

The Assembly met at 10 a.m.

Prayers

ROUTINE PROCEEDINGS

NOTICES OF MOTIONS AND QUESTIONS

Hon. Mr. Lingenfelter: — Mr. Speaker, I hereby give notice pursuant to rule 34 that at the next sitting of the Assembly immediately before orders of the day is called for resuming adjourned debate on the motion to allocate time for proceeding on Bill 3, An Act respecting Health Districts, and on any amendments or subamendments proposed thereto, I will move that the said debate be not further adjourned. I will be moving that.

INTRODUCTION OF GUESTS

Ms. Stanger: — Thank you, Mr. Speaker. I would like to introduce to you and through you to the Assembly today some folks from my constituency. I see Stuart Keys, the director of our school division. I see some board members. I can't see past the post if other board members are here, but I know they're here to meet with the Minister of Education and I know that she'll give them a good hearing.

And I'd like to welcome them here and hope that their trip is profitable. And I'd like the members of the Assembly to welcome them in the appropriate manner.

Hon. Members: Hear, hear!

ORAL QUESTIONS

Closure on Bill 3

Mr. Swenson: — Thank you, Mr. Speaker. My question is to the Premier. Mr. Premier, it's about time that you started to take some responsibility for the government actions, the complete betrayal of health care in this province which your government is bringing about.

It's also time I think to do away with some of the hypocrisy which we've seen coming out of your front benches, Mr. Premier. You've now brought closure into this House to snuff out this public debate that should be taking place on health care. Mr. Premier, you once said about closure: discredited and desperate, this government has no other choice; it resorts to the actions of the bully, it resorts to the actions of coming down here and guillotining the opposition. Your words, Mr. Premier. That's what you're doing today, resorting to the desperate actions of a bully, Mr. Premier.

Will you end the hypocrisy of your government? Will you show some leadership? Will you end this closure motion which you brought down on this House and ensure a full public debate on the health issues? Would you do that, Mr. Premier?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, thank you very much. I say to the Leader of the Opposition we totally agree with them that there should be full public debate. We have argued and maintained that there is full public debate. This Bill has been on the floor of the House since very early March, five weeks now. It is open even after the motion passes for the opposition to have lots of time to debate.

And the difference really here is that your opposition has taken the position that it will do everything it can to kill this debate. That's different than prolonging a debate for prolonged arguments. You don't want to have a prolonged argument, you simply want to kill it. And with it you want to kill medicare, and we want to defend medicare.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. My question is to the Premier. Mr. Premier, you referred to the use of closure as guillotining the opposition. Well, Mr. Premier, you're not just guillotining us. You're just not guillotining the Progressive Conservative Party that's fighting you in this legislature, you're guillotining the people of Saskatchewan who have serious concerns on this matter.

Two nights ago, Mr. Premier, your Minister of Health and your Minister of Education went off to Weyburn, Saskatchewan, and they heard from the people there. And they, Mr. Premier, heard from those folks that you don't have to spend a half a million bucks on polling to know that there are serious concerns with your wellness program.

Now, Mr. Premier, given what your ministers heard the other night, what the public is saying to you, will you now do the right thing, sir, show some leadership, take the closure motion off and let those people have the assurance that their concerns about health care in this province are going to be roundly debated in the legislature today. Would you do that, sir?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, I think the Leader of the Official Opposition and the Conservative Party don't recognize the gravity of the situation which the government has to deal with and responsible men and women throughout Saskatchewan want to deal with.

In today's *Globe and Mail*, for example, on the front page, if the Leader of the Opposition would care to take a look at it, you would see as a front page story, the following which I'll just briefly read:

Canada's public ... health care systems ... will buckle under the load unless a major restructuring is done before the baby-boom generation retires, Statistics Canada says.

Not the Premier, not the Leader of the Opposition, Statistics Canada and their document set out.

Now what this Bill is all about, is restructuring the second phase of health care pursuant to the visionaries of Tommy Douglas and Woodrow Lloyd, in order to save medicare. What you people are doing by your determination to absolutely kill the Bill is to kill medicare and hospitalization. And I tell you, that may be a consistent Conservative pitch and it may be a consistent Liberal pitch. It is not the position of the government of the day nor is it the position of the people of the province of Saskatchewan. They want restructuring. They want to be involved. That's what this legislation provides. We want to save medicare and we want you to join us in that task.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. It's obvious, Mr. Speaker, that the Premier's been living in another world here. The problem, Mr. Premier, isn't about rationalization. Saskatchewan people want rationalization. What they're talking about, Mr. Premier, and you're not listening to, is the process. They're talking about their inability to have their government listen to them.

Yesterday, Mr. Premier, Cargill announced that it's donating a percentage of its spring fertilizer sales to rural hospitals. Cargill. Mr. Premier, what must the NDP (New Democratic Party) Party be thinking today when Cargill, a large multinational, has to donate funds to rural hospitals to keep them open because your government won't listen to an open debate on how we rationalize our health care system. Imagine, Mr. Premier.

Now, Mr. Premier, this craven bunch of ministers that you have here in the front benches will not go out and talk to Saskatchewan people. Will you give the commitment today, Mr. Premier, will you give the leadership today, that you will be in Kerrobert on the 14th and Eston on the 15th, Kindersley on the 19th, and Codette on the 20th? Show the leadership of your office, Mr. Premier. Don't let Cargill do it for you.

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, I don't know the details of the Cargill situation but if they are as reported by the Leader of the Opposition, I think only one can commend Cargill for doing so. I would only hope that the recently appointed new member to the board of directors of Cominco potash, the member from Estevan, would have his influence on Cominco doing the same thing.

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Since at one time he was both the father and the engineer of Cargill and was in effect de facto board of directors there, perhaps he can do the same thing with respect to Cominco.

But the issue remains the same, Mr. Speaker, and this

is this. What the Leader of the Opposition is doing is what all of the Conservative and Liberal parties have been doing throughout the history of the province of Saskatchewan. They have always been saying, we are for medicare and hospitalization . . .

An Hon. Member: — But.

Hon. Mr. Romanow: — But. And then they will mount every reason as to why it ought not to proceed. We want to save health care but . . . Then they will give all the arguments that are advanced there. That's the position that they take. They say we are for restructuring but . . .

All you have to do is take a look at the speeches from the member from Kindersley, some of the others who have taken part in the public meetings, to tell the people of the legislature and the public that those butts are full of untruths and in reality those butts mean they want to kill health care.

I say, stop it and join us; get on with the Bill. Let's debate it — there's lots of time — and let's save medicare and hospitalization for Saskatchewan. That's the line to take.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. Mr. Premier, Mr. Member from Riversdale, come out of your bubble, come out of the protective bubble, Mr. Premier, that you're hiding in. If this is all about the wellness plan, of wellness of our people, then why the rush? Why are you so afraid to listen to people, Mr. Premier? And again I remind you: closure is the last resort of a discredited, desperate government.

Mr. Premier, a short time ago you said, I must go to a rally in Kindersley because the people are crying out to me; I need to attend on behalf of Saskatchewan people. Mr. Premier, those same people in Kindersley are having another rally. And they're saying, Mr. Premier, we're crying out to you; come out and listen to us.

Mr. Premier, show the courage of your convictions. Withdraw this closure motion, allow full public debate, and go to Kindersley, Mr. Premier, like you did in the fall of 1991. Would you do that, sir?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, I am pleased to say that I have attended many meetings throughout rural Saskatchewan and will be going to other meetings in rural Saskatchewan, talking not only about health care but about the deficit position which was left behind for us by the members opposite.

And I'm also pleased to report that they're very, very widely covered by the news media in rural Saskatchewan, and they understand the gravity of the situation. So wherever possible, members of the government side will attend as many meetings as is necessary and as time permits. There should be a full

and complete dialogue.

I remind the member opposite that for nearly a year the Minister of Health led this debate by appearing in public meetings in virtually every corner of the province of Saskatchewan. I estimate that she met over 20,000 people in her travels. She is on the road now, virtually non-stop, and will be in the weeks ahead.

The Speaker: — Order, order. Order. I would want to ask the member from Maple Creek to cut down his interruptions a bit during question period.

Hon. Mr. Romanow: — Mr. Speaker, I just simply want to close off my train of thought which is that the fundamental assumption of the . . .

An Hon. Member: — The train has already left.

Hon. Mr. Romanow: — Yes, the train has already left. The train has left to save health care and you had better join on or you're going to be opposing health care and we are for saving it. That's the issue. The train has left. You're right.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. Mr. Premier, Mr. Premier, your ministers hide, SHA (Saskatchewan Health-Care Association) have cancelled their spring meetings because your minister won't go out and face the public.

Mr. Premier, when you wanted votes, when you wanted votes and you wanted to be Premier of this province you went to Kindersley and you went there before thousands of people and you said: I'm here to help you; I'm going to be the Premier; I'm going to sort these things out.

And today, Mr. Premier, the very basic of our society, health care, and the people of Kindersley say, Mr. Premier, come out. Well there's no votes to be had today. Is that the reason, Mr. Premier, you won't go? Is that the only reason — it's only politics? Show them some courage, Mr. Premier, and go to Kindersley.

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — You know, Mr. Speaker, I am pleased to say again that I have attended and will continue to meet in rural Saskatchewan where time permits and as the requirements dictate. I have ministers who do the job very, very well and health care is very much at the top of the list. There's no doubt about that.

But the fundamental assumption of the Leader of the Opposition is one which I want all the members of this House and the public to understand. It is the situation that says: we are for reform, but . . . And you hear it from the former premier right now, saying, but don't close any hospital. And we don't intend to close . . .

The Speaker: — Order, order. Order, order. Order! I

will issue a second warning to the member from Maple Creek to not continually interrupt in question period, the Premier. Next question.

Mr. Devine: — A question to the Premier, Mr. Speaker. Just a two-sentence quote. One from one of your own members. Closure is a very drastic, heavy-handed, and despicable thing to do. Those aren't my words. Those are from members of your cabinet.

And the most reprehensible aspect of this approach is that you are suppressing people. So my second quote comes from an individual. And you'll hear more of them.

People like Sister Rosetta Reiniger from Prelate. And she writes this about your plans: it means death to rural areas. And she says that the province of Saskatchewan, as we know it, will cease to be if the present trend of destroying the rural areas continues. And she asks, and I quote: Do everything in your power to prevent the government from implementing this health plan. End of quote.

Mr. Speaker, my question to the Premier is this. Given individuals who genuinely believe in rural Saskatchewan and in health care, don't you think that we could take the time to debate their feelings and their issues in a democratic process like any real democrats would? Why, Mr. Premier, won't you allow this debate to go on without closure?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, again the former premier fails, refuses, to acknowledge the fact that the debate is not being cut off. There will be 40 hours of debate still, even after this motion is passed. You can say everything that you want to say over and over and over again.

But in his question you will note the point that proves my answer, Mr. Speaker. He gets up in his preface to the question and he says, reading from the good sister's point of view, do everything in your power to kill this Bill. Just a few moments ago his Leader of the Opposition said no, we don't want to kill this Bill; we just want more time to debate it.

And that's exactly the point. When it comes right down to it, what they really want to do is but, but, but kill it. And in killing it, they want to kill health care and hospitalization. That's what they want to do. And we won't allow it.

Some Hon. Members: Hear, hear!

Mr. Britton: — Thank you, Mr. Speaker. We are not trying to kill this Bill.

Mr. Speaker, I'd like to direct a question to Madam Minister, Minister of Health. Madam Minister, let me read you a part of a letter that you received from a couple in Choiceland sent to you. And I quote:

My husband and I are writing about the Saskatchewan health plan and the terrible botch you have made of it. We both trusted your government and never expected the NDP to rob the sick. We find that's exactly what you're doing. Tommy Douglas would turn over in his grave if he knew.

This is a letter to you, Madam Minister.

And I want to go on to say, Madam Minister, this is not the Tories; this is your own people talking to you. You're not listening. When you chose to debate this Bill, you're not just stifling the Tories, Madam Minister, you're stifling your own people. You're not just muzzling the opposition, Madam Minister, you're muzzling the people of Saskatchewan, all around the province.

Madam Minister . . .

The Speaker: — Order. Member put his question, please.

Mr. Britton: — Madam Minister, my suggestion to you is to go home and think this over during the Easter weekend. And when you come back, Madam Minister, will you . . . Madam Minister, will you withdraw your closure motion? Will you do that, Madam Minister?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, I thank the Minister of Health for allowing me to answer this question.

I want to say to the member from Wilkie and to the legislature the following: beware Tories when they quote Tommy Douglas. Beware. Beware any Tory who quotes Tommy Douglas or uses in support, because it was the Tories sitting opposite there and the Liberals who fought medicare tooth and nail in 1962. Members opposite who probably were members of the notorious Keep Our Doctors committee tried to kill, in the defence of medicare, the best reform that we've ever implemented in Canada. Now they're doing it in this context.

I say to the hon. member from Wilkie — if he would just calm down — if you say that you support this Bill, then put your words and your deeds together. We want you to debate. We want you to make constructive suggestions. You have . . .

The Speaker: — Order. Order, order. Please let the Premier answer the question, all right. And now . . . Well before we proceed to the next question, would members please use some restraint in interrupting in answers when they are given. Order. Order.

Mr. Boyd: — Thank you, Mr. Speaker. My question is for the Minister of Health. Madam Minister, people all over this province are trying to reach you and they can't get through to you, and I mean that literally.

Yesterday we received a call from a Mr. Ron Moldenhauer from Saskatoon who told us he tried to contact your office yesterday and ask for help. He's on a fixed income due to a disability and he can't afford an eye examination. He called your office, Madam Minister, and you wouldn't accept the charges; you wouldn't help him; you wouldn't even accept his call. This may seem trivial to you, Madam Minister, but the precise point that we're trying to make is, people are trying to talk to you and you won't listen. People are trying to call you and you won't take their calls.

Madam Minister, Mr. Moldenhauer was finally able to reach other departments of this government but he would like to talk to your office. Very simply, Madam Minister, will you direct your office to take his calls along with the other people in this province that are calling your office on a regular basis to discuss this damaging health care reform you are about to impose on rural Saskatchewan?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Here we go again, Mr. Speaker. Here we go again. I want the public to note what the Conservative Party is saying about this Bill. They've . . .

The Speaker: — Order, order. Order. If this interruption continues, I'm going to call the end of question period.

Hon. Mr. Romanow: — Mr. Speaker, I will try again to say to the member opposite and to the House what the true motivations of the Conservative and the Liberal parties are. He used the words: this damaging health Bill. He has said in Eaton's that this Bill must be stopped. Those were his exact words. This is . . .

An Hon. Member: — Until public consultation.

Hon. Mr. Romanow: — No. You have said that it should be stopped. And this member should be very careful about his exact words because those exactly are the words that you have stated and the member from Maple Creek stated, that it should be stopped. This is not a question of debating and debating and debating; this is a question where debate stops and what happens is outright obstruction because they want to kill the Bill. Well I say to him, he may want to kill medicare and hospitalization; we are here to save it. All the systems tell us we've got to save it, and we ask you and the people of Saskatchewan to stop the politicking there and come to join us in the defence of health care. That's what we're asking.

Some Hon. Members: Hear, hear!

Mr. Martens: — Mr. Speaker, and Mr. Premier, the mayor of the town of Naicam wrote, and I quote:

Fear for the health of my community. If patients are forced to leave the community for hospital beds or doctor care, the people will begin moving out of our communities, with businesses and schools to follow. Are those of

us in rural Saskatchewan less important than those in large centres?

End of quote.

Now, Mr. Premier, that's the mayor of Naicam saying that. This isn't a political battle between your party and our party. I was out in Wapella yesterday and the same thing was stated to me. They're very, very concerned and frustrated.

And, Mr. Minister, Mr. Premier, why are you trying to stop the people from being involved in the debate and not going out there to meet them on a personal basis, on a regular basis? Why aren't you doing that?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, I don't know how many times I have to tell the members opposite. I suppose for ever because they'll never accept it. We are meeting the people out there. We're urging them to set up health care district boards quickly. There are some that have been set up. They know what's best in their interests. If the mayor of Naicam has a concern, we will obviously do the best we can to answer those concerns. We'll take any phone calls that we can take. The ministers are meeting on an ongoing basis.

But it's not good enough to use isolated examples and say, knowing full well the minister's schedule, that this particular complaint hasn't been answered. If it hasn't been, we'll attend to it as quickly as we can. No one wants to cut off the people. In fact this thing will only work as a partnership with the people.

In New Brunswick there was not even any consultation. In New Brunswick they simply decided to reform it without health care districts. I'm not saying that in a critical fashion necessarily. That's the way they've approached it. We've approached it in a consultative way involving the communities. But in order to involve the communities we need the passage of this Bill. We need this Bill passed so that the communities can organize themselves, elect themselves, so that the mayor can be heard properly, so that the reforms can be implemented and so that a lot of the untruths and the misconceptions and a lot of the natural concerns can be put to bed very quickly.

Now if you say you're with us — you said you're with us — then stand up and vote with us and pass this Bill now. Do not drag your feet; do not delay. Join us.

Some Hon. Members: Hear, hear!

Mr. Martens: — Mr. Speaker, Mr. Premier, yesterday I took the time to visit with the very reputable and respectable individual in my community, Mr. Don Whiteman, who's the chairman of the steering committee in relation to the area around the city of Swift Current. There were a number of things that he said, Mr. Speaker. There was a number of things that he said. There's no homework been done by the government. This is a random plan. The longer the work . . . They believe everything has been decided.

There is nothing given to them. This is the words of a very, very irritated and frustrated, very respectable individual in the community of Swift Current, Mr. Premier.

And the question that I have for you is exactly the same as the other. Why don't you go out there and talk to those people. And I could give you a whole list of those names of those individuals and they are not Liberal only, they are not Conservative only, they are not NDP only. They are all political parties. And, Mr. Speaker, and Mr. Premier, they resigned from that steering committee because they are frustrated beyond words about what your Minister of Health is doing to the province of Saskatchewan. Will you go out there and visit with them and relieve that frustration that they feel all over the place?

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — Mr. Speaker, the Associate Minister of Finance has been in Swift Current and has met with these people and will continue to meet with the people.

Of course we understand that they embrace people of all political persuasions in the community. That's exactly what we intend to do and that's exactly what this Bill is all about which we're trying to pass and you're trying to hold up. Join us in passing the Bill.

Some Hon. Members: Hear, hear!

Hon. Mr. Romanow: — But please also, Mr. Member, tell the complete story. Please tell the complete story. Because in the same report that you're talking about, and I've got a copy about it in today's *Leader-Post*, here's what it said, by Mr. Whiteman, or at least the story says:

However, there was no conflict (note this, Mr. Member, there was no conflict) within the committee with regards to the NDP government's basic philosophy of health-care reform, he said (referring to Mr. Whiteman).

"I think it's been a feeling of many over a long period of time that with escalating costs, a close examination of the hospital situation was absolutely necessary," said Whiteman, who serves on the executive of the Swift Current Union Hospital's board.

Now he may have frustrations. A new board has been set up.

Now that is what he is saying. He is onside with our basic philosophy. He is onside with our legislation. He has said this in this article, unless it's a misquote.

Now if it's okay for him even with the frustrations, what's wrong with you? Why aren't you onside? I don't accuse Mr. Whiteman of anything, but I say that what you people say, namely that you're for it but do everything to kill it, tells me that you're really not onside, that really what you want is this health care

system to collapse. Typical Tory and Liberal. And I say it will never collapse so long as we're here.

Some Hon. Members: Hear, hear!

(1030)

INTRODUCTION OF BILLS

Bill No. 50 — An Act to amend The Provincial Lands Act

Hon. Mr. Wiens: — Mr. Speaker, I move that a Bill to amend The Provincial Lands Act be now introduced and read the first time.

The division bells rang from 10:31 a.m. until 10:42 a.m.

Motion agreed to on the following recorded division.

Yeas — 42

Romanow	Murray
Van Mulligen	Hamilton
Thompson	Johnson
Wiens	Trew
Tchorzewski	Draper
Lingenfelter	Whitmore
Teichrob	Sonntag
Anguish	Flavel
Goulet	Cline
Kowalsky	Scott
Carson	Wormsbecker
MacKinnon	Crofford
Penner	Stanger
Hagel	Knezacek
Bradley	Harper
Koenker	Keeping
Lorje	Carlson
Lyons	Renaud
Pringle	Langford
Lautermilch	Jess
Calvert	Haverstock

Nays — 7

Swenson	Britton
Martens	D'Autremont
Boyd	Goohsen
Toth	

The Bill ordered to be read a second time at the next sitting.

Bill No. 51 — An Act to amend The Wildlife Act

Hon. Mr. Wiens: — Mr. Speaker, I move that a Bill to amend The Wildlife Act be now introduced and read the first time.

The division bells rang from 10:45 a.m. until 10:55 a.m.

Motion agreed to on the following recorded division.

Yeas — 41

Van Mulligen	Murray
Thompson	Hamilton
Wiens	Johnson
Tchorzewski	Trew
Lingenfelter	Draper
Teichrob	Whitmore
Shillington	Sonntag
Anguish	Flavel
Goulet	Cline
Kowalsky	Scott
Carson	Wormsbecker
MacKinnon	Crofford
Penner	Stanger
Hagel	Harper
Bradley	Keeping
Koenker	Carlson
Lorje	Renaud
Lyons	Langford
Pringle	Jess
Lautermilch	Haverstock
Calvert	

Nays — 7

Swenson	Britton
Martens	D'Autremont
Boyd	Goohsen
Toth	

The Bill ordered to be read a second time at the next sitting.

ORDERS OF THE DAY

WRITTEN QUESTIONS

Hon. Mr. Lingenfelter: — Mr. Speaker, I move that question 93 be converted to motions for returns (debatable).

The Speaker: — Motions for returns (debatable).

GOVERNMENT ORDERS ADJOURNED DEBATES

MOTIONS

Time Allocation

The Assembly resumed the adjourned debate on the proposed motion by the Hon. Mr. Shillington.

Mr. Boyd: — Thank you, Mr. Speaker. We'd like to pick up on the discussion of yesterday about the closure motion and the lack of interest this government seems to be displaying with respect to the concern for the debate and the concern about the way the health care reform is going in this province.

We saw in the legislature, Mr. Speaker, a desperate Premier desperately attempting to justify his actions; absolutely desperate in his attempts to try and convince people of this province that what he's doing

is correct. And he drags out the memory of Tommy Douglas as his last weapon. It's always the last resort is to bring out Tommy Douglas. That's the last thing that he can always do.

But the fact of the matter is, Mr. Speaker, is I don't think Tommy Douglas would be in favour of closing rural hospitals. I don't think he'd be in favour of closing the hospital in Eastend or the one in Eatonville or the one in Estevan or the one in Kerrobert or Dodsland, or all over this province. Forty-one small hospitals are in danger, I predict, as a result of this government's actions, Mr. Speaker, 41 rural hospitals.

(1100)

An Hon. Member: — Is that all?

Mr. Boyd: — And the member from the back corner over here says, is that all? Is that all? Forty-one hospitals at risk and that member has the audacity to say, is that all? How many more then are you going to put at risk? Is 41 not enough to satisfy you? Is 41 hospital closures not enough to satisfy that member?

Well, Mr. Speaker, I say, shame on that member. Not one hospital in this province should close. Not one hospital should be put at jeopardy as a result of this government's actions. And you, sir, should take that kind of thought back to your constituency, and I wonder what they would think of your tone and your actions and your thoughts in this legislature.

That member . . . It's interesting, every time the debate comes up the Premier likes to say everybody's against health care but himself. Everybody's against health care but himself.

Well who is the one, who is the one that's bringing forward these changes? Who is it? Who's the one that's reducing the bed levels in rural Saskatchewan from 4.5 to 1.5 — 70 per cent reduction in my constituency alone. Who is that? It's the member from Riversdale, Saskatoon Riversdale. That's who's doing it. That's who's making these destructive changes.

That's why the people of Saskatchewan are rallying all over this province and will continue to rally all over this province. That's why they're asking for more debate on this. That's why they're asking that the government holds this Bill up. That's why the people of Saskatchewan want the member from Riversdale to step back, take a look at the situation, provide adequate time for public consultation and public debate.

But oh no. As is the case of this Premier ever since he's become elected, if you don't like what I'm doing, too bad. I'm going to force it through the legislature without any adequate consultation, without adequate debate. That's his way of governing, and the House Leader of the government supports him in that view and pushes forward at every opportunity, every single step of the way. Push, push, push. It doesn't matter what anyone else thinks. He is the government. He's above debate.

Got to get the job done, he chirps from his seat — got to get the job done. No matter who it hurts, no matter what the cost, no matter what hospital closes, no matter what — got to get the job done . . . (inaudible interjection) . . . Absolutely. Absolutely. Got to get the job done, he says. So that means closure.

Something that that member spoke so eloquently about that he said that closure should never be used in this legislature. But now when he has the tools of government at his disposal, the levers of government at his disposal, he uses it at every opportunity. More times than the collective premiers in the history of this province he has used that. And he gives the thumbs up signal. Right on, he says. That's the way he views this institution, Mr. Speaker, with absolute disgust. He doesn't care about this institution. The only thing he cares about is the promotion of his agenda. That's the only thing he cares about.

And, Mr. Speaker, I think this Bill is indicative of the way he views this legislature, this motion. And I'd like to take an opportunity to read this motion and show the gravity of the motion to the people of Saskatchewan.

On the proposed motion presented by the hon. minister:

That notwithstanding the rules of the Assembly and following the adoption of this motion, when the order is called for resuming the adjourned debate on the motion for second reading of Bill No. 3, An Act respecting Health Districts, not more than two sitting days shall be allocated to debate on such order and that 15 minutes before the set time of adjournment on the second sitting day, unless sooner concluded, the Speaker shall interrupt the proceedings and put every question necessary to dispose of the order;

And I think that first paragraph outlines to the people of Saskatchewan exactly the way this government feels about this institution. It doesn't want to debate Bill 3. It doesn't want to debate anything any more, it seems like. They just want to push their agenda forward, force it on the people of Saskatchewan, force it on the government . . . or the people of Saskatchewan.

And it's interesting. The Premier, the Premier in question period desperately tried, desperately tried, Mr. Speaker, to pick out passages from newspaper clippings to defend his position — to defend his position. And here is the complete clipping of what he was trying to quote from, Mr. Speaker, on Bill No. 3.

And it's interesting. He says that Mr. Don Whiteman of Swift Current is supportive of his changes. Well if he would have read on just a little bit further, just a little bit further — in fact all he would have had to read is the first paragraph — he would have found that he wasn't in favour of it at all.

While he is suggesting that health care reform is necessary, he also says, and I quote out of the *Leader-Post* of today:

A feeling health boards are going to be the “fall guys” for tough austerity decisions is one reason the health district . . . committee here (chairman) resigned recently, says its former chairman.

He’s so much in favour of this that he resigned. Can you believe that, Mr. Speaker? The Premier holds him up as an example in question period and says this man is supportive. He’s so supportive he resigned. He resigned his position because he supports the government’s view.

How ludicrous can that possibly be. Don Whiteman from Swift Current, former chairman of the board out there. And he goes . . . (inaudible interjection) . . . former chairman of the planning committee; I stand corrected; that’s right . . . (inaudible interjection) . . . Absolutely.

The Premier says he supports it, but the man steps down, resigns from the planning committee because he’s so supportive of your Premier. What a joke. What a joke, Mr. Member back there. Take the time to read the article yourself if you don’t believe us.

And he goes on to say:

And had the other three members been present, “it likely would have been 12 (out) of 12,” . . .

Resigned. Can you imagine, Mr. Speaker, 12 out of 12 would have resigned had they been there that day, he predicts, because they do not support the government in these changes. And the members opposite sit in their desks, Mr. Speaker, and they laugh and they say, oh well that doesn’t matter — that doesn’t matter. That man, he obviously supports us even though he resigned.

In fact, as things progressed, it became apparent “we were being (used as) a buffer for the government, and if things (went) wrong . . . the fault could be laid at the feet of the committee,” . . .

That’s what the people who are so-called supporting you are saying. That’s what the people that you guys hold up as examples to the people of Saskatchewan and say this man’s supportive . . .

And I’ll just read that over again because it’s important, Mr. Speaker. It illustrates clearly how the Premier wants to misrepresent this kind of information in the legislature. It simply isn’t the facts. The fact of the matter is, the man said:

In fact, as things progressed, it became apparent “we were being (used as) a buffer for the government, and if things (went) wrong . . . the fault could be laid at the feet of the committee,” . . .

And that is why that man stepped down. That’s why that man resigned. And they’re saying from their seats, scare tactics — scare tactics. He’s one of the most distinguished members of that area . . . the people from that area when he comes to health care reform. And it’s absolutely incredible that anyone could say that it’s scare tactics on that man’s behalf. He’s been around there longer than you’ve been alive probably, when it comes to health care. Member of city council, absolutely tremendously well-respected man from that area.

And he goes on to say:

The government also tried directing the committee to do the things its way, despite Health Minister Louise Simard’s earlier statements that the districts would have autonomy, he said.

Absolutely astounding, Mr. Speaker. This man has condemned this process right from start to finish, and the Premier has the audacity to stand up in question period and say he supports you? Absolutely incredible.

When the committee decided governance would be its first priority, it was much to the consternation of the deputy minister (Duane Adams),” he said.

I can’t think of any other complete condemnation of this government’s actions than what we see in this article here. And for the Premier to stand in his place and say that he supports it, a total falsehood, Mr. Speaker, a complete misrepresentation of the truth, absolutely unfounded in this House before.

Mr. Speaker, the first paragraph of this motion I think has in fact become a manifesto for the NDP government, the single characterizing principle about what this government lawyer from Riversdale is all about. And we have to look back, Mr. Speaker, about what other members have said about closure in the past.

And I wish the members opposite would take the opportunity to stand in their place and tell us about what they think about closure today. What do you really believe about closure? Do you believe that what you’re doing is correct? Do you honestly believe that you’re doing the right thing? Well the people of Saskatchewan I don’t believe would agree with you.

Mr. Speaker, I would like to remind the member from Humboldt just of a few words that he said in this Assembly, and I quote: Mr. Speaker, we are in this debate because the government is drunk with power. That’s what he said. He went on to absolutely condemn a government for bringing in closure. And what is he doing and what is he supporting today? He’s exactly supporting that very same thing. That was the member from Humboldt that said those kinds of things, Mr. Speaker. He didn’t care then; I don’t believe he cares now.

The member from Humboldt went on and on and on about how outrageous it was for a government to bring in closure, and that was after 70 hours of debate, Mr. Speaker — 70 hours of debate. We've had an opportunity to debate this Bill only five hours — the actual Bill No. 3, five hours, three speakers. That's it, Mr. Speaker.

And I think that by the member from Humboldt's own assessment, the logic of this continued use of closure is undermining the institution of this Legislative Assembly. They're repeatedly using closure because they don't believe the people no longer care.

Well, Mr. Speaker, I think they're wrong. I think the people of Saskatchewan do care. I think they care about this institution. I think most members here care about this institution, and yet they are being led down the garden path by a government that seems bent on destroying the rules of this legislature, changing them at whim to suit their purposes, Mr. Speaker.

And it's hard as members of the opposition to be able to fight this government when we see these kinds of things. But you can be assured, Mr. Speaker, that we will not sit and just take this kind of action. The people of Saskatchewan already . . . I talked to the economic development officer yesterday in Kindersley, and he suggests to me that the people on the west side of the province are at the point now where they want to have a mass rally in front of this legislature. He believes that there are enough people in this province that want to come and stand in front of this legislature and demand that the Premier talk to them. If he won't come out to their area, they probably will have to come down and visit him themselves.

They're in a position now, Mr. Speaker, where they believe there would be all kinds of people that would want the opportunity to talk to the Premier about this. And I say that public consultations must take place, absolutely must take place, before this Bill proceeds any further, Mr. Speaker.

And one of the more . . . One of the other members that spoke about closure in the past, Mr. Speaker, is the member from Regina Churchill Downs. He has a contribution to make to this debate, and I'll just lend him a hand in making that contribution. And he said, and I quote from *Hansard*:

. . . I sincerely hope it'll be the last time closure is ever invoked in this province.

Now that's relevant to the debate, Mr. Speaker. He sincerely hopes it will be the last time closure is ever invoked in this House. But what is his government doing today? What is his government doing today? And where is that member when it comes time to vote on this? Where will he be?

In fact he was the one that introduced the closure motion. He sincerely hopes that it would never be used, but he's the one that stands in his place on behalf of the government members and makes the motion, even though in the past he said he hopes that

it never has to be done again. Hard to believe.

Mr. Speaker, he goes on to say a whole bunch of things about closure. He wanted closure to never be used again. And yet he is standing there with the member from Riversdale, shutting down dissent, shutting down debate, his own little verbal Tiananmen Square, killing debate. That must be profoundly an unhappy experience for him, and I await his expression of dissatisfaction.

(1115)

Because you know, Mr. Speaker, he is also very cynical about the whole thing, very cynical indeed. We are approaching summer, Mr. Speaker, and in face of this NDP motion to close all debate in this Assembly, one of the most fundamental elements of what I would call the social contract of Saskatchewan people in the province . . . But indeed we face the approach of summer, and what does the member from Churchill Downs have to say about governments who impose closure with the approach of summer? Well let me quote him further, Mr. Speaker, we'll just continue on with what he said:

Mr. Speaker, it is undoubtedly another factor — I wished it were not so — undoubtedly another factor is simply the desire of members opposite to enjoy their summer.

Well, Mr. Speaker, I don't think that that's the case.

So we've had a sad admission that the NDP thinking process, when it comes to closure, includes considering how it might affect their summer vacations. And isn't it an interesting coincidence, Mr. Speaker, that the last time this NDP government used closure, it was also in the midst of the summertime. People want this debated, but they have to invoke closure so they can get away on their holidays.

Mr. Speaker, no one denies these New Democrats their summer vacations. They'll get it before very long. They know they're going to get their way in the legislature at some point. But I think the point has to remain that people all over this province want an opportunity to debate this legislation. They want an opportunity for there to be public consultation.

They want an opportunity to try and help this government improve on this legislation. They don't want to destroy medicare. What kind of ridiculous talk is that, that the Premier constantly has to use when he gets into the most heated type of debate that he frequently finds himself in. Why does he want to lower the debating skills that he has to that level, where he says people want to destroy medicare.

Mr. Speaker, the previous administration built hospitals around this province, provided increases in budgets to health care in this province. I think that's a clear testimony to the fact they are supportive of medicare in this province, Mr. Speaker.

Open hospitals all over the place, Mr. Speaker,

allowed for access to acute care beds, long-term beds, all over this province. Is that not a testimony to the support that the Progressive Conservative Party has to medicare in this province?

Well, Mr. Speaker, and yet the Premier likes to say that everyone but himself is going to uphold the principles of medicare. Well, Mr. Speaker, I think that he is the one that's out of step. I think that he is the one that's in danger of closing down a large part of the rural hospitals in this province.

I think the people of rural Saskatchewan and indeed the people of the medium-sized cities in this province are beginning to realize that that isn't the case any longer. He is no longer the great defender of medicare that he likes to stand in this legislature and harangue on about. He's no longer that man that is going to be the principled one, that's going to stand in the defence of everything that was set forward in medicare from the start of medicare to the present, Mr. Speaker.

The member from Churchill Downs goes on to say further about closure motions: right now this motion would kill debate just as people are gathering the resources to oppose this government.

Well isn't that ironic, Mr. Speaker. This motion would kill debate just as people are gathering the resources to oppose this government. How those words must come back to haunt him today. Because that exactly is what is happening today when it comes to health care reform.

All over this province people are gathering their resources right now, right as we speak, to oppose this government's destructive health care reform package that they are laying out. That's what they're doing, Mr. Speaker. People all over this province are gathering their resources today to oppose this government.

They are stirring . . . Here's the words once again of the member from Churchill Downs: they are stirring in community after community and they are preparing themselves to do battle with this government. Exactly, I say, Mr. Speaker, exactly what is taking place in Saskatchewan today.

Public meetings are being organized as we speak, all over this province. There is one that the member from Morse attended last night in Wapella. There's one being proposed, a possible date of the 13th in Kindersley, or the 19th. They haven't completely fixed it. They may be . . . And I talked to the economic development officer last night. I talked to the mayor and economic development officer last night.

And they had originally scheduled it for the 19th. They had originally scheduled it for the April 19, Mr. Speaker. But now, in light of the fact that the government is bringing forward closure, they are giving absolute serious consideration, serious consideration to moving that timetable up to the 13th, hoping, hoping that a large-scale rally would convince this government of the need to step back and review this, step back and take the opportunity to

provide for public consultation with the minister and with the Premier himself at those meetings.

And the member from Churchill Downs went on to say: they cry out to be heard and they demand to be heard. And day after day after day the Minister of Health and her Premier deny the people of Saskatchewan. They reject the people and refuse to hear their cries. And instead they have turned the civil service of this province into a political armed force to sweep across the province in a blitzkrieg taking on community after community.

But the people who have responsibility, the people in whom the electors have placed their trust, these NDP ministers and their Premier, they hide behind this motion of closure. And once again, how does the member from Churchill Downs feel about that, Mr. Speaker?

Well we'll just bring forward a little bit more of his public record of 1989, Mr. Speaker, from *Hansard*. He said, and I quote:

They don't want to be here, Mr. Speaker, because they don't want to face the music. They don't want to admit and they don't want to be reminded that the public doesn't want this. They are acting contrary to public opinion and they are being arrogant, insensitive, and undemocratic.

That's what he said at that time, Mr. Speaker. And you were in the House at that time; you probably remember that. He said that in 1989, the member from Churchill Downs.

And is it not one of the most accurate characterizations of the NDP leader and his Minister of Health that you've ever heard, Mr. Speaker? I think it is the most telling story of what the member from . . . the Premier and the Minister of Health are doing in this province. The NDP leader, who the people called the man in the bubble, the bubble boy does not want to face the music so he brings in closure. The Minister of Health does not want to admit and does not want to be reminded that the public does not support her unfair, ill-conceived and costly shotgun approach so she brings in closure, Mr. Speaker.

And the public support for this motion, Mr. Speaker, I want to point out to the media, one very bizarre set of statistics that the NDP government wants the people of Saskatchewan to believe. I'm of course referring to the opinion polls released recently by the minister responsible for politics, the Provincial Secretary. In those polls they say that 52 per cent of the people support closing rural hospitals if it saves money. And at the same time they say 60 per cent oppose closing hospitals in Regina and Saskatoon even if it does save money.

That seems like some kind of careful manipulation that the government has been able to do with the numbers, Mr. Speaker. On one hand, 52 per cent of the people say that they're in favour of closing rural

hospitals if it saves money, but yet those same people, when they are asked about saving money in Regina and Saskatoon hospitals, they say no, 60 per cent are opposed to that.

If you look at the structure of their sample, even though their rhetoric implies that there is a balance in the rural as compared to the urban, you find that for the particular set of questions, their definition of rural is everything outside of Regina and Saskatoon. Well I would remind the government, Mr. Speaker, that everything outside of Saskatoon and Regina is not rural. The city of Moose Jaw, the city of Prince Albert, the city of North Battleford and others, Mr. Speaker — I don't believe they consider themselves rural. I think they consider themselves cities equal to Saskatoon and Regina.

So what you have is a polling question skewed with the responses from Regina and Saskatoon. The people of Regina and Saskatoon, according to the NDP government, are happy to see rural hospital closures so long as their hospitals are not closed.

Well first off, Mr. Speaker, I don't believe the results of that poll. And I don't think anyone in Saskatchewan would believe those results of that poll. I don't believe the people of Saskatoon and Regina want to see rural hospitals close. I don't believe that they think that there's wasteful amounts of money being spent in rural Saskatchewan on health care.

I don't believe the people of Regina and Saskatoon are that unfair or that callous, and that this government should be absolutely ashamed that it is even asking questions structured in such a way as to try and pit urban people against rural people.

That's what's happening, Mr. Speaker. They're trying to pit the rural against the urban with respect to health care. This is simply a continuation of an absolutely despicable campaign of a rural-urban split that the NDP, and in particular the member from Riversdale, mounted in the past five years. It worked so well for them in opposition, they tried to use the same disgusting tactic when they are now in government. They try to use the same disgusting tactic to justify their unsavoury motion.

Mr. Speaker, some days you have to wonder what these people across the way are made of. I say to you that even the fact that they would structure this survey in such a way is so deeply shameful that resignation should be demanded and delivered without delay.

The Premier will claim it wasn't him. So find out who it was and fire those people from government. That's what should happen, Mr. Speaker. Because all kinds of support for this motion just is not there. There isn't support for a closure motion in this legislature, Mr. Speaker. And I dare say in all of Saskatchewan there isn't support for this motion.

This government has got to face the music and address the issues that are before them, Mr. Speaker. The NDP leader has to quit being so obsessed with his own

political agenda, with his own political hide, and to start being concerned about the future and well-being of the people of Saskatchewan.

Even the Minister of Health, Mr. Speaker, even the Minister of Health had some direct observations about closure in 1989. She said the use of closure was a symptom of a government obsessed with its own political agenda.

Just let me quote a few passages from *Hansard* from the member from Regina Hillsdale:

This debate, Mr. Speaker, is about a government with its own agenda, an agenda that is not in the best interest of the people and that is not good for the people of Saskatchewan.

That's what she said at that time, Mr. Speaker. That was from August of 1989. And the Minister of Health would do well to go back and look at her own words.

She is proving by this motion that she does not care what the people of Saskatchewan think; that she is not concerned for the best interests of the people of Saskatchewan. She is only interested in trying to prepare the way for a smooth political situation two years from now when she has to face the music whether she likes it or not.

And that is what this motion is all about, Mr. Speaker. The NDP leader has figured out if she can inflict enough pain now, close down the greater part of rural Saskatchewan now, that she . . . that he can build for himself some room to make some fancy footwork two years from now and make the case: see how I've taken out the pain in rural Saskatchewan.

But the fact is, the people will not forget where the pain came from, Mr. Speaker. As desperately as the Premier wants to keep people under a delusion that the pain is all on the shoulders of others, the people very bluntly . . . the people are not stupid, Mr. Speaker. The people of this province will not go along with this. I predict the people of this province are going to rally up in opposition to this, just as they're doing right now, all over Saskatchewan.

And this motion, no matter if it succeeds in shutting down the opposition and allowing the imposition of the vile health policy on this government and on the people of Saskatchewan, no matter, Mr. Speaker, the people will remember.

(1130)

The people of this province won't forget this, Mr. Speaker. When you go to the public meetings — and I've attended some of them around the province, Mr. Speaker — the people of this province, the people of this province now believe that this government is abandoning them. Absolutely abandoning them, Mr. Speaker.

The people of this province, when you see the concern on their faces at these public meetings, when

you see them stand and go before a mike and talk to the people of their community, they say to them, they're concerned that they may lose their rural hospital. They're concerned what may happen to their family if they're the victims of an accident, what may happen to them if they are a heart attack victim or something like that. They're concerned about the employment opportunities in their town. They're concerned that those kinds of things will be swept away right before their very eyes by this government.

And it's interesting to note, Mr. Speaker, when long-time NDP supporters stand before a large crowd of people and condemn this government. It must be a scary thought for the government when that kind of thing is happening. That the people who have supported them for years and years, and decades in some cases, stand up at the mike and say that this government must be stopped. Is it any wonder, is it any wonder that the opposition takes up their cause when they see such heartfelt concern for their hospital or the people in their province?

Mr. Speaker, this motion, no matter if it succeeds in shutting down the opposition in allowing the imposition of this health Bill, Mr. Speaker, the people of this province will remember these actions. They will remember that this government, the Minister of Health, and the NDP leader did not have the courage to face the opposition, to hear debate, to take into account legitimate criticism.

And I think that's what we're doing, Mr. Speaker. I think it is very legitimate, the type of criticism that is being brought forward with respect to this legislation. It's not an attempt, as the Premier likes to say, to destroy medicare. No one, no one on this side of the House is in favour of the destruction of medicare. And yet the Premier continues along that train of thought, Mr. Speaker. But that isn't the case.

The people in the opposition party believes that medicare has to be preserved and we are fighting to preserve that, Mr. Speaker, in rural Saskatchewan. We're fighting to preserve that medicare system that has served the residents of Saskatchewan as a whole and rural Saskatchewan in particular. It's served them very well over the last decades that it's been in place, Mr. Speaker.

And the people in rural Saskatchewan, they understand what these changes . . . the impact that these changes will have on their communities. It puts at risk their whole community. And they realize that. When the hospital goes, just as sure as I'm standing here, the jobs go along with it that are at those hospitals. The health care goes along with it. The long-term beds go along with it. The jobs in health care that are associated with long-term and acute care go along with it.

And then it starts to put in jeopardy other things, Mr. Speaker. It starts to put in jeopardy the education system in those small towns, because those people are forced, those people are forced to leave, Mr. Speaker. Those people that formerly worked in those medical

institutions and hospitals around rural Saskatchewan are forced to leave. And then, as I say, it puts into jeopardy the school in those small towns.

And once that happens, Mr. Speaker, all kinds of businesses start to be put in jeopardy. And anyone that's ever had anything to do with business in rural communities understands the serious impact that it is when just one family moves away — just one family stops buying groceries, for example, in a small-town grocery store — significant impact that it has.

So you go around and around and around, and the economy just continues spiralling down. As you take away job after job after job, business after business after business, just continues the system of spiralling down to the point where that community, there's nothing left. And the people of rural Saskatchewan know all too well what that's about, Mr. Speaker. They've seen all too well community after community after community close up before their very eyes.

And, Mr. Speaker, it's not just the small communities that's being affected by this. Just take the opportunity — and I challenge members opposite to take the opportunity — to drive in downtown Swift Current these days. The downtown of Swift Current is literally being boarded up before our eyes. And it's a shameful thing, Mr. Speaker, that a government cannot recognize what their policies are doing to that city. And they have a member from that city, and it just astounds me that that member will not stand in defence of his community. Where is he in this legislature? Where is he when he's sitting at the cabinet table when it comes time to defend his city, Mr. Speaker?

The people in that community are beginning to realize what kind of impact these changes will have on them. They're beginning to realize what the closure of a hospital means, Mr. Speaker. And it's little wonder. It's little wonder that people who are on the planning committee, like Mr. Don Whiteman from Swift Current, are resigning from the planning committee. It's little wonder that he says:

In fact, as things progressed, it became apparent "we were being (used as) a buffer for the government, and if things (went) wrong . . . the fault could be laid at the feet of the committee," . . .

It's little wonder that he doesn't want to be the fall guy for this government, Mr. Speaker, because he recognizes, he recognizes the importance of health care in rural Saskatchewan and in small cities in Saskatchewan. He recognizes the importance of health care for the people of Swift Current, the community that he represents, Mr. Speaker. He recognizes that this government is setting forward a destructive policy that will have a significant impact upon his community.

An Hon. Member: — Tory scare tactics.

Mr. Boyd: — And the member keeps chirping from his

seat, Mr. Speaker, Tory scare tactics. No one is scaring anyone, no one is scaring anyone in this province except the Premier and the Minister of Health. That's who's scaring people. That's why everyone in this province is raising up and is concerned about health care reform.

Join us, they say. Well we are not going to be a part, we are not going to be a part of closing rural hospitals. Not going to take any part in that at all. We're going to defend them till the end, Mr. Speaker. We're going to defend those rural hospitals as long as we have breath to speak in this legislature or at public meetings, Mr. Speaker. We are going to defend those rural hospitals in rural Saskatchewan. We're going to defend small hospitals in cities, in towns, villages, all over this province.

And I have to think back about the pleasure that it was to help open one hospital. And since I was elected as member for Kindersley I've had the pleasure of participating in one hospital opening. And it was quite an event that day, Mr. Speaker, quite an event.

And the people turned out *en masse* to the hospital opening in Eatonia. And again, Mr. Speaker, just a couple of weeks ago they turned out *en masse* once again, but it was for an entirely different reason. They were trying to save their hospital on that occasion.

The paint's hardly dry on the building, Mr. Speaker, and this government already wants to close it for them. And it's interesting because you go out there, it's an absolute beautiful facility. Not a large, huge, urban type hospital or anything like that. This is a small, little rural hospital. I think it has five or six, I believe it is acute care beds and a number — I think it's 10, maybe 12 long-term beds, something in that order. And it's full. Integrated type facility. And it's full. The people there utilized it to such a degree that it's full right now and there's a waiting-list for those long-term beds, Mr. Speaker.

And further to that, Mr. Speaker, the people of that community recognized how important it was for them to have health care services, how critically important it was for them to have health care services in that area. So you know what they did, Mr. Speaker, prior to the construction of that hospital? They raised in excess of \$1 million from the local tax base around there to help with the construction of that hospital. They raised that money in a time when that community probably can least afford it.

Over the past 10 years that community has only seen, in my estimation, two crops, two harvests that would be considered to be good. The other eight harvests in that community and surrounding area were disastrous. I had the opportunity, Mr. Speaker, prior to the election to tour that area with I believe it was four or five reeves. The member from Estevan, I believe the member from Morse was there that day. We toured all around that area. And the drought, you wouldn't believe the drought, Mr. Speaker.

If you've never been in an area that's totally

devastated by drought, you can't hardly understand the level of devastation that there is and the feeling of hopelessness that people have when it comes to that type of thing, Mr. Speaker. And they have kind of a dark sense of humour as a result of those kinds of things. And I remember one rancher telling me that it was so dry in his area, he said, so dry in my area, Mr. Speaker, you couldn't roll a cigarette off a quarter section.

That's the type of dark humour that comes forward from that type of experience, Mr. Speaker. You couldn't roll a cigarette off a quarter section. Well, Mr. Speaker, that's pretty dry. And there's no question that the people of that area, they look at it and the only thing that they have left is to come forward with those kinds of dark type of humour and jokes, Mr. Speaker, because that's all they have left when you have that type of thing impact on you.

And I remember as well that day we talked to the reeve — Adam Ehresman is his name — the reeve of the municipality of . . . oh it just escapes me, the municipality of Newcombe, the RM (rural municipality) of Newcombe. He was the reeve of that municipality, Mr. Speaker, has been the reeve for quite some time — I don't know how many years, as long as I can remember. Tremendously well-respected man, that's why he is the reeve; tremendously good farmer and that's why, Mr. Speaker, the people of his area have such profound respect for that man.

He showed me, that day, his crop insurance records. He had them backed up for . . .

The Speaker: — Very interesting story, but I do want to remind the member that he is on a motion that has nothing to do with drought and the other things that he has mentioned. I do want him to relate that to the motion that is before us.

Mr. Boyd: — Thank you, Mr. Speaker. Well if I could be permitted to at least finish the little anecdote that I'm about to relate to you, I would ask that I could do that. It's just a short little while to the conclusion of that story.

Anyway he brought out his crop insurance records that day, Mr. Speaker, and as I said, he's one of the best farmers in the area and I don't think there's any dispute about that. He showed us his records and what they indicated. Prior to 1982 he had a crop insurance yield history of 125 per cent of the area average which is the highest you can get under crop insurance regulations. And after seven years of consecutive claims, seven years of consecutive droughts, his coverage had been reduced to 70 per cent of the entire area.

I think that illustrates, Mr. Speaker, how difficult a time that the people of that area have had and why, as I said earlier, it is so critically important to recognize the difficulties these people have had, and the difficulties that they had raising the money that it took to build a hospital in that area. Now he understands.

He's nodding, and I appreciate that. Now he understands, Mr. Speaker, the importance of health care to those people. He didn't have five cents to rub together with another nickel, Mr. Speaker, to put into that hospital, but he dug down deep. He dug down deep to provide what he could for the support of that rural hospital.

(1145)

And his example isn't any different than a whole bunch of other people over there. As I said, he was one of the people that probably, in the early '80s, could best afford it. And then at the end of the decade, he was one of the people that could least afford it. And he was just an example, just an example of what everyone in that area was feeling.

And, Mr. Speaker, that's not unusual for that area. We toured all over that vast area throughout there. And I recall the sod turning for that hospital was right around that same time. Can you imagine the type of feelings that those people must have had when they were turning the sod, turning the dry dirt, dry dirt for their hospital?

And I'll never forget it, Mr. Speaker, when we would have the opening that it was quite a day last summer, just prior to . . . It was like the Lord himself decided he was going to bless that community. And there was a shower of rain. And the member from Biggar, well he can testify to this. He was there that day. There was a shower of rain just prior to the opening of that hospital that day. And it was a blessing to that community. Not only did it rain for one of the first times in a long time, it had . . . They were opening and cutting the ribbon for the hospital that day. And people sat there all day long — men, women, children. They closed the school. I told you that before. They closed the school; everyone was there.

As it happens in rural Saskatchewan — we all know the traditions of rural Saskatchewan — the people of rural Saskatchewan all brought things like pies and cakes and refreshments for the afternoon, and there was a huge celebration. That's what happened that day, Mr. Speaker. There was huge celebration because . . . (inaudible interjection) . . . because, exactly, the community came together in a community effort and built that hospital.

And you drive down the streets of that small community, Eatonia. You drive down the streets of that community and you see . . . It's not hard, Mr. Speaker, to pick out why that community is suffering the way it is. There just isn't any money around. There's building after building closed; home after home that's unpainted, even though people have tried their level best to keep up, tried their level best to provide for the area, provide for their children, Mr. Speaker. And yet now they're being told that this hospital that they have worked so hard for may have to close.

And they don't understand, Mr. Speaker. They don't understand why they

should work so hard, why they should work so hard to open that hospital, and at the stroke of a pen, on the whim of this government, on the whim of this government that it could be closed. They don't understand that.

And that was clearly evident that night a few weeks ago in Eatonia, Mr. Speaker, when again the whole community turned out to the gymnasium in a local school and voiced their concerns. And it's hard to sit in an audience like that, Mr. Speaker, when people go forward to the microphone and can't speak because they're overcome with emotion. And that happened that night, Mr. Speaker. And I wish government members would have been there to witness that — the people, these great defenders of medicare.

And I would ask the member from Indian Head sometime to come out to a meeting out in that area and you'd see. And I suspect he's witnessed that before in his community. It's a moving, moving type of thing, Mr. Speaker, for anyone there when long-term residents — or anyone, for that matter — stands up before a public gathering like that, before friends and neighbours, and can't speak because they're totally overcome with emotion.

And I think it clearly illustrates to everyone the seriousness and the gravity of the situation, Mr. Speaker — the absolute critical importance that those people place on their hospital.

And, Mr. Speaker, that same kind of concern was felt in Leader in another public meeting — same kind of concern. The people of that community . . . And I recall I went over to that meeting, Mr. Speaker, and that was right at the same time that that weather system was moving across Saskatchewan. It was a miserable night, to say the least.

People travelled . . . I had to travel something in the order of 60 miles from my home, and that wasn't unusual. There were people from a radius of about that distance that attended the meeting that night, and travelled gravel roads, and wondered, Mr. Speaker — and it's no exaggeration — I wondered that night whether I was going to be able to make it there to that meeting on time because the roads were in such terrible shape as a result of the storm system that was moving through at that time. Everyone wondered.

But yet you'd think, Mr. Speaker, on a night like that people would say, I don't think I'm going to bother with this; I think I'll just stay home. But that isn't the case, Mr. Speaker. I think it illustrates how clearly important it is to the people of that area, how desperately important it was for them to come out to a meeting that evening and attend and voice their concerns.

And, Mr. Speaker, the same thing happened there. There was something in excess of 500 people there at that meeting that night at the community hall in Leader. And what happened that night was interesting, Mr. Speaker. They had representatives of the various levels of health care there. They had someone representing long-term care. They had

someone representing acute care. They had someone representing the ambulance system, Mr. Speaker. They had someone representing home care and then they had the mayor of the community. And everyone had an opportunity, each of those people had an opportunity to give a brief outline — a brief, as I say, outline — of what they thought the impact would be on their community for these changes.

And it's not me that said those things, Mr. Speaker, and it isn't me that organized that meeting. It isn't me that organized the meeting in Eatonville. It isn't me that organized the meeting in Brock. Just ask those people. They aren't going to give any credit to me for helping to put the crowd there because that simply isn't the truth, simply not the truth, Mr. Speaker. I had no part in the organization of those meetings that took place in those areas. Just phone the people out there and ask them if you don't believe me.

I can give you the names: Marilyn Clary, the mayor of that community out there; Blair Eichorn, I believe his name is, is the other gentleman that organized the meeting. If anyone thinks for one moment, if anyone thinks for one moment that that gentleman is a strong Conservative supporter, well I would . . . you better talk to him because I don't think he is the strongest supporter that we've ever had the privilege of being a part of our party, Mr. Speaker. But I suspect he's beginning to second-guess his thoughts in the past, Mr. Speaker.

Ask the organizers, ask the organizers of the Eatonville meeting that night, Mr. Speaker. They were the administrator of the hospital, they were the mayor of the community, they were the chamber of commerce for that community. I had no part in it. Just phone them and ask them if you don't believe it.

And the Premier and the House Leader were chirping from their seat, Mr. Speaker, after question period about the meeting in Brock, about how I had organized it and should be ashamed of the turnout for that evening. Well, Mr. Speaker, I invite you and other members of this legislature to phone the administrator of the town there. Ask, just ask her whether I had any part in that meeting. I'll tell you, she isn't one of my best supporters. She isn't a supporter of mine, I'll clearly indicate to you. She most certainly wouldn't want to give any credit to Bill Boyd, the member from Kindersley. She wouldn't want to give credit to the member from Kindersley; I'm sure she wouldn't.

And I just forget the other gentleman's name that night. I believe he's on the chamber, the local chamber of commerce. I can't recall his name. He helped organize the meeting that night, Mr. Speaker. And I don't think that they will give credit to anyone but themselves for organizing that meeting.

And the same thing, Mr. Speaker, is taking place in these other communities. The same thing is taking place in these other communities, Mr. Speaker. In my home town of Eston, my home town of Eston, I don't know who's organizing the meeting there. Honestly don't know who is organizing that meeting. I suspect

the mayor and the town council and the economic development committee perhaps, or the chamber of commerce might be the ones that are organizing it. I don't know. It isn't in the advertisements that are being placed in the local newspapers there.

It's being done because of the genuine concern that people have. I didn't take any time whatsoever to involve myself with organization of these meetings, Mr. Speaker, because I didn't need to because no one needed to drive this thing, Mr. Speaker. No one needed to try and initiate these meetings. They came forward as a result of the tremendous concern that the residents of that area have for their hospitals.

An Hon. Member: — They want to see their budget.

Mr. Boyd: — They want to see their budget — exactly. And it's interesting, Mr. Speaker, in the meeting in Brock that night. There was a hurried meeting earlier in that day in Kindersley where the representative of government, John Borody, I believe his name is, he convened this meeting earlier that day in Kindersley where they had the representatives of the planning committee there and all of the health boards. And he said what was supposed to happen in that meeting in the afternoon was that they were going to give them their budget. They're going to tell them what the budget was for those hospitals in that area. And apparently he didn't provide them with that information.

And, Mr. Speaker, at the public meeting that night someone asked, someone stood in their place — I don't know the gentleman's name even, Mr. Speaker — he stood in his place and he said, why wasn't the budget presented to the planning committee this afternoon? What was the hold-up here? And he got up, the government representative that day, John Borody, got up and went to the microphone and he said, because there was technical difficulties.

Now I'm not sure what that means exactly, Mr. Speaker. What kind of interpretation would you place on technical difficulties? I'm not quite sure what that means. But I'll tell you, there was a lot of suspicious folks there that evening when he said that. There was a lot of suspicious people there that night, Mr. Speaker, because I think they knew what that meant. They knew that their hospital was being targeted. They knew that their hospital budget was being targeted, and they didn't want to release the budgets prior to that meeting, Mr. Speaker. I think that's the real reason the budgets weren't released.

And the member from Kelsey-Tisdale winks, Mr. Speaker. He winks at me because he knows that that's the case all right. He knows. He knows; he knows that that's exactly why they weren't released, Mr. Speaker. He knows that the reason the budgets were not released was that that took place, Mr. Speaker. He knows that the budgets weren't released because they would have had hundreds of people at that meeting that evening. Because I'll tell you, in rural Saskatchewan the news travels fast; bad news like that travels fast, Mr. Speaker. They would've put together a

phone campaign that would've been unprecedented in that area if that budget had've been released that afternoon as was scheduled to be.

But I guess the minister had technical difficulties. Does that mean that the typewriter or the computer that's printing out the information broke down? Is that the type of technical difficulties? Or does it mean that they forgot to bring them, they left them on their desk here in Regina, forgot to bring the budget along with them? Nobody believes it, Mr. Speaker. Nobody believes it.

Kelsey-Tisdale over in the corner here, he knows. He knows exactly what that means. He's been around government, he's been around government long enough, long enough to know how these guys on the front bench operate. He knows that any sign of controversy has to be held back, has to be squashed, because they can't have people standing in these communities and asking why their hospital has to close, Mr. Speaker. Can't have it.

Why, when they were promised that their budgets were going to be released, why did they decide all of a sudden to hold them back, Mr. Speaker? Because they knew that public meetings were being initiated all over this province, and they have to get this Bill through quick. They have to get this through fast, before the people of this province realize what's going on.

(1200)

And I think the member for Biggar realizes that that's the truth. He's nodding his head in compliance too. He realizes that's exactly what the truth is, Mr. Speaker. He realizes that the people of this province have been deceived by this government.

Why? Can anyone give me a reason why they wouldn't release those budgets prior to those public meetings? I don't think anyone can. No explanation whatsoever, other than the vague term, technical reasons. That's the way that you address that question. Some vague notion that came forward that night to try and keep people from seeing the real reason for that hospital budget not being released.

And they say . . . So the fellow asked him, he got on his feet again after he was given that, that story — I think is the only kind way you could put it — after he was given that story, he got to this feet and he said, Mr. Speaker, well when will they be released? And I . . . you know, what's wrong with asking that question? So once again, this representative of the government was forced to get to his feet and go to the microphone and he said, well he wasn't sure, but he thought maybe it would be about two weeks. He thought they'd be released in about two weeks.

Well the technical reasons took quite . . . must be taking a quite a while to address, Mr. Speaker. Must be quite a problem that they have in the Department of Health right now with technical problems. I wonder what the technical problems are. I suspect the people

of Eatonia, Kindersley, Dodsland, Eston are wondering what kind of serious technical problems they're having in that office today, Mr. Speaker, that is holding them back.

When it came time to make the announcement of acute care bed levels in that area of rural Saskatchewan, they had no problem with technical difficulties. No problem whatsoever with technical difficulties.

And it was interesting, another little anecdote, Mr. Speaker, from the meeting there. And the member from Saskatoon Broadway was there and she can testify to this. She was there; she saw it. In fact the story is, the story partly is something that happened that night. When a gentleman from the back — he's the reeve of one of the RMs around Coleville, I just forget which one he's the reeve of — he asked a question from the floor. He had seen a television program about, I think it was W5 he had seen a clip of that show, and they were talking about, Mr. Speaker, they were talking about air ambulance services in Alberta, helicopter air ambulance services. And they were saying that it's real efficient and fast and it's working quite well and they're going to be doing more of that air ambulance evacuations. And so he said he wondered whether the government in Saskatchewan was considering something similar to that because he saw the program and he understood it was working quite well.

So he asked the question: is the government in Saskatchewan looking at something similar. And so I watched the Minister of Social Services and she sat there, nodding her head like this, motioning to John Borody at the front of the room, no question in anyone's mind what she was motioning. Yes is what she was saying indirectly to him. Yes, we're looking at that. Tell the people yes, we're looking at that.

I don't know whether he didn't catch the signal or what happened, Mr. Speaker. The health care representative, John Borody, was standing on the stage at the front, and like I say I don't know whether he missed the signal that he was getting from the minister or what happened, but he got up to the mike and said no, we're not looking at that, it's too expensive.

And because the gentleman asked the question and because he said he thought it was working quite well, he had understood it was working quite well in Alberta, that is why that minister I believe was nodding her head, because she knew that other people had seen that same show. She knew that other people believed that it might be an option for rural Saskatchewan. She knew it might be an option and that's why she was nodding her head.

But unfortunately, as I said, unfortunately the government representative that was answering all the questions, he missed the signal, missed the cue. He didn't know that he was supposed to say yes. He didn't realize that the government was looking at it. This comes as a strange revelation to him that they're

looking at it. The minister indicated they were looking at it. But he sits, Mr. Speaker, in the Department of Health and he knows that they're not.

An Hon. Member: — He's covering up the hide of his minister.

Mr. Boyd: — He was covering up. That's right, Mr. Speaker. He knows that that is not taking place. He knows that that isn't taking place even though the minister would like everyone to believe it is.

Mr. Speaker, health care is extremely important to rural Saskatchewan and that's clear. People all over this province know that it's important. The member from Assiniboia-Gravelbourg knows how important rural health care is. One has to wonder in his community, the community that he promised he would build a hospital if he was elected, one has to wonder: are those plans still on hold?

Do you remember the Assiniboia-Gravelbourg by-election, Mr. Speaker, when the NDP ran all over down in that area and said the Tories are going to close hospitals, and the reaction? Do you remember that, Mr. Member? I'm sure you vividly remember it because you were right in the middle of it all at the time. I'm sure he remembers the concern that there is when you talk about rural hospitals and how effective your scare campaign was at that time to scare people into believing that the Conservatives would close hospitals.

Well it's no longer a scare campaign. It's reality. It's a reality now, Mr. Speaker. It's what's going to happen if you guys get your way. It's going to happen.

And the member from Regina Rosemont nods his head in agreement. He knows that that's going to happen. How many hospitals are going to close, I ask that member. Is it 41? How many? More than that? Bigger number than that? Yes, he motions, bigger than that. One wonders how many . . . how big a thirst he has for hospitals, for destroying them.

And the member from Kelsey-Tisdale, he chirps from his seat. He does that constantly in the background here, Mr. Speaker. I don't know whether you can hear him because I'm in between you and him. But he constantly chirps from the background that it's scare tactics again. Seems to me the only two words he knows — scare tactics, scare tactics, scare tactics, he keeps saying from his seat.

But the reality is, how many beds in Kelsey-Tisdale . . . I think I'll take it upon myself over the course . . .

The Speaker: — Order. What's the member's point of order? Order.

Mr. Hagel: — Mr. Speaker, on a point of order, I think we've had previous rulings in this House on two points that I'd like to ask you to rule on. One is the phrase "chirps from his seat" which I think has been previously ruled as not language appropriate to the conduct of sensible debate in the Chamber. And

secondly, Mr. Speaker, it has been a long-standing rule of the Assembly that it is not acceptable for members to refer to either the presence or the absence of other members in the House.

The intention of both of those rules, Mr. Speaker, is to try to raise the level of debate to a debate of ideas, objectives, and to reduce as much as possible the personalization of debate which serves no one particularly well, Mr. Speaker. I would simply ask you to rule and to advise appropriately.

Mr. Toth: — Thank you, Mr. Speaker. Mr. Speaker, it would seem to me that certainly there will be ample time for all members to enter the debate. And when a member is on his feet, and I think as the Speaker has ruled time and time again, when a member is on his feet, that the member does have the floor.

But certainly just to acknowledge some of the comments and to bring forward the debate, add to the debate, I don't think it takes away nor does it deter from the debate, and I would suggest that the point of order is not well taken.

The Speaker: — Just to make a comment on this. I think Speakers have asked members not to refer to other members, whether they are chirping from their desks or not, but if the Speaker were to interrupt on those occasions, the Speaker would be on his feet a lot of times.

But having said that, I would ask members, as I've done on a number of occasions, to please direct their comments through the Chair, not at other members in the House. And by making comments — whether another member is actually making a motion by signalling with his or her head and whether they are or are not — by referring to that member, you are actually referring to the presence or absence of that member. And that really clearly is out of order.

And I would ask the member to try and refrain from that as much as possible and to direct his words and his presentations through the Chair.

Mr. Boyd: — Thank you, Mr. Speaker. I appreciate your advice.

Mr. Speaker, I think that on this side of the House we'd like to at some point take the opportunity, and I think that will be . . . It just occurred to me it might be a useful exercise if on this side of the House we examined the impact of these changes in various constituencies around the province.

And I think of Kelsey-Tisdale and I think of Shaunavon and I think of some of the other constituencies in this province. And I think Assiniboia-Gravelbourg would be another good one. I think those ones would be excellent ones to take as examples and maybe do an exercise on the whole . . . Maybe the whole province wouldn't be a bad exercise to do, Mr. Speaker, and see what kind of impact these changes are going to have on some of those constituencies.

How many beds will be shut down in the Kelsey-Tisdale constituency? How many beds will be shut down in Shaunavon? How many beds will be shut down in the Assiniboia-Gravelbourg constituency as a result of these changes?

Is there some kind . . . I wonder, Mr. Speaker . . . The member from Souris-Cannington, he says, lots. I wonder, Mr. Speaker, is there some kind of a sliding scale in this thing? Is there something we're not aware of in all of this? Or is this being done the same all across the province? Or is there being some targets, areas that are being directed at, Mr. Speaker?

In my area, it represents a 65 per cent reduction. Now I wonder, is that the same in the member from Assiniboia-Gravelbourg's constituency? Or is it the same in the member from Kelsey-Tisdale? Is that the same number of bed closures in his area, in those areas, Mr. Speaker — Shaunavon — or will it be less? Or will it be more, Mr. Speaker?

Scare tactics, we constantly are hearing, Mr. Speaker. It's not a scare tactic. If we move in the Kindersley larger area there that's being proposed — Eston, Kindersley, Eaton, Kerrobert, Doddsland; five hospitals — currently have, Mr. Speaker, they currently have something in the order of 90 acute care beds.

And they're going to be reduced. They're going to be reduced to somewhere — if you use the funding formula that's being talked about, or acute care bed level formula that's being talked about of 1.1 to 1.5 beds per thousand — it'll be somewhere in the range of 17 to 25, which represents 65 or more per cent of those beds will be closed.

And it's interesting to note, Mr. Speaker, that those beds are currently being used. So one has to wonder, where are those people that are laying in those beds going to go? Where are the people that are sick and in need of medical attention and are laying in those beds, where are they going to go? No one has answered that question in this legislature. Where are those people going to get the medical services that they are going to need?

Does the member from Kelsey-Tisdale know? Does the member from Assiniboia-Gravelbourg know? Does the member from Shaunavon know where these beds are going to be made up from? Where they're going . . . Are these people going to be asked to go into Saskatoon or Regina for medical attention? That's the question that's on everyone's mind out there.

And the same thing, the same thing exists with long-term beds in that area, Mr. Speaker. In my home community of Eston, I believe it's 35 long-term beds that there are at the Jubilee Lodge it's called, senior citizens home. I have an uncle that lives in that home, Mr. Speaker. He's in level 3 care right now, Mr. Speaker. He's lived there for a number of years.

And I talked to the staff. I talked to the staff of that facility, Mr. Speaker, just a few short days ago. And I

asked some of the people there, I asked the director of nursing for that facility if their beds are cut back from 35 down to, I believe it's going to be 24 — 11-bed decrease in that facility alone — if they have done any evaluation of the patients . . . of the people that are in that facility right now, of people that could be taken out of that facility and put into home care as been suggested.

(1215)

And her name is Diane Palmer. She lives at Eaton, commutes to Eston. I'll give you her phone number, if you like. You could call her yourselves. Members, if you wanted to talk to me afterwards, can check with her. I called her and asked her that simple question. And she said, we've done an evaluation of all of the 35 people in this facility. The nursing staff and the administrative staff have done an assessment of all of those 35 people, and they don't believe that there is one. They don't believe, in their opinion, that there is one person in that facility currently that could live under home care.

And the reason is simple, Mr. Speaker — because a lot of those people have been long-term residents; they don't have a home to go to any longer. They've long since disposed of that type of possession that they had. They've sold their home because they wanted to retire and move into a facility that they were going to get care for in.

And so I guess it begs the question: where are you going to put those 11 people that are being asked to move out of that hospital . . . or out of that long-term facility, pardon me. Where are they going to put them, Mr. Speaker? These are people who need level 3 and level 4 care.

And I ask the member from Indian Head, does he have any ideas about where they're going to put them? Mr. Speaker, I don't know. I don't think he does have any ideas about where those people are going to go and neither does anyone else. They don't have a home to return to. In a lot of cases they don't have family that they could move back in with because their families aren't there. They aren't there any longer, Mr. Speaker. They're in other areas; they've moved on to other pursuits. Their farms have been sold or gone broke because of things like the changes in the GRIP (gross revenue insurance program) program. They've left. They have no families to return to. And even if they did, Mr. Speaker, I suspect those people may not want to live with their families and impose on them. I don't think they would, Mr. Speaker. They're used to making their way in life, and they don't want to do that any longer. When they're 80-some years old or whatever and lived all of their lives by themselves with their spouse, they don't want to return to be a burden to their family.

And, Mr. Speaker, that question came up at the meeting in Brock. There was a pastor there from Kindersley had taken the time to drive out to the meeting in Brock. I forget his name now, but he's a pastor from Kindersley. And he asked that question,

where are you going to put these people? And he got up and said he didn't . . . John Borody, the wizard for the Department of Health that was there that evening, that was going to answer all the questions, he simply asked the question of him, where are these people going to go? And he said he didn't know. He didn't know where they were going to go.

So then he was asked, is there going to be adequate home care services? Can home care pick up the slack quick enough to address the situation that these people are in? And he said no; no, home care can't pick up the slack quick enough.

But the fact of the matter is, Mr. Speaker, that what we are debating in this legislature is closure, but it's closure as a result of this Bill that's being brought forward. And so, Mr. Speaker, I think that people want to hear about this Bill. They want it debated in this legislature. They don't want closure to be put on this, Mr. Speaker. They don't want this debate to be restricted to, as the motion says, I believe it's two days. They don't want that.

And that's why communities are holding these types of meetings around. And I invite the member from Moose Jaw to come to one. I invite you to come to my constituency and hear what the people are saying. Take the time to come out to Kindersley on the 13th or the 19th — I'm not sure of the schedule on that one. For sure the one in Eston is on the 15th. And I think, Mr. Deputy Speaker, I believe the Minister of Health has already committed herself to that one. So it wouldn't be any inconvenience for you. You could ride out there with her. Just take the time. Just take . . . pardon me?

An Hon. Member: — He was there two days ago.

Mr. Boyd: — Just there two days ago? In Eston?

An Hon. Member: — Kindersley.

Mr. Boyd: — Were you at a health care . . .

An Hon. Member: — Constituency executive meeting.

Mr. Boyd: — Constituency executive meeting. Yes, right.

Mr. Speaker, interesting to note the other night in Kindersley there was a health care meeting, and I don't think he was there, to tell you the truth, Mr. Speaker.

An Hon. Member: — Kindersley Inn.

Mr. Boyd: — Kindersley Inn. Well he may have been then. Kindersley Inn had a health care meeting and the people that came out of that meeting afterwards, and one of the ladies that came out, I had the opportunity to speak with her after the meeting, Mr. Speaker, and no budget had been released, Mr. Speaker. And they were wondering what was going on.

Well here's an interesting piece of information that's been passed to me. We were saying . . . and this just goes to show you how efficient the staff of our caucus is. They've already been able to come up with some numbers for the Kelsey-Tisdale constituency, already came up with some numbers for Kelsey-Tisdale constituency about the hospital beds in that constituency. And here they are, Mr. Speaker. There are 7,500 people in that constituency, voters. Tisdale has 68 beds. Tisdale has 68 beds, Mr. Speaker; Hudson Bay has 20 and Porcupine Plain has 20, for a total of 108.

So, Mr. Speaker, when we look at the changes in that area — and maybe the member would take the time to confirm this for everybody — it's 108 beds. And if I'm wrong on that figure, well maybe you could enlighten us a little bit when you get the opportunity; 108 beds is my information here anyway.

And if they change the acute care bed levels to what's being talked about, in that area they'll have 11, be reduced to 11 — 108 to 11. That's health care. That's NDP-style health care.

Well, well, well, Mr. Speaker. Just one example of what we see so far from one of the NDP constituencies of Kelsey-Tisdale.

I wonder if the people of that constituency feel 11 beds is adequate. In Tisdale alone . . . and I've been to Tisdale I think once or twice. And it's a nice community, no question about it. Beautiful community up in the parkland — beautiful community. Should be a pleasure to live up in that community. Well is 11 beds going to be adequate? Is 11 beds going to be adequate for that entire region?

Tisdale alone has 68 beds. Tisdale alone has 68 acute care beds in their hospital right now. And they're going to be reduced, they're going to be reduced from 68 in Tisdale, 20 in Hudson Bay, and 20 in Porcupine Plain, for a total of 108; they're going to be reduced to 11 — 11 acute care beds.

And that's just an example, Mr. Speaker, of the kind of change that this health Bill will mean to the residents of this province. That's just an example of one other constituency. And I think we're going to take the time in a whole lot of other hospitals around this province, to investigate the bed levels and what is being proposed for their area.

And the member from Assiniboia-Gravelbourg, he could probably do the exercise for us right in this very legislature, because he's a doctor and he works in that area. I'll bet he knows right at the touch of his fingers, what the changes would mean to his area. And I challenge him to tell us what those changes will mean.

Because we're going to investigate, we're going to investigate his constituency to find out what the bed levels are in that area. We'll do a little research and find out what the bed levels currently are in Assiniboia-Gravelbourg and who really is the one

that's closing hospitals. Who really is the one in your area, sir, that is closing hospitals?

Mr. Deputy Speaker, it'll be an interesting exercise for the people of Saskatchewan to take part in, to realize the impact all over this province. It's just not the west side of this province, the constituency of Kindersley, the one that I represent. It's constituencies all over this province.

And the member from Kelsey-Tisdale, I would think he should be pretty concerned about this, Mr. Speaker. He should be pretty concerned about this. Because I would guess that the people of his constituency aren't going to be very happy with all of this. I don't think the people in Kelsey-Tisdale are going to be very happy when that member stands and votes in favour of this. I don't think they're going to be very happy when they realize that he's participating in closure to help put this through as quick as possible. I don't think they're going to be very happy with him at all.

And I don't think that the good doctor from Assiniboia-Gravelbourg, the folks in that area, Mr. Deputy Speaker, are going to be very enthused . . .

The Deputy Speaker: — When members refer to other members, they should call them as members and not use any other title.

Mr. Boyd: — I'm sorry, Mr. Deputy Speaker, I didn't catch what you had said there.

The Deputy Speaker: — When a member refers to other members in the Assembly, he must call them members or hon. members. He must not refer to them in any other way.

Mr. Boyd: — Thank you, Mr. Speaker. The member from Assiniboia-Gravelbourg, it would be interesting to know what he thinks about all of these changes. It would be interesting for the people of his constituency, I believe, if he would stand in this legislature and tell everyone in his constituency whether he agrees with this. Does he agree that there should be bed closures in your constituency?

When he promised, Mr. Speaker, in an election campaign that he would be the one that could deliver a hospital; when he made the promise in an election campaign that he could deliver a hospital and no one else could and the Conservatives would close hospitals. Does he believe that today? I don't believe the member from Assiniboia-Gravelbourg believes that any longer.

And I'll be surprised, Mr. Speaker, if he votes in favour of this legislation. I'd be surprised if he supports this any longer because the people of his area know he promised them that. They know that he promised that. They know that he promised and he said in a by-election down in that area and other people who were supporting that party at that time, he knows that they said that the Conservatives would be the ones to close hospitals.

Well the reality is, Mr. Member, that it isn't the Conservatives that are closing hospitals, it's you. It's you folks on the government benches these days that are going to be responsible for closing hospitals. And I wonder, Mr. Speaker, how many closures there'll be in Melfort constituency. How many hospital closures will be there? How many beds will be lost? None.

Well isn't this being done equitably around the province? Isn't this being done equitably across the province? If there's 65 or 70 per cent of the beds being closed in my constituency, is there 65 or 70 per cent of the beds being closed in the constituency of Melfort? Is there that many going to be closed in your constituency? How about some of the other constituencies?

How about Indian Head? How many beds are going to close in Indian Head? And if there aren't any, why aren't there any? Why aren't there any beds being closed in Melfort or Assiniboia-Gravelbourg if there's going to be a whole bunch closed in other areas? Is it because they have an NDP member? Is it because there's an NDP member? I can't think of his constituency or I would ask him.

(1230)

An Hon. Member: — Last Mountain-Touchwood.

Mr. Boyd: — Last Mountain-Touchwood. How many beds are going to be closed in Last Mountain-Touchwood? How many beds in that proposed health area? I'm sure they're busily working on a health area, if they can find anybody any more to serve on those planning boards. How many are going to be closed in that area, Mr. Speaker? Last Mountain-Touchwood, how many do you think there will be closed? One wonders how many will be closed in Last Mountain-Touchwood.

Maybe the member, the hon. member for Last Mountain-Touchwood, would care to enlighten the House on how many beds will be closed in his constituency. How many beds will be closed there? Is there still a planning committee out there? Or have they all done like Mr. Whiteman at Swift Current has done? — tendered his resignation because he doesn't believe in your plans any longer, doesn't buy into this wellness story any longer, Madam Member from Melfort. Doesn't buy into this story and the rhetoric that your government has been handing out left, right, and centre.

The great protectors of health care. Isn't that incredible? The great protector of health care from Saskatoon Riversdale, the Premier of this province. How many hospital beds in his constituency are going to close? How many beds in his constituency will be shut down as a result of the changes, Mr. Speaker? One wonders about that.

Regina Elphinstone — how many beds are going to be closed in his constituency? How many constituency beds will be closed there, acute care beds? It's no

wonder, it's no wonder that the gentleman out at Swift Current resigned because he realizes what you're doing. He realizes the devastation, the impact that it's going to have on his community, Mr. Speaker.

And here's some quotes, Mr. Speaker. We'll just move back to the motion on closure for a moment. Here's some interesting observations from previous members in this legislature about closure: This debate is about muzzling the opposition, Mr. Speaker, muzzling the opposition, something that this government is not reluctant to do because we've seen repeated examples of how they've muzzled other people who have effectively spoken out against their policies, their cut-backs, and their harsh and cruel tactics, Mr. Speaker.

That's a direct quote from a member of that government when they were sitting in opposition. And we've seen, Mr. Speaker, how this government and the Premier in particular, the Minister of Health, have dramatically muzzled other people who have effectively spoken out against their policies, Mr. Speaker.

It's interesting to note that associations around the province that they claim are supportive of this, are now beginning to drop off. They're beginning to fall off the wagon, this wellness wagon, Mr. Speaker. They're beginning to fall off of it because they realize that they've been deceived. They realize that they've been deceived. It's my understanding, Mr. Speaker, that out in various communities around this province, they're all evaluating whether they want to belong to the SHA any longer. They're all re-evaluating that. They're all evaluating whether or not they believe this any longer, Mr. Speaker.

And here's a letter that's interesting, that we received here just a short while ago from the Preeceville Union Hospital. This is about your wellness plan. This is about your wellness plan, and it's addressed to Hewitt Helmsing, president and chief executive officer, Saskatchewan Health-Care Association. It was dated April 7, yesterday — yesterday, Mr. Speaker. Here's what they're saying. Whose constituency is Preeceville in? Is it in Canora? That's the constituency. Okay. Here we go:

Dear Mr. Helmsing: I wish to advise you that specifically regarding the matter of Health Reform that the Saskatchewan Health-Care Association does not represent the views of the Preeceville Union Hospital . . .

Maybe I'll take the time once again, Mr. Speaker, to read that first sentence over because of the importance of it. The Premier of this province has stood in this legislature, and the Minister of Health have stood in this legislature and they said people all over the province support their views and the SHA support their views. And now we're beginning to see how many associations and how many hospitals are beginning to think that the SHA doesn't represent them very well any more.

Dear Mr. Helmsing: I wish to advise you that specifically regarding the matter of Health Reform that the Saskatchewan Health-Care Association does not represent the views of the Preeceville Union Hospital Board. Implementation deadlines are too quick, the cut backs overly severe and will significantly affect the health care, economy and morale of rural Saskatchewan.

That is what the Preeceville Union Hospital is saying. And I go on:

Your memorandum of March 31, 1993 attempts to downplay the seriousness of a very severe situation. Substantial cut backs are about to occur without the infrastructure required for support (services) . . . as wellness centres, salaried physicians, day hospital programs, home care expanded roles and funding. We are concerned that rural physicians will leave because of the devastation in workplaces.

Mr. Speaker, that's just part of the letter. And I would like to continue to quote from this letter:

The government plan indicates that for 20,000 people in our proposed Kamsack, Canora and Preeceville district, of the present total rated active treatment beds of 157 (that's the total number of rated active treatment beds — 157) only 20-30 will remain after the dust cloud settles. Due to the health care needs, geography and large percentage of elderly in our district, those numbers of beds are unrealistic.

That's what they say.

Mr. Speaker, and they go on to say:

We are not opposed to change, reform in some measure is required, some positive points do exist (and we recognize that as well) . . .

Some Hon. Members: Hear, hear!

Mr. Boyd: —

. . . however the plan is unnecessarily harsh. The Saskatchewan Health-Care Association may no longer speak on behalf of the Preeceville Union Hospital regarding any aspect of Health Reform. Further, we do not agree with the recommendation to invoke closure regarding this necessary debate.

Well, well, starting to come in now, isn't it? This is signed William G. Morken, chairman of the board, Preeceville Union Hospital.

Interesting to note, Mr. Speaker, that's in the Minister of Agriculture's seat, Canora. She's coming unglued fast, isn't it, boys? Things around the province are starting to heat up a little bit, aren't they? The

Preeceville Union Hospital doesn't agree with you any longer, doesn't agree . . .

The Speaker: — Order. I would like to remind the member again, and he should be directing his words through the Chair and not to the members. The Chair is over here and I would like to ask the member to direct his remarks through the Chair.

Mr. Boyd: — Mr. Speaker, I would not only like to direct my remarks to you, but I'd like to provide you with a copy of this letter so everyone — and we'll table it — everyone in this Assembly and indeed all of Saskatchewan has an opportunity to see what kind of changes are being imposed upon these people and the fact that they don't support it any long.

Some Hon. Members: Hear, hear!

Mr. Boyd: — Don't support it any longer. And this is just, I predict, one single example of what's going to be taking place quickly across rural Saskatchewan. The tip of the iceberg budget of this government. The ice is beginning to float to the surface of these changes and what kind of impact they're going to have. The plan is unnecessarily harsh, Mr. Speaker. The plan is unnecessarily harsh.

The Saskatchewan Health-Care Association may no longer speak on behalf of the Preeceville Union Hospital. And I guess the most important point in all this, Mr. Speaker, at the last sentence, with respect to what's going on in this legislature right now:

. . . we do not agree with the recommendation to invoke closure regarding this necessary debate.

Real people, real people are saying this. And, Mr. Speaker, this letter came in from the Preeceville Union Hospital, April 7, it was sent in to us. And, Mr. Speaker, the Premier knows about this letter. The Premier knows about it because he was sent a copy of it. The Kamsack steering committee knows about it, because they were sent a copy. The Canora steering committee knows about it, because they were sent a copy. And Isabelle Colvin, Saskatchewan Health-Care Association, knows about this, because she was sent a copy.

Mr. Speaker, I think it's a clear illustration that people don't support closure. People don't support changes that are being proposed for their areas.

I ask the people of this Assembly, Mr. Speaker, I ask the people of this Assembly, what kind of impact do you think a reduction to 20 to 30 acute care beds from 157 will have on this area — on the Kamsack, Canora, Preeceville district, which has 20,000 people approximately in that area. What kind of changes, what kind of impact do you think it will have? What kind of impact will that have, Mr. Speaker? And I think they support the view that this closure should not go forward. They support that opposition in opposing this closure motion.

And, Mr. Speaker, we've seen how this government and the Premier in particular and the Minister of Health has dramatically muzzled other people who have spoken out against their policies. I think that it's important to recognize, Mr. Speaker, that the people of this province aren't frightened any longer of this government; they're beginning to speak out. Even though the member from Melfort can threaten organizations like SUMA (Saskatchewan Urban Municipalities Association), it isn't beginning to wash any longer, Mr. Speaker. They are beginning to stand up to this government because they know that this government does not represent the views of the people in Saskatchewan any longer, Mr. Speaker. They do not represent the views of Saskatchewan any longer, Mr. Speaker, with respect to health care.

Mr. Speaker, the only thing that might be the saving grace in all of this in the next election for this government is if they can cut out a whole bunch of rural seats. And that's what they intend to do. I tell people in this province today that that's exactly what they intend to do. They're going to cut out a bunch of rural seats so this health care reform won't matter any longer because there won't be enough seats to defeat Saskatoon and Regina any longer.

SUMA has real and legitimate concerns, Mr. Speaker, and it spoke those concerns. They reminded this Premier about his commitment, before he proceeded with radical restructuring, he would have a plan to ensure the property tax base did not have to bear the costs of the health care system. The Premier made that commitment and SUMA reminded him of their concern to that commitment be kept.

And I was at that SUMA convention, Mr. Speaker. I was at that SUMA convention and I heard the Premier speak. And I heard . . . After he made the comment that it would not be put on the local property tax base, the people that were represented at that SUMA convention applauded him. And so they should. They applauded him because they believed him at that time, Mr. Speaker. And what was the response? Just like the motion of closure, the government responded by trying to muzzle SUMA.

(1245)

The minister wrote a letter to the organization and threatened them. That's what she did. And we called, Mr. Speaker, if you think back, we called for her resignation at that time, and we still call for her resignation today because she threatened them just as surely as I'm standing here speaking this afternoon. She threatened them and she knows she threatened them. She threatened them on the direct order, I suspect, of the Premier of this province.

He knew how critically important, how critically important it was to get SUMA to snap into line. He knew how critically important it was so he directed his minister to threaten them, do what it took to put them people back into line as quickly as possible. He said, you shut up or we'll take care of you and everyone knows when the member from Riversdale is holding

the pistol he's more than willing to pull the trigger. So the train left the station, Mr. Speaker, and the government muzzled legitimate community concern.

And the Minister of Health, for the record, knows all about it. This motion falls on the coercion and threats of the last session where the now minister of politics, then the minister of Finance, told the chiropractors in no uncertain terms, you accept our policy or you will be cut out completely.

Muzzling the opposition, muzzling the legitimate concerns of the community, this motion is an extension of the government's dealings with the College of Physicians & Surgeons. And we'll table this letter showing that the government threatened the doctors.

You accept our policies or we will wage a public campaign against doctors. That will be the basic threat that was used to muzzle doctors in this province, Mr. Speaker. And now they come into this Assembly in absolute disgrace to try and muzzle the people's elected officials, elected representatives. And I say, Mr. Speaker, that even the Minister of Health knows the disgrace she is perpetrating with her complicity in this motion.

Let me quote that member from August of 1989:

Another thing that I wish to talk about, Mr. Speaker, is the fact that the motion violates the very spirit of democracy. It violates the freedom of discussion, free debate in this legislature on an . . . (important issue, Mr. Speaker).

Mr. Speaker, can anyone in Saskatchewan . . . that the Minister of Health ever made a speech in the spirit of democracy? Then she pretended to oppose closure and defend free speech. This is a cruel joke, Mr. Speaker, a twisted gesture of hypocrisy. She demands that Bill 3 be shut down. She demands an end to the very free speech, so she misleadingly spoke in favour. She says, shut up my opponents and silence the people.

Mr. Speaker, this minister has been out closing debate wherever she can. And the simple fact is that she knows it. Everyone, Mr. Speaker, knows that. And there's no disputing that any longer. She's using this closure motion to finish off the Premier's policy of decommissioning rural Saskatchewan. Rural revenge, Mr. Speaker.

Mr. Speaker, that's what's happening. We believe there's a hidden agenda. We believe that it's important that the people of Saskatchewan recognize the damaging effects that this will have on a government, on this government, and on the people of rural Saskatchewan in particular.

And we challenge — we challenge, as I said earlier — each and every member of this Legislative Assembly to go home and do an evaluation of the hospital beds and how they will be affected in their area. And it would be an interesting exercise, Mr. Speaker, if

everyone came back and gave a little report on what those changes would be.

Kelsey-Tisdale, we've already done the work for him so he won't have to. But in my constituency . . . And he says, Mr. Speaker, maybe someone should check the figures. Well fine. Check the figures if you don't believe our figures. Let's get the budgets out to the people in rural Saskatchewan, in rural hospitals, and then they'll know for sure what the budgets are. Then they'll know how many hospital beds are going to close for sure. Then they'll know if their hospital is being targeted. That, Mr. Speaker, is the important consideration that has to be done in this legislature.

Mr. Speaker, I think it's important that the people of rural Saskatchewan have an opportunity to be heard.

That's why they're asking for the minister to come out to public meetings. That's why, Mr. Speaker, that there was a meeting in Weyburn the other night. That's why there was a meeting last night in Wapella. That's why there's a meeting in Kindersley next week. That's why there's a meeting in Eston, Kerrobert, Codette, I believe there's one organized for there.

They're being organized all over because people are opposed to this government's actions, Mr. Speaker. We are opposed to it; we'll continue to be opposed to the government's refusal to hold public debate on this.

The Premier says we are against health care reform, and he's wrong. He's wrong, Mr. Speaker. We are against the policy of this government to strip rural Saskatchewan of health care services. That's what we're opposed to.

We're opposed to that, Mr. Speaker, and we'll continue to be opposed to it. And, Mr. Speaker, I would move:

That we now move to proceed to consideration of Bill No. 10.

Some Hon. Members: Hear, hear!

The Speaker: — Order. The vote . . . because the vote was called on a superseding motion which now lapses because it is 1 o'clock, our regular adjournment time, no vote will be taken. This House stands adjourned until 2 p.m. Tuesday.

The Assembly adjourned at 1 p.m.