — I'll send you the calculation.

Ms. Simard: — Thank you. He's going to send me a copy, let the record show.

Mr. Minister, however, you have said that a substantial portion of that increase is due to drug costs. Why, Mr. Minister, then have you agreed to support the drug patent

legislation in Ottawa, which you know has already led to an increase in drug costs and which will lead to further increased in drug costs?

Hon. Mr. McLeod: — . . . (inaudible interjection). . . Okay I will. I wanted to give you accurate numbers. The members are yelling over here that they want more quick answers, and I want to be giving very accurate answers. And I wanted to, in support of my answer, to be able to give them the actual numbers as it relates to our costs, post-Bill C-22 at the federal level, and projections that they are, and costs, prior to Bill C-22 in the federal House.

I will just say to the hon. member a couple of things. Throughout all of the debate, much of it . . . much of the debate surrounding Bill C-22 at the federal level, much of it that came from the member's political colleagues in Ottawa and so on, against Bill C-22 and all of the research and development that it would need, the patent legislation has not and is not projected to come to pass in terms of their view that this would increase the costs of drugs in a very substantial way over and above the kinds of increases that have been the case for a good number of years.

Since the advent of the drug plan in Saskatchewan in whatever year . . . anyway in about 1975, there has been a significant increase, year over year, in terms of the costs of drug material, and that carries on. But the patent legislation has not and is not believed by folks within the area here to be a major factor in terms of increasing the cost of drug materials.

That's on one side of the issue. And on the other side of the issue there are definite benefits for all of Canada. So for the question is: why did I, and why did we as a government, support that legislation? We supported it because we believe that it's good for this country in terms of the research and the development and the kind of knowledge industry that's needed in this country as we develop in this global village we're in. We believe that strongly; our federal colleagues believe it and we still believe that and that's why we supported it and that's . . . and as I say, some of the hysterical debate that surrounded it from the point of view of those who are against most everything has not come to pass.

Ms. Simard: — Well, that's simply not the way we understand it, Mr. Minister. I understand that there has been an increase in drug prices across Canada, largely because multinational corporations have been trying to get their prices bumped up before the price review board comes in under the drug patent legislation.

With respect to inventory allowances and dispensing fees, I understand, Mr. Minister, that these inventory allowances and dispensing fees increased by 2 million or some 20.2 per cent. And I believe that information also comes from your annual report on prescription drugs. Is that correct, Mr. Minister?

Hon. Mr. McLeod: — Just while my folks dig up the answer to your last question, let me just say this. In the first quarter of last year, the average cost of prescription was 12 . . . \$12.35 — I can't read this fellow's writing. And the first quarter this year the average is \$13.03, about a 5.5

per cent increase just so you can see the difference and that's very close to the rate of inflation. It's the kind of number and the kind of change that has gone on over a long period of time, so the trend line has not changed in that area.

I'll just wait for a second here and I'll give you the answer to your other question.

Yes I believe that's about a \$2 million increase.

Ms. Simard: — Mr. Minister, could you please advise when this inventory pricing, or inventory allowances came into effect and why it was brought into effect?

Hon. Mr. McLeod: — It came into effect in the early part of 1986 during a contract which was negotiated with the pharmacists of the province at that time, and it's there; it's something that they've been negotiating on for a good number of years, and it's related to our recognition, or the department's recognition of the costs to the individual pharmacies of the inventories which they must keep on their shelves and so on. And it's paid out on a basis of so many cents per prescription dispensed, and it's based on the inventory they must keep and the cost of that inventory.

Ms. Simard: — Thank you, Mr. Minister. Your annual report, Mr. Minister, indicates that 38 per cent of prescriptions do not utilize the lowest-priced drug product available, and I understand that this is an exceptionally high percentage. I have been advised that it is 40 per cent higher than other jurisdictions.

Now I am wondering whether your department undertook any efforts to estimate the impact on this practice on the cost of the drug program?

Hon. Mr. McLeod: — The issue that you raise, as it relates to the drug . . . the prescriptions going out for, not necessarily the lowest-cost drug . . . In other words, when the doctor would write, in many cases would write, "No substitute" for . . . and say that it must be this particular drug when the pharmacist in many cases would say, well there is another drug which is cheaper, generic, or whatever, and the physician would be saying no substitute.

Under the former drug plan . . . You said, what are we doing to solve this problem? The new drug plan, and under the configuration of the new drug plan has, by and large, solved that problem already. And that is because consumers, who have some responsibility for the cost now, are saying to their physicians, because they hear from the pharmacist there is another drug that's equally as effective, that is cheaper, and physicians are finding themselves in a position, frankly, finding themselves in a position where the patients are asking them the question: will you give me the cheaper drug, and is there any reason why I can't have it? And the physicians are, by and large, saying: no, there's no reason and certainly you can have the . . . So the market-place has taken the . . . is having its effect out there.

And that's the case. It has been the case across the country before, and that's why we had such a high number of no

substitutions here in this province under the other drug plan where provinces like Manitoba and Alberta and our neighbours and all . . . most of the other provinces in the country did not have that same circumstance. So, by and large, the problem has been solved by the configuration of the new drug plan.

Ms. Simard: — Mr. Chairman, I note that the minister says, the market-place has its effect. Did you hear that, Mr. Chairman? Because I did and everybody on this side of the House has heard it. He said, the market-place has its effect.

What he's saying, Mr. Minister, is the prescription drug plan, as he envisaged it, is to move to the free-market system and that when people have to pay for their own drugs they're going to be insisting on generic drugs as opposed to accepting what the doctor says. That's what he's implying.

Meanwhile, we have many, many people out there in Saskatchewan — seniors, women, men, children — who can't obtain access to needed medication because this minister wants to move to the market system, Mr. Chairman. That's what he said. The market system takes its place.

And that's what we heard in the rural hospital closure report about the free market system. We heard that in there as well, Mr. Chairman, about moving towards, or how different it would be, I suppose is more accurate, under the free market system. That's what's in that report, and that's how that government thinks. And this minister, by a slip of the tongue, let us know where his heart is, Mr. Chairman. He let us know where his heart is.

Now with respect to no substitutions, Mr. Minister, I should advise you that there are . . . surely there were other ways to deal with this problem, rather than making people pay for their own medication when they can't afford to pay it and thereby forcing people not to take and receive needed medication. Surely, Mr. Minister, there were other ways that you could have dealt with this problem.

And let me give you one example. In 1987, in July of '87, in January of '88, the editions of the Saskatchewan *Formulary*, the format was altered, as I understand, and currently the *Formulary* contains prices for only those products purchased by the standing offer contract, and it no longer contains comparative prices for all drugs covered.

Now I want you to tell me whether that's indeed correct, Mr. Minister, and why you are not . . . and if it is correct, why the *Formulary* is not containing comparative prices for all drugs covered to enable doctors to prescribe equivalent drugs at a lower price?

(1700)

Hon. Mr. McLeod: — Well the *Formulary* price list that you refer to is meant to be and, in fact, is a list of the highest prices that a pharmacy is allowed to charge for a particular drug. But that's not to say that they are not able to charge a lower price.

And what we see happening out there now is that we have a number of pharmacies — well, some of the large ones, but we certainly have many of the smaller pharmacies — who are telling me that they are banding together in terms of bulk purchasing and volume purchasing and so on, and they are able to then charge a lower price than what the *Formulary* list is, and some of them do that. So the *Formulary* price is not a hard and fast price list that is the cost of that drug — it is only the maximum that can be charged for that drug.

Ms. Simard: — Mr. Minister, did the *Formulary* in earlier times not have comparative pricing of drugs?

Hon. Mr. McLeod: — Yes that's true, as you say that. And in the past, because the majority of the drugs on the formulary were purchased on contract by the province — and the facts are that some of the drug stores are able to, in the case of some drugs, some particular materials, are able to buy them cheaper than what that price is. And because they can, they're able to go to a lower price on some cases. And so if that's the case, we allow it to happen because it helps the consumer; it doesn't hinder the consumer in any way.

Ms. Simard: — Mr. Minister, you haven't addressed my concern — a concern that has been expressed to me by doctors — that is that the formulary had comparative pricing in the past which allowed them to take a look at it and prescribe cheaper prescriptions. Now they don't know what the comparative pricing is, Mr. Minister. And you have said that yes, it had that in the past, but for some reason the druggists can buy their own drugs, you haven't put it in. It doesn't make any sense to me, Mr. Minister.

I want to know why the formulary does not have comparative pricing in it for the use of doctors when they're prescribing prescription drugs. Would you please advise me, Mr. Minister, why that comparative pricing is not in there any longer?

Hon. Mr. McLeod: — Well let me address your question this way, and this is the case not only here, but anywhere else, where there's a . . . The physician would . . . Let me give you an example of valium, for example. The physician would write the prescription for valium under the old system, or under the former system. If the physician chose to, it could write the prescription for a particular brand name and say, "no substitute" on there, and that would be the case, and that would be as it would have to be filled, regardless of whether that particular brand was three times the price or double the price, or whatever, of another drug which would have the same effect.

In the case now, what we see happening, and what is in fact happening across the province to a much greater degree, and that's the case that's happening in other provinces and has for a long time, is that physicians will, in the case of valium, will write an open prescription for valium. And the person will take their prescription to the pharmacist, and the pharmacist then has the costs of the drugs and then would fill the prescription on the basis of the lowest cost drug that they can sell to the patient. So that's the system that's there now, and it's a system that,

frankly, works well.

And I don't know why there would be need for the other . . . I'm not sure why there would be a need for the comparative price.

I believe you're asking why the physicians don't have comparative price in their particular office. And I guess what we're saying is, if the physician has a particular reason — and even the physicians are saying this to us through their association, and so on — if the physician has a particular reason to write a prescription for drug ABC because that is the brand name and there is to be no substitution, the physician will write that. If the physician has no medical reason for writing that, they won't, and they'll write the open prescription, and then that will be determined at the pharmacy level, which brand and so on will be dispensed to the patient.

Ms. Simard: — Well physicians have expressed to me, Mr. Minister, the desire to see the comparative pricing, the desire to have some input into which of these drugs their patient is going to receive, rather than having their hands tied in the fashion that you are insisting. They want to know what the various pricing is when they're prescribing.

And that concern has been expressed to us by physicians, and I'm sure that your office has also made that . . . has also heard that complaint from some members of the medical profession, Mr. Minister.

With respect to no substitutions, as I understand, they could still write "no substitution" on there if they wanted to, Mr. Minister. So that hasn't been solved; you haven't solved that problem.

I also want to ask you, Mr. Minister, now, to go on into another area, is whether or not there has been an increase in the number of prescriptions that are being prescribed under the prescription drug plan, and whether or not the dispensing fee and the inventory allowance appears to be gauged to the quantity of drugs being prescribed and the number of prescriptions — whether or not there is any sort of a connection in this regard. Have you looked at that, and what conclusions have you drawn?

Hon. Mr. McLeod: — We don't have final numbers on this, but we are told by the pharmacists — and I think their numbers may be pretty reliable, but we are told that the number of prescriptions written has dropped about 15 per cent.

And in terms of your other question in terms of the relationship between the drop of the number of prescriptions written and the — what were you saying? — dispensing fees to the pharmacists. But dispensing fees, inventory costs allowance, mark-up, all of those other things, are based on the number of prescriptions written, and so there is a relationship.

Ms. Simard: — Mr. Minister, the information I have shows that the number of prescriptions has increased from 4.88 million to 5.714 million between '83-84 to '86-87, and this represents a 17 per cent increase or 5.6 per cent annually. I'm wondering if you could take a look

. . . like I don't know whether these figures are accurate. This is the information that's been given to me.

Could you please take a look from your records and advise me — not necessarily this afternoon, but in correspondence — as to the number of prescriptions from '83 to today's date, the increase, and on a year-by-year basis, so I can take a look at the situation and see whether or not there has been an increase and in what years the increase has been and how much it has been, and analyse this a little bit further. Because I think that the government should be doing this, and as opposition Health critic, I would like to as well.

So would the minister be prepared to do that?

Hon. Mr. McLeod: — Yes, Mr. Chairman, I'd be prepared to provide that information.

Ms. Simard: — Thank you. Now I think it is very important for the Minister of Health to have this information. He talks about spiralling health costs at length, and we note that there has been approval by this government for the drug patent legislation. And I believe that we will be seeing in future months, when these drug costs have an opportunity to sift down into Saskatchewan and into prescriptions, we will be seeing an increase in the cost of prescription drugs. We've noted that there already was a substantial increase the year preceding — something like 80 per cent of a 22 per cent increase was due to drug material costs.

We note that the formulary is no longer showing comparative pricing for doctors, so that doctors can take a look at the various drugs that are out there and decide which one will be best and look at the cost of the drugs before prescribing or writing "no substitution" on the prescription. And we note that the government hasn't helped the medical profession in that regard, in order to reduce the costs of the prescription drug plan. Instead the government has tried to solve the problem and correct it by letting the market take its place, which were the clear words of the minister this afternoon.

I believe that this shows that the government is not serious about controlling the spiralling costs of drug prices in Canada, if indeed that is the fact. I think that its blind support for drug patent legislation is clear evidence of that, and the fact that it hasn't taken some very obvious measures to reduce the costs of drugs, such as a comparative pricing formulary in Saskatchewan. It's clear evidence of the fact that this government's not serious about controlling prescription drug costs, but simply wants to move the prescription drug plan toward a free market system so that the market can take its place.

Now with respect to hospital waiting lists, Mr. Minister, we see that there has been PC underfunding and understaffing that has caused a crisis in Saskatchewan with respect to hospital waiting lists. It's resulted in tragically high and unacceptable hospital waiting lists. I believe the figures in February of 1988 were something like 12 or 13,000 in hospital waiting lists in the two major cities of Saskatoon and Regina.

(1715)

We note that there will be further summer bed closures this summer, and we see the minister commissioning a report that refers . . . or tends to push the government in the direction of rural hospital closures which will encourage more people to go into the cities and thereby increase the hospital waiting lists in the cities once again. There's no question that the crisis with respect to hospital waiting lists exists, and there's no question that the government appears to be doing very little with respect to this problem. I know there was some initial funding available some time ago, but there has been nothing done of late with respect to hospital waiting lists.

Now, Mr. Minister, could you please tell the members of this Assembly what immediate action you're going to take with respect to dealing once and for all with this unacceptable level on the hospital waiting lists, with the unacceptable numbers of people who are waiting to get into hospitals. Could you please tell us, Mr. Minister, what immediate action you're going to take?

Hon. Mr. McLeod: — Okay, Mr. Chairman, a couple of things to put this into perspective. We have been through this once before and I just . . . and I know on several occasions, and we'll be again, I'm sure.

As it relates to this summer, Mr. Chairman, the base hospitals, the large base hospitals have all received funding which would provide and which can provide for them to remain open throughout the summer, and many of them are.

I know Regina General's staying open throughout the summer. I believe University Hospital is staying open throughout the summer with all of their beds. City Hospital in Saskatoon is not, and they have a much shorter period of time when they will have some beds closed. But those will . . . none of that, I want to make this very, very clear to the member and to the House, that none of that is based on any funding levels from us. It's based on the administrative structure of the hospital and the way in which they believe they can best utilize those beds. And it's based on their surgeons in specific areas and the time that they take away, along with specific specialized nursing staff and so on.

So I just would say to the member that the numbers — and I don't want to get into numbers too badly because, as I've said on many occasions and as everyone else who talks about waiting lists in a responsible way will know, the key thing always is the waiting times, the waiting times for individuals.

But even with that, we have a shortening of that period of time for waiting on individual cases — I'm speaking now of Saskatoon — and also a lowering of the number of people who are waiting for specific surgery in the Saskatoon hospitals, and that's gone down since we took the initiative last year of the couple of million dollars which was targeted — something that had not been done before and something which was very important to do — to target the extra expenditure going to those base hospitals, to target it directly at areas, or speciality areas, which were causing the log-jam, so to speak — and those areas being ophthalmology and orthopedics and, I believe, ear, nose and throat, and some of those areas.

So, Mr. Chairman, we directed money directly at those areas. There was significant work done, and to the credit of the people working, both in surgical staff and people working in those surgical theatres and so on, and the administration of the hospitals, to their credit they have this thing on the trend line downward.

And, Mr. Chairman, one more thing. They are all looking forward to the time when their new hospitals, which are under construction right beside them now — at St. Paul's, I think of, and at the University Hospital, which is in the process of a move in now, and the City Hospital, obviously, which is a new hospital coming on stream, but it'll be a number of years before that's done — those hospitals which were much in need for a long time, and which were commissioned by this government and, frankly, should have been commissioned prior to us coming to office, Mr. Chairman, those hospitals and those new facilities will contribute significantly to a reducing of the length of time individuals will have to wait for specific surgery.

Ms. Simard: — Mr. Minister, obviously you're not doing enough when we have hospital waiting lists at the tune of 10,000 people, when we have Mrs. Klotz waiting for her hip replacement and she still hasn't got in, the last time I spoke to her, which was last Friday. For how many months? When we have Mr. Smith, who's waiting to get his blood clots looked after and he's been waiting since last December; when I spoke to him a week or so ago he still hadn't got in for surgery, Mr. Minister.

Obviously, if you want to talk about waiting times, we can talk about waiting times. We've talked about waiting times in this Legislative Assembly on numerous occasions, Mr. Minister, and the facts are against you and your government. You're simply not doing enough with respect to hospital waiting lists.

And the point has been made to me, and I'll make it here in this House today for your benefit, Mr. Minister, the point has been made to me on numerous occasions that yes, we do need new hospitals and more hospital beds, but if we're not going to be funded to keep the beds open that we already have, what is the point, Mr. Minister? That point has been made to me on several occasions.

And I want your assurance today that that funding will be available for the beds in the new hospitals as well as the beds that are already existing, Mr. Minister. And I want to know what you're going to do about the City Hospital's summer bed closures and whether you will make funding available to them so that their hospital beds can be open this summer.

Hon. Mr. McLeod: — I gave the member the assurance before, and I say that again, and I'm glad to have the opportunity to repeat it because I know that's not the way in which you have been suggesting here and around the province that is the case.

The case in fact is that all of these base hospitals have the money to be able to remain open throughout the summer. They know that. If you ask any of them of that, they will say, yes, we have the money. It's not a case of the

provincial government funding level if we choose to, over the middle of the summer, to stop for three or four, or whatever, weeks. It is strictly based on the way in which they will administer and the way in which they feel they can make best use of that very specialized staff they have, to have holidays at the same time.

But I just want to say that . . . I'll give you an example of City Hospital in Saskatoon. Between October and March . . . between October of '87 and March of '88, we have . . . in each of these areas there's a decrease in the number of days that individuals will have to wait for surgery in those areas. And I know that some of those are high, but general surgery, there's a 13 per cent decrease in terms of the number of days that they have to wait; orthopedics down 35 per cent; gynecology down 21 per cent; ophthalmology down 26 per cent; ear, nose, throat down 16 per cent; pediatric patients down 66 per cent. Where pediatric patients were waiting 210 days back in October, which I know is unacceptable, they're now waiting 71 days, so there's significant work being done here.

City Hospital, for example, and we've talked about it here before, Mr. Chairman, the day surgery unit which was opened at City Hospital, which is an initiative that they had asked for and that we provided to them, is making excellent use of it, and their medical staff are making excellent use of that day surgery unit.

And I might say, as it relates to Regina, because often we talk about Saskatoon here because that's where the log-jam seems to be the greatest, to the credit of the specialists in Regina, they have been utilizing day surgery — and day surgery for some of these areas for a longer period of time than they have in Saskatoon, I'm told — and to the benefit of the people of southern Saskatchewan in terms of keeping down some of the length of time individuals have to wait.

So there is a good deal going on in this area in terms of trying to alleviate a challenge that's there for the health care system. And I say not only in this province for the large, base hospital centres, but across this country, and it's something that we have to continue to be very vigilant about. But it is not based on — not based on — a lack of funding from the provincial government.

Ms. Simard: — Well, Mr. Minister, I disagree with you. It is based on a lack of funding from the provincial government to keep hospital beds open. It is based on that. And you aren't . . . as far as Mrs. Klotz, and Mr. Smith, and many of the other people that we've raised in this Legislative Assembly, and many . . . and all those that we haven't brought up, you're obviously not doing enough, Mr. Minister, because their waits are unacceptable, Mr. Minister.

I want to ask you a question now about poor people skipping visits to doctors, Mr. Minister. And I'm referring to a May 24th article in *The Globe and Mail* where there was a reference to the elimination of a travel allowance for Saskatchewan welfare recipients which jeopardized the health of hundreds of low income people who could not find transportation to medical offices.

Welfare recipients were delaying visits, Mr. Minister, missing operations, failing to keep appointments with specialists for tests and treatment; fewer children were getting immunized, women were unable to get prenatal check-ups — prenatal check-ups and prenatal medicine is preventative medicine, Mr. Minister — and there was increased emotional stress on these people because of isolation.

A study of some 80 welfare recipients found that 56 of them had problems getting to medical appointments, and 23 of these people had physical disabilities, Mr. Minister, that made walking difficult, such as arthritis, respiratory ailments, back problems, and heart conditions, Mr. Minister.

Now I want to know, as Minister of Health, because you are responsible for making sure that every man, woman, and child in this province has access to medical care. I want to know what you have done as Minister of Health to bring this problem to the attention of your colleague from Melville, and to insist that the special travel allowance be reinstated for the purposes of obtaining access to medical services and obtaining transportation. Please tell us what you've done, Mr. Minister.

Hon. Mr. McLeod: — Well a couple of things first of all that I . . . is the article you're referring to in *The Globe and Mail*? Could I ask the member just to clarify, is that the one that was written by one Geoffrey York? I believe there was a question to the Minister of Social Services, and it was answered here in the House before, in terms of travel allowances for medical services. Now I'm just going by recall here because I don't have anything in front of me, but I believe the response from my colleague, at that time, was that medical . . . allowances for medical travel have not been cut, but allowances for travel, in a general sense, have been. I don't know if that's the case, and I just . . . I'll go through it with him if that's the case.

But as it relates . . . and the reason I wanted clarification, if that is the article written by one Geoffrey York, . . . you know, we've had him quoted from time to time in the House, probably more often than he deserves, and frankly the way . . . the circumstances as he outlines them are very far from the actual facts of the matter on several occasions.

Ms. Simard: — Mr. Minister, the problem is the travel allowance is not available until they've spent the money and hand in a receipt, and that's my understanding of the problem. And indeed if that's correct, they don't have the up front costs. It's the same as your prescription drug plan, Mr. Minister. Welfare people do not have the up front costs to pay to get to the doctor and then submit a receipt and get the money in.

Now with respect to Mr. Geoffrey York, I note that you're saying that he's not a credible person, Mr. Minister. And I take exception to that because I think that you should just check the facts out with the member from Melville before you accuse Mr. York of not being credible.

Mr. York indicates that doctors and nurses at the West Side Community Clinic in Saskatoon, which has a large number of welfare recipients, have reported a noticeable

decline in the number of patients receiving treatment since the government abolished a \$27 monthly travel allowance late last year.

(1730)

Now the survey was conducted with respect to 80 welfare recipients. Now, Mr. Minister, are you telling us today that this survey was not done by the West Side Community Clinic in Saskatoon, and that if it was done it was inaccurate. Are you telling us that, Mr. Minister?

Hon. Mr. McLeod: — No, no I'm not and I just . . . I made my comment as it relates to the particular article, and I was trying to go by recall on what . . . or what my colleague, the Minister of Social Services had answered.

I will give you this undertaking. I will look into it in a more detailed . . . from the health perspective, from our side of the issue. I will look into it and, you know, and see what is the real circumstance there.

Ms. Simard: — One more question, Mr. Minister, on that issue. If you determine . . . one more question, Mr. Minister. If you determine that poor people indeed are skipping visits to doctors, as claimed by the community clinic, and if you determine that the reason this is happening is because they cannot get transportation to doctors' offices and to the hospital, will you ensure that your government rectifies the problem by giving them the up front costs of that transportation, Mr. Minister?

Hon. Mr. McLeod: — I will check into the circumstances as you've been outlining in this line of questioning. If I find that there's not a system in place, of vouchers or otherwise, there's not some system in place in the Department of Social Services to accommodate people who . . . and if I find that . . . and we in Health believe that there are people who are in the circumstance as you've outlined it, I will undertake to deal with the Minister of Social Services and talk to him about how we might rectify the circumstance.

The Assembly recessed until 7 p.m.