

The Assembly met at 13:30.

Prayers

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

Ms. Draude: — Thank you, Mr. Speaker. I'm very pleased to rise again today on behalf of people from my constituency that are concerned about Highway No. 49 around Kelvington. The prayer reads:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to repair Highway 49 in order to address safety concerns and to facilitate economic growth in the area.

The people that signed this petition are from Kelvington, Lintlaw, and Wadena.

Mr. Gantfoer: — Thank you, Mr. Speaker. I rise again this afternoon on behalf of citizens of Moose Jaw and area concerned about a lack of dialysis services. The prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause government to take necessary action to provide the people of Moose Jaw and district with a hemodialysis unit for their community.

As you might expect, Mr. Speaker, this afternoon the signatures on this petition are all from the city of Moose Jaw, and I am pleased to present on their behalf.

Mr. Elhard: — Thank you, Mr. Speaker. Today I present a petition once more on behalf of the constituents of Cypress Hills concerning the increases to crop insurance premiums for this year. The prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to take the necessary steps to have Saskatchewan Crop Insurance reverse the 2003 premium increases and to restore affordable crop insurance premiums to our struggling farmers.

As in duty bound, your petitioners will ever pray.

Mr. Speaker, this petition is signed by producers from the communities of Abbey and Cabri, as well as Lancer.

I so present.

Mr. Dearborn: — Thank you, Mr. Speaker. I rise today to present a petition on behalf of citizens of west central Saskatchewan concerned with the alarming number of rural school closures. And the prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to take the necessary steps to retain schools in rural communities

such as Denzil and supply adequate education for rural families of our province.

And as in duty bound, our petitioners will ever pray.

Mr. Speaker, this petition is signed by the good folks from Denzil and Cactus Lake.

I so present.

Mr. Weekes: — Thank you, Mr. Speaker. I also have a petition from citizens concerned about the fairness of Crown lease land. The prayer reads:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the provincial government to take the necessary steps to ensure current Crown land lessees maintain the first option to renew those leases.

And as in duty bound, your petitioners will ever pray.

Signed by the citizens of Blaine Lake, Osler, and Krydor.

I so present.

Mr. Lorenz: — Thank you, Mr. Speaker. Mr. Speaker, I present a petition on behalf of the citizens recognizing the condition of Highway 14.

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to recognize the deplorable condition of Highway 14 from Biggar to Wilkie and to take the necessary steps to reconstruct and repair this highway in order to address safety concerns and to facilitate economic development in rural Saskatchewan.

And as is duty bound, your petitioners will ever pray.

The petition is signed by the residents of Wilkie.

I so present.

Mr. Allchurch: — Thank you, Mr. Speaker. Mr. Speaker, I rise in the Assembly today to bring forth a petition signed by citizens of Saskatchewan that are upset with the NDPs (New Democratic Party) handling of the Saskatchewan Crop Insurance premiums. And the prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to take the necessary steps to have Saskatchewan Crop Insurance reverse the 2003 premium increases and restore affordable crop insurance premiums to our struggling farmers.

And as in duty bound, your petitioners will ever pray.

Mr. Speaker, the signatures on this petition are from Shell Lake and Parkside.

I so present.

Mr. Stewart: — Thank you, Mr. Speaker. Mr. Speaker, I rise to present a petition signed by citizens concerned with the dangerous and deplorable condition of Highway No. 43. And the prayer reads:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to repair Highway 43 in order to address safety concerns and to facilitate economic growth in Saskatchewan.

And as in duty bound, your petitioners will ever pray.

Mr. Speaker, this petition is signed by individuals from the communities of Regina and Gravelbourg.

I so present.

Ms. Harpauer: — Thank you, Mr. Speaker. Mr. Speaker, I have a petition today with citizens who are concerned about the dangerous and deplorable condition of Highway No. 20. And the prayer reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to repair Highway 20 from Nokomis to Strasbourg in order to address safety concerns and facilitate economic growth in rural Saskatchewan.

And the signatures, Mr. Speaker, are from the communities of Nokomis and Tisdale.

I so present.

Mr. Wall: — Thank you very much, Mr. Speaker. I rise on behalf of residents of my hometown of Swift Current concerned about a health care issue in our community and specifically suggesting to the government they reconsider plans to allocate a used CT (computerized tomography) scanner into Swift Current as opposed to a new one, and allocate the used one for training purposes in other districts that have no experience to date with this technology. The prayer of the petition reads as follows:

Wherefore your petitioners humbly pray that your Hon. Assembly may be pleased to cause the government to reconsider its plan to allocate the used CT scanner to Swift Current and instead provide a new CT scanner for the southwest.

And, Mr. Speaker, the petitioners today are all from the great city of Swift Current.

I so present.

READING AND RECEIVING PETITIONS

Deputy Clerk: — According to order the following petitions have been reviewed and are hereby read and received as addendums to previously tabled petitions being sessional paper nos. 12, 13, 18, 36, 100, 119, and no. 120.

NOTICES OF MOTIONS AND QUESTIONS

Mr. Brkich: — Thank you, Mr. Speaker. I give notice I shall

on day no. 56 ask the government the following question:

To the Minister of Corrections and Public Safety: did your department recommend an individual company to provide pager equipment to local emergency measures organization boards; if so, what company and why were they chosen?

INTRODUCTION OF GUESTS

Mr. Stewart: — Thank you, Mr. Speaker. It's my pleasure to introduce to you and through you to all members of this Hon. Assembly, a group of 43 students from Waldeck School, 26 grade 5 students and 17 grade 6 students, seated in your east gallery, Mr. Speaker.

The students are accompanied by Miss Hain, Mr. Parscheuer, and Mrs. Wallace. And I hope that all members will welcome these students and I hope that they'll have an educational and a fun day here in the legislature and in Regina.

Hon. Members: Hear, hear!

Hon. Mr. Calvert: — Thank you, Mr. Speaker. I have a number of visitors that I would like to introduce who are today seated in your gallery. But if I may say, Mr. Speaker, given the events in Manitoba yesterday, I say with some confidence that they sit today in your gallery but this group of men and women soon will be seated on the floor of the legislature . . .

Hon. Members: Hear, hear!

Hon. Mr. Calvert: — . . . as members of the next New Democratic Party government. Mr. Speaker, as I make this introduction I note members opposite are checking to see if there's wheels under their desks.

Mr. Speaker, I would like all members, I would like all members to welcome those visitors who are here today with us in your gallery: John Vinek from Cut Knife-Turtleford; Len Taylor from The Battlefords; Wayne Byers from Lloydminster; Joan Beatty from Cumberland; Lon Borgerson from Sask Rivers; Russell Scott from Saskatoon Silver Springs; David Pattyson from Estevan; Bryan Barnes from Humboldt; Trevor Davies from Wood River; Lee Pearce from Biggar; and Henry Friesen from Cannington. Welcome all.

Hon. Members: Hear, hear!

STATEMENTS BY MEMBERS

Catholic Women's League of Canada

Mr. D'Autremont: — Thank you, Mr. Speaker. Mr. Speaker, on Monday I had the opportunity and pleasure to attend the 55th annual Saskatchewan Provincial Council of the Catholic Women's League of Canada.

Their theme for this convention, Mr. Speaker, which was held in Arcola, was Cast Out into the Deep. The host council was the Immaculate Heart of Mary which represents the three communities of Arcola, Carlyle, and Manor, Mr. Speaker. There were about 250 people in attendance at this convention.

And the CWL's (Catholic Women's League of Canada) mandate or mission, Mr. Speaker, is spirituality, family, teachings of the Church, and social justice with peace and humanity, Mr. Speaker.

This organization was founded in 1920 nationally, and in 1947 became a provincial organization, Mr. Speaker. They represent approximately 180 councils and 9,400 women across Saskatchewan.

And, Mr. Speaker, while I didn't have the privilege to attend and wait, they had a very, very good roast beef supper that evening for the convention, Mr. Speaker. They were showing their support for the cattle industry in Western Canada. And Father Banga and his group were catering and I'm told he does an excellent job.

Thank you, Mr. Speaker.

Some Hon. Members: Hear, hear!

Manitoba Election

Mr. Yates: — Thank you, Mr. Speaker. Well, well, well, to paraphrase the Good Book, Mr. Speaker, yesterday there was a sign from the East, a vision from Manitoba of things to come in Saskatchewan — an electoral foretaste, let's call it, Mr. Speaker.

I know all members will join me in congratulating Premier Gary Doer and the Manitoba NDP (New Democratic Party) for their resounding victory in yesterday's election.

Premier Doer's government was re-elected with an increased majority from 31 to 35 seats with 50 per cent of the vote. The Sask Party look-alikes, the Conservatives, dropped to 20 seats, Mr. Speaker.

Why did we win again? Two reasons: one positive, one negative. First, responsible, balanced, open government was rewarded. Second, the Sask Party, oops, the Tories, ran on a right-wing philosophy of two-tiered medicine, gutting labour legislation, ignoring Aboriginal issues, centralizing education, and providing tax breaks for the rich.

It didn't work in Manitoba, Mr. Speaker, and it won't work here. Thank you, Mr. Speaker.

Some Hon. Members: Hear, hear!

The Sweet Shoppe in Landis

Mr. Weekes: — Thank you, Mr. Speaker. Sharon Clay, owner and operator of the Sweet Shoppe in Landis, Saskatchewan, calls her hometown a one-horse town. Officially a village with a population of around 125, Landis is 32 kilometres west of Biggar in west central Saskatchewan. If you blink twice you'd miss it, but it is all well worth the stop within its corridors.

When Sharon found space available in a building which housed her daughter's insurance agency, she decided it was time to open her own store. She had always wanted a leather shop.

Sharon, her husband Bob, and her family raise 80 head of buffalo outside of Landis. Two of the daughters, Chandra Archdekin and Candace Miller, share 40 head.

This candy store/gift shop is full of both delicious and beautiful things, selling everything from candy to Sharon's buffalo hide products. More buffalo products abound: beer sausage, meat patties — spiced or not — roasts, steaks, smokies, and plain ground buffalo, all fresh frozen and wrapped in freezer paper.

The kids in town love the little 5 cents and 10 cents candies. No one can resist an old-fashioned hard ice cream cone from the long list of flavour choices or maybe a cup of coffee from the state-of-the-art coffee machine with another long list of flavour choices.

The store is stocked with pieces of art by local artists and non-locals, several of whom are relatives, confirming that this is indeed a family affair, and a very talented group at that.

Please join me in congratulating Sharon Clay, owner and operator of the Sweet Shoppe in Landis, Saskatchewan.

Some Hon. Members: Hear, hear!

Saskatchewan Woodworkers' Guild

Mr. Iwanchuk: — Mr. Speaker, about 25 years ago a group of people who had an interest in woodworking got together to talk and share ideas. From that first meeting grew the Saskatchewan Woodworkers' Guild, the oldest and largest guild in the country with over 250 members across the province.

Mr. Speaker, last weekend the Minister of Industry and Resources and I had the pleasure of attending the opening of the guild's 25th anniversary woodworking show, Wood 2003, being held this week in Innovation Place. Not only does Wood 2003 showcase the results of the guild members' labour but is also an opportunity for the members to demonstrate and share some of their woodworking skills and techniques.

But, Mr. Speaker, the guild doesn't only do good work. Guild members also donate materials and time — over 2,600 volunteer hours a year — to the community. Among other things, they provide specialized instruction to teachers and students in school wood shops.

Students are encouraged to show their work. Some are displaying at Wood 2003 and some even go on to careers in woodworking. Guild members carve pumpkins for UNICEF (United Nations Children's Fund) each fall and at Christmas they collect money for the Salvation Army and make toys for the Denny Carr Secret Santa campaign.

Mr. Speaker, it is people like the members of the Saskatchewan Woodworkers' Guild who ensure that Saskatchewan's future is wide open.

I ask my colleagues to join me in wishing them continued success in all their endeavours.

Some Hon. Members: Hear, hear!

**Newsask Community Futures
Youth Business Excellence Awards**

Ms. Draude: — Thank you, Mr. Speaker. I'm proud to report that several students from my constituency won awards in Newsask Community Futures Second Annual Youth Business Excellence Awards. The awards are open to students from grade 6 to 12 who submit business plans in developing their own enterprises for opportunities in rural Saskatchewan.

Andrea deGooijer of Naicam turned her 10-year passion for piano into a money-making venture and won the first place in the Business Venture Individual Category.

(13:45)

Sarah Rain Warsylewicz from Greenwater and Stacey Lutz of Porcupine Plain composite school won the Business Venture Group for Rain Works . This venture grew from Sarah's therapeutic activities following a lengthy and remarkable recuperation from an acquired brain injury she attained in a car accident eight years ago.

Students of Porcupine Plain's entrepreneurship class, instructed by teacher Anthony Lau, swept the Business Plan Group Category of the YBEX 2003 awards. Stacy Kwiatkowski, Jason Saufert, Derek Schultz took first place in Always Sideways Rally Club, Ltd., with their goal of offering entertainment for the entire family.

Amy Shuya and Christin Thorpe took second place with a plan to build a kennel service near Greenwater Provincial Park . Third place winners were Brock Norum, Nicole Kaziuk, and Brett Bohachewski, and Dallas Kohl's business, KBBK Agro Enterprises, which would supply farmers with the ultimate agro superstore.

Mr. Speaker, I would like this Assembly to join with me in congratulating this future generation of entrepreneurs.

Some Hon. Members: Hear, hear!

Transportation Week

Mr. Addley: — Mr. Speaker, I am pleased to inform the Assembly that the first week of June has been officially proclaimed as Transportation Week in Saskatchewan.

Mr. Speaker, transportation plays a fundamental role in the life of Saskatchewan and that is why in 1997 this government made the commitment to spend \$2.5 billion over 10 years on highways and transportation — a commitment we are well on track to meeting.

But, Mr. Speaker, I want to take this opportunity to recognize and acknowledge all the people of this province who work in the various aspects of the industry — be it air, water, road, or rail. I think sometimes we forget that without the efforts of everyone in the transportation industries — from snow removal crews to baggage handlers to ferry operators to train engineers, to name just a few — we'd be going nowhere and getting there fast.

And so I ask all the members of this Assembly to join me in applauding their contributions to this province and in thanking them for keeping us moving. Thank you, Mr. Speaker.

Some Hon. Members: Hear, hear!

Ed Thoen Inducted into Baseball Hall of Fame

Mr. Wiberg: — Thank you, Mr. Speaker. Mr. Speaker, it's my pleasure today to inform this Assembly of a man who has brought distinction to himself, his community, and the sport of baseball in Saskatchewan.

For more than two decades, Ed Thoen of Birch Hills was a starting pitcher, leading his teams to a great many victories. It is for this achievement that Ed will be inducted into the Saskatchewan Baseball Hall of Fame in North Battleford on August 16 of this year.

Mr. Speaker, Ed Thoen grew up on a farm south of Viscount, and at the age of 14 began his long and illustrious foray as a starting pitcher — from his local school at Logan, then on to Plunkett, Viscount, and Colonsay where he earned the incredible amount of \$300 per month to ply his pitching skills.

Ed moved to the Birch Hills area in 1947 and exhibited his pitching until 1958 for a local team in Hagen, Mr. Speaker, again for the princely sum of \$300 per month — a tidy sum in the 1940s and '50s for someone starting farming and raising a family.

Mr. Speaker, congratulations to Ed Thoen on being recognized for his pitching prowess. And I ask that all members of this Assembly join me in saluting him as he is inducted into Saskatchewan's Baseball Hall of Fame & Museum .

Some Hon. Members: Hear, hear!

ORAL QUESTIONS

Crown Corporation Accountability

Mr. Hermanson: — Thank you, Mr. Speaker. A column in today's paper suggests that even some in the NDP aren't happy with the lack of accountability from the Crowns.

Mr. Speaker, apparently nothing has changed since the SPUDCO (Saskatchewan Potato Utility Development Company) disaster. NDP Crowns are still losing millions of taxpayers' dollars on bad investments and the NDP continues to refuse to release the details about these bad investments. Mr. Speaker, Saskatchewan taxpayers are tired of the arrogance and lack of accountability of the NDP government when it comes to the Crowns and how they are spending taxpayers' money.

Mr. Speaker, I ask the Premier: when is his government going to stop covering up its multi-million-dollar losses on its bad Crown investments?

Some Hon. Members: Hear, hear!

Hon. Mr. Calvert: — Mr. Speaker, the great returns that are brought to the people of Saskatchewan from our Crown

enterprise are widely known. On occasion when there have been losses, they are, too, widely known.

The improvement, Mr. Speaker, if I may say, in accountability of our Crowns has been, I would argue, exceptional. Does that mean, Mr. Speaker, there is not yet room for improvement, not yet room for change? No, it does not mean that at all. And this government, and I'm sure the people of Saskatchewan who believe in their Crown utilities and their Crown enterprise, will want to find even better ways to be accountable for that enterprise.

Let me just ask this question though, Mr. Speaker, to the Leader of the Opposition. How would he propose to have accountability of utilities after they are sold off to private interests?

Some Hon. Members: Hear, hear!

Mr. Hermanson: — Thank you, Mr. Speaker. Well it's good to see the Premier practising to be the leader of the opposition when he has all his potential candidates up there in the gallery.

Some Hon. Members: Hear, hear!

Mr. Hermanson: — Now the NDP has started talking about making the Crowns more accountable. But that's exactly what they said after Channel Lake and nothing changed. That's exactly what the Premier said after SPUDCO and nothing has changed.

Mr. Speaker, the NDP still refuses to give straight answers on how much money they are losing — losing all over the world. In fact earlier in this session the Minister of Crown Investments Corporation said he had no intention of answering our questions about how much money the Crowns were losing on bad foreign investments under his watch.

Mr. Speaker, here's what the NDP doesn't understand. It's not their money; it's not the Premier's money or the Minister of Crown Investments Corporation money. It's the taxpayers' money that they're losing.

Mr. Speaker, the taxpayers deserve answers. Will the minister provide a full accounting of how much money the Crowns have lost on bad investments over the last five years?

Some Hon. Members: Hear, hear!

Mr. Speaker: — Order. Order. I would just remind all members, tempting as it might be, not to involve anybody in the gallery in the debate.

Hon. Mr. Calvert: — Mr. Speaker, the Leader of the Opposition full well knows that there is a wide, public reporting of all of the profits and benefits of the Crowns as well as the losses. We've spent considerable time in this session describing and debating some of the losses that have been accrued by some of the Crown enterprise. There's no mystery about this.

Mr. Speaker, the question is . . . The Leader of the Opposition wants to remind this government about who are the true owners of these Crown enterprises. We know who the enterprise

owners are; they're the people of Saskatchewan. That's the owners.

And so I challenge him then to be true, to be true to the commitment he made in the campaign last time around. He said before any Crown enterprise would be sold off in this province, he would go to a referendum, to the owners of these Crown enterprises, to ask those owners, should they or should they not be sold.

I ask him — I challenge him — to again declare that today in this House. If he should form government, will his new government go to the people of Saskatchewan before any privatization of Crown enterprise in Saskatchewan?

Some Hon. Members: Hear, hear!

Mr. Hermanson: — Mr. Speaker, I don't know, maybe the Premier has fallen asleep in his own caucus meetings because it appears that there are some NDP members that are suggesting there should be more accountability from the Crown corporations. In fact, some of them are suggesting that they should fire at least three of the five major Crown . . .

The Speaker: — Order, please. Order, please. Order, order. Order, please.

Mr. Hermanson: — Thank you, Mr. Speaker. As I was mentioning, there are a few of the NDP members that are suggesting the government should fire at least three of the five major Crown presidents. Now, Mr. Speaker, they're not saying which three. We're wondering which ones they're considering. I guess perhaps if they just say three out of five, they hope that that will keep all five of them on their toes.

Mr. Speaker, I ask the Premier if he knows which three Crown corporation presidents is the NDP considering firing?

Some Hon. Members: Hear, hear!

Hon. Mr. Calvert: — Mr. Speaker, the question today, given the results in Manitoba yesterday, that is being asked by the people of Saskatchewan, are which of those Sask Party MLAs (Member of the Legislative Assembly) are we going to fire in the next provincial election? That's the question.

Some Hon. Members: Hear, hear!

Hon. Mr. Calvert: — The Leader of the Opposition, the Leader of the Opposition and his research wing at the Regina *Leader-Post* might want to answer these questions.

He wants accountability. We'll be accountability for all the activity of government and all the activity in the Crown sector. All he needs to be accountable for is his own caucus and his own political party. That's all he needs to be accountable for.

Will he be accountable therefore for the member from Weyburn who stood up in this House this week — I sat right here; I heard it; all the members heard it — when the member of Weyburn stood up and said they'd be fully supportive of privatizing liquor distribution in this province. Well does he accept that position?

Is he accountable for his member from Kindersley who yesterday in this House — I sat right here; I listened very carefully to the member of Kindersley — who, like his leader, will not now commit to any referendum in the unlikely circumstance they ever form government. Let's have the Leader of the Opposition show a little bit of accountability.

Some Hon. Members: Hear, hear!

Mr. Hermanson: — Thank you, Mr. Speaker. Now it's truly amazing when we get a little peek into the NDP caucus meetings, Mr. Speaker. And let me tell you what that recent peek was into the NDP caucus meeting.

Mr. Speaker, Don Ching, head of SaskTel, was standing up at the front of the caucus meeting. The Premier was sitting quietly at the back of the caucus meeting. Now that has some disturbing symbolism in itself.

Mr. Speaker, Mr. Ching refuses to answer questions about the Crown corporations, in particular SaskTel, will not tell the NDP caucus what he's doing at SaskTel. And the Premier sits at the back of the meeting and refuses to demand answers from Mr. Ching.

Mr. Speaker, the ineffectiveness of our Premier and your cabinet and caucus means that the Crown corporations are getting away without reporting to the people of Saskatchewan how they are losing taxpayers' money.

Mr. Speaker, will the Premier order Don Ching and his minister for Crown Investments Corporation to start answering questions and to start answering those questions today?

Some Hon. Members: Hear, hear!

Hon. Mr. Calvert: — Mr. Speaker, I want to repeat what I said earlier. There has been tremendous improvement in the accountability and the transparency of public enterprise in the Crown corporations in our province. But is there room for further improvement? Yes, there is.

And this is a government, this is a government who represents the will of Saskatchewan people — that those public enterprises should be strong, providing service at good rates for the people of Saskatchewan. And we'll work with the people of Saskatchewan, with those Crowns, to find even further measures of accountability.

Now the Leader of the Opposition stands up and he wants to talk about peeking — peeking, I think he said. He peeked over here. Well I'll tell you who's peaked — that party. They peaked a few months ago and it's downhill from now.

And then, Mr. Speaker, get this. Then he stands up and like he somehow thinks he's had a little peek into the caucus meeting of the government caucus. He thinks he's had a little peek because he reads the research wing there in the *Leader-Post*. Well I'll tell you, I wish I'd had a little peek into his caucus meeting when he's trying to explain why he's firing Grant Schmidt.

Some Hon. Members: Hear, hear!

Crown Investments Corporation of Saskatchewan Investments

Mr. Wall: — Well, Mr. Speaker, you can tell that the Premier is all talk and no walk because if anything, what he just said, were true, he would have had the courage to call an election in the province of Saskatchewan. But he didn't do it, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Wall: — Mr. Speaker, he says there's room for improvement. We want to see if they'll accept the room for improvement today.

We know, Mr. Speaker, that the NDP have gambled \$24 million on a dot-com in Atlanta, Georgia called Retx . . .

The Speaker: — Order, please. Order, please. Order please, members.

Mr. Wall: — Thank you, Mr. Speaker. We know the NDP have finally admitted that they have lost about half or more than half of the 24 million taxpayers' dollars they risked in a dot-com in Atlanta, Georgia through SaskTel.

The question they haven't answered, the question we ask today: how much more money have the NDP approved to be risked in this Atlanta-based dot-com?

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Thank you very much, Mr. Speaker. Well I've answered that question a number of times in the Assembly, Mr. Speaker.

Mr. Speaker, we've been clear, we've been clear, Mr. Speaker, about SaskTel and their investments. SaskTel will continue to diversify, Mr. Speaker, so that they can ensure that they can provide service to people across our province, Mr. Speaker.

They are in a world that is very, very competitive. They will compete and provide choices for the people of Saskatchewan. They will provide as the Premier indicated, Mr. Speaker, high-quality service at the most affordable rates right across our province, Mr. Speaker.

(14:00)

Mr. Wall: — Mr. Speaker, how much money did SaskTel lose on its \$8.1 million, of taxpayers' dollars, gamble on the Ontario-based agdealer.com?

Hon. Mr. Sonntag: — Well thank you, Mr. Speaker. Well the member is now one of . . . is a member of the Crown Corporations Committee, Mr. Speaker, and they are meeting weekly as I understand it; as I believe tomorrow probably.

Mr. Speaker, these questions are very appropriately asked at Crown Corporations, that level of detail. But, Mr. Speaker, let me generally answer for . . . as the minister responsible, from a policy perspective, Mr. Speaker.

The Crown corporation, SaskTel, and all of our Crown

corporations, have been forced into a world of, Mr. Speaker, of competition. They've been forced into a world where they have to diversify so that they can continue to provide high-quality service at the affordable rates that they have provided for the years past, Mr. Speaker. They want to provide those services at the affordable rates for years into the future.

And the only way they are able to do that, Mr. Speaker, is to make the very difficult decisions that they make; that is to make investments outside of our province so they can provide these services, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Wall: — Well, Mr. Speaker, Mr. Speaker, the . . . What we know now today after the article in today's *Leader-Post* is that Don Ching won't even answer questions that the government poses to him and yet that's where we're supposed to go for the answers to the questions. That minister is responsible to the taxpayers. He ran for office. That Premier has promised to be more accountable.

Here's another one, Mr. Speaker. We know that the NDP have risked about 20 to 60 million taxpayers' dollars to develop their cable TV venture at SaskTel. How much more money has the NDP budgeted to risk on this TV venture?

Hon. Mr. Sonntag: — Mr. Speaker, to listen to that member from the Sask Party from Swift Current talk about SaskTel, you would think that SaskTel operates the worst telephone company in the entire world, Mr. Speaker. And that's what they think and that's what the people of Saskatchewan . . . they would want the people of Saskatchewan to believe, Mr. Speaker. That's what they'd want the people in Saskatchewan to believe.

I look at *The Globe and Mail*, Mr. Speaker, of Saturday, May 24, and I look at the caption that says, Canadian phone bills cheaper than in the US (United States).

But do you know what, Mr. Speaker? It goes on, Mr. Speaker. I look at Chicago where the average monthly bill is sixty-eight sixteen. I look at, Mr. Speaker, at Toronto where the average bill is thirty-five sixty-eight. Do you know where the cheapest monthly phone bill in all of Canada is, Mr. Speaker? Right here in Regina. It's at twenty-six eighty-three right here in Regina, the service provided by SaskTel — the corporation that they criticize on a daily basis, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Wall: — Well, Mr. Speaker, Mr. Speaker, the minister has just underscored for the people of the province why the Sask Party position on the Crowns is so popular. We have said time and time again that SaskTel's greatest success is when its focus is on Saskatchewan, Mr. Speaker. That's what we've said.

How much better could it be today, Mr. Speaker, had they not lost \$60 million last year alone on NDP out-of-province schemes in Australia and Georgia and Tennessee? How much better could it be?

Mr. Speaker, on Monday the Sask Party asked the minister about the millions of taxpayers' dollars the NDP lost on

FarmGro Organics, that mill that is currently in bankruptcy. The minister didn't answer the question; he didn't answer the question.

To the minister: on the FarmGro Organics bankruptcy, how much money have the taxpayers lost — not how much was invested — how much money have the taxpayers lost on that NDP deal?

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Well there were a dozen questions in that question, Mr. Speaker, but first of all let me say I want to correct myself in my answer on the last question, Mr. Speaker, with respect to SaskTel. I said they had the lowest rates in Canada. Mr. Speaker, SaskTel has the lowest rates in North America, Mr. Speaker — the lowest rates in North America.

And as it pertains to FarmGro, Mr. Speaker, I was clear in the House the other day and was clear also . . . or the CIC (Crown Investments Corporation of Saskatchewan) officials were clear in disclosing all of the detail as it pertains to FarmGro outside to the public and to the media, Mr. Speaker. The investment, Mr. Speaker, was at something over \$6 million, roughly \$6.5 million, Mr. Speaker. The recovery was \$3.4 million, Mr. Speaker. CIC's investment was something . . . A loss, Mr. Speaker, on this investment in actual dollars was something over \$4 million, Mr. Speaker.

But having said that, Mr. Speaker, the investment continues to operate, continues to function. Mr. Speaker, we are looking at a growth in the number of jobs out there. They will continue to mill organic flour and other cereals so that will maintain jobs out in that community, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Wall: — Well, Mr. Speaker, at least we're getting, sort of, something answers now from the minister on that particular investment. So let's try our luck on one more.

Mr. Speaker, we know the NDP have committed \$20 million to the ethanol project at Belle Plaine. Now we also know that the CIC president, Frank Hart, has confirmed that \$25,000 has been spent by the NDP with Scotia Capital to review the deal between the government and Broe Companies, the private sector partner on this deal — except, Mr. Speaker, that no deal existed when the review would have taken place. Unless, Mr. Speaker, unless there was a deal when the review took place last year and the deal involved the NDP using taxpayers to guarantee the debt of that ethanol project — to guarantee the debt of that ethanol project, all or some of it.

Mr. Speaker, that is the question of the minister: of the \$25,000 taxpayer-funded study done by Scotia Capital on this ethanol deal, will the minister confirm that that original deal involved the taxpayers, the taxpayers guaranteeing the debt on this project?

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Thank you, Mr. Speaker. Mr. Speaker, as it pertains to the investment out there at Belle Plaine, as it

pertains to the ethanol development, Mr. Speaker, we said that we would keep the public informed on this. That's what we have done. Mr. Speaker, we said we would try to achieve the best possible deal that we possibly could for the taxpayers of Saskatchewan and that's what we would do, Mr. Speaker.

Mr. Speaker, the deal, as we announced, still stands. But having said that, having said that, Mr. Speaker, I want to refer to — I don't have it right here in front of me — but I want to refer to what the member from Lloydminster said in an article in the *Lloydminster Booster*, who said that the government was doing the right thing, Mr. Speaker, by taking their time and putting together a deal, Mr. Speaker; a deal that would be good for the people of Saskatchewan is what that member said, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Wall: — Well thank you, Mr. Speaker. I'd like to remind the minister what another member of this Legislative Assembly said about this very subject. He happens to be the Premier today; then he was the member for Moose Jaw North. What did he say about a Belle Plaine deal very, very similar in scale anyway to this particular one in terms of timing, also of the life of that government?

Well, Mr. Speaker, the headline of that article says, "New Democrats want all the facts on Belle Plaine." And here's what the Premier said at the time, it's very strange the deal would be announced without the details in place. He says the New Democrats want the details.

He promised it back in the late 1980s, Mr. Speaker. In the wake of the SPUDCO scandal he promised honesty and forthrightness again — again. Mr. Speaker, he's got a chance to now deliver on a 13-year-old promise that he's made.

Mr. Speaker, will he direct the minister to clearly outline the specific details of the arrangement with Broe on this particular project?

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Mr. Speaker, we have outlined in detail the specifics of the deal, Mr. Speaker. We've outlined in detail the specifics of the deal.

Mr. Speaker, let me say again, let me say again . . . I'm going to talk about and answer the question by saying, Mr. Speaker, let's talk about the big picture. You've heard the questions, one after another, Mr. Speaker, where they try and select — cherry-pick, Mr. Speaker — losses. That's what they try and do — cherry-pick.

Mr. Speaker, let's remember, let's remember that our Crowns last year, through Crown Investments Corporation, through the CIC, throughout the industrial incorporated investments, Mr. Speaker, returned on the investments across our province over \$11 million.

Mr. Speaker, the Crowns as a whole, through its subsidiaries, returned to the people of Saskatchewan for services here in Saskatchewan, \$300 million, Mr. Speaker.

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Over the last 10 years, they've improved services for the people of Saskatchewan. They employed 9,000 people and returned \$1.6 billion, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Wall: — Mr. Speaker, Mr. Speaker, we've cherry-picked about seven or eight projects already with still more to come, Mr. Speaker.

Specifically, yesterday SaskEnergy announced it has finalized a deal to invest in \$60 million in Nova Scotia, Mr. Speaker. So the same utility that's currently jacking up rates here in the province of Saskatchewan, they've announced yesterday they're going to invest \$60 million to grow the province of Nova Scotia, Mr. Speaker. That's, Mr. Speaker, \$60 million of taxpayers' dollars that will be gambled in yet another, another NDP investment with such a stellar track record.

Mr. Speaker, the fact of the matter is this, the NDP have returned to the people of the province of Saskatchewan not a single dime on their out-of-province investments since 1995.

The Speaker: — Order, please. Order, please. Once again we've reached a stage here where we seem to have about six or seven debates taking place simultaneously, and I would ask members to pay attention to the questioner and to the respondent.

Mr. Wall: — Mr. Speaker, the minister responsible for SPUDCO wanting to get into this debate, that is like a turkey wishing for Thanksgiving, Mr. Speaker. It's absolutely unbelievable.

The fact is this. Since 1995, the NDP have not made . . .

The Speaker: — Order, order. Order. Order. Once again, the member for Swift Current has the floor.

Mr. Wall: — Mr. Speaker, the NDP haven't made a single dime on their out-of-province investments since 1995. All these millions of taxpayers' dollars gambled.

Will the minister, will the minister undertake today to table or make public the terms, the specific terms of this agreement and table the due diligence of this \$60 million gamble in Nova Scotia?

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Thank you, Mr. Speaker. Well once again that member from Swift Current from the Sask Party completely misrepresents the facts when he talks about the investment by SaskEnergy in Heritage Gas in Nova Scotia.

And may I point out, Mr. Speaker, that the Conservative Premier of Nova Scotia, the Conservative Premier, who apparently there may be some relationship with their philosophy over there, talks about, Mr. Speaker, in glowing terms, SaskEnergy, Mr. Speaker. He talks about it as a Crown corporation . . . as a utility that operates as one of the best

energy utilities in Canada, Mr. Speaker. And that member suggests and infers that SaskEnergy is going to lay out \$60 million without, Mr. Speaker, any customers on line. Nothing could be further from the truth.

Mr. Speaker, Mr. Speaker, SaskEnergy is going to build as you buy on this project, Mr. Speaker. Therefore there will be no construction until they have customers; there will be no — virtually no — expenditures of dollars, Mr. Speaker, until customers are signed up, Mr. Speaker. Unlike what they did in the 1980s where they built and built and built.

Some Hon. Members: Hear, hear!

Mr. Wall: — Well, Mr. Speaker, Mr. Speaker, we've heard this story before and we've heard it from this minister. We heard it on SaskTel *Max*. We heard it on their TV scheme that didn't work, Mr. Speaker.

We heard it from the member for P.A. (Prince Albert)-Northcote, the demoted minister over there, on the SPUDCO file, Mr. Speaker. We've heard it even from that minister. Six years of deception on the SPUDCO file, 28 million loss, scandal after scandal. He'll have to forgive the people of the province and so will the Premier if they just don't believe him on the Nova Scotia deal.

Some Hon. Members: Hear, hear!

Mr. Wall: — If that minister, Mr. Speaker, is so confident about this deal, then will he stand up today and agree to table the due diligence, and report back to the people of Saskatchewan, and assure them that this is not yet the latest NDP boondoggle with their money?

Some Hon. Members: Hear, hear!

Hon. Mr. Sonntag: — Well, Mr. Speaker, Mr. Speaker, you'll have to forgive me, Mr. Speaker, if I don't always believe what that member says when he sits in the dead of night with his glue and his tape, Mr. Speaker; misquotes this minister, Mr. Speaker, completely misquotes this minister and then apologizes for a punctuation error, Mr. Speaker. Please forgive me, Mr. Speaker, but I don't believe that member sometime, Mr. Speaker.

Mr. Speaker, the point is — the point is on this, on all of this with our Crown corporations, Mr. Speaker — is that they provide high-quality service, very affordable rates, lower rates, Mr. Speaker amongst . . . (inaudible) . . . all of Canada. They employ over 9,000 people. They partner with over 600 businesses. They buy goods and services from over 12,000 businesses across our province.

Our view — and he will hear it over and over and over and over again — our view is that we will maintain these Crowns to provide their services. Their view is they will sell those Crowns, full stop, period.

Some Hon. Members: Hear, hear!

The Speaker: — Order. Order. Order.

(14:15)

MINISTERIAL STATEMENTS

Telehealth Network Expansion

Hon. Mr. Nilson: — Mr. Speaker, I'm pleased to rise today in this Assembly to announce a major expansion of Saskatchewan Health's Telehealth network to five new sites in southern Saskatchewan.

Some Hon. Members: Hear, hear!

Hon. Mr. Nilson: — This is a very important provincial government funding announcement, Mr. Speaker. Our government is investing one and a half million dollars for the expansion of Telehealth services in the regional health authorities across southern Saskatchewan. Mr. Speaker, the Telehealth network is a key initiative of our government's Action Plan for Saskatchewan Health Care that the Premier and I were pleased to announce in December 2001.

Mr. Speaker, we know that the size of our province and the long distances that exist between our communities can pose some significant challenges to how we live, work, and deliver services. It is those distances and the remoteness of some of our communities that make it more difficult to provide the best access to specialized health care services for all patients. Mr. Speaker, those distances also cause isolation for health care providers and present challenges in retaining and recruiting health care professionals.

Our government is responding to those challenges by announcing the expansion of the Telehealth network. We are joining with our health region partners, Mr. Speaker, and the Telehealth Saskatchewan Management Committee to announce the expansion today of Telehealth services to five additional regional health authorities across the province. They are: Sunrise, Yorkton; Five Hills, Moose Jaw; Cypress, Swift Current; Heartland, Kindersley; and Sun Country, Weyburn.

In addition, we have a new Telehealth suite at the Regina General Hospital. This new site in the Regina Qu'Appelle Health Region will act as the anchor for the southern locations.

Mr. Speaker, I'm proud to say that in total we now have 17 sites in 15 communities; a provincial network that stretches from remote northern areas of our province to central and southern rural communities.

Funding for today's network expansion is part of a collaborative initiative with the federal government, the provincial government, and the Saskatoon Regional Health Authority. One million dollars came from a Health Canada federal grant, \$200,000 from the regional health authority, and our provincial contribution is 1.5 million. Our government is very pleased to work with these partners in support of Telehealth technology in Saskatchewan.

Mr. Speaker, our immediate goal is to establish a least one Telehealth site in each region. In our government's action plan we set a long-term goal to have a total of 24 sites in the province. These sites, along with the existing sites and nursing stations in Pinehouse Lake and Beauval, and the site at the Kinsmen Children's Centre in Saskatoon, will bring us in the

future to 27 sites in 23 communities. Mr. Speaker, we are making real, great progress in reaching this goal.

This is a viable strategy to improve access to quality health care in Saskatchewan while also improving the efficiency of specialized health care services. Using the latest communication and multi-media technologies, Mr. Speaker, the Telehealth Saskatchewan network is able to provide a broad spectrum of services.

People who normally would have to travel great distances to see a specialist are able to save time and money by having a remote consultation via Telehealth. Health care workers and the public are able to keep up with the latest developments in health care without leaving their communities.

Another very important aspect of adding Telehealth sites to the network, Mr. Speaker, is our goal to support rural doctors and health care providers by introducing technology that will allow them to stay in touch with their peers in larger centres and to participate in educational sessions.

One of the challenges that all health care providers face in rural areas is feeling cut off from colleagues as well as from research and educational opportunities. Telehealth has the potential to reduce isolation. It is our hope that through Telehealth education, doctors may be encouraged to stay for longer periods of time in remote and rural areas because they can stay connected with the latest procedures and techniques. In this way, Mr. Speaker, we add to our initiatives to revitalize and sustain our rural communities.

Mr. Speaker, we have some very positive statistics on the usage of Telehealth services in Saskatchewan. Approximately 9,500 participants have attended 670 education sessions. This includes health providers as well as community members. Nearly 1,000 patients have been seen during 390 specialist clinics.

Another use for Telehealth, Mr. Speaker, and one that is already in use here in Regina, is connecting medical residents who are practising in Regina hospitals to their colleagues in Saskatoon. Through Telehealth, Regina's medical residents are able to participate in resident rounds, grand rounds, and other educational opportunities with their Saskatoon peers.

Telehealth also provides information on preventative care and health promotion to patients and their families, Mr. Speaker. If patients have good access to health information, particularly if it helps them to understand their illness or the treatment recommended by their doctor, they will have a better chance for improved health. If they are able to conveniently attend educational sessions by Telehealth link in their own communities for such things as diabetes, nutrition, parenting, and fetal alcohol syndrome assistance, both individuals and communities as a whole will benefit by having better health outcomes.

Given all of these benefits, Mr. Speaker, it is clear that the Telehealth Saskatchewan network, and that the new sites we are announcing today as part of the expansion to this valuable network, are an important part of our health care system in Saskatchewan. It is a program that greatly adds to an already strong foundation of health care services and programs in our

province.

Mr. Speaker, it is a program that fits well with the direction this government is taking to improve and secure health care for the future in this province.

Thank you, Mr. Speaker.

Some Hon. Members: Hear, hear!

Mr. Gantefer: — Thank you, Mr. Speaker. It's a pleasure to rise to respond to the ministerial statement in regard to the expansion of the Telehealth network in Saskatchewan.

Mr. Speaker, one of the things that we are starting to understand more and more in this day and age — and it's more particularly difficult and challenging for those of us of a certain age — is the important possibilities of the digital age and the advances made because of electronics and all of the things itinerant around the communications industry.

Mr. Speaker, as a part of my role of opposition Health critic, I've travelled to many centres. And one of the peak experiences that I've witnessed is being in Saskatoon and witnessing how the Telehealth network was linking to remote northern communities, nursing stations, and other facilities. And really the absolute possibility now because of the digital networks, the ability to transfer real-time advanced medical information is really quite astonishing, Mr. Speaker.

Mr. Speaker, I think that these advances in technology certainly create the opportunity and indeed perhaps even the responsibility to make sure that we use these new tools that are available only to us in the last very few years to the very best advantage possible. And certainly to link electronically with the digital network, and in a way that's specific to be able to have two-way, instantaneous communications as well as data transfer of imaging and test results is a very, very important initiative by the health system in Saskatchewan.

I believe Saskatoon pioneered this technology and were very instrumental in setting up some of the protocols, ironing out some of the ways the system would operate and making recommendations on improvements to the system. And so people from the Saskatoon region and the health system there are to be congratulated for their foresight and their initiative.

Certainly we very much support and applaud the expansion of this network across the whole province, and we support the reality that every health region in the province should be . . . is linked as soon as is possible to this whole Telehealth network.

I'm also mindful of a visit in . . . when I was here in Regina, where they were talking about doing grand rounds electronically and digitally. And I thought well that's kind of interesting, it must be happening within this facility. But in reality I believe, if I don't remember correct, they were linking physicians in Regina to physicians in Texas and physicians in Europe. And they were doing consults on some diagnosis that were very difficult to make. And so the possibilities of using the digital aids are very exciting and certainly show some real promise into the future.

So, Mr. Speaker, we support this initiative. We think it's important, and it is something that is going to be a real tool in making sure that we have quality health care, not only in parts of this province but able to link this province with the very best resources in the world. Thank you, Mr. Speaker.

MOTIONS

Leave of Absence

Mr. D'Autremont: — Thank you, Mr. Speaker. Mr. Speaker, with leave to move a motion dealing with an absence in the Assembly.

Leave granted.

Mr. D'Autremont: — Thank you, Mr. Speaker. I move, seconded by the member of Swift Current, that by leave of the Assembly:

That leave of absence be granted to the member for Canora-Pelly for Monday, June 9 to Friday, June 13, 2003 inclusive to attend the CPA Wilton Park Conference at Wilton Park, England on behalf of this Assembly.

Motion agreed to.

ORDERS OF THE DAY

WRITTEN QUESTIONS

Mr. Yates: — Thank you, Mr. Speaker. I am extremely pleased today to stand on behalf of the government and table responses to written questions no. 649 through 670 inclusive.

The Speaker: — Responses to questions 649 to 670 have been submitted.

(14:30)

GOVERNMENT ORDERS

COMMITTEE OF THE WHOLE

Bill No. 13 — The Parks Amendment Act, 2003

The Chair: — I recognize the minister to introduce his officials.

Hon. Mr. Belanger: — Thank you very much, Mr. Chairman. To my immediate right is Ken Lozinsky, and Ken is the acting director of our parks branch. And then we have, directly behind Ken, Bruce Martin, who is a policy analyst.

Clause 1

Mr. Weekes: — Thank you, Mr. Chair. Welcome to the minister and your officials. I have a few questions concerning Bill 13, the Act to amend The Parks Act.

First set of questions really revolves around the changing from a one, permitting a one-year lease up to a maximum of five years. Mr. Chair, I'd like to ask the minister right now, what is

the formula . . . or what, concerning the cost of the leases to an individual ranchers, what is it now for the one year? And also could . . . then you could elaborate on the cost to the rancher for one to five years after the Bill has been passed, and how is that price determined.

Hon. Mr. Belanger: — Okay. Thank you very much, Mr. Chairman. Just to point out that the reason why the permit length is being extended is to allow for activities such as grazing. On a one-year permit, it's considered to be insufficient in length to allow the permit holder to make the kind of improvements such as fencing and water access that promote environmentally responsible grazing practices.

And we determine the permit — it's not a lease; it's a permit — we determine the permit based on the number of cows. So it's really on the animal unit that we determine the permit rules and processes. And the one-year agreement versus the five-year agreement, there won't be no price change; it'll remain consistent. So really it's just a matter of looking at the . . . at a longer term planning time frame. So again, there'll be no change in the cost.

Mr. Weekes: — Thank you. Again to the minister, concerning the cost of improvements, fence, water, and access, I'd just like the minister to clarify, if a producer goes and puts up a permanent fence — what I call a permanent fence is a four- or five-wire fence — and after five years they may not have . . . may not be allowed to access that land, may not be able to get a permit, who owns the fence? What's required? Is the producer . . . Would a producer be requested to take the fence down if it's a permanent fence? And also at issue around electric fences and things like that.

Also the second part of the question really is around dugouts. Would there be dugouts allowed to be dug on this land? And again, who would pay for the digging of the dugouts and wells, and any access of water as well?

And also in reference to access, exactly what does the Bill mean by access to this land and how does that pertain to a permit holder?

Hon. Mr. Belanger: — Thank you very much for the question. Just to point out that the Saskatchewan Environment does not assume any responsibility for any of the improvements. If there are improvements to be made on the particular parcel of land that we're permitting, then the permittee would be responsible for all the improvements that he or she wishes to make.

I think it would be advantageous to advise the opposition that some of these permits run from 30 or 40 years, so every year we've got to kind of renew these permits. So again, from our perspective, having five-year permits is much more practical to, you know, to undertake in reference to working very closely with the potential permittees.

In reference to the dugouts, we don't have any major issue with dugouts. There are no dugouts currently in some of the areas that we do permit to use. Many times some of the areas that we're talking about they have a natural water source, so it's not really a major issue. And again, if in the event a five-year permit was structured, then if they built a bunch of fences or

they built a well and after a few years they decided to get out of this, then they could either sell those assets or take the assets with them in the event that they want to get out of farming. If they want to transfer it to somebody then, you know, they can certainly negotiate a value for some of the improvements that they have on that particular site of land, or they can withdraw the improvements and sell them accordingly.

So again very quickly, Saskatchewan Environment is not responsible for any improvements. And in the event that the permittee does not want to continue farming, then he or she can either sell the improvements when they transfer the permit or they could simply withdraw the improvements and sell them as they wish.

Mr. Weekes: — Thank you. To the minister, thank you for that answer. I guess my next question is more concerning my first question. You, the minister, had stated that many of these permits are long-term permits but my question goes to who is eligible to apply. And if a rancher has had these permits for a number of years, once the rancher has the permit, is it an automatic rollover for another term of five years or do they run the risk of losing the permit? What is the process of other people applying for these permits?

And in the case of a rancher giving up the permit, what is the conditions and the rules around other ranchers applying for the permits?

Hon. Mr. Belanger: — Thank you very much for the question. Just to point out again that as part of The Parks Amendment Act, there are some grazers that use some of the park lands. So I just want to, you know, just to remind the opposition that this is in reference to park lands where we have grazing permits that, you know, that we allow and this is not of course a province-wide issue.

But I'd point out that each year the permittee would get the permit issued in their name. And it's been going on for a number of years. And there's only once . . . Again, I'd point out there's only been a few grazers that really operated on our provincial parks. And this five-year deal gives them a bit of time . . . a better time frame. It's meant to improve that.

And there's only once where we've had a competing interest of one long-term . . . a grazer permittee that had another person that was applying for his particular area. And that's where we go into a formula that has been developed by both Ag and Food and PFRA (Prairie Farm Rehabilitation Administration) that talks about distance from the market and whether grazing is their primary activity and so on and so forth. So that formula is usually what kicks in and what we use in the event that there's been a dispute or another application for a certain area. This has only happened once.

And again, if you look at people that may be interested in grazing in the park system, that we do have a waiting list, and we advise folks that wish to participate in this grazing permit that they will put them on a waiting list. And we usually don't generally kick out a permittee that has been operating in a certain area for, you know, for a number of years. We recognize that they have, you know, they've satisfied the formula, they've had a long history, and those are some of the things that we take

into account.

So again very quickly, there are very few grazers around the provincial park system. Many of those grazers have been there for a number of years. If there's a competing interest, but it's only happened once, we use a formula that's been designed by Ag and Food and PFRA. And again, the five-year time frame versus the one-year program is intended to have the grazers that have permits now to have a comfort of time that they're able to operate and satisfy some of their needs when it comes to grazing.

Mr. Weekes: — Thank you. To the minister, a few questions concerning some of the other transactions that are in this Bill. Section 2 and 24 is amended under The Highways and Transportation Act. What are the changes being done here?

Hon. Mr. Belanger: — Thank you very much. This is a minor housekeeping item. There's a change of the name from The Highways and Transportation Act and substituting The Highways and Transportation Act, 1997. So really all that was done there is just a minor technical change where we added the 1997 into the Act as the Highways and Transportation folks changed their name. So we changed it according to our Act.

Mr. Weekes: — Thank you. Also, section 27 is amended under The Environmental Management and Protection Act. And what is the changes there?

(14:45)

Hon. Mr. Belanger: — Again the same principle. As you notice, it says The Environmental Management And Protection Act. And what we've done is we've changed that Act to really quite frankly read The Environmental Management and Protection Act, 2002. Again that's technical in nature, same as the previous question.

Mr. Weekes: — Thank you. This Bill updates a number of land descriptions in parks and I'd just like to ask you questions concerning two of them: what is being changed in Lac La Ronge Provincial Park, and why, and what changes are being made to Meadow Lake Provincial Park, and why?

Hon. Mr. Belanger: — Thank you very much. First on the amendments to the Lac La Ronge Indian Band, what the amendment does, it facilitates a land exchange between the La Ronge Indian Band in which the land will be taken out from the La Ronge Provincial Park and will be added to the community of Sucker River.

The park land will be exchanged for some of the reserve land at Bittern Lake. So really what we are doing here is we are exchanging land around Sucker River for land at Bittern Lake, where the land at Bittern Lake will become part of the park and the land around the community of Sucker River — because they need to expand, which is a provincial park now — will be used for future community growth.

The community of Sucker River and the La Ronge Indian Band has requested that land be withdrawn from the provincial park to be added to their reserve. And the reserve right now is completely surrounded by a park . . . or by the park, a lake, and

a highway. And what we do in an exchange of land, it'll allow the reserve to expand its land base and to accommodate future housing needs for the growing population of Sucker River.

And secondly in reference to the Meadow Lake area, a 15-hectare — which is a 37-acre — area of agricultural land at Meadow Lake Provincial Park will be removed. It is not suitable for park purposes, and the Waterhen River cuts off a piece of this park land from the rest of the park. So really it's a twofold point in reference to Meadow Lake. Again, it's not suitable for park purposes and the Waterhen River does cut off this piece. It's kind of a piece of land that's off to the side. And those are the two amendments in reference to Sucker River and in reference to Meadow Lake.

Mr. Weekes: — Thank you, Mr. Minister. What is the role and responsibilities of INAC (Indian and Northern Affairs Canada) concerning these transactions?

Hon. Mr. Belanger: — Thank you very much for the question. I just want to point out that INAC did not play a very strong role. Obviously we have certain protocols that we have to follow when we're talking about designating First Nations land and those protocols will be followed.

INAC was not the lead in this regard. They certainly want to be part of the process in terms of watching to make sure that we designate these lands as they should be designated.

The negotiations were primarily from the La Ronge Indian Band and working in conjunction with SERM (Saskatchewan Environment and Resource Management) and certainly working with Northern Affairs.

So Northern Affairs and SERM and the La Ronge Indian Band worked together on this particular project. We moved it forward. We followed a protocol with INAC because INAC has to make sure that the land that we're withdrawing from Bittern Lake are okay to be transferred to the La Ronge park and that the land at Sucker River that's currently under the La Ronge park becomes part of the First Nations band land.

So they're aware of all of the changes that are in place. And they're primarily facilitating their needs or their issues to make sure that they're able to designate these lands accordingly.

Mr. Weekes: — Mr. Chair, I'd just like to thank the minister and his officials. That's all the questions I have today.

Clause 1 agreed to.

Clauses 2 to 12 inclusive agreed to.

The committee agreed to report the Bill.

**Bill No. 28 — The Health Information Protection
Amendment Act, 2003**

Clause 1

The Chair: — I recognize the minister to introduce his officials.

Hon. Mr. Nilson: — Thank you, Mr. Chair. I'm pleased to

have with me, to my left, Duane Mombourquette who's the director of health planning, policy and planning branch. And to my right, Phil Moleski who's the director of the IT (information technology) development and operations and the corporate information and technology branch.

Mr. Gantefer: — Thank you, Mr. Deputy Speaker. And, Minister, welcome to your officials this afternoon.

Mr. Minister, the health protection Act of course is a very important amendment to the general legislation that I think it be fair to say ran into a few stumbling blocks in terms of its practical implementation when it was first enacted and hence the reason for not having it proclaimed.

Minister, can you describe briefly is this legislation . . . When you sort of wed the two pieces of legislation, is this designed to give the responsibility, the authority, the ownership of a medical health record to the individual who that record pertains to?

Hon. Mr. Nilson: — I'll answer that question, which is a very good question, this way. The custody and control of information will be in the hands of trustees and they will have a fiduciary duty to the individuals to manage those records appropriately. So the relationship is that the individual patient can rely on the fiduciary responsibilities of the trustees to manage this information.

And so that's the structure. So it has elements of the individual clearly knowing and monitoring what's happening, but it also has elements that allow for the trustee to live up to their fiduciary responsibilities.

Mr. Gantefer: — Thank you, Minister. In regard to the relationship then between the individual who the record pertains to and the trustee, is there any relationship that's direct in terms of the patient — if you like, for lack of a better description — being able to set certain parameters on the trustee in terms of what parts of the medical record can be shared, and under what terms and conditions it could be shared? Or is it completely under the terms, the fiduciary responsibility as set out by this legislation that the trustee has?

Hon. Mr. Nilson: — I think what I'll try to do is identify in clearer language than the Act itself does, what kinds of rights individuals have so that we can have on the record how this works. And I think I'll be able to answer your specific question by doing that.

The Act specifically identifies an individual's rights to consent to the use and disclosure of their personal health information unless otherwise authorized by the Act. It identifies the individual's rights to access one's own personal health information. It identifies the right of an individual to be informed by trustees of anticipated uses and disclosures of their personal health information.

It gives an individual a right to be informed of disclosures of personal health information without consent if something happens inadvertently. It gives an individual a right to prevent access to a comprehensive electronic health record on the Saskatchewan Health Information Network. It gives an

individual the right to revoke consent to the use or disclosure of their personal health information. It gives an individual the right to request amendments to their personal health information if they see something is inaccurate or a problem.

It gives an individual the right to refuse to provide a health services number as identification for a non-health service. It gives an individual the right to apply to the Privacy Commissioner to request a review of an action taken by . . . taken or a decision made by a trustee with respect to their individual personal health information. And it also gives an individual the right to designate another person to make decisions about their personal health information in certain circumstances.

So that's identification of the individual kind of rights that are spread throughout the Act. And I think that probably answers all your questions. I'd be happy to answer more if there are.

Mr. Gantefoer: — Minister, currently I think the practice in many instances for individuals that go to their family physician and the family physician maintains a medical record . . . And those may be fairly complete in some instances. If you've had a family physician for a good number of years, the file that is built up can be quite comprehensive and fairly complete. There may well be, in individual circumstances, other pieces of the file in different locations.

How does this legislation envisage bringing this information into a . . . Or maybe I should say, does it envisage bringing the information together into a single medical record that then is under the jurisdiction of the trustee in collaboration with the individual, under those conditions and circumstances that you just outlined?

(15:00)

Hon. Mr. Nilson: — Mr. Chair, this legislation allows for and sets the rules around what might be called a comprehensive health record. So it enables it or allows for it to happen. It doesn't direct that it happen but if that is created by a particular trustee, whether it's a doctor's office or a hospital around a particular patient, then this sets the rules around that compilation of information.

But at this stage it really is to make sure that there's protections in place if that kind of record is created.

Mr. Gantefoer: — So in the definition of trustees, it would be agencies or entities like doctors, specialists, things of that nature.

What is the relationship between the record and the trustees' protection of the record on behalf of the patient? Is there a relationship defined in regard to other agencies? I'm thinking particularly like agencies that may have a legitimate reason to have access to a health record, for example, SGI (Saskatchewan Government Insurance) or Workers' Compensation. Are those relationships spelled out as well between the trustees and those corporations or agencies?

Hon. Mr. Nilson: — Mr. Chair, I think the answer to that particular question is the way the Act is set up, information

cannot be given out unless there's a specific purpose for that legislation . . . or for that information to be released.

And so in the examples that you give around SGI or WCB (Workers' Compensation Board), the trustee of the information whether it's the . . . most likely the doctor would then have to look and see whether the relationship that they have with the patient allows them to give that kind of information.

The most common way that it would be done is by consent of the patient. So the patient actually is working with SGI around a particular personal injury. They would then give a letter of consent to the trustee, the doctor, who would then in turn give that information to SGI. Otherwise that information would not flow.

Mr. Gantefoer: — So there'd be an onus of responsibility on the agencies requesting the information to obtain the necessary consent directly from the individual whose record it pertains to, and that's important.

In regard to, and I know this legislation doesn't specifically spell out the implementation of how this system would work, but it provides a framework as to how it might happen. Is there in the parameters of making sure that records are going to be properly safeguarded, if we get into an electronic record is there going to be the standards that are going to be set so that these records can be accurately and completely defined by individuals?

I'm concerned that some of the problems about duplicate names that we hear about in land titles and some of those things might be a problem that would come into an electronic record system. So in terms of this legislation of protecting the privacy, is there sort of standards that are going to be set so that any electronic agency like SHIN (Saskatchewan Health Information Network), for example, will have to meet those standards in order to comply with the requirements of the privacy in this legislation?

Hon. Mr. Nilson: — Thank you for a very good question. And I'll answer it on, I think, three different levels. One is, in Saskatchewan we have a fairly long history of using electronic records in our medical system and in our pharmacy system, that have been used for a while. And in that process we have developed a number of, I think, very high standards in Saskatchewan. One of the issues then becomes, well what are the levels of security and the standards that you use in that particular area? And there are industry-wide standards, as we know from various reviews that are done. But we also in Saskatchewan Health have some development of that.

I think the most interesting thing is, though, that we are working on national standards through the Canada Health Infoway operation. And Saskatchewan is actually Co-Chair with Canada in the development of many of the things that relate to health information in Canada. Because ultimately the goal is that your health information would be available if you are in a car accident in British Columbia, in a way that, for the specific purpose of treating you as a patient, you would be able to get back to your record in Saskatchewan.

We're quite a ways away from that, but to do that, you need to have some very clear standards around what kind of

information there is, what is the accuracy of it, but then clearly the security of it. And all of those are the things that are being worked at as I say on quite a number of levels.

Mr. Gantefer: — Minister, does the legislation specifically dictate who the trustees are specifically? For example, we used the example of the family physician would be clearly a trustee. But to what extent does that go and are these categories of people designated? For example, you might have an alternative medicine practitioner that is not regulated under a professional college, would they be considered trustees? Or how do you define who trustees potentially even can be?

Hon. Mr. Nilson: — Thank you, Mr. Chair. My answer to this question is really the definition section of the 1999 Act, where it sets out under section 2(t) the definition of trustee. And it lists a whole number of specific things, from government institution to district health board or regional health authority and all the way down the line.

Now the specific question that you asked about an unregulated body or an unregulated profession is that it doesn't fit into any of the clear definitions under trustee, but there is a final one, no. (xv), which is, "... any other prescribed person, body or class of persons . . ."

So there is the ability to actually, in the regulations, to designate another group of people who would be trustees if it was seen that there was some problem arising around some of these other unregulated professions. Clearly that would be a challenge and would obviously involve some discussion with the particular group, but practically there is a way of including them in here so that they would be bound by all the rules.

Mr. Gantefer: — Thank you, Minister. Minister, we talked about the rules about safeguarding or the relationship between the patient and the trustee. Is there provision for, say in the event that an individual may have a condition or a disease that would be such that it might place other people in society at risk, and even though that individual would prefer not to disclose that, that there is an overriding public purpose in making sure that this information was shared in some way at some level.

How is that kind of a situation dealt with, where there may be competing interest between the individual's desire to have their specific medical record shared and the overall purpose of the public good, if you like, and needs to be protected?

Hon. Mr. Nilson: — Mr. Chair, there are two answers to that question in that in the normal case if you end up having some kind of infection, you would do what's called universal precaution — you're always careful; you always set your procedures to deal with body fluids, or blood, or other things in a way that prevents a problem.

But I think the more specific question that you asked relates to what would be on page 5, section 27, the disclosure provision, under (4)(a). This gives a trustee the power to disclose information without the consent of a subject:

where the trustee believes, on reasonable grounds, that the disclosure will avoid or minimize a danger to the health or safety of any person;

And that would deal with some of the kinds of communicable diseases that may be in a community and a trustee, a doctor, identifies that particular problem. The patient doesn't want to consent, the doctor may say, no, that's something that we do have to report, and there would be rules around that. And so it would cover it in that way.

And the ultimate challenge, if there ever was a challenge, would be on what does reasonable grounds mean. And clearly that is something that if there was a dispute, ultimately a judge would decide and hopefully he would do it on the side of the society in general.

Mr. Gantefer: — Thank you, Minister. Minister, in regard to information that would be more of a statistical nature and more generic, there are those that would argue that that should be pretty easily made available for statistical purposes and for research and advisory groups like quality councils and things of that nature on a provincial and a national basis.

But what if a person has a circumstance that is pretty unique and it might be a very rare circumstance. So where statistically you say we're taking and giving examples of these things on a provincial basis, but it might be one or two individuals and that might be the only individuals that would exist on a provincial database. And so in disclosing this general statistical information, you quite possibly could be violating or treading into an individual's privacy, if you like. How is that kind of circumstance dealt with?

Hon. Mr. Nilson: — Thank you, Mr. Chair. I'd also like to add some information to the last answer that I gave. The Public Health Act also applies, relating to some of these communicable diseases that may be there as well. And that would provide some guidance to the trustee about when they might have to release the information.

Now on this specific question that you've asked here, in the '99 legislation it's clear that you can release de-identified information. That does happen now and has happened for a number years on research. But what happens is that you look at the information you're going to give from Health — and which is normally where the broader information comes — and they identify what's called a critical cell.

In other words if there's a group of one or two or three cases that are the only ones in all of Saskatchewan, and that information would clearly probably identify some people, then that information is not released. It's taken out of the overall general statistic. And so there are some rules about any information where there is a very small number that would be reported. Then that would not be described as de-identified and so therefore it wouldn't be released.

Mr. Gantefer: — Thank you, Minister. Just backtracking a little bit to make sure I understood you correctly because my colleague was not exactly clear on the answer.

When we talked about agencies like SGI and WCB that may have a reason to request access to a patient's file, as I understood it that you said, is that these agencies would be required to get a written consent from the patient through their doctor. And is it also true that it would be clearly explained to

this patient that this is a consent to allow SGI or Workers' Compensation or whatever other agency may be appropriate to access the patient's files so they aren't thinking that they're giving the doctor the right to look at the file, that it indeed is a request for consent from this other agency? I understood that's what you said and I wanted to make sure that that was exactly what you intended.

(15:15)

Hon. Mr. Nilson: — I think your description of what I said is accurate. Let me try to explain this like this. Insurance companies, for example, that have insurance contracts with their customers, will usually put in that insurance contract somewhere that the patient or the person who is injured consents to them getting information to meet their claim. So that's sort of a business practice around some of these things.

What we have in Saskatchewan is a no-fault insurance scheme now, with choice, that includes some of those insurance clauses right in legislation. And so I think that that may be where some of the questions arise, that in The Automobile Accident Insurance Act there are some specific provisions that are like normal insurance contracts that give the right to that kind of information.

Now my understanding of the practice in Saskatchewan Health as it relates to that particular kind of clause is that their policy is still to make sure that the patient knows that this kind of information is being requested and try to get the consent. Now part of the problem arises is that it is very specific in the legislation about getting that information and so sometimes the other trustees may not be as . . . have as many procedures available to provide that protection.

But it's in that context of where somebody seeks reimbursement for an injury in a private insurance contract, you'd have a clause that consents prior to anything happening, and then that's what's used by the insurance company. In Saskatchewan our insurance contract for automobile insurance is the Act.

Mr. Gantefer: — So, Minister, for example, an individual, when you go to get your automotive driver's licence, they have usually I think five or six medical questions that you're asked to check off yes or no on. And on the basis of your answers, you are awarded a driver's licence with no medical exemptions, depending on how you answer those questions.

In that circumstance, or in a circumstance where you've answered all the questions so that it would be indicating to SGI that there is no . . . there should be no restrictions on your licence, would they have the right, under the legislation you describe, to actually access the patient's file to confirm that the answers were answered accurately, or are they forced to accept the validity of the questions as answered?

Hon. Mr. Nilson: — Mr. Chair, I'm not sure if I have the full answer to that. It's been a number of years since I was the minister of SGI when this was the kind of question that would come up in some of those situations.

But I think, I think there is a right though for SGI, if they have some question about the answers that are given in that particular

form, that they can write to the individual and ask for more information. Or sometimes they will ask for a medical or something like that. But I don't know for sure whether they have a right to sort of demand it directly.

So I can maybe request from another one of the other ministers to get an answer to that if you wish.

Mr. Gantefer: — Thank you, Minister. I think the point in principle here that I think is important is that I think it's important to make sure and safeguard that patients sort of give informed consent for people accessing their medical records, so that they're put in a position of being able to judge pretty honestly and objectively if indeed someone else accessing their records is in their best interest. And that whole concept of informed consent, I think, is the principle that I would certainly like to see sort of going through this whole bit of legislation in regard to this legislation.

Mr. Chairman, one further area. Although it happens very rarely, sometimes there are some medical practitioners that do not live up to the standards of their self-regulated college after they have been practising medicine in one form or other in the province. And so it may at least be theoretically possible that the reliability, the quality of medical records that this individual, who in that case would have been in a trusteeship position, might be brought into some question.

If there ends up being a dispute, does this legislation provide the faculty for someone to assume the medical records in the event of a trustee either being found to be negligent or unprofessional, number one?

And in the second instance, what happens in the case of a trustee, a practitioner leaving the province? In some instances a community has found vast amounts of medical health records that simply seemed to have been abandoned. What provision is there to make sure that individuals' medical records are being safeguarded in the event one of the trustees of those records actually defaults?

Hon. Mr. Nilson: — There are two ways of doing this and sort of . . . The first one relates to, for example for doctors, The Medical Profession Act that has some rules around how this is done.

But section 22 of The Health Information and Protection Act, the 1999 Act, sets out sort of the duties around what you're supposed to do with your records and it includes transferring that responsibility to somebody else who remains in the province.

But there is clearly a duty on the trustee to take care of those kinds of records, and then if there's some failure in that duty the various penalties in the Act would apply.

Mr. Gantefer: — Thank you, Minister. I appreciate that it sets out the responsibility, it sets out penalties. The problem is, is when people are in default they might not be safeguarding or respecting those things.

For example, I'm aware of community — or at least a community and maybe there has been more — where a doctor

has moved to another practice in another jurisdiction, might be within the country or outside of it, so the penalties are relatively immaterial because the individual is gone and filing cabinets full of records were just abandoned.

Is there a mechanism in here for the trusteeship of those records shifting from that individual medical practice to the regional health authorities or to the Department of Health, or how is that mechanism . . . so that someone actually takes responsibility in a pragmatic, physical way of those records?

Hon. Mr. Nilson: — Yes, under section 22(2) of The Health Information Protection Act, the minister may appoint somebody to take care of those records and do it in an appropriate fashion if they are in fact abandoned in the way that you've indicated in the example that you've raised.

Mr. Gantfoer: — Thank you, Mr. Minister. Those are the questions that I have.

I think the point that I want to stress, and I think you agree with, is this whole issue of that we need a practical system that is going to work and also safeguard the protection and the privacy of these individual records. And that people need, that the records pertain to, need to be given the opportunity to exercise informed consent in terms of allowing people to access those records.

I think your answers have provided me with a level of comfort that that indeed is going to be the case, so thank you.

The Chair: — Why is the member on her feet?

Ms. Atkinson: — To ask a question.

The Chair: — Okay.

Ms. Atkinson: — Thank you very much. Mr. Speaker, in my remarks regarding this Bill I indicated to the minister I wanted him to consider the notion of certain medical procedures not forming part of the person's comprehensive health record, and in fact an individual would have the right to indicate that certain medical procedures not form part of that electronic record.

And I'm wondering whether the minister has considered that, and if he has, what amendment does he propose to this legislation, for instance to allow women to keep from the electronic record, as an example, a therapeutic abortion?

Hon. Mr. Nilson: — The member has asked that I consider a House amendment to this particular piece of legislation, and I would say that I have considered very carefully a House amendment that would try to deal with some of the issues that the member has raised. But at this stage I am going to stay with the legislation as it is and I will explain why.

At this point in the stage of technology the best way for providing the kind of protection for the individuals is to allow the data to be collected and then put a limit on the ability to access it. So basically what we're saying is that we will provide the ability to put the restriction on the disclosure of the information, not on the collection of the information.

(15:30)

Now why do we take that position, or why do I take that position after listening to advice from many people throughout the health system? I take that position because at this stage the ability to set up electronic methods of cutting off the entry of information into the system is not technologically possible to do it. Now that's not to say that three years or five years or ten years from now there may be some ways of doing that, but at this stage it's not possible.

And it's this particular point that has been the challenge for our whole health system — the regional health authorities, the medical profession, others — who have said that to try to implement a system that allows for the non-collection of information of a particular patient as it relates to only specific parts of the information about that particular patient is unduly or almost impossible to do; whereas a rule that protects absolutely the disclosure of that total record of that patient is something that would work.

And so we are sticking with this particular amendment as it is now. We will continue to examine this issue because we know that it's an issue that is raised in the community. But after consultation throughout the health system in Saskatchewan with the health professions and with the people who are trying to manage this system, the proposal as we have it is the one that we intend to go with.

Ms. Atkinson: — Thank you, Mr. Minister, for that explanation. Can you indicate whether this, the amendments to the legislation, allow for the minister to, through regulation, exempt certain procedures that an individual may not want kept in their electronic health record? That's question number one.

And my second question — which will be my final question — is what is the penalty, what is the punishment, for any individual who releases a person's health record? What is the maximum fine and what is the maximum penalty that an individual can undergo if they disclose health information without the approval of the individual citizen?

Hon. Mr. Nilson: — Thank you for those questions. The first question relates to the creation of the electronic health record, which we have not yet created, and so this type of question can be included in how you might design that electronic health record. And it would obviously have to be done with discussion with the health profession. It would be possible, for example, for the design of the system not to include any mental health information or not any . . . certain other kind of information because the information that's collected is collected in fields.

Obviously if you're a patient, but even probably more so if you're the professional, you would want to have a system that you could rely on that had all the kinds of information that you needed in the system to provide the kind of care. That's an ongoing discussion that has to take place with the people in the whole health system as to how that would be designed.

In this specific legislation there is no power to do that as it relates to the electronic health record, but clearly there is as a government policy as the health record, electronic health record would be designed as we move forward.

Now as far as the penalties are concerned for breaches or violations of the Act, the actual penalties in the Act are very serious. For each individual breach, if it's a person that's found guilty of an offence of breaching this Act, the fine could be up to \$50,000 or one year in jail. If it's a corporation, the fine for the corporation could be up to \$500,000 and the officers and directors could be subject to a \$50,000 fine or up to one year in jail.

But I think those penalties actually pale in comparison to the penalties that would be on trustees who are professionals — whether you're employed in a corporation or you work on your own — because clearly this is an area where if you're a medical doctor and there's a breach of this kind of relaying of information, then you could lose your whole career.

And so that's the range of penalties that there are.

Clause 1 agreed to.

Clauses 2 to 20 inclusive agreed to.

Hon. Mr. Nilson: — Thank you, Mr. Chair. I'd like to thank the members of the Assembly who have asked questions here today and who have been part of the ongoing discussion as we try to get this Act in the right form for the people of Saskatchewan.

I'd also especially like to thank the officials of Saskatchewan Health who have I think put, simply put, spent many years working on this problem and how we can get the protection of individuals and their health information. And I would venture to say that this is a task that will never be done because we will be continuing to work on it to make sure that we provide the best protection possible for our individuals.

The committee agreed to report the Bill.

Bill No. 4 — The SaskEnergy Amendment Act, 2003

Clause 1

The Chair: — Order. I recognize the minister to introduce his official.

Hon. Mr. Sonntag: — Thank you, Mr. Chair. Seated with me to my left is Roger Sobotkiewicz, legal counsel for SaskEnergy.

Mr. Wall: — Welcome to the minister and SaskEnergy's legal counsel. I have a few brief questions about Bill 4, and then we can start examining it on a clause-by-clause basis or voting it rather on a clause-by-clause basis.

The first question has to do with the expansion of a service that has been available, as the minister pointed out in his second reading speech, for some time and this expansion over and above pipeline locates.

My first question that I had when I read the second reading speech, and prior to being able to consult with anybody, was whether or not there are other companies today in the province that would do this sort of a service. Now we did check with municipalities — and who would be certainly a main user of

this, of the new service — and they seemed, the ones that we checked with, were supportive of this particular Bill and the expansion.

But did the corporation look at this issue and are there any either in-province or out-of-province either NGOs (non-governmental organization) or businesses that provide services like this in terms of locates for over and above the . . . over and above pipelines?

Hon. Mr. Sonntag: — In response to the question, in the province as it relates to pipelines, there are not, but as it pertains to location of buried telephone cable, there is. And SaskTel is . . . This is a bit beyond what you asked, but SaskTel as an example contracts with those private companies. They're all regionally based, and it would be SaskTel's intent to continue to contract with those regionally based contractors who do provide that service for them.

Mr. Wall: — Thank you, Mr. Minister. Mr. Chair, I noted here that . . . And maybe through *Hansard* I'd just sort of publicly thank the city engineer in Swift Current who just provided some information about what the city of Swift Current does, for example, in their, when they're doing locates, what the engineering department does.

When he talked about SaskTel for example, he talked about using a Web site that SaskTel has: dialbeforeyoudig.com I think is the Web site that they use. And so is SaskTel then using these other regional services in order to make sure that Web site's updated? Does the minister know?

And I understand that this isn't really directly related to SaskEnergy but is that, is that the service that SaskTel's currently offering; it's based on this information they get from these regional service providers?

Hon. Mr. Sonntag: — My understanding is that that is correct. But I would want to get that answer with absolute certainty and we'd provide that information for you. But it's my understanding that you are correct in that assumption.

Mr. Wall: — There's two particular municipalities in Saskatchewan, as the minister will know, that own their own electrical utilities or at least part of their . . . sort of a hybrid system, part of . . . Each municipality is served by their own light and power department. The city of Swift Current is one and the city of Saskatoon is the other.

And so — I'm not sure if Saskatoon operates the same way as Swift Current, but I'd imagine that they do — that the electrical department of the city of Swift Current or the public works department will generate locates for whichever utility is needed, for example if the city was doing some work, and they don't outsource those. So it sounds to me like they would be able to use then this particular service as well.

(15:45)

But I wonder if the uniqueness of the cities of Swift Current and Saskatoon were also taken into consideration in the development of this service and the passing of this Bill? My understanding is that Saskatoon . . . We checked with the city

and there seemed to be no problem there. But is there anything different for those two municipalities with respect to using this service? It sounds to me like they may well just go on . . . be using their own systems and maps to locate, at least on the electrical side of the equation.

Hon. Mr. Sonntag: — We've been in consultation, I'm advised, with these two jurisdictions as well. There is nothing different that . . . There is nothing specific, I should say, that applies to those jurisdictions as it pertains to this amendment in this Act.

The Act is dual-focused. First of all it is to provide a better service to the industry and to other stakeholder groups who might be interested in utilizing the service. But secondly and foremost — maybe I should have said most importantly — it's about safety. And there would be . . . This service would be available to those jurisdictions but there would be nothing at all that would require them to use the service.

If they're already receiving the service and have that information within their own domain, that's entirely up to them to continue to use the process that they currently employ.

Mr. Wall: — Thank you, Mr. Minister. Mr. Chair, the other issue that was raised . . . that has been raised with us is just the delay, and certainly it's a delay not unique to our province. Many other jurisdictions apparently, municipalities in this case, have experienced . . . or those who have experienced, the municipalities in different province have experienced the same thing, for example, often a 48-hour turnaround for locates in some places. So even a 24-hour turnaround in the case of a water break or some sort of an emergent situation, they talk about as being difficult.

Now in places like . . . In Swift Current apparently the good news is, is that local officials of all the . . . of Crowns in this case or the city utility, are they're local people and they know, you know, they're generally very available and accessible and things can be dealt with quickly.

But this new service that's been introduced by SaskEnergy and reflected in the Bill, was turnaround time in terms of locates a prime consideration for this? What about this new system might help with turnaround times for locates?

Hon. Mr. Sonntag: — I don't think there's a . . . I don't know if there's really a simple answer. The time has not changed. Also the corporation commits to responding within 48 hours but in circumstances where it's clearly an emergency or a very high priority, the corporation attempts to — and is successful, I'm advised — in having that information turned around in a much more timely manner. And they obviously will continue to try to improve the response time as we move on with better and newer technology.

And some of this stuff, not directly, but there will be through this legislation as well — which I suspect you're aware of — there will be opportunity, not specific to the question you just asked, but there will be opportunity with the technology that currently exists to actually provide real time information. Some of this might be applicable with . . . I think your reference in your question as it pertains to water breaks and stuff like that,

that technology is available. This legislation, this amendment, will enable that to happen.

But with respect to the specific question, the amount of time is still set at 48 hours. Okay.

Mr. Wall: — Thank you, Mr. Minister, for clarifying that. And I think the real time aspect of it, the potential for the real time aspect of it is positive.

And the final question just has to do with the implications for the corporation of this expanded service. Is it revenue neutral for the corporation?

Hon. Mr. Sonntag: — Yes, it's revenue neutral; it's straight cost recovery.

Clause 1 agreed to.

Clauses 2 to 7 inclusive agreed to.

The committee agreed to report the Bill.

THIRD READINGS

Bill No. 13 — The Parks Amendment Act, 2003

Hon. Mr. Lautermilch: — Mr. Speaker, I move that this Bill be now read the third time and passed under its title.

Motion agreed to, the Bill read a third time and passed under its title.

Bill No. 28 — The Health Information Protection Amendment Act, 2003

Hon. Mr. Nilson: — Mr. Speaker, I move that this Bill be now read the third time and passed under its title.

Motion agreed to, the Bill read a third time and passed under its title.

Bill No. 4 — The SaskEnergy Amendment Act, 2003

Hon. Mr. Sonntag: — Thank you, Mr. Speaker. I move that Bill No. 4 be now read a third time and passed under its title.

Motion agreed to, the Bill read a third time and passed under its title.

COMMITTEE OF FINANCE

General Revenue Fund Health Vote 32

Subvote (HE01)

The Chair: — And I would recognize the Minister of Health to introduce his officials.

Hon. Mr. Nilson: — Thank you. I'm very pleased to have with me this afternoon in a counter-clockwise, starting on my left if

you're following, Glenda Yeates, the deputy minister; Kelly Kummerfield, who is the executive director of health human resources; Rod Wiley, the executive director of finance and management services; Lawrence Krahn, assistant deputy minister; and Lauren Donnelly, executive director, acute and emergency services; Bert Linklater, executive director of district management services.

Mr. Toth: — Thank you, Mr. Chair. Mr. Minister, welcome to you and to the officials. I'm pleased to have an opportunity to enter into the debate and estimates in Department of Health.

First of all I'd like to begin, Mr. Minister, is you're probably well aware of the fact the community of Moosomin has been doing a lot of work, taking a lot of initiative the last few years. They've been . . . a lot of comments and certainly the Department of Health has invested a fair bit into a new facility in Moosomin already.

And just recently I've chatted to some of the finance committee and I believe the community is just short of, shy of the \$7 million mark in raising the funds required by the community and surrounding area. A lot of work . . . people have worked very diligently and hard in raising these funds and are awaiting an announcement from your department.

I'm wondering, Mr. Minister, if you can give a sense of when the department will make a final decision or be in a position to make a final decision, and give you the opportunity of letting the community know that the final decision's been made and we can proceed with the new facility in that community.

(16:00)

Hon. Mr. Nilson: — Well, Mr. Chair, I'm very pleased to report that there's been very good progress working together with the local community, with the Regina Qu'Appelle Health Authority, and various officials around the plan and what kinds of things need to be done. There's still some more work that's required and that is what's happening right now. And so I think the best thing I can just say is, stay tuned.

Mr. Toth: — Mr. Chair, Mr. Minister, I think what the community and certainly people have been hearing, we've been hearing the stay tuned scenario for a period of time. Certainly the Pipestone Health District, there was a fair bit of work had been done and accomplished and now with the Regina east health district. And I think at the end of the day that stay tuned . . . We're hoping that we're within — when we're talking being tuned — within just a matter of a fraction of tuning the station in and coming forward with that announcement.

Having said that, Mr. Minister, as we look at a new facility, and I think you can appreciate, your department officials can appreciate the fact that this, this community and the hospital in the Moosomin community certainly reaches out to a very broad, broad community. It's not just a small area of, say, even 10 miles. I think we're looking at people utilizing that service for probably 40 or 50 miles. And I think we could even expand that a bit as we look at . . . even just looking at some of the services that have been provided since the surgery has been opened up in the community of Moosomin.

And I'm wondering, Mr. Minister, whether or not as we look at a new facility in that community, if service such as renal dialysis might be something that would be considered when we look at the fact that, and we talk about equal access to health care services and individuals having to travel to centres like Yorkton or Regina. If we're not . . . By placing a service of that nature in that, in a facility like that may alleviate some of the load and some of the other services in our province.

Hon. Mr. Nilson: — Thank you for that question. I think what I need to do is explain a little bit about how we try to set up the dialysis facilities across the province. What happens is that we look at the numbers of patients there are across the province that require dialysis and then the number — or the distance, the number of kilometres — that they have to travel for treatment.

And there's a committee of people from across the province, which includes the Kidney Foundation who has a very keen interest in obviously getting this for a lot of the people who are their members and families who are members, and they look at and keep looking at, well what are the ways and how can we provide that? There the . . . I would have to say that Moosomin isn't on the top of the list as far as the demand, looking in that light.

But your question, I think, was more, well is there a possibility at some point that this may be there? I think you'd have to say the answer relies on, well if there were a whole number of patients in that area, it clearly has the distance question as you've identified as a factor. And so it would be something that is constantly re-evaluated as the years go on.

But at this stage, I'm not sure it's up high on the list. We have a couple of other places for sure that we're working on right now.

Mr. Toth: — Mr. Chair, Mr. Minister, I thank you for that response and I think it's important that we certainly keep some of these things in mind recognizing the fact that at a point for some patients it becomes a very difficult feature.

And if this is something that can really enhance the role of a facility such as Moosomin's being, I think you have to recognize that it's somewhat of a regional centre, and the role it plays as it provides services to so many families and people in that area.

One further question and it's been raised by a retired lab tech, and certainly an individual who's involved in the . . . with horses in the community as well, is the whole issue around West Nile virus. And I know you've made a couple of announcements in the past, but just a specific question. What is the department doing in its overall scheme of addressing this issue and the preventive measures that you're putting into place in order to just protect the community of Saskatchewan from this, from any major outbreaks that may occur? What is being done to protect Saskatchewan residents from the West Nile virus as much as is physically possible?

Hon. Mr. Nilson: — I'll give you an overview version and then if you have some specific questions, I'd be happy to answer them.

But as you know, earlier this spring we announced some

funding that was available for some expanded surveillance and education and things as it relates to West Nile virus. I guess what I would say is there's \$1.2 million and this money goes for surveillance, education, and then mosquito control.

And the education part is really about some of the ads that we've done, some of those kinds of things, the things that go through the public health system around the advising the general public on how to use personal protective measures for themselves, also how to make sure there aren't mosquito breeding grounds in their residential area.

Then the surveillance part is tracking the disease in birds, mosquitoes, and horses, and also in people if that happens. And then the final thing is the actual mosquito control measures that we do in conjunction with municipalities. And from the Health perspective, we have a chief medical health officer and the people who work with him who tie in very closely with all of the medical health officers and their related staff in the regional health authorities and the Athabasca Health Authority. And they're in regular contact on what kinds of new information that comes up.

Obviously everybody is waiting for results around the surveillance of the birds and the horses and mosquitoes. That's an area where we hope there isn't a problem, but we are ready if there is.

Mr. Toth: — Mr. Chair, Mr. Minister, thank you. I think one of the concerns that was raised by indeed the individual, the retired lab tech, was the fact that there was . . . I think in the *Leader-Post* article May 14 talked about a 19 per cent . . . 80 per cent of people who may get affected will have no symptoms of the virus, 19 per cent of those affected will develop mild fevers, a symptom such as a fever, headache, or body aches. And yet this gentleman who's worked in the health field indicates that his sense is that we've left the impression that it really isn't, doesn't create a significant problem.

But he's suggesting that people can become very sick and I think he's . . . what he's mentioning is the fact that we need to really imply that people need to be very diligent in protecting themselves from mosquito bites rather than taking the chance that you may become infected and you may be one of those that really has mild symptoms when indeed you could . . . it could become a very significant sickness, an illness. And I think what this gentleman is pointing out, we should be really relaying the fact that there should be some diligence and . . . in taking protection and precautionary measures.

And just another question as well, Mr. Minister, related to West Nile virus — and it may not have anything to do with your department — but it's the cost of vaccinating horses to protect from this virus. And I'm just wondering if any financial support has been there for individuals with horses in helping offset some of those costs, whether through your department or the Department of Agriculture. And certainly, Mr. Minister, I look forward to your responses.

Hon. Mr. Nilson: — I think the simple answer to your question about whether there's . . . There isn't any funding in the Department of Health for vaccination for horses. I would assume that's something that might be dealt with in Ag and

Food and Revitalization.

But I share your constituent's concern. And part of our challenge from Saskatchewan Health and from the government is to make sure that people realize the serious consequences of this disease and some of the people who are infected and . . . but also not to create a panic or a concern because there aren't that many people that do get affected.

But I think what I can do for you is give you a bit of the statistics of what happened last summer and why we're being very careful in Saskatchewan. Last summer West Nile virus was identified in 44 birds and 30 horses across southern Saskatchewan. The infected birds were found in Regina, Saskatoon, Yorkton, Moose Jaw, and Estevan, and 20 other communities across the province. And there may have been some other birds that weren't picked up, but those were the ones that were reported.

There were no human cases reported in Saskatchewan last year. In North Dakota there were 17 cases of serious illness and two deaths last year; in Montana there were two cases of human West Nile virus and no reported deaths. In Canada last year there were 400 human cases, including 18 deaths that were associated with West Nile virus. Most of these took place, happened in southern Ontario. In the United States there were, last summer, 4,100 cases of human West Nile virus and 284 deaths.

So it's something that all of the public health officials are monitoring very carefully, we are monitoring very carefully on behalf of the government. And we urge all people to follow the recommendations that come from our medical health officer.

Mr. Toth: — Thank you, Mr. Chair. Mr. Minister, I thank you for that response and I think it's certainly imperative that we remain vigilant on this issue and that we take every precaution necessary and the public be aware of that.

As well, Mr. Minister, we're looking forward as well and we're keeping tuned to your department in regards to a new facility in Moosomin. And while I'd have a lot more questions, I know my other colleagues want to get in as well so I'll revert and allow someone else to enter the debate.

Thank you very much.

Mr. Allchurch: — Thank you, Mr. Chair. Mr. Minister, welcome to your officials here today. I have a few questions to ask the department and the first line of questioning is on the line of MRIs (magnetic resonance imaging) in Saskatchewan.

Does the Department of Health have a standard cost for an MRI that's being done in the province of Saskatchewan?

(16:15)

Hon. Mr. Nilson: — The cost for an MRI in Saskatchewan for a Saskatchewan resident is part of the global funding that goes to each regional health authority, so there isn't a specific fee attached to it.

But there is a standardized fee for reciprocal billing purposes.

So if an Alberta resident gets a MRI in Saskatchewan, for example, that cost is \$655. If a Saskatchewan resident has the MRI in Ontario, that cost is \$655. In other words, all the provinces and territories have agreed that if somebody has one of these procedures, which end up being fairly high cost, the bill that goes back to the home province of the person involved is \$655.

Mr. Allchurch: — Thank you, Mr. Minister. So then is it fair to say then that a person living in Saskatchewan that obtained an MRI, the cost, the value of that MRI would be \$655 then?

Hon. Mr. Nilson: — I think you'd have to remember that it's an estimate, that . . . because the services are funded on a global basis. So that where the MRIs are located in Saskatchewan, it's a service for all people of Saskatchewan and so they would get specific funding for the capital costs, the ongoing maintenance costs, the staff costs, those kinds of things. And so it's hard to say that the cost to a Saskatchewan person is \$655.

But on an estimate across the country, this is what everybody's agreed as would be the reciprocal billing rate. It's an estimate.

Mr. Allchurch: — Thank you, Mr. Minister. Is it fair to say then that a person in Saskatchewan receiving an MRI, the cost estimated would be 655? Is there a different cost to an MRI if it's for a head injury where MRI has taken place versus say a back injury where an MRI has taken place?

Hon. Mr. Nilson: — I'll emphasis again that that reciprocal billing rate is an average cost. And so there might be some that will be a little higher and some that will be a little bit lower. And it's an estimate because we don't do our accounting that way.

If you went to a hospital in Minneapolis or Phoenix or somewhere like that, they end up costing their procedures in a different way, where they would then have a certain fee for each type of procedure. What we do in Saskatchewan is provide the global amount to a regional health authority who then, that regional health authority provides the staff and all of those things are included there.

So once again, I say this is an estimate in the Canadian system. I think that that's the best we can say at this point because we just don't account for it another way.

Mr. Allchurch: — Thank you, Mr. Minister. The reason for my question, Mr. Minister, is my son needed an MRI. Close to a month ago he had some head problems and he went to a neurologist and the neurologist said at that time that he needed an MRI.

Now by going through the Saskatchewan health care system, he had to wait 12 weeks for an MRI. Now we're again talking about a head injury. I got a little upset with the waiting period. And I know our critic for Health has raised this question many times as the time that is required for an MRI in Saskatchewan is such a long period of time.

So I took my son to Edmonton where he received an MRI and the cost of that was below \$500. Now my line of questioning regards to what it costs in Saskatchewan versus what it costs in

Alberta. I paid out of my pocket the cost of that MRI, to get it done immediately. I couldn't afford to wait 12 weeks to have him have an MRI.

So my question is, if it's cheaper to get it done in Alberta and the cost in Saskatchewan is a lot more, with the waiting lists that we have in Saskatchewan with MRIs, why are we not sending more patients to Alberta to get MRIs done so that their health can be cared for immediately and not at a waiting time?

Hon. Mr. Nilson: — I thank you for the question. As the minister, I'm not able to comment about a particular patient in this context. But I am able to describe in a broader way how this system works.

What we have in Saskatchewan obviously in our health system are MRI facilities. And what happens with those facilities is that the professionals involved — the doctors working together with the specialist depending on what particular area or concern there is with the patient — assess the patients and then provide some priority codes, if I can put it that way. And this is both . . . I think Regina has a definition of this and Saskatoon has something that's similar.

But basically, the priorities are in this order. First, if there's immediate threat to life or permanent loss of function. Second level is risk of irreversible deterioration in seven to ten days. Third, ongoing disability or undiagnosed state causing significant physical or mental suffering. Fourth level, chronic stable pathology management and outcomes rest with the MRI; in other words, you're monitoring something that's happening. And fifth is a routine follow-up.

And there's . . . What happens is that if the professionals involved, the doctors involved identify that it's an emergency, MRIs are done immediately. I mean, there's no waiting at all. Urgent exams are usually done between seven to ten days and/or eleven days, somewhere in that sort of just less than two-week period.

And the waiting times or the concerns that you raised about the 12 weeks or some time like that usually would be for patients that are classified as non-urgent by the professionals. And that's the challenge is that we end up having to rely on some of that assessments.

Now you asked a question about the cost. Last year in Saskatchewan, there were 312 people who were approved for MRIs out of the province and the cost for each one of those was \$655 as agreed by all the provinces and territories. Of the ones that were requested, there were 63 that asked but were denied. In other words, that those ones could be done within the province in what was identified as a professional, reasonable time.

Now one of the challenges that we have, and you didn't directly ask this but I think I'll explain it in this question, is that we've been working carefully around the Saskatchewan Surgical Care Network to, and the surgical registry, around setting these priorities in a common way across the province that's transparent, open. People can understand how it's done, when you get into surgery, and especially on the things that are identified as non-urgent.

And we also have, as part of the Western Canada Wait List Project, we have a similar project that goes around the use of the MRI that we're doing in conjunction with our neighbours around how you do the assessments of setting these kinds of priorities.

And it's often somewhat frustrating for patients because there's a concern and there's unknowns and things like that. And we end up . . . It's trying to get that right balance. But we think that the services we're providing in Saskatchewan are reasonable cost and that they . . . it is sort of more efficient use of our dollars to continue to provide those services in Saskatchewan rather than send them all to somewhere else.

Mr. Allchurch: — Well thank you for the answer, Mr. Minister. In regards to this situation, you are so right that the physician at the time said he did not need or require an MRI immediately but needed an MRI.

On the second thing, the neurologist said he needed an MRI very soon because of a head injury, and the MRI was to detect whether it was a brain tumour, a blood clot, or an aneurysm. The test that came back from Edmonton showed that it was not a brain tumour and that it was not a blood clot, but they did not do a dyed MRI, and the dyed MRI is the only way you can detect for aneurysms, and that's what they feel he had.

Now he's fortunate enough that in the booking of an MRI through Saskatchewan, which is 12 weeks, which is . . . only leaves us eight weeks left, he will have that opportunity to have another MRI which we hope will be a dyed MRI which we can detect the outcome as far as aneurysms. Now eight weeks is a long time and with aneurysms he could die by then, and we pray to God that he doesn't.

But my main question is to you as the minister and to the health region. One doesn't know what they're going through with health unless you actually have this happen to your family members as itself.

And all I'm saying to the minister and to your department is waiting 12 weeks for a head injury where an MRI is needed and specifically specified by a neurosurgeon . . . or a neurologist, why is a waiting list so long? What does it take for a person to have a head injury that possibly is serious to be up in the period where they only have to wait two to three days for an MRI rather than 12 weeks?

(16:30)

Hon. Mr. Nilson: — Thank you for that further question. It's not possible for me to talk about an individual, but once again I'll talk about some of the concerns.

As you know it's interplay between the professional assessment of what's happened and the capacity of the system. I guess what I would say is that the capacity, in other words the number of MRIs that we can do in Saskatchewan has increased quite dramatically over the last number of years.

And to give you an example, in 1998-99 — so the period ending at March 31, 1999 — the total number that we did in Saskatchewan was 5,031; and they were all done in Saskatoon

because that was the only place we had an MRI. As of March 31, 2003 that number is 13,650 that we did in the province, so it's about two and a half times as many that we do just over a four-year period.

But one of the challenges that we have is that it's a tool that's used by the doctors and the specialists in many new ways as they figure out how to use it. And so it ends up being something where there'll always be some kind of a list of people who want to use the service. The important part is to get the people who need it or have the most urgent needs in a very orderly and quick way. And that's what we're trying to do, working together with the doctors and with the people who are managing these systems.

The Deputy Chair: — Why is the member on his feet?

Mr. Lorenz: — Request leave to introduce guests.

Leave granted.

INTRODUCTION OF GUESTS

Mr. Lorenz: — Thank you, Mr. Chair. Through you, to you to the members in the Assembly, I would like to take the opportunity to introduce a group of students that have travelled here from Macklin, Saskatchewan. They've been on the road I think for a number of hours already. There's 35 students as well as three teachers that are accompanying them — Rob Kozinski, Audrey McDine, and Barb Legge — as well as six chaperones that have accompanied them as well.

They've had the tour of the Legislative Building and I'm sure they'll be visiting some other places in the community of Regina as well. And I'll be meeting with them shortly after they've had some opportunity to observe the activity in the House here this afternoon. So if you can join me in welcoming the students from Macklin.

Hon. Members: Hear, hear!

COMMITTEE OF FINANCE

General Revenue Fund

Health

Vote 32

Subvote (HE01)

Mr. Allchurch: — Thank you, Mr. Chair. Mr. Minister, my final question to you today is . . . and you've just stated that there is an increase in MRIs in Saskatchewan and everybody knows that. Why doesn't the government use out-of-province MRIs to relieve the pressure in Saskatchewan if there's so many more MRIs they can place in Saskatchewan? And why doesn't the government pay for MRIs out of the province of Saskatchewan when it costs less than here in the province of Saskatchewan?

Hon. Mr. Nilson: — We do in fact have some patients, as I indicated earlier, go out of province for MRIs. The costs vary depending on the procedure, and so sometimes we end up with a higher bill, sometimes with a lower bill. If we do it through

the reciprocal arrangement, the cost is the \$655. But there are some other ones that in fact go out of the country because of whatever special circumstances there may be.

So the presumption that every procedure would be the cost of one that you have referred to is not what the experience is over many years. And so the other part of that is that we need to have this capacity in Saskatchewan at a rate that provides for the needs of the people. And so one of the challenges is to look at, well do you do more of these procedures?

One of the other challenges is that in the diagnostic imaging area, MRI is just one of a number of procedures that are done. And sometimes the MRI is the best one. Other times it may be one of the other newer technologies or even the old X-ray is sometimes that works the best. So it's a challenge that way.

Mr. Elhard: — Thank you, Mr. Deputy Chair. Through the Chair to the minister. Mr. Minister, I have a case that I'd like to bring to your attention. You may have some familiarity with it because my office has talked to your office a couple of times on various aspects related to this particular situation.

I have a constituent that came to our office in September of last year because of a situation involving a condition of the lungs. This constituent is in the final stages of pulmonary fibrosis and a lung transplant is this constituent's only hope of survival.

Now part of the issue, I guess, that was raised at the time with our office, was the position of the Department of Health in terms of paying for pre-op and post-op medications and medical issues that needed to be attended to.

My understanding is that if you are going to go into a heart transplant situation, the Department of Health pays for all pre-operative and post-operative costs associated with getting an individual up to good health and in good condition. There might even be a situation where dental work was required so that the fear of infection could be eliminated. When it comes to heart transplants those costs, in my understanding, are fully paid by the Department of Health.

But in the case of my constituent who is on a waiting list, in very serious need of a lung transplant, those costs are not attended to by the department. Would the minister confirm that that is the department's policy? And could he indicate whether or not that policy is under review and can we expect any changes in that regard?

Hon. Mr. Nilson: — Mr. Chair, I'd like to thank the member for that question because it goes to the heart of some of the challenges of how you deal with specific cases that come up that don't quite fit in with the general rule, the rules.

Now basically what happens is that if you're in hospital, the drugs are covered. But if you're in the community waiting for a particular procedure, they're not most of the time. And so when specific cases arise, it raises questions about the overall coverage of the drug plan.

Now basically the drug plan is set up to cover catastrophic costs; they're the ones that the costs are very large. And so often in . . . I think you referred to heart transplants. I think

some of the kinds of drugs related to heart transplants, those are really expensive drugs so they would get some coverage there. And maybe even because they're in hospital as they're awaiting for the transplant, they would be covered under our obligation under the Canada Health Act.

So it's a bit hard to compare but we know that there are a few places where we have to continually examine how the drug plan works. And the most recent example obviously is after a number of years we've ended up expanding the drug plan to include diabetic supplies. And that would have been something that wasn't there last year, and we continually examine these kinds of things and see whether or not that they can be included.

So it may be that there is a place where we should do some further review around transplant kinds of drugs but one of the questions then becomes, well are . . . you know, at what point do you introduce this coverage? And I think that's a valid community discussion.

Mr. Elhard: — Mr. Minister, in my understanding and having talked to the constituent and his wife, the minimum cost for some of the drugs that will be required once the transplant is achieved will be about \$1,500 — that's one drug, and it's a necessary drug — and I'm not sure what all the other costs are. And I think there has been some conversation with your office and with the drug plan administration directly over the suitability and the efficacy of the requirement for that particular treatment.

I guess, Mr. Minister, I don't want to be seen as splitting hairs but when we talk about the significance as a health procedure of a heart transplant, is there any less significance in terms of the consequences of having a lung transplant? It seems that if either one of them are not achieved or if either one of them fail, the consequence is the same. The result is the same for either patient. And I'm just wondering if those types of major transplant operations should not be treated in a similar vein.

(16:45)

Hon. Mr. Nilson: — Mr. Chair, the member raises another aspect of this as a very tough question. And I would have to say that Mr. Romanow, Mr. Fyke, Mr. Kirby, all tried to address this exact question. And it relates to the Canada Health Act where very sick people used to always be in the hospital, and so therefore their drug coverage was included as part of their hospitalization.

The world has changed in how medical treatment has developed, so that many times people are much more comfortable and thrive better if they take the medication, but they do it at home as they prepare for a very serious procedure like you've referred to. And you know, one of the recommendations — well I think recommendations from all of the different people who've examined this — is that the Canada Health Act doesn't fully address this issue around catastrophic drug costs.

And so in the premiers' accord in February, part of the money that was included in that accord from the federal government was to address some of the catastrophic drug costs and that's allowed us to examine anomalies or things that don't quite work

the way they did even 10 years ago, to see if we can't expand it.

It sounds to me like this whole area that you've raised is another one that I know we're examining, but we need to take even a harder look at it. And as we get some more resources over the next two years, it may be one that we can figure out a way to do this because one of the things that we've done in Saskatchewan, and we did I think probably the first jurisdiction in Canada — or the first or second — which was to include cancer drugs for palliative care for people, even if they weren't in the hospital.

And that was a change then from the policy that in the hospital you had all of your drugs paid for. When you're out of the hospital it wasn't as clear. So if you're a cancer patient, then you do get that kind of coverage.

It's hard to, on an evaluative scale, put a cancer patient over against a heart transplant, over against lung transplant, or many other serious kinds of things — and that's really the tough question that you've raised and it's a tough question for us. We're trying to address it, and we appreciate your assistance in asking the hard questions because that's how we'll solve it.

Mr. Elhard: — Mr. Minister, thank you. You know, I do believe that this is a tough question and I understand the nature of the question. I'm wondering if there will be some opportunity for me to contact my constituent though and give him some sense of hope on this?

Now if he has to wait two years for an answer, I don't think he's, frankly . . . Well he might survive that long, but his problem won't be addressed in a timely fashion.

So I guess I would ask whether the department can't look at this specific type of case — I won't ask for this individual case — but this specific type of case to be addressed as a priority in your considerations as to how to pay for those types of serious operations.

This particular gentleman is on a waiting list. He's a patient on a waiting list for this transplant in the city of Edmonton, at one of the Edmonton hospitals. I was just wondering if the minister could tell me, is that the preferred facility for this type of operation? Does the province of Saskatchewan, the Department of Health, routinely refer people for those major transplant operations to that facility in the city of Edmonton, or is it just that it's the most convenient one?

Hon. Mr. Nilson: — The question that the member raises about the Edmonton program, I think the information is that on the Prairies, there's the Edmonton program and the Winnipeg program, and we have some that go to Edmonton, some go to Winnipeg. It's often based on the professional referral relationships of the specialist in this field and who they've worked with before.

And so it's not something that we direct on the health system side. It's really the professional advice from the doctors involved in consultation with the patients.

Mr. Elhard: — Thank you, Mr. Minister. There are a number of questions I'd like to pursue on that particular line, but time is

running short and I have some other issues I need to bring to your attention today.

One of my colleagues earlier raised the matter of West Nile virus and the Department of Health has a program in place to help communities, I understand, to some extent as it relates to, not just education, but providing some remedial help in attending to West Nile issues in local communities.

And I understand that there are a set of criteria in place that are going to sort of direct where the money will go and what the standards for participation in the program will be. But my understanding also, Mr. Minister, is that you have set a minimum population level as part of the requirements to participate in the program. Would you tell us what that figure is and how your department justified those figures?

Hon. Mr. Nilson: — The question that the member raises around the West Nile virus funding program, we're working and deal with this together with the Municipal Government people and Government Relations.

Basically the rule of thumb is communities under 2,000 are asked to band together and bring an application as a group or . . . and that can include First Nations and the local community or other combinations. But I would say that in some areas of the province and I know that the area that the member represents, you have to cover a lot of miles to get 2,000 people together in some parts of that, and so we do consider applications on a case-by-case basis and obviously it relates to the sort of danger that's assessed for a particular area. But if there was a problem in a particular area that didn't meet the 2,000 population requirement, there'd be a way that we have in our process to evaluate that.

Mr. Elhard: — Thank you, Mr. Minister. I'm encouraged to hear that because the area I was thinking of in particular is in the Frontier area of the extreme south of the province. And with all of the people within a 40-by-40 square block, you couldn't come up with 2,000 people.

So I'll take it from what you've said that the individuals that are responsible for mosquito control — and there's a lot of water lying around down there after lots of flooding — those people should not hesitate to contact the Department of Health and you will look at their, their application as being extraordinary under the circumstances. Is that correct?

Hon. Mr. Nilson: — Yes, that's correct and this information was sent out in the letters that went to SARM (Saskatchewan Association of Rural Municipalities) and SUMA (Saskatchewan Urban Municipalities Association) when the program was originally announced. So it's something that people know about.

I'd like to thank the members for the questions this afternoon. And I'd like to thank the officials who are here, and I move that we report progress from this Committee of Finance and I ask for leave to sit again.

The committee reported progress.

The Assembly adjourned at 16:58.

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