



FOURTH SESSION - TWENTY-SEVENTH LEGISLATURE

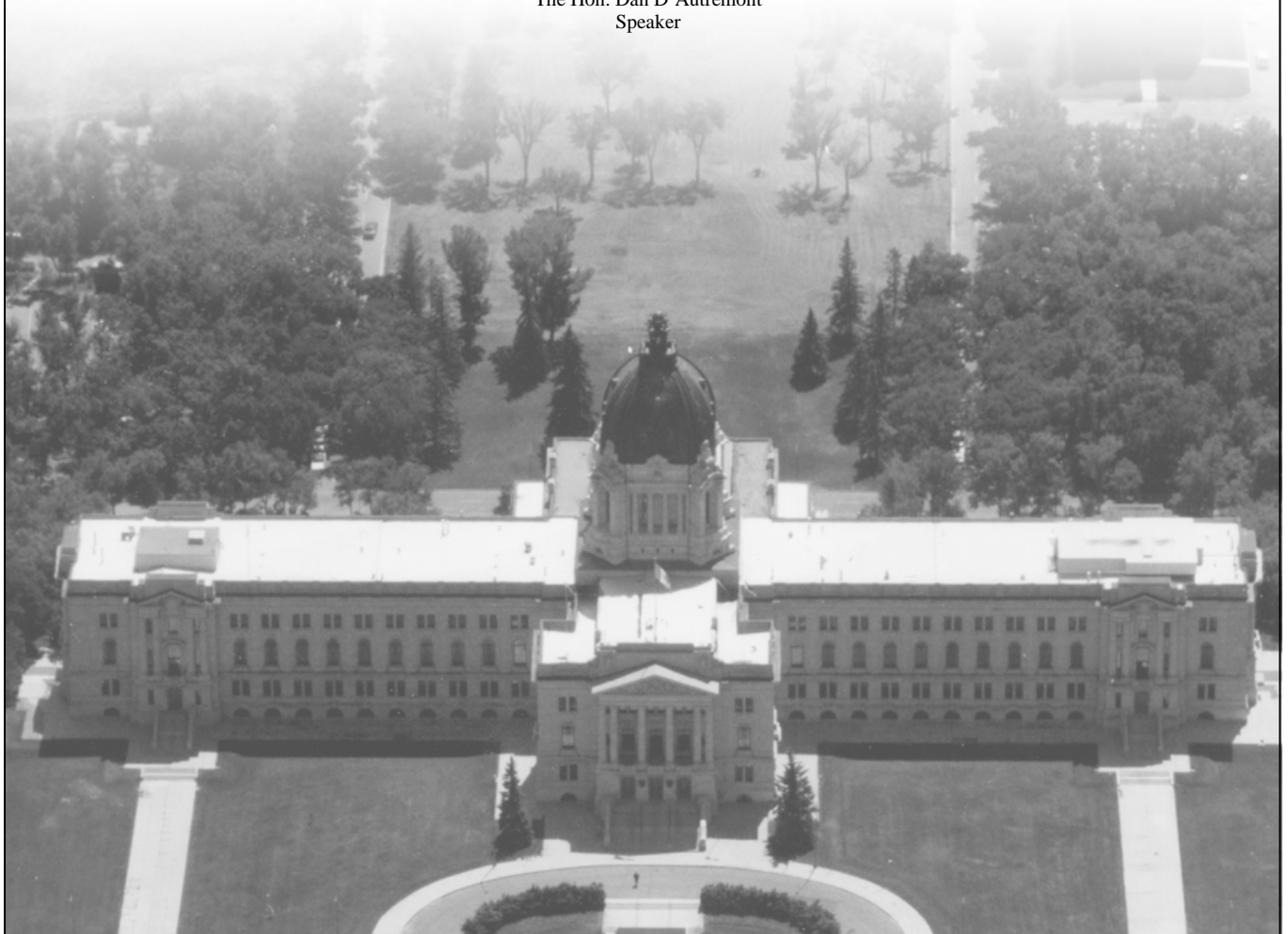
of the

Legislative Assembly of Saskatchewan

**DEBATES
and
PROCEEDINGS**

(HANSARD)

Published under the
authority of
The Hon. Dan D'Autremont
Speaker



MEMBERS OF THE LEGISLATIVE ASSEMBLY OF SASKATCHEWAN

Speaker — Hon. Dan D’Autremont
 Premier — Hon. Brad Wall
 Leader of the Opposition — Cam Broten

Name of Member	Political Affiliation	Constituency
Belanger, Buckley	NDP	Athabasca
Bjornerud, Bob	SP	Melville-Saltcoats
Boyd, Hon. Bill	SP	Kindersley
Bradshaw, Fred	SP	Carrot River Valley
Brkich, Greg	SP	Arm River-Watrous
Broten, Cam	NDP	Saskatoon Massey Place
Campeau, Hon. Jennifer	SP	Saskatoon Fairview
Chartier, Danielle	NDP	Saskatoon Riversdale
Cheveldayoff, Hon. Ken	SP	Saskatoon Silver Springs
Cox, Herb	SP	The Battlefords
D’Autremont, Hon. Dan	SP	Cannington
Docherty, Hon. Mark	SP	Regina Coronation Park
Doherty, Hon. Kevin	SP	Regina Northeast
Doke, Larry	SP	Cut Knife-Turtleford
Draude, June	SP	Kelvington-Wadena
Duncan, Hon. Dustin	SP	Weyburn-Big Muddy
Eagles, Doreen	SP	Estevan
Elhard, Wayne	SP	Cypress Hills
Forbes, David	NDP	Saskatoon Centre
Harpauer, Hon. Donna	SP	Humboldt
Harrison, Hon. Jeremy	SP	Meadow Lake
Hart, Glen	SP	Last Mountain-Touchwood
Heppner, Hon. Nancy	SP	Martensville
Hutchinson, Bill	SP	Regina South
Huyghebaert, D.F. (Yogi)	SP	Wood River
Jurgens, Victoria	SP	Prince Albert Northcote
Kirsch, Delbert	SP	Batoche
Krawetz, Hon. Ken	SP	Canora-Pelly
Lawrence, Greg	SP	Moose Jaw Wakamow
Makowsky, Gene	SP	Regina Dewdney
Marchuk, Russ	SP	Regina Douglas Park
McCall, Warren	NDP	Regina Elphinstone-Centre
McMorris, Hon. Don	SP	Indian Head-Milestone
Merriman, Paul	SP	Saskatoon Sutherland
Michelson, Warren	SP	Moose Jaw North
Moe, Hon. Scott	SP	Rosthern-Shellbrook
Morgan, Hon. Don	SP	Saskatoon Southeast
Nilson, John	NDP	Regina Lakeview
Norris, Rob	SP	Saskatoon Greystone
Ottenbreit, Hon. Greg	SP	Yorkton
Parent, Roger	SP	Saskatoon Meewasin
Phillips, Kevin	SP	Melfort
Reiter, Hon. Jim	SP	Rosetown-Elrose
Ross, Laura	SP	Regina Qu’Appelle Valley
Sproule, Cathy	NDP	Saskatoon Nutana
Steinley, Warren	SP	Regina Walsh Acres
Stewart, Hon. Lyle	SP	Thunder Creek
Tell, Hon. Christine	SP	Regina Wascana Plains
Tochor, Corey	SP	Saskatoon Eastview
Toth, Don	SP	Moosomin
Vermette, Doyle	NDP	Cumberland
Wall, Hon. Brad	SP	Swift Current
Weekes, Randy	SP	Biggar
Wilson, Hon. Nadine	SP	Saskatchewan Rivers
Wotherspoon, Trent	NDP	Regina Rosemont
Wyant, Hon. Gordon	SP	Saskatoon Northwest
Young, Colleen	SP	Lloydminster
Vacant		Prince Albert Carlton

[The Assembly met at 13:30.]

[Prayers]

STATEMENT BY THE SPEAKER

Ruling on Requirement for Royal Recommendation

The Speaker: — I have a statement to make regarding a ruling on Bill No. 613 and the requirement for a royal recommendation. Standing on the order paper for second reading under the name of the member for Saskatoon Nutana is Bill No. 613, *The Green Energy, Green Jobs and Diversified, Sustainable Economy Act*. The bill was introduced on May 4th, 2015.

As Speaker, it is my obligation to ensure that all bills are reviewed to determine whether a royal recommendation is required. The authority is found in rule 67(1) of the *Rules and Procedures of the Legislative Assembly of Saskatchewan* which states, and I quote:

Any vote, resolution, address or bill introduced in the Assembly for the appropriation of any part of the public revenue, or of any tax or impost to any purpose whatsoever, or to impose any new or additional charge upon the public revenue or upon the people, or to release or compound any sum of money due to the Crown, or to grant any property of the Crown, or to authorize any loan or any charge upon the credit of the Province, shall be recommended to the Assembly by Message of the Lieutenant Governor before it is considered by the Assembly. (See section 54 and 90 of the *Constitution Act, 1867*.)

The practice of this Assembly is for bills to be introduced and read the first time, with further progress being contingent upon the Speaker affirming that they are in order under rule 67. In Saskatchewan practice, consideration is taken to mean the first opportunity for debate. Pursuant to rule 24(3), this Bill could be designated a priority consideration. For this reason it is necessary for me to rule on the admissibility of this bill.

When a private member proposes a public bill to the Assembly, the test is to determine if it imposes a new responsibility, task, or commitment on the government that requires expenditures from the public treasury. That is, is there existing legislative authority for the expenditure of public funds?

Bill 613, *The Green Energy, Green Jobs and Diversified, Sustainable Economy Act* focuses on the promotion of energy efficiency, energy conservation, and renewable energy. The bill sets out specific reductions in electrical usage and greenhouse gas emissions while detailing specific targets for electricity generated from renewable energy sources. Clause 6 of the Bill requires the government to use existing resources.

The inclusion of this non-appropriation clause in effect requires that the new targets must be achieved within existing resources. In the absence of clause 6, this bill imposes substantial financial commitments on current and future governments. The new significant duties and costs outlined in the bill contain legislated

reductions in electrical usage, greenhouse gas emissions, and specific targets for non-hydro renewable energy sources. It is a well-established principle and detailed in several former Speaker rulings that a charge upon the public revenue for new or increased expenditures which are not already covered by legislative authorizations require a royal recommendation from the Crown.

There may be legislative authority to promote energy conservation, energy efficiency, fostering the growth of renewable energy projects, transitioning to clean, renewable energy sources, and reducing greenhouse gas emissions. Bill No. 613 goes further to provide specific targets to be met by 2050. These provisions require the government over the next 35 years to achieve the targets outlined in clauses 3, 4, and 5. Clause 6 of the bill requires the costs to achieve the targets must be from “using the existing resources available to them.” It is not reasonable to expect that the requirements to use existing resources could be sustained in perpetuity.

On August 7, 1997, Speaker Hagel ruled a similar non-appropriation provision out of order. The private member’s bill sought to create a health ombudsman and office of a health ombudsman. The bill established that the health ombudsman would not be remunerated or reimbursed from the General Revenue Fund, but may act on a fee-for-service basis. The bill provided no indication on how to fund the office’s accommodation, equipment, or other administrative expenses. Speaker Hagel ruled that “it is reasonable to expect that such operating costs will be incurred which consequently will create a charge on public moneys.”

I find that clause 6, the non-appropriation clause in Bill No. 613, is of a similar nature. In the absence of a non-appropriation clause, the bill would require a royal recommendation. The non-appropriation clause is used as a procedural device to avoid the conditions set out in rule 67. For that reason I must rule that Bill No. 613 requires a Crown recommendation, and because the member for Saskatoon Nutana is not a member of the Executive Council, I must rule the bill out of order and direct that it be removed from the order paper.

TABLING OF REPORTS

The Speaker: — I present herewith the report of the Legislative Assembly of Saskatchewan on the financial statements of Crown agencies for the years ending 2014 calendar year according to the provisions of section 14.1 of *The Provincial Auditor Act*.

As well I lay on the Table the report of the Legislative Assembly of Saskatchewan on the 2014 fiscal statements of CIC [Crown Investments Corporation of Saskatchewan] Crown corporations and related entities according to the provisions of section 14.1 of *The Provincial Auditor Act*.

ROUTINE PROCEEDINGS

INTRODUCTION OF GUESTS

The Speaker: — I recognize the Premier.

Hon. Mr. Wall: — Thank you very much, Mr. Speaker. I would ask leave of this honourable Assembly to make an extended introduction.

The Speaker: — The Premier has requested leave to do an extended introduction. Is leave granted?

Some Hon. Members: — Agreed.

The Speaker: — I recognize the Premier.

Hon. Mr. Wall: — Well thanks very much, Mr. Speaker. It's an honour for me to be able to introduce to you and through you to all members of the House the coaching staff for the 2015 Saskatchewan Roughriders football team. Mr. Speaker, we had the opportunity to invite the staff in last spring at about this time and introduce them both to the legislature and in the province and thank them for what they were about to do. And I'm happy to see that we are able to do it again. Maybe it can become a bit of a tradition each spring, just as winning the Grey Cup could be a tradition in the fall every year. That would also be good.

Mr. Speaker, we know that May is a great month for a number of reasons. Seeding is happening in earnest across the province, and training camp for the Riders is just a few weeks away. So I want to introduce to you and through you, all the members of the coaching staff.

You'll note, Mr. Speaker, there are a few changes from last year, quite a few changes. In the parliamentary system of government, which we were talking about a moment ago, we have cabinet shuffles from time to time. Well Coach Chamblin has undertaken a bit of a cabinet shuffle in advance of the season this year, and so there are some new faces we want to welcome and introduce. Of course the delegation — we'll ask each one maybe to give us a wave as I introduce them — the delegation from the Riders is led by the 2013 Annis Stukus award-winning Coach of the Year, Coach Corey Chamblin. There he is right there. There's our head coach.

Joining Coach Chamblin today are brand new offensive coordinator and quarterbacks coach, former British Columbia Lions staff member, Jacques Chapdelaine is here. Greg Quick is the new defensive coordinator. He has experience on both sides of the border. We're looking forward to what happens on defence this year. And back for a sixth season with the Riders and just a welcomed institution with the Saskatchewan Roughrider Football Club, Bob Dyce, the teams coach is here as well. Cory McDiarmid is here, the assistant special teams coordinator. Now, Mr. Speaker, members will know Cory worked with the team in 2013. Then he moved to Winnipeg and realized his mistake, and he's back with the Saskatchewan Roughriders this year.

Tyrone Pettaway is the linebackers coach. He's in his first year with the Riders. He's got both collegiate and NFL [National Football League] coaching experience. Now Jeremaine Copeland caught a lot of balls against the Saskatchewan Roughriders for the Alouettes, for the Argos, and for the Stamps, but he's now our receivers coach so we're welcoming him back. For the most part we're over all of those things, I think. We're probably over those. Tony Missick is another

first-year Rider coach. He's in charge of the DBs [defensive back]. We stole Tony from the Stamps, and we're not going to apologize to them for that.

Avon Cobourne is back for another season. He was obviously an excellent running back for the Montreal Alouettes and now is coaching up a great stable of running backs that we have in Saskatchewan. And, Mr. Speaker, it's an honour to introduce Mike Sinclair, the defensive line coach. Mike has coached with the Alouettes, coached with the Chicago Bears. He must be behind the clock. Mike is big, but that clock is very, it's pretty big. He played a number of seasons, 11 seasons actually with my son's favourite team, the Seattle Seahawks, and a team that's well known to the province because their punter is of course from, their touchdown-throwing punter is from Canada in Jon Ryan. But he played 11 seasons with the Seahawks and was a pro bowler on the NFL Pro Bowl team three times. Finally, Justin Chapdelaine is an offensive assistant. He's going to be helping out on offence as well this year, coaching. He went to Queen's. He's a Golden Gael that played football at Queen's.

Dan Dorazio, the new offensive line coach, couldn't be here today. He has 43 years of experience, including 18 in the CFL [Canadian Football League], Mr. Speaker. They've been having meetings, the coaches tell me, and getting ready for camp and getting ready for the draft.

And I just want to say on behalf of the province, I want to say thanks to them. Their life will be very much in a fishbowl over the entire season, a little bit like politics probably, frankly more severe in terms of the attention they get, and lots of us coaches watching every weekend and second-guessing the calls that they make.

And so we know they're here for all the right reasons, to bring home a championship for the Riders and also to be involved in the community. And I wonder if we should all just thank them for that, in addition to welcoming them here today to their Legislative Assembly.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Thank you, Mr. Speaker. On behalf of the official opposition, I'd like to join with the Premier in welcoming Coach Chamblin as well as the entire coaching and leadership of the Riders. It's great to see them here in the Assembly today.

And there are a few things in the province, Mr. Speaker, that certainly transcends politics, and I think the love for Rider nation is certainly one of those things. So welcome. We look forward to your contributions and the leadership that you'll provide to the team over this season, and it is something so important to all people in the province. I think every youngster in the province can remember, and then we remember as adults, that time where we got to meet with a Rider as a kid and all the activities out in the community. So thank you also for setting that tone and that expectation for the players as well.

[13:45]

You know, there's been occasion, Mr. Speaker, where on both

sides we've worn Rider jerseys here in the Assembly as a show of support, but I've never seen a watermelon worn in the Assembly here. I think if that request came in, we'd need one of those lengthy rulings by you. And I'm not sure who would do it on each side, but that's maybe something up for discussion in the coming days . . . [inaudible interjection] . . . The Education minister thinks the Speaker could wear it, so perhaps.

Anyway, Mr. Speaker, on behalf of the official opposition, a big welcome to the leadership of the Riders. We're looking forward to great things this season. Thank you so much.

The Speaker: — I recognize the member for Last Mountain-Touchwood.

Mr. Hart: — Thank you, Mr. Speaker. Mr. Speaker, seated in your gallery are 30 grade 8 and 9 students from Ituna School. They are accompanied today by their teachers, Mrs. Cindy Yanko and Ms. Rachel Groff. Also accompanying them are educational assistants Mr. Todd Schnell and Mrs. Alison Boczulak.

Mr. Speaker, I'm sure that these students have been very well prepared for their visit here today because one of their teachers, Mrs. Yanko, was an active participant in our recent Social Science Teachers' Institute. And I'm so pleased that she was able to bring, be part of this visiting group here today, Mr. Speaker. I'm hoping to have an opportunity to have a visit with them after they watch the proceedings in the Chamber here, and I would ask my colleagues to welcome them to their Legislative Assembly.

The Speaker: — I recognize the member for Regina Rosemont.

Mr. Wotherspoon: — Thank you, Mr. Speaker. It's an honour to welcome two exceptionally strong community leaders to their Assembly here today: Ms. Renu Kapoor and Ms. Rani Bilkhu. These two are driving forces of so much good within our community on so many fronts, raising dollars for important causes, and such an incredible investment of time and leadership into the India Canada Association of Saskatchewan.

And whether it's upcoming Mosaic, where I look forward to joining them in attending bar, serving up some cold Kingfishers and mango lassi, or whether it's India in the Park or whether it's India Republic Day or whether it's India Night, these two leaders do an incredible job of enriching our province and bettering the lives of so many. So I ask all members to join with me in welcoming Ms. Rani Bilkhu and Ms. Renu Kapoor.

The Speaker: — I recognize the Minister of Culture, Recreation and Sport.

Hon. Mr. Docherty: — Thank you, Mr. Speaker. I'd like to join with the member opposite as well in welcoming Renu and Rani to the legislature today. They are tireless workers in relation to India Canada Association. I've enjoyed their hospitality on a number of occasions. And I'd just like to join with the member opposite in again welcoming you here and congratulating you on all your efforts plus all the awards that you seem to collect in your wheelbarrow there, Renu, and well deserving. But again I'd like to have all members join me in welcoming them to their Assembly. Thank you.

The Speaker: — I recognize the Minister for Social Services.

Hon. Ms. Harpauer: — Thank you, Mr. Speaker. It's indeed my pleasure today to introduce 38 fabulous grade 12 students from the Humboldt Collegiate Institute in Humboldt, along with their teachers, Mr. David Millette and Mrs. White, and parent chaperone, Mrs. Janet Nunn.

Mr. Speaker, Mr. Millette has brought his students here every year for I'm not sure how many years now, but he is very dedicated to bringing a classroom to this Assembly and showing them how democracy works here in Saskatchewan. So we always enjoy his class coming, and I'm looking forward to meeting with them later. So I want everyone to join me in welcoming this fabulous grade 12 class to their Assembly.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Thank you, Mr. Speaker. To you and through you to all members, I'd like to introduce someone who's seated in your gallery who has visited the Assembly before. That's Mr. Adam Duke who is our candidate in the next provincial election in Humboldt-Watrous. And it's great to have Adam in the Assembly today, an energetic individual who does a tremendous amount in his community, and we're very happy to have him on the team. So I'd ask all members to join me in welcoming Adam to the Assembly today.

PRESENTING PETITIONS

The Speaker: — I recognize the member for Saskatoon Centre.

Mr. Forbes: — Thank you very much, Mr. Speaker. I rise today to present a petition calling for support for better schools here in Saskatchewan. We know that far too many of our classrooms are overcrowded and under-resourced, and that the Sask Party government eliminated hundreds of educational assistant positions, and that students often do not get the one-on-one attention that they need, and that the condition of many of our schools is run down, unsafe, or unexpected. And this government refuses to release the information on the \$1.5 billion of known repairs that are needed in our schools and, Mr. Speaker, this is not acceptable given the record revenues this government has had over the last eight years. Mr. Speaker, I'd like to read the prayer:

We, in the prayer that reads as follows, respectfully request that the Legislative Assembly of Saskatchewan call on this government to immediately stop ignoring schools and start prioritizing students by capping classroom sizes, increasing supports for students, and developing a transparent plan to build and repair our schools.

Mr. Speaker, I do so present. Thank you.

The Speaker: — I recognize the Opposition Whip.

Mr. Vermette: — Mr. Speaker, I rise to present a petition. People who signed this petition would like the Assembly to know that there is a definite need for a long-term care facility in Creighton, Denare Beach, and area and that the health region is in a code red when it comes to senior care beds. And they want the Assembly to know that most seniors in the North cannot

afford private care homes and the lack of services in Creighton-Denare Beach puts a huge financial burden on the elderly and their families. And the prayer reads:

Wherefore your petitioners humbly pray that your honourable Legislative Assembly may be pleased to cause the government to treat northern Saskatchewan senior citizens with respect and dignity and to immediately invest in a new long-term care facility in the Creighton-Denare Beach area.

It is signed by many good people of Creighton. I so present.

STATEMENTS BY MEMBERS

The Speaker: — I recognize the member for Moose Jaw North.

Family First Radiothon in Moose Jaw

Mr. Michelson: — Thank you, Mr. Speaker, last Thursday and Friday I, along with the member from Moose Jaw Wakamow, participated in the ninth annual Family First Radiothon in Moose Jaw. The 36-hour radio marathon was hosted by Moose Jaw Health Foundation and the CHAB 800 radio station at the Town 'n' Country Mall. Funds raised through the radiothon go toward the Moose Jaw Health Foundation's capital equipment campaign to help equip the new Moose Jaw regional hospital which is set to open later this year.

Mr. Speaker, the fundraising total goal for the radiothon was \$750,000. I am pleased to announce that this goal was well surpassed with the final tally of funding totalling \$1,004,529.

Mr. Speaker, the largest and most surprising donation was announced just before the radiothon ended at 6 o'clock Friday evening. Kelly McElree, executive director of the Moose Jaw Health Foundation, presented a gift of \$600,000 from the estate of the late Catherine Klassen, a retired teacher and published author. Generous donations were also made by area businesses, community groups, individuals, and families.

Mr. Speaker, I ask all members to join me in congratulating the Moose Jaw Health Foundation and 800 CHAB on the success of the Family First Radiothon, and to thank the people and businesses of Moose Jaw and area for their outstanding generosity. Thank you, Mr. Speaker.

The Speaker: — I recognize the member for Regina Rosemont.

Caring Canadian Award to Regina Volunteer

Mr. Wotherspoon: — Thank you, Mr. Speaker. It's my pleasure to rise in the Assembly to recognize a remarkable Regina resident, committed volunteer, and friend, Ms. Renu Kapoor. Renu has called our city home for more than 40 years and her volunteerism is legendary. It was for her years of community service and dedication to improving lives of others that she was recently awarded a Caring Canadian Award by our Governor General, the Right Hon. David Johnston. This prestigious award is given to Canadians who demonstrate an outstanding commitment to volunteer work, and it's hard to imagine how anyone could be more deserving than Renu.

Over the years she has shown leadership through her work with the Canadian Centre for Substance Abuse, the Regina Public Library, the Regina Housing Authority, SaskCulture, the Regina chapter of Osteoporosis Canada, the Regina Association of Fundraising Professionals, the South Saskatchewan Community Foundation, just to name a few.

I've observed Renu's tireless leadership on so many fronts in our community but I want to specifically recognize her incredible leadership and support of the India Canada Association of Saskatchewan, a very active and very vibrant association that contributes mightily to our province on so many fronts. Appropriately she was also this year's recipient of the University of Regina President's Community Award.

So I ask all members to join me in congratulating Renu Kapoor on her well-deserved awards and also in thanking her for her years of leadership, making Regina and Saskatchewan a better place for everyone. Thank you, Mr. Speaker.

The Speaker: — I recognize the member for Saskatchewan Rivers.

Girl Guides Clean Up New Home

Hon. Ms. Wilson: — Thank you, Mr. Speaker. Recently I had the opportunity to bring greetings at the Tim Hortons Community Clean-Up event put on by the Girl Guides Evergreen District. The Tim Hortons Community Clean-Up is a special event which brings Girl Guides together each spring to perform community service in the Prince Albert area.

This year's event was extra special as it was the Girl Guides' first gathering at their new home in the Prince Albert Wildlife Federation building. This group had to search for a new home after discovering that the roof of the Girl Guides' hall in Prince Albert was in need of extensive repairs.

The wildlife federation has gladly welcomed the Girl Guides into their facility and look forward to having a mutually beneficial relationship. In the past, the wildlife federation has had difficulty finding volunteers to clean up its site. The Girl Guides will now play a major role in this task.

Mr. Speaker, Girl Guides of Canada started in 1910 and since then 7 million Canadian girls have been involved in guiding. Girls from ages 5 to 18 can participate in Girl Guides, which aims to aid in cognitive and educational development for young girls and professional development for young women.

I ask all members to join me in congratulating the Girl Guides Evergreen District on their new home and in thanking them for their community service. Thank you, Mr. Speaker.

The Speaker: — I recognize the member for Saskatoon Riversdale.

Support for Breastfeeding in Saskatoon

Ms. Chartier: — Thank you, Mr. Speaker. I'm so pleased to rise in the House today to recognize an important new initiative in Saskatoon. Last week Saskatoon Breastfeeding Matters, a not-for-profit organization of mothers and health professionals

working together since 1988 to protect, promote, and support breastfeeding in the community as a biological, ecological, and cultural norm, announced that it has partnered with the Saskatoon Health Region to develop two new programs, the breastfeeding protection pledge and the passport to breastfeeding.

The breastfeeding protection pledge is a training program for businesses, community centres, and other public spaces where the employees learn about the benefits of breastfeeding and how they can make sure that they provide a welcoming environment for breastfeeding families.

The passport to breastfeeding provides moms with a list of places in the city that have taken the breastfeeding pledge. The passport is given to new mothers by the health region at their child's two- and four-month checkups.

Despite the fact that the right to breastfeeding any time, anywhere is protected in human rights legislation, many moms don't feel comfortable breastfeeding in public because of a lack of public awareness and understanding. These new projects will help to promote and support breastfeeding in our community and raise awareness about the benefits of breastfeeding.

I ask all members to join me in thanking Saskatoon Breastfeeding Matters as well as the Saskatoon Health Region and all the participating businesses and community centres that are taking the pledge and making sure that breastfeeding mothers feel safe and included in Saskatoon. Thank you.

The Speaker: — I recognize the member for Regina Walsh Acres.

Long-Time Business Changes Hands

Mr. Steinley: — Thank you, Mr. Speaker. International companies are recognizing the benefits of doing business in Saskatchewan. Mr. Speaker, last week Finning International reached an agreement to buy Kramer Ltd. for approximately \$230 million. Finning International is the world's largest Caterpillar equipment dealer. Finning serves customers in various industries including mining, construction, petroleum, forestry, agriculture, and a wide range of power system applications. Finning's will build on Kramer's strong heritage by growing the business, providing great customer experience, and contributing to Saskatchewan communities.

Scott Thomson, the CEO [chief executive officer] and president of Finning International, said that, and I quote, "Expanding Finning's Western Canadian operations into Saskatchewan is a great strategic fit and represents a compelling growth opportunity for our company, employees, customers, and shareholders." Mr. Speaker, our government welcomes business ownership and investment in the province. We are excited to see a business like Finning International choosing to build, work, and invest in our province.

Mr. Speaker, we'd like to thank the whole Kramer family for what they've contributed to Regina and Saskatchewan over the last 70 years. Founded by Robert A. Kramer in 1944, then headed by his son Don Kramer, and for the last 20 years, Tim Kramer has been at the helm, the Kramer name was

synonymous with not only great customer service and a quality product but with giving back to the communities in which they worked in business.

I ask all members to join me in thanking Kramer for their 70 years of business, and I'd like to welcome Finning International to Saskatchewan.

The Speaker: — I recognize the member for Melfort.

Melfort Shelter Rebuilds Following Construction Fire

Mr. Phillips: — Thank you, Mr. Speaker. I'm pleased to rise in the House today to talk about this government's recommitment to an emergency shelter that will provide a safe haven for up to 20 women and children who are victims of family violence. Mr. Speaker, I've spoken about this shelter before, and I don't think anyone needs to be convinced about what a good project it is.

[14:00]

Thanks to the vision and commitment of the North East Outreach and its supporters, this shelter in Melfort is being rebuilt after a construction fire destroyed it last November. That fire, although devastating to the community, didn't bring this dream of this emergency shelter to an end. Mr. Speaker, I am very proud that Saskatchewan Housing Corporation, along with their federal counterpart CMHC [Canada Mortgage and Housing Corporation], are jointly contributing over \$1.6 million to this shelter.

The whole northeast of the province believes in the good that this shelter can bring. In fact I attended the Walk a Mile in Her Shoes event just last week to raise money for the shelter, as well as awareness of domestic violence. Although I was unable to put on the sky-high red heels this year, it was amazing to join with the men wanting to spark the conversation about domestic violence.

Mr. Speaker, I ask that all members join me in recognizing the good work of the North East Outreach and Support Services on this project. Thank you, Mr. Speaker.

The Speaker: — I recognize the member for Saskatoon Sutherland.

Saskatchewan Employment Statistics

Mr. Merriman: — Thank you, Mr. Speaker. The new unemployment numbers were released on Friday by Statistics Canada. Lo and behold, Mr. Speaker, Saskatchewan once again has the lowest unemployment rate amongst all the provinces for April at 4.3 per cent. More importantly, this province has the lowest unemployment rate in the country for 19 straight months. That's four premiers in Alberta time, Mr. Speaker.

There's 7,700 more people working year over year in the province, and full-time employment is up 14,800 year over year. These are quality jobs in educational services, health care, and social assistance, support services in businesses across Saskatchewan, and jobs in finance, insurance, and real estate. Even our young workers are enjoying the strength of Saskatchewan, as our youth unemployment rate was the lowest

in Canada at 9.3 per cent.

Even though the Leader of the Opposition doesn't even want to mention highways, agriculture, or the economy in estimates, it's clear that business is still strong, thanks to a diversified economy here in Saskatchewan. And if the Deputy Leader of the Opposition was really worried about manufacturing jobs, Mr. Speaker, he could have voted in favour of the tax incentives for manufacturers in this year's budget.

So for all our Alberta neighbours who may be looking east for opportunity, SaskJobs has more than 11,000 jobs as of this morning. And in this side of the House, we'll be working to ensure businesses and entrepreneurs keep creating more jobs in Saskatchewan. Thank you, Mr. Speaker.

QUESTION PERIOD

The Speaker: — I recognize the Leader of the Opposition.

Quality of Care in Health Facilities

Mr. Broten: — Dolores Surbey was 84 years old. Last summer on the evening of June 30th, Dolores and her husband were in a car accident because the other driver ran a red light. The jaws of life were required to get Dolores out of the car. Dolores's daughter says:

They were taken to RUH emergency department where they were eventually assessed and discharged that night. Both my parents have numerous medical conditions, with my mom being anticoagulated on warfarin for approximately 12 hours. At no time during the emergency room assessment was admission for observation offered, as there were no available beds. My wonderful, loving mom experienced a massive brain bleed on July 2nd at home, transferred to RUH, placed on life support, and died July 3rd surrounded by family. My dad is now living without his partner of 62 years.

Dolores's family wasn't even told that she had broken ribs when the hospital sent her home, and just a couple of days later she suffered a massive brain bleed. My question to the Premier: what does he have to say to Dolores's family?

The Speaker: — I recognize the Premier.

Hon. Mr. Wall: — Thank you very much, Mr. Speaker. I thank the member for raising these questions and this particular case. To Dolores's family, we offer our deepest sympathies and concerns for the case that has just been described by the Leader of the Opposition.

Mr. Speaker, if members of the family are here today, I know the Health minister will want to meet with them and determine exactly, you know, what happened in this regard in that process and ask the questions that should be asked with respect to what happened to Dolores, which we don't want to happen to anybody in the province of Saskatchewan, Mr. Speaker. And I know the Minister of Health will be ready for that meeting today.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Mr. Speaker, two of Dolores's daughters are here today as well as a son-in-law. Dolores's daughter, Jan, is a registered nurse and is a certified geriatric nurse, so she certainly has a lot of experience and insight to draw upon. Jan says this: "My mom lived a full, productive life as a contributing member of the community of Saskatoon. Her end of life should not have looked like this."

Mr. Speaker, because of the severity of the car accident, because of other medical conditions, Jan says Dolores should have been kept for observation, and she should have been monitored and given some other tests, Mr. Speaker, that could have saved her life. The story in speaking with the family, Mr. Speaker, is absolutely heartbreaking. Does the Premier recognize that overcrowding in emergency rooms and hospitals has tragic consequences?

The Speaker: — I recognize the Premier.

Hon. Mr. Wall: — Thank you very much, Mr. Speaker. I thank the member for the question. I'm not sure, in the case of the tragic loss of Dolores, if there has been a critical incident investigation undertaken, as is often the case with respect to tragedies like this within the health care system. The Minister of Health informs me that the region, I think, or perhaps the quality care coordinator has been in contact with the family. I don't know the nature of that interaction, whether there were any satisfactory answers provided to the family, answers that they would consider to be satisfactory. But I also understand the minister's office is aware of this particular tragedy.

And again we offer our condolences to the family and commit to look into this particular case so that if there is something that can be prevented in the future, that it would be prevented. Although that isn't any particular solace, understandably, to Dolores's family today.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Mr. Speaker, Dolores's family, they do not blame the doctors or the nurses or the other front-line workers, Mr. Speaker. They know that these people are doing their best to provide care under challenging conditions. What they're concerned about are the decisions that are made by politicians and upon layer upon layer of health care administrators, Mr. Speaker, decisions that are really out of touch with what the reality is like on the front lines of health care.

This leads to cuts in areas that really matter, while funds are inappropriately allocated. This leads to hospitals being turned into factories, moving patients as fast as possible. And, Mr. Speaker, this leads to premature deaths.

My question's for the Premier. Does this government keep track of these types of tragic situations? How often are people being sent away from emergency rooms without a proper diagnosis or treatment, and dying?

The Speaker: — I recognize the Premier.

Hon. Mr. Wall: — I thank the member for the question. The answer is yes, if it is a critical incident, no matter the circumstances surrounding the critical incident with respect to a

discharge or any other event within the health care system that would have caused, that might be a part of the reason for a critical incident occurring or the entire reason.

And, Mr. Speaker, we know that in health care in the province of Saskatchewan, we need to continue to invest in new resources so that the experience that people have with the system can be something decidedly different than what we're talking about with respect to what has happened to Dolores.

And that's why, over the last number of years, we have significantly increased both human resources so we have more of those front-line people working in the province today in terms of nurses, in terms of doctors, in terms of care aids — more, significantly more in respect of all of these different categories. It's why we've invested record amounts in capital as well too.

And more work is needed with respect to the system in terms of our structures. You know, we acknowledge, Mr. Speaker, that there is more work that needs to be done. We have though, however, been undertaking record-breaking investments in health care on the human resource side, on the capital side, on the operating side.

We're also looking to make sure the money is used most effectively and have a concern, with respect to that particular issue, that the money is being used efficiently in the interest of patients, in the interest of people like Dolores and her family. And so we're going to continue to do that good work. In this specific case, we'll do whatever we can to find out what happened, on behalf of the family and the loved ones of Dolores.

The Speaker: — I recognize the Leader of the Opposition.

Capacity of Health Facilities

Mr. Broten: — Mr. Speaker, the family has been working very strongly and co-operatively in trying to find out answers to their mom's situation. As far as they know, there's been no critical incident investigation, Mr. Speaker, as the family informs us.

Mr. Speaker, we've heard from doctors and nurses and front-line health care workers that terms like overcapacity alert, bed crisis, and hallway medicine are now incredibly common. And we've heard, Mr. Speaker, from families whose loved ones have gone to an emergency room and have been sent away without a proper diagnosis or treatment, and they have died.

A coroner's jury even recommended that this government increase the hours for the emergency room at Saskatoon City Hospital in order to address this exact problem. Mr. Speaker, having City Hospital emergency room operating longer and properly would take the pressure off of RUH [Royal University Hospital] and St. Paul's. And we know that it would mean people like Dolores wouldn't be sent home when they should be kept for observation.

My question to the Premier: will he finally do the right thing and expand the hours for the emergency room at Saskatoon City Hospital?

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Thank you very much, Mr. Speaker. Mr. Speaker, the waits that people are waiting in our emergency departments have been something that has been a concern for this government for several years now. Mr. Speaker, I can inform the House, as the members opposite will know, that in this budget in fact our emergency department initiative dollars have gone up from \$1.7 million last year to \$4.7 million this year, a \$3 million increase. What that is providing for is a provincial team that is made up of physicians, providers, partners from the health regions, the ministry, but most especially patients and patient representatives, looking at ways to lower our wait times.

We know, Mr. Speaker, that emergency department waits are really a symptom of other problems that are happening in our health care system. That's why this government has provided for funding for a new process for patient treatment and assessment at Regina Qu'Appelle. That's seeing a reduction in time to assessment. We're also investing in police, police and crisis teams both in Regina and Saskatoon to see those people that don't need emergency rooms getting the service where they need. So, Mr. Speaker, we are concentrating on the emergency department to reduce those waits, but we have to concentrate outside of the ED [emergency department] as well.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Mr. Speaker, that response isn't addressing the question. And the issue at hand here is the fact that Dolores was sent away without a proper diagnosis and treatment, Mr. Speaker, when she needed observation. She needed to be watched.

You know, Saskatoon City Hospital, Mr. Speaker, is significantly underutilized. Much of this beautiful hospital is filled with offices and clinics. If City Hospital were actually open for acute care beds, it would take significant pressure off of RUH, Royal University Hospital, and St. Paul's Hospital. It would mean that people like Dolores, when they arrive in emergency rooms by ambulance, that there would be space there to observe them and save their lives, Mr. Speaker, instead of rushing them out the door because there aren't any beds.

My question to the Premier: why won't he agree to reopen Saskatoon City Hospital to acute care?

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Mr. Speaker, first of all, I do want to correct the Leader of the Opposition. City Hospital does provide for acute care. I don't want him to be able to leave the impression that it doesn't offer acute care for the people of Saskatoon and area.

Mr. Speaker, we know that there are pressures within the system, particularly around the capacity within our major tertiary centres. That's why under this government, the total number of hospital beds in the city of Saskatoon has been increased by 17 per cent since this government formed office in 2007. That's the total number of hospital beds. When you break that down to acute care beds, it's up 12 per cent, Mr. Speaker.

So the days are gone where we had our tertiary facilities in this province closing acute care beds to the citizens of this province. We've worked hard in the last seven years to actually open, reopen acute care beds that had been closed over those years.

Mr. Speaker, I know that Saskatoon, I think we all know that Saskatoon has been working on their capacity issues. They went through a 14-day challenge to empower their front-line staff that's actually seen a reduction in the number of temporary beds and patients waiting without a bed, Mr. Speaker. They're going forward with a 90-day process, and I think we'll see some positive benefits after that process is complete.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Mr. Speaker, we know at City Hospital most of the space is used for offices and for clinics. The minister, Mr. Speaker, needs to speak with front-line physicians who are incredibly frustrated, incredibly frustrated with the direction that this government has taken Saskatoon City Hospital when it comes to providing acute care.

We need Saskatoon City Hospital to be properly utilized. We need more long-term care spaces, better home care supports to take pressures off of care facilities. We need to cut bloated administration and put an end to the massive amount being spent on consultants and this government's lean pet project. We need to make sure that resources are put onto the front lines and empower doctors and nurses and front-line workers to make the decisions that they are trained to do. And, Mr. Speaker, we need a seniors' advocate as an independent officer of the Legislative Assembly.

Those are meaningful steps that would go a long way to ensuring that no other senior like Dolores is sent away from the emergency room because there's no room for her because the hospital is overcrowded. My question to the Premier: will he agree to any of this?

[14:15]

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Mr. Speaker, we certainly agree to continuing to make improvements when it comes to the health care system in this province. Mr. Speaker, Saskatoon Health Region has used City Hospital space to open an additional 28 beds for convalescent care. This began in November of 2014 to help take capacity off of the other two sites. As well, I can inform the House that through funding from this government we are seeing, for example, funding provided to ensure that the people that actually need to be in the emergency room and the beds are available in our hospitals, that we're providing services outside of the areas where the health care system has those interactions.

So for example, Lighthouse has a paramedic pilot project that has a paramedic station at Lighthouse for 12 hours a day, 7 days a week in order to reduce the number of calls and reduce ER [emergency room] visits. This came about as a part of the 14-day challenge in that health region. Mr. Speaker, I mentioned the police and crisis team. I can tell members in the first six months of the program, there were almost 250 patient

contacts with less than half of those requiring an emergency room visit. Mr. Speaker, I think in the past that nearly all of those visits would have seen patients inappropriately going to the emergency department.

So we need to better utilize the capacity that we do have in the system. That's certainly what Saskatoon Health Region is looking at, and we are supporting that as a ministry.

The Speaker: — I recognize the Leader of the Opposition.

Mr. Broten: — Mr. Speaker, Dolores's family, they loved their mom and they loved their dad. They're an incredibly reasonable family, well informed, Mr. Speaker, well spoken. They want to have answers for their mom's situation, but they don't want this repeated for any other family. They don't want a list read. They want to be heard, and they want some real answers, Mr. Speaker, about how this could happen to their mother.

Mr. Speaker, we've heard from many other families who have been let down when they show up in our emergency rooms. Dolores's daughter, Theresa, has this to say: "If anybody thinks the system is working, I would just get them to think about their loved ones and elderly parents and then maybe do a little worrying."

Mr. Speaker, families need to stop being put through this, where they need to come to the legislature to get answers, Mr. Speaker. Every person deserves care, top-quality care here in the province. My question, Mr. Speaker, to the Premier: what will it take for the Premier and his two Health ministers to take this seriously?

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Thank you, Mr. Speaker. Certainly we take this very seriously. Mr. Speaker, this is something that we have, as a ministry and as a government, have put a great deal of focus, whether it be on shortening the wait times that people wait for surgery in this province which was unacceptable, Mr. Speaker, the amount of time that people are waiting in emergency departments. We know that that is too long and we're working to address that as well.

That's why this government, despite the fact that this was a more challenging budget, this government found three additional millions of dollars to put into our emergency department waits, Mr. Speaker, where we not only have clinicians but also family members being a part of looking at solutions to these problems that we have in the system. And I would certainly not only make the offer to Dolores's family for me to meet with them, but to be a part of that, Mr. Speaker, if they feel like that's something that they want to contribute back to the system.

Mr. Speaker, in terms of the initiatives that we are working at, we know that more has to be done. That's why we are taking direct action. That's why we are funding action in our health regions to see that this never happens again to any family member in this province.

The Speaker: — I recognize the member for Saskatoon Riversdale.

Support for the Lean Initiative

Ms. Chartier: — Last year just one in four nurses had a positive view of this government's lean pet project. That was bad enough, but that number has plummeted over the last year. Now less than 1 in 10 nurses in our province have a positive view of lean. From 1 in 4 to less than 1 in 10 — are either of the two Health ministers alarmed by this?

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Thank you, Mr. Speaker. Mr. Speaker, I'm pleased to take this question. Mr. Speaker, it allows me an opportunity to perhaps talk about even what we just have finished talking about, about our emergency departments.

Mr. Speaker, I can tell you that in Saskatoon Health Region for those patients presenting at RUH, for cardiac patients presenting, because of work using a lean tool, lean methodology, the time that it has taken from a person entering the emergency department to when they . . . a wait time for somebody at RUH has been a 58 per cent reduction, Mr. Speaker, using lean principles. This is empowering front-line staff to make those changes.

At St. Paul's Hospital a RPIW [rapid process improvement workshop], a lean tool, was used at the emergency department to reduce the time that a patient waited to enter the emergency department to when they had a bed and were placed in a bed is down by 50 per cent, Mr. Speaker, at that one hospital. So we know that it is one tool that we use but it has to be, go in line with ensuring that we have the right number of front-line staff. And that's what this government has worked hard to achieve.

The Speaker: — I recognize the member for Saskatoon Riversdale.

Ms. Chartier: — Less than 10 per cent of nurses have a positive rating of this government's approach to lean, about 27 per cent have a neutral view, and more than 60 per cent of nurses in our province have a negative view of this government's lean pet project. They say lean is not patient centred, and they say it's not appropriate for health care settings. Are either of these two Health ministers ready to admit that this government has made huge mistakes and wasted a ton of money with its lean pet projects?

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Thank you, Mr. Speaker. Mr. Speaker, well I can tell you that lean has been used at the Moose Jaw Union Hospital in the emergency department. That has seen a reduction in the time it takes for a level 3 — so in our CTAS [Canadian triage and acuity scale] 1 to 5 — a level 3 patient arriving to have an initial assessment by a physician is down because of lean tools by 46 per cent.

Here's what Nicole, an RN [registered nurse] nurse in emergency room said, "These changes will decrease the patient load I am responsible for, lower frustrations, and improve the care that I'm able to provide to my patients, hopefully improving patient's satisfaction of their time in ER." Dr. Allie from emergency says about this process, "Exciting is the word

that comes to mind when I think about an RPIW, a rapid process improvement workshop. It has positively contributed to the patient journey in ER and efficiency of clinical processes."

Mr. Speaker, we know that for some health care workers perhaps haven't had an experience, front-line staff haven't yet had an experience with being part of a lean process or a lean project, but we know, Mr. Speaker, that we're seeing positive results by those that have had an effect, have had an interaction with it, Mr. Speaker. We think that this is something that will prove to be a benefit for the system.

The Speaker: — I recognize the member for Saskatoon Riversdale.

Ms. Chartier: — Mr. Speaker, less than 1 in 10, I think speaks volumes. Here is what one nurse said:

It really boggles the mind that lean was even considered in the first place. As caregivers, we are dealing with human beings under stress and anxiety concerned about their condition. We also have to communicate with family members. It may take X number of minutes to administer a medication, but it may also take X number of minutes to listen to a patient's concerns, answer questions, and maybe even sit at the bedside and hold a hand while they express their fears. We are not robots. We are caregivers.

No wonder the vast majority of nurses can't stand this government's lean pet project because it's all about stopwatches, and it's not about making decisions that are in the best interests of each patient. And when you take away the freedom of doctors and nurses to make important health care decisions, the consequences for patients like Dolores can be tragic.

To the minister: will this government finally recognize that its lean pet project is harmful, and will it redirect those resources to the front lines where they are desperately needed?

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Thank you, Mr. Speaker. Well again, Mr. Speaker, I can tell you what certainly a number of health care providers have been saying as it relates to their involvement in lean.

Mr. Speaker, I know that the member opposite is very interested in the mental health services that we provide as a province. In our in-patient, 50-bed unit we've seen wait times of up to 18 hours, and 36 per cent of patients were inappropriately admitted into the ward. Lean initiative has dropped that wait time for admissions to three hours and 37 minutes — from 18 hours to three hours and 37 minutes.

This is what Dr. Abdulla has to say about it: "I was a physician skeptic. Now I'm a physician champion for lean initiatives." Here's what a patient had to say. This is Jessica who's been a patient in the Regina Qu'Appelle mental health:

Prior to my participation, I was very frustrated with the admission process from emergency to mental health unit. Over the past week, I've seen a vast change in the

admission process, and I'm so glad to see the standard work has been implemented.

Mr. Speaker, we're seeing real results for the patients in this province.

The Speaker: — I recognize the member for Saskatoon Centre.

Gay-Straight Alliances

Mr. Forbes: — Thank you, Mr. Speaker. Last Thursday Sask Party MLAs [Member of the Legislative Assembly] used some very strange logic while discussing gay-straight alliances or gender sexual alliances. Some of the social media responses about them included the following, and I quote, "Condescending and rude." "Dismissive attitude." "Horribly disrespectful to LGBT students and family realities in our province."

When it comes to GSAs [gay-straight alliance], the Sask Party is bending itself into a pretzel trying to please social conservatives while still pretending they take this seriously, and vulnerable kids are paying the price. Mr. Speaker, can the Education minister please explain the government's position?

The Speaker: — I recognize the Minister of Education.

Hon. Mr. Morgan: — Mr. Speaker, the member opposite and myself share something in common. We have a strong belief in the benefit of GSAs and the benefit that they give to gay-straight students. Recently I was at an event at Bethlehem collegiate in Saskatoon. I heard a grade 11 student speak to several hundred classmates, several hundred other students about the benefits that he had experienced as a result of his participation in a GSA.

The fact that he had come forward voluntarily and was able to speak says where our society is now. It talks about where school boards are. It talks about where teachers are, and where our society is right now. The STF [Saskatchewan Teachers' Federation] recently passed a resolution in favour of gay-straight alliances, not in favour of legislating, but in favour of having them, and the support from teachers. And that resolution, Mr. Speaker, was passed unanimously.

We want to give people the credit, the respect that they deserve for going forward and doing that type of thing, Mr. Speaker. We will continue to work in that direction, Mr. Speaker. If they know somebody that is not receiving the supports they need, we'd invite them to tell us so that we can make sure that it happens.

The Speaker: — I recognize the member for Saskatoon Centre.

Mr. Forbes: — Thank you, Mr. Speaker. On Thursday, a Sask Party MLA said over and over again that enshrining within legislation the rights of students to establish GSAs would infringe on the autonomy of school divisions. And the former minister of Education, the member for Regina Douglas Park said, "They are the best ones that are in the best position to make decisions around what is best for their communities, and it's our intent to allow them to do that."

To the Education minister: is it the government's policy that school divisions should be allowed to say no to GSAs?

The Speaker: — I recognize the Minister of Education.

Hon. Mr. Morgan: — Mr. Speaker, I have a letter from Connie Bailey, president of Saskatchewan School Boards Association, dated April 28th. I will read a portion of that:

We feel it is unnecessary, as school divisions are responding to diverse and changing student needs every day and will continue to do so.

She writes in favour of the autonomy of school boards, and she goes on to say:

Whether it is starting a GSA or any club, boards of education in Saskatchewan respect diversity and are committed to providing students with opportunities to connect within their schools. We know that school divisions in our province are doing a great job in responding to student respect by ensuring they have places that are supportive, safe, and secure for clubs to meet.

Mr. Speaker, the Saskatchewan School Boards Association is in favour of that. We are unable to locate a school division or a school that has been unable or unwilling to provide a GSA when asked. Mr. Speaker, the members opposite raised the issue last week and, Mr. Speaker, I wrote to the members opposite and I said, if you know of specifics, please tell us so that we can deal with it directly. I do not have any specifics from them at this point in time, Mr. Speaker, but if the specifics come, we will deal with them.

INTRODUCTION OF BILLS

Bill No. 180 — *The Legislative Assembly Amendment Act, 2015/Loi de 2015 modifiant la Loi de 2007 sur l'Assemblée législative*

The Speaker: — I recognize the Minister of Justice and Attorney General.

Hon. Mr. Wyant: — Thank you, Mr. Speaker. I move that Bill 180, *The Legislative Assembly Amendment Act, 2015* be now introduced and read a first time.

The Speaker: — It has been moved by the Minister of Justice and Attorney General that Bill No. 180, *The Legislative Assembly Amendment Act, 2015* be now introduced and read a first time. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried.

Law Clerk and Parliamentary Counsel: — First reading of this bill.

The Speaker: — When shall this bill be read a second time?

Hon. Mr. Wyant: — Later this day with leave.

The Speaker: — Later this day if leave is granted.

Bill No. 181 — *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*

The Speaker: — I recognize the Minister of Justice and Attorney General.

Hon. Mr. Wyant: — Mr. Speaker, I move that Bill 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* be now introduced and read a first time.

The Speaker: — It has been moved by the Minister of Justice and Attorney General that Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* be now introduced and read a first time. Is it the pleasure of the Assembly to adopt the motion?

[14:30]

Some Hon. Members: — Agreed.

The Speaker: — Carried.

Law Clerk and Parliamentary Counsel: — First reading of this bill.

The Speaker: — When shall this bill be read a second time?

Hon. Mr. Wyant: — Later this day with leave, Mr. Speaker.

The Speaker: — Later this day if leave is granted. Why is the member on his feet?

Hon. Mr. Wyant: — Mr. Speaker, I request leave to move a procedural motion regarding bills 180 and 181.

The Speaker: — The minister has requested leave. Is leave granted?

Some Hon. Members: — Agreed.

The Speaker: — Carried. Leave has been granted. The minister may proceed.

MOTIONS

Procedural Motion Regarding Bills 180 and 181

Hon. Mr. Wyant: — Mr. Speaker, I move:

That rule 139(9) and 142(3) of the *Rules and Procedures of the Legislative Assembly of Saskatchewan* shall not apply to the consideration of Bill 180, *The Legislative Assembly Amendment Act, 2015* and Bill 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*.

The Speaker: — The minister has moved:

That rule 139(9) and 142(3) of the *Rules and Procedures of the Legislative Assembly of Saskatchewan* shall not apply to the consideration of Bill No. 180, *The Legislative*

Assembly Amendment Act, 2015 and Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*.

Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried. I recognize the Minister of Justice and Attorney General.

Hon. Mr. Wyant: — I wish to announce to the Assembly the receipt of the Royal Recommendations for two bills. They were not received in time to appear on the order paper; therefore I beg to inform the Assembly that Her Honour, the Lieutenant Governor, having been informed of the subject matters of Bill 180, *The Legislative Assembly Amendment Act, 2015* and Bill 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*, recommends them to the consideration of the Assembly.

So, Mr. Speaker, I request leave to consider all stages of Bill 180, *The Legislative Assembly Amendment Act, 2015* and Bill 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* immediately.

The Speaker: — The minister has requested leave to consider all stages of Bill No. 180, *The Legislative Assembly Amendment Act, 2015* and Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* immediately. Is leave granted?

Some Hon. Members: — Agreed.

The Speaker: — Leave has been granted. I recognize the Minister of Justice and Attorney General to move second reading on Bill No. 180, *The Legislative Assembly Amendment Act, 2015*.

SECOND READINGS

Bill No. 180 — *The Legislative Assembly Amendment Act, 2015/Loi de 2015 modifiant la Loi de 2007 sur l'Assemblée législative*

Hon. Mr. Wyant: — Mr. Speaker, I rise today to move second reading of *The Legislative Assembly Amendment Act, 2015*.

Mr. Speaker, *The Legislative Assembly Amendment Act, 2015* will do a few things. First, it will create a stand-alone status for the Office of the Speaker and his or her employees separate from both the Legislative Assembly Service and the public service. It will require the Board of Internal Economy to establish an anti-harassment policy for members; set out appointment, removal, suspension, and salary provisions for the Clerk in a manner consistent with other officers of the Legislative Assembly; require the Clerk to prepare and maintain human resource and financial management policies and file them with the board; add requirements for the Clerk to stay within budget and file quarterly financial forecasts with the board; add a special warrant provision applicable to the Legislative Assembly; provide that the Clerk, rather than the Speaker, will appoint the Legislative Assembly Service

employees; require all government ministries, agencies, and Crown corporations, and officers of the Legislative Assembly to provide the Legislative Library the number of complimentary copies of publications requested by the Legislative Librarian rather than the eight copies that the Act currently requires.

Mr. Speaker, these changes are presented following a series of consultations with the Office of the Speaker, the Clerk, the officers of the Assembly, as well as the opposition members. I would like to thank them for their participation in this process.

Mr. Speaker, I am pleased to move second reading of *The Legislative Assembly Amendment Act, 2015*.

The Speaker: — The minister has moved second reading of Bill No. 180, *The Legislative Assembly Amendment Act, 2015*. Is the Assembly ready for the question? I recognize the Opposition House Leader.

Mr. McCall: — Thank you very much, Mr. Speaker. It's just an opportunity to get some things on the record in terms of the bills 180 and 181 that are before the House but certainly to, you know, not just have the minister indicating our support, which is in fact the case, but to get a few words on the record, as a friend of mine would say, for our own selves, Mr. Speaker.

Certainly over the past year, from the time of the introduction at the close of proceedings last spring of bills 137 and 138, at that time two bills with very similar aims put on the order paper to get them out there for debate, to elicit better commentary, a more precise commentary from the independent officers themselves, Mr. Speaker, we've come a fair distance from that time until now.

I want to say on the record, thank you very much to officials, to the Minister of Justice, and also to certainly my opposite, the Government House Leader, but also the government . . . the shadow House leader — only the shadow knows, Mr. Speaker — but also the government lead on the Board of Internal Economy, the Minister for Trade, Immigration . . . He's got a few things going on there, Mr. Speaker, but the member from Meadow Lake. Thank you for his work in terms of making sure that we were in fairly close consultation on these pieces of legislation, going forward.

Again as is often the case, some of the matters are fairly picayune, responding to the request from the Legislative Library on the precise numbers of legislation that are required in paper copy with each government document, moving that from eight to what is required in a given circumstance but, more fundamentally, making sure that we've got our independent officers on a common platform and to standardize various of the practices that are there.

And again, Mr. Speaker, the independent officers — I won't go on at too great a length — but certainly they provide tremendous service for the people of Saskatchewan and they provide tremendous service to us as legislators and certainly I'm sure for the executive branch of government as well in terms of the work that there is to be done for the people of Saskatchewan, be it the Ombudsman, the Children's Advocate, the Conflict of Interest Commissioner, the various independent officers, Mr. Speaker, but also for the Chief Electoral Officer

and the Provincial Auditor, the folks that do some very important work in service of democracy and in service of the people of Saskatchewan. So we're glad to see this piece of legislation here, and we're glad to see that the government approached it in a spirit of co-operation and in a spirit of listening that again is reflected in the legislation that is here today.

Some of the measures in the previous pair of bills, Mr. Speaker, raised some questions about what the implications would be for the independence of the officers, certainly the whole question of whether or not Board of Internal Economy should be signing off on the HR [human resources] plans of the independent officers and what that could imply for the independence of those offices. Again it's been changed and will be brought forward as not so much giving the Board of Internal Economy the right of authorizing but certainly to have those human resource policies in place for individual independent officers, to have that being posted with the Board of Internal Economy so that they're known for all to see but again not interfering with the independence of the various officers.

Again, Mr. Speaker, I'll have more to say at this particular juncture as regards Bill 181, but certainly we see a marked improvement from the bills 137 and 138. We're thankful for all the work that was undertaken to get these pieces of legislation to this particular stage. And with that, Mr. Speaker, I conclude my remarks on the bill and allow the minister to proceed through the remaining stages.

The Speaker: — The question before the Assembly is the motion moved by the Minister of Justice and Attorney General that Bill No. 180, *The Legislative Assembly Amendment Act, 2015* be now read a second time. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried.

Law Clerk and Parliamentary Counsel: — Second reading of this bill.

The Speaker: — To which committee shall this bill be committed? I recognize the Minister of Justice and Attorney General.

Hon. Mr. Wyant: — Mr. Speaker, I designate that Bill 180, *The Legislative Assembly Amendment Act, 2015* be committed to the Committee of the Whole on Bills and said bill be considered in Committee of the Whole on Bills immediately.

The Speaker: — The bill stands committed to the Committee of the Whole on Bills. I recognize the Minister of Justice and Attorney General.

Bill No. 181 — *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*

Hon. Mr. Wyant: — Mr. Speaker, I move second reading of Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*. Mr. Speaker, I rise today to move second reading of *The Officers of the Legislative*

Assembly Standardization Amendment Act, 2015. Mr. Speaker, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* will amend *The Advocate for Children and Youth Act*; *The Election Act, 1996*; *The Freedom of Information and Protection of Privacy Act*; *The Members' Conflict of Interest Act*; *The Ombudsman Act, 2012*; *The Provincial Auditor Act*; and *The Public Interest Disclosure Act*, and make the appointment, suspension, acting, and termination provisions for these officers of the Legislative Assembly as uniform as possible.

It will provide for the renewable five-year terms for the majority of officers. The Provincial Auditor will move from a ten-year renewable term to an eight-year non-renewable term. The Chief Electoral Officer will continue to serve for two general elections. We will retain the Public Accounts Committee rather than the Board of Internal Economy as the governing board for recommending the appointment and suspension of the Provincial Auditor or the appointment of an acting Provincial Auditor.

We will amend the Acts to provide for substantially uniform staffing powers for the officers. The officers will have the ability to hire and manage their own staff under their governing legislation. It will confirm that the employee benefits applicable to public servants apply to employees of the officers; provide that each officer shall administer, manage, and control the officer's office and the general business of the office; and oversee and direct the staff of the office.

It will require the officers to file quarterly financial forecasts, require each officer to prepare and file human resource and financial management policies, add a special warrant provision to each officer's Act, and confirm that the officers cannot exceed their budgets. These last two provisions do not apply to the Chief Electoral Officer, since that budget is statutory.

These changes are, again, presented following a series of consultations with the Office of the Speaker, the Clerk, the officers of the Assembly, as well as the opposition members, and I would again like to thank them for their participation in this process. So, Mr. Speaker, I'm pleased to move second reading of *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*.

The Speaker: — The minister has moved second reading of Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*. Is the Assembly ready for the question? I recognize the Opposition House Leader.

Mr. McCall: — Thank you very much, Mr. Speaker, and with thanks to former Speaker, the member from Moosomin. We'd like to say our piece on this one as well but certainly it is . . . As the Minister of Justice has indicated, we have been certainly consulted on the legislation.

Again dating back to and certainly previous to the introduction of Bills 137 and 138, our Deputy Leader on this side was speculating that, you know, at different times people say to him in political life, you guys never agree on anything. And certainly, Mr. Speaker, I'm not going to be expecting the presses to screech to a halt that we found agreement on a piece of legislation or two pieces of legislation. Double the wonder,

I'm sure, Mr. Speaker, but it is noteworthy that we've been able to find agreement on these pieces of legislation.

Again that builds upon some significant work undertaken by yourself, Mr. Speaker, in terms of work that had gone on, by work on the part of the Clerk and officials but also, as the Minister of Justice has referenced, the good folks in drafting over at the Ministry of Justice to whom fell a significant amount of I'm sure what some would refer to as cat herding in getting everybody to the place where there was something that could be agreed upon. And again I would indicate my thanks to the member from Meadow Lake, the government lead on the Board of Internal Economy, for making sure that we were able to be fully briefed and to participate in a constructive way in the process.

[14:45]

Again, Mr. Speaker, the independent officers are tremendous servants of this parliamentary democracy that certainly we all seek to serve as well in the name of the people of Saskatchewan, so in terms of the different changes that are indicated in this particular piece of legislation, again striking that balance between seeking to adhere to what is best practice but also seeking to preserve and protect the independence of those officers.

And it's at this point I would note with particular interest the exceptions that have been made for the different practices that have grown up over the years around the work of the Provincial Auditor, maintenance of that Act, but also as well, Mr. Speaker, moving to an eight-year, non-renewable term as opposed to the previous 10-year with an option to renew. This puts us more squarely in the middle of the pack or around best practices as regards the work of the Provincial Auditor and the term, and certainly that is a change from the bills 137 and 138 that were brought forward last fall as regarded the term of appointment for the Provincial Auditor. And again, Mr. Speaker, this has been further complicated or further made more demanding, a more challenging process, by the fact that of course for the last time we've been looking for a new Provincial Auditor. So then the good folks on the Public Accounts Committee have had to undertake a search for a new Provincial Auditor while having some degree of uncertainty around the terms of reference for that position. This legislation will put those questions to rest and will allow the process to carry forward and to move us from an acting basis with the Provincial Auditor to the hiring of a full-time Provincial Auditor.

I'd note also, Mr. Speaker, that the practice around a statutory budget for the Chief Electoral Officer is retained. And again in terms of the relationship of that individual to being the referee-in-chief of the electoral process by which no members should be interfering, Mr. Speaker, and again one of these demanding balancing acts that our system calls for, it's good to see that that is retained, and then certainly, as had been referenced earlier, the independence and the ability of the officers to have their own HR policies and to have that known for a fact and to have that protection there for the employees and the staff of these different institutions, but at the same time to have that accountability back to the people's representation through the Board of Internal Economy and posting that information with that body.

So with that, Mr. Speaker, there's many thanks that are due to many people for these two pieces of legislation. And certainly it's a bit of an unusual process, and it will certainly underline the importance for us to see that that which was intended is in fact that which is carried out as the legislation proceeds, Mr. Speaker. But in the main I think this has been a good process again with the tabling of bills 137 and 138 last spring and then the work coming forward here today. We'd have liked to have seen them introduced earlier in the session, Mr. Speaker, to provide for that broader public investigation and opportunity for comment, but with that one note of concern, again it doesn't take away from I think what is largely good work and work that has had the opportunity to be scrutinized and to be constructively questioned.

So here we are on a day when we're able to agree on two things, Mr. Speaker, so we're glad to see that. And again when we're being reasonably approached, we'd like to think that we can be reasonable people as it comes to the official opposition. So with that, Mr. Speaker, I'd welcome the Minister of Justice shepherding the bill through its remaining stages.

The Speaker: — The question before the Assembly is the motion moved by the Minister of Justice and Attorney General that Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* be now read a second time. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried.

Law Clerk and Parliamentary Counsel: — Second reading of this bill.

The Speaker: — To which committee shall this bill be committed? I recognize the Minister of Justice.

Hon. Mr. Wyant: — Mr. Speaker, I designate that Bill 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* be committed to a Committee of the Whole on Bills and that the said bill be considered in Committee of the Whole on Bills immediately.

The Speaker: — This bill stands committed to the Committee of the Whole on Bills.

Law Clerk and Parliamentary Counsel: — Committee of the Whole on Bills.

The Speaker: — I do now leave the Chair to go into Committee of the Whole on Bills.

COMMITTEE OF THE WHOLE ON BILLS

Bill No. 180 — *The Legislative Assembly Amendment Act, 2015/Loi de 2015 modifiant la Loi de 2007 sur l'Assemblée législative*

The Chair: — The first item of business before the committee is Bill No. 180, *The Legislative Assembly Act, 2015*. Clause 1, short title, are we ready to vote?

Some Hon. Members: — Yes.

The Chair: — Okay. Clause 1, short title, is that agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried.

[Clause 1 agreed to.]

[Clauses 2 to 14 inclusive agreed to.]

The Chair: — Her Majesty, by and with the advice and consent of the Legislative Assembly of Saskatchewan, enacts as follows: Bill No. 180, *The Legislative Assembly Amendment Act, 2015*. I recognize the Minister of Innovation.

Hon. Mr. Harrison: — Thank you, Mr. Chair. I move that the committee report the bill without amendment.

The Chair: — It has been moved that the committee report Bill No. 180, *The Legislative Assembly Amendment Act, 2015* without amendment. Is that agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried.

Bill No. 181 — *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*

The Chair: — The last item of business before the committee is Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*, clause 1, short title. Ready to vote the bill? Okay. Clause 1, is that agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried.

[Clause 1 agreed to.]

[Clauses 2 to 10 inclusive agreed to.]

The Chair: — Her Majesty, by and with the advice and consent of the Legislative Assembly of Saskatchewan, enacts as follows: Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*.

I recognize the Minister of Innovation.

Hon. Mr. Harrison: — Thank you, Mr. Chair. I move that the committee report the bill without amendment.

The Chair: — It has been moved that the committee report Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* without amendment. Is that agreed?

[15:00]

Some Hon. Members: — Agreed.

The Chair: — Carried. I recognize the Government House Leader.

Hon. Mr. Cheveldayoff: — Thank you very much, Mr. Chair. Mr. Chair, I move that the committee rise, report progress, and ask for leave to sit again.

The Chair: — It has been moved by the Government House Leader that the committee rise, report progress, and ask for leave to sit again. Is that agreed?

Some Hon. Members: — Agreed.

The Chair: — That's carried. We await the return of the Speaker.

[The Speaker resumed the Chair.]

The Speaker: — Order, order. I recognize the Chair of committees.

Mr. Hart: — Mr. Speaker, I am instructed by the committee to report Bill No. 180, *The Legislative Assembly Amendment Act, 2015* without amendment.

The Speaker: — When shall the bill be read a third time? I recognize the Minister for Immigration.

THIRD READINGS

Bill No. 180 — *The Legislative Assembly Amendment Act, 2015/Loi de 2015 modifiant la Loi de 2007 sur l'Assemblée législative*

Hon. Mr. Harrison: — Thank you, Mr. Speaker. I move that the bill be now read a third time and passed under its title.

The Speaker: — It has been moved that Bill No. 180, *The Legislative Assembly Amendment Act, 2015* be now read the third time and passed under its title. Is the Assembly ready for the question?

Some Hon. Members: — Question.

The Speaker: — Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried.

Law Clerk and Parliamentary Counsel: — Third reading of this bill.

The Speaker: — I recognize the Chair of the Committee of the Whole on Bills.

Mr. Hart: — Mr. Speaker, I am instructed by the committee to report Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* without amendment.

The Speaker: — When shall the bill be read a third time? I recognize the Minister for Immigration.

Bill No. 181 — *The Officers of the Legislative Assembly Standardization Amendment Act, 2015*

Hon. Mr. Harrison: — Thank you, Mr. Speaker. I move that this bill be now read a third time and passed under its title.

The Speaker: — It has been moved that Bill No. 181, *The Officers of the Legislative Assembly Standardization Amendment Act, 2015* be now read the third time and passed under its title. Is the Assembly ready for the question?

Some Hon. Members: — Question.

The Speaker: — Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried.

Law Clerk and Parliamentary Counsel: — Third reading of this bill.

The Speaker: — When shall the committee sit again? I recognize the Government House Leader.

Hon. Mr. Cheveldayoff: — At the next sitting of the House, Mr. Speaker.

The Speaker: — Next sitting.

ORDERS OF THE DAY

GOVERNMENT ORDERS

SECOND READINGS

Bill No. 179 — *The MRI Facilities Licensing Act*

The Speaker: — I recognize the Minister of Health.

Hon. Mr. Duncan: — Thank you, Mr. Speaker. Mr. Speaker, I rise today to move second reading of *The MRI Facilities Licensing Act*. Mr. Speaker, this new legislation will pave the way for patients to choose to directly pay for a private facility for an MRI [magnetic resonance imaging] scan in our province.

Providing timely and high-quality diagnostic imaging services to patients is a high priority for the government. We've already successfully implemented a model of third party care within the public health system. The private delivery of day surgery and specialized medical imaging in Saskatchewan has reduced wait times and reduced costs since being introduced in the health system in 2010.

Most recently, Regina Qu'Appelle Health Region has entered into contracts with one private firm and is in discussions with another to provide community-based MRI service through the publicly funded and administered system. While there are several jurisdictions across Canada where patients can choose to pay for specialized medical imaging services, current legislation does not allow this in Saskatchewan.

Mr. Speaker, our government is interested in removing legislative barriers to allow patients the option to pay for MRI services right here in Saskatchewan, in turn improving patient access and satisfaction with health services.

The MRI Facilities Licensing Act will provide the ability to make and update regulations that will require patient vendors to provide a second scan at no cost to a patient on the public list every time a scan is provided to somebody who chooses to pay for their own MRI. Just like today, an appropriate physician referral will still be required to obtain an MRI scan. This model will provide options for Saskatchewan people closer to home without the added cost of travelling to another province for quicker access to an MRI. The requirement for a private provider to deliver a second scan at no cost to a patient on the public list will increase MRI capacity in the health system and is expected to reduce overall wait times.

Mr. Speaker, this model is similar to the long-standing arrangement between the Workers' Compensation Board and the Saskatoon and Regina Qu'Appelle Health regions where the WCB [Workers' Compensation Board] funds MRI scans for WCB patients and provides additional funding to cover patients from the public list. This model is also similar to an arrangement with the Saskatchewan Roughriders. Mr. Speaker, both of these arrangements were entered in prior to this government being elected in November of 2007.

Mr. Speaker, regulations to support the administration and operation of private pay MRI services in Saskatchewan must still be developed. This will include a framework for private vendors to set their own private pay rates to ensure that the second scan is provided at no cost to the patient on the public list.

Mr. Speaker, it's important to note that the proposed legislation will also ensure uniform quality standards. The Act takes the authority of licensing of all MRI facilities out of the current health facility licensing Act. Regulations will allow for the provision of a specific category of licence that will enable that facility to accept private payment for MRI services. Licensees will be required to maintain accreditation standards, and an appropriate physician referral is necessary before any patient can opt to privately pay their MRI scan.

For each licence application, regional health authorities will be required to report on the expected impact of the MRI facility on public system operations. This will ensure that the addition of private services do not have a detrimental effect on the public system.

Following the passage of the Act and the establishment of regulations, private pay MRI services could be implemented, starting with our existing private MRI facilities. The model will be evaluated after one year to ensure that it's meeting the goal of improving access to safe high-quality care.

The government is committed to putting patients first, and we believe that allowing patients to choose to pay for MRI services will enhance access to MRI services in our province. Mr. Speaker, this is another innovative, made-in-Saskatchewan approach that will ensure both fairness and access. And with that, Mr. Speaker, I am very pleased to move second reading of

The MRI Facilities Licensing Act. Thank you.

The Speaker: — The minister has moved second reading of Bill No. 179, *The MRI Facilities Licensing Act*. Is the Assembly ready for the question? I recognize the member for Saskatoon Centre.

Mr. Forbes: — Thank you, Mr. Speaker. It's an important time for us to have this debate. It's an interesting time as we're in our last week, with only two more days of government business before we break and return home. And so this is an interesting piece that comes before us, and we really have to have . . . The question before us is why all of a sudden has this come forward in the last week? What really brought this forward in the dying days?

You know, I heard people shout over there, game changer. Is it a Hail Mary? It might be a Hail Mary, closer to Hail Mary when you're talking about game changers. Paving the way, I'm not sure what kind of metaphor that is. But I have to say, there are an awful lot of people who have an awful lot of questions about this. And while the minister would like to say, let's pass this today, and it may be the way that they operate things over there, this takes a lot more work and needs a lot more attention.

And besides the rhetoric we hear from the other side about how we need to rush this through, clearly, Mr. Speaker, when we've seen the letters in the paper, the editorials, the commentary from doctors who have a lot of questions about what does this really, really mean for health care in Saskatchewan, I mean, even if you put aside the ideology, put aside the ideology, is it common sense? How does it work when you have two lines and one person can jump the queue by paying for an MRI and then have the results, and are they just going to sit with the results? Are they going to sit with the results when their time comes again? How does this all work? And this has not been explained, and I'd be curious to know. I'd be curious to know.

And the minister didn't — and I was listening carefully to his comments — did not talk about who called for it. Who did he consult with? Did he consult with the medical association? Did he consult with people on this? Who was bringing this forward to say we've got to do this, that it's urgent and that we break the norm of how we do legislation, where we introduce legislation like this in the fall and then we have a chance to look at it over the winter months and pass it in the spring. And he's talking about a one-year test pilot and then it's going to be an evaluation. And I'm thinking, is that really . . . How quick is this all happening here? I mean clearly, clearly have they got all their ducks in a row over there, with the outcry from lots of people saying, what does this really mean?

And so Bill No. 179, *An Act respecting the Licensing and Operation of certain Facilities providing Magnetic Resonance Imaging Services and making consequential amendments to other Acts*, so it's quite a thorough Act. But we have to say that really, when you think about other things that this government . . . And we've been calling on response and a decision about the hyperbaric chamber in Moose Jaw. What's going to happen with that? We've been talking about that for several, several weeks. People have been coming to the legislature and saying, what's happening with the hyperbaric chamber, and we've not got a response.

This government says we need time to study that. We need time to study that, but here we have something brought in — as they would say, a game changer or Hail Mary pass — as we end this session. And I think it is a bit of a political game and really, when they talk about game changer and they're throwing something in the last days . . . We have two more days after this of government business and clearly, clearly it's a Hail Mary. I'm really deeply concerned about the political game that's being played here, and many other people have raised that concern as well.

And so we'll talk about this, and there will be lots of questions. I do have some comments I want to get on the record. And I know all of us over on this side will have comments to make as we look at this closely, just because it's our duty and our responsibility as opposition to make sure this government has really thought out this idea. Because too many people are saying, it doesn't look like you've really thought it all out.

And you know, sometimes when you see the Premier responding and acting from social media and whether he has a Twitter out there, so what do you think. Then he works from there. And I think, Mr. Speaker, you know, when you have a Health budget the size it is and how critically it is important to people here in this province, and we have some of the best services and the best traditions and best people working in health care, that this in many ways can be even considered as a bit of a reckless move when they really haven't thought this out. So we have those questions. Where does this come from? Whose idea was this? Was this from the doctors? Was it from the patients? Where did it come from? Where did it come from, and why aren't we seeing those people here? We've not seen a petition calling for this, you know, and of course there is a lot of questions that we'll have to ask about this.

So you know, Mr. Speaker, clearly when we think about . . . This will essentially create two lineups for MRI scans, but at the end of the day there will only be one line for the surgeries because that in reality is why people are getting MRIs. And then they'll talk about this as we look at some of the comments that have been made by some of the professionals in the field who've asked real questions about, you know, when we've had the MRIs here in Saskatchewan, what has been the impact? And particularly people are now asking questions about how effective are they? Clearly they help an awful lot in diagnosing situations that need surgeries or need treatments, but how has it been?

[15:15]

You know this would be a good time. Why do we have to wait one year? And it would be very interesting to see what that study the minister talks about that will happen in one year's time. Why doesn't he do a study right now to connect with the people who are raising those concerns and say, so what has been the impact of MRIs here in Saskatchewan? What has been the impact, and has it had a real impact on the health situation here in Saskatchewan?

And of course and that would have been in days gone by, part of the issue for the Health Quality Council. They could have been very, very helpful in that field, but now they are too busy really promoting lean. And this would have been the perfect

thing for them to come forward and say, listen, you know, really in terms of MRIs this has been the positives of MRIs in Saskatchewan and how it's been utilized and the impact it's had on health care, on our waiting lists, and all of that type of thing. And where should we go? But I would like to know, has the minister talked to the Health Quality Council? What have they said about this?

You know, that's one of the things that I was really struck by the minister's comments. Often we have people say, the ministers will say we were consulting with this group and this group and this group, and it adds an awful lot of weight. And we have to say, well if they have, then clearly many people have thought about this.

When a minister gets up and doesn't mention one group, not one group that he's consulted with, particularly when we've talked about this kind of impact on health care, and he can't name one group that he's been consulting with, that's a real problem. And whether it's the SMA [Saskatchewan Medical Association], the medical association, with the Health Quality Council, there are people out there I'm sure, I'm sure could give him an opinion about the directions he should be taking.

We know, we've had people come into this Chamber and into the galleries saying, if you're thinking about innovations, think about keeping the hyperbaric chamber in Moose Jaw. And we've had good debate about that. We've had lots of questions about that, but the government is silent about the innovation around that.

We have areas that we really need to talk about in health care. And I know, for example, and we've not heard from the two Health ministers what has been their response about Craik. Craik is still up there. On the very first day, the very first day of the spring sitting, we had a demonstration out in the front of the legislature. And it's not a common day when we have folks who come from rural Saskatchewan, whether it's because of travel or distance or whatever, but they came, and they had some comments to make about what's happening in their community about health care.

So if this government was truly interested in making innovation happen, you would think that probably one of their priorities they might want to talk about, and the Minister of Health has been silent about, places like Craik. Why is it that Craik and the people there feel they're not being well served by this government in health care when it comes to providing the kind of health care they need in their community?

But instead, on the dying days of this session and in fact as we're heading into, you know, in the course of . . . The election is actually scheduled for November 4th, and until the federal election is actually called, technically this is it for us. This is the dying days of this government. And you know, this is what they do in their final days. It is quite shocking and it really shows still how people haven't, on that side, haven't thought through what might be the unintended consequences of this.

You know, we often make the comments that we'll see, and of course there's no explanatory notes to go along with this because this is a bill that is fresh starting out. There is no other legislation dealing with it, so it's not . . . While it's amending

some other Acts, there's no other main. It's not an amendment, so there's no explanatory notes. But we probably will see some if this bill happens to pass, that we will see amendments. But we're not sure, really clearly, how serious is this government in doing this bill. Because if it was, they would've introduced it in the fall and it would've been here as a bill like any other bill and it would be going through the regular process.

This has just got too many problems with it, Mr. Speaker. And that's why I know, on this side of the House, we will have lots and lots of questions about it. And again as I said, the minister with his comments, we were very, very disappointed with the lack of clarity about the implementation of this, but more the language of paving the way. I think this is really problematic, and we really have a lot of concerns.

We see that there might now well be two lineups for the MRI scans, but really there will only be one line for surgeries. And allowing queue jumping really means that most people will have to wait longer for both. This government has been not been clear, and as we go through . . . And I will demonstrate from some of the letters that I have here with me that there will be a lot of questions about, how does this actually work? Have they really thought this through? Where did it come from?

And, Mr. Speaker, evidence from other provinces, including Alberta, shows that introducing user-pay MRI clinics makes wait times longer for everyone. And in Saskatchewan, 90 per cent of the people now get their scan within 88 days, but in Alberta, 90 per cent of people wait up to 247 days. So this is not good. This is not a good situation that we want to emulate, in Alberta.

Now why isn't it? And of course as we will find out, of course it's easy enough to get people through and get their scans, but then you have to do something with those people. Everybody'll be waiting around holding their scans and saying, I want and I need. And many of them will be . . . And I can understand exactly where they're coming from because they'll have the medical results, and that will create anxiety. And the next question will be, I jumped the queue to get my scan; can I now jump the queue to get my surgery? That seems to be the thinking that this government may be okay with, and I think we have a lot of questions around that.

We see the results of what has happened in Alberta, where their waiting list went up to 247 days because they did not have the capacity really to deal with all of this, and there is some real concerns.

And, Mr. Speaker, we have a health care system that we can be really proud of in terms of the fact that it is a system that allows people to get services that are paid for. But now it will be . . . People will be thinking, really should I take a look, should I take a look at getting a loan? Should I be taking a look at using my credit card? Because they may have the idea that they'll get an answer or treatment sooner for their loved one. Now unfortunately that may be a bit of false hope, and I think the government will have to be responsible for that, Mr. Speaker, at the end of the day. Because if you're giving the idea that you can get your scan faster, then people will automatically think that they'll be able to get their surgery or their treatment quicker, and that may not be the case, Mr. Speaker. That may

not be the case, and in fact it may cause some more issues.

You know, and, Mr. Speaker, as I've talked about issues already, whether it be the hyperbaric chamber in Moose Jaw or the Craik hospital, we have also brought forward many times concerns around ambulance charges. And we know for example, Saskatchewan, we already have the highest rates in Canada. In fact we charge way too much, and we've shown the inconsistencies, the problems that we should be focusing on when it comes to ambulance charges. That would have been a much more reasonable innovation for them to bring forward. If they were thinking about a Hail Mary pass, this would have been one that they should have really thought about.

And I'm surprised actually that members over there have not been paying attention to questions in question period, whether it be the hyperbaric chamber in Moose Jaw, the Craik situation, the ambulances, why they have not brought forward at this time, if they are interested in doing something innovative . . . This is what has been in the papers. This is what's been brought to the House. This is what's been brought here by patients. It's been patients who've been coming forward. And while they will chirp from their seats, it's patients that's driving . . . Yes, patients have been driving down here. Patients have been driving down here to call for better, more reasonable fees for ambulances. They've been calling for work around their hyperbaric chamber in Moose Jaw. They've been calling for better services in Craik.

Yet the folks over there will say no, this is the time we want to do something to create a second line for MRIs. And everybody's wondering why. Why? Yes, and I think that this an interesting process that we're going through. It is a diversion. We're coming to the end of the session. They don't want to talk about things that were brought up in the House. They don't want to talk about their performance, whether it be lean, whether it be the hyperbaric chamber in Moose Jaw, whether it be Craik, whether it be the ambulance charges. This is obviously hitting a nerve, Mr. Speaker. I didn't realize they were so sensitive about this, but clearly they are because they have been listening during question period to what people have brought forward as concerns, as concerns.

Now, Mr. Speaker, we're not against a study into MRIs. And as we see from Dr. Steven Lewis, in fact he calls for some more research on that. I think that would be reasonable, but this is putting the cart before the horse. And then to say we're going to take a look back at it a year later is even sillier. Yes, Mr. Speaker, I really think it is a case of doing your homework and paying attention to people who, coming down here, coming down here . . . And you know, we've had petitions. We've had petitions about lean. We've had petitions about the hyperbaric chamber in Moose Jaw. We've had the fire folks come from Moose Jaw. We've had the doctor talk about that. We've had the doctor from Craik talk about the situation in Craik. Why aren't we dealing with those issues?

Here we have in the dying days, the dying days, Bill No. 179, talk about MRIs. And that's what they want to talk about. That's what they want to talk about. And, Mr. Speaker, we hear what people want to talk about, whether it's lean, John Black and his gravy, gravy plane. Let me just . . . I don't want to downgrade him too much. He doesn't ride no train. He takes the

plane. And, Mr. Speaker, we've got issues. We have issues that they should be looking at. And seniors' long-term care homes, we could really talk about that if we wanted to talk about innovation that that minister should be talking about. That's what people on the doorstep are talking about, seniors' long-term care. And we know the Ombudsman is really taking a look at that.

And so, Mr. Speaker, we have some real, real concerns about this. And you know, we are deeply concerned that when people have come forward . . . For example, when you talk about ambulance charges and the fact they're too high and people are stuck with these charges, and in fact the suggestion from the other side is, you know, people have raised money through steak nights. That is their level of innovation when it comes to dealing with ambulance charges — hold a steak night. That's outrageous, Mr. Speaker, and here yet the minister can stand up in the House and talk about this Bill No. 179 about MRIs.

I think we've got a real issue here, Mr. Speaker, as we finish up session and really how this government has not paid attention to what people are really talking about. You know, we saw a budget in the spring that kicked off, that middle-class seniors were kicked off the drug plan. We've seen more and more families are paying for extra private care at homes and senior care and even in the hospital because of understaffing on the front lines. And today we saw we had questions that one in ten — one in ten — nurses don't believe that lean is the direction we should go. Nine in ten believe we should be doing other things to make our hospitals and our health care system better. This is a real, real problem.

So, Mr. Speaker, I know that we have a lot of questions and I have a lot to say here. And I know that we already have private MRI clinics to handle patients, and the government pays. Now they say they're going to cut that work in half. The experience in other provinces is poaching of professionals from the public system, like technologists, so the existing capacity of the public system is likely to suffer, and that's a concern. That's a concern. That's a huge concern about this.

[15:30]

You know, the other day we had a discussion about pharmacist technologists, and the government had not made any plans. There's 1,300 technologists in the pharmacies across the province. Two hundred work in the hospitals. Two hundred work in the hospitals. And they're going to have to get registered. They're going to have to do upgrading. It's going to cost thousands of dollars. They're going to get one year to do it but the minister cavalierly just brushed them off saying, you know, we don't know what the impact is going to be.

So we don't know what the impact of this is. We're going to know a year after the fact, a year after the fact. We should know a year before the fact. This is a government that prides itself on being business oriented. Have they made the business case for this? Have they shared the business case with us? What's the impact on the professionals, and what will that do for the public sector?

You know, when we've asked about pharmacists and the pharmacist technologists, they had no idea. They shrugged their

shoulders. We'll see what happens. We'll see what happens. We asked what happened in Alberta. Well they didn't ask that question. They travelled to Alberta. They asked about other things, but they didn't ask about what's the impact on the human resources aspect of it.

I would ask the minister, what is the impact on this Hail Mary as we finish this session? As we finish this session and the four years of this government, they throw a Hail Mary pass because there are things that we should be talking about in health care and things that should be addressed. But they decide to throw this, and this is something else.

So, Mr. Speaker, we have some real, real questions. Mr. Speaker, I want to talk about some of the public stuff that's out there. I could go on about some of the questions we have, but I want to make sure because I really want . . . And I know people are going to be anxious to get into this debate. But here is *The StarPhoenix* editorial. And I know, I know the other side reads these editorials because we had them shown to us last week. I forget what the topic was, but everybody brought that in. And I just wondered if those folks brought in today or if they've read the editorial from May 7th, *The StarPhoenix*. And this is *The StarPhoenix's* opinion, and it's "MRI legislation reaches too far."

Just because something is billed as a "Made in Saskatchewan solution" doesn't make it sensible or even particularly effective.

That appears to be case with the legislation Health Minister Dustin Duncan introduced Wednesday to bring in more private provision of magnetic resonance imaging services to the province.

[And it goes on.] From a government that has managed to shorten the wait lists for select surgeries by opening up the market to private care providers and paying them directly from the public health care envelope, this approach to MRI privatization is confounding.

Either it amounts to a case of forcing private companies to offer a two-for-one discount on MRIs, or cashing in on the desperation of potentially seriously ill people — who either have the money or will find it in order to [spend for] . . . their diagnoses — by making them pay not only for their own scans but also someone else's. The fact that it emulates the model currently in use for Workers' Compensation and SGI claimants as well as Roughrider players doesn't make it any more desirable.

[And I go on.] What Mr. Duncan is proposing, however, is a further privatization of health care based on one's ability to pay, even if there's provision made to provide a no-cost second scan under the public system. Not only does the legislation create a potentially huge administrative nightmare in terms of policing the service providers, but also in questions about equity.

Mr. Duncan justifies the move by saying Saskatchewan people already are paying out-of-pocket for private MRI scans in Alberta and the U.S. and says, [and the quote is for the minister] "We're trying to balance off what already

happens in Saskatchewan with allowing for a little bit more patient choice and trying to tackle what is a public wait list using private dollars.

But I go on, and I quote *The StarPhoenix*:

It's a questionable strategy for a Saskatchewan Party government that has faced enough public skepticism on privatization that it couldn't go as far as Alberta did on liquor sales. While Saskatchewan has a 5,000-person wait list for MRIs, it's the second best in Canada and the government has ample room under its current outsourcing model to tackle the problem.

Instead of an innovative solution, this comes across as a poor strategy that crossed a line it didn't have to in order to get the job done.

So it just doesn't make sense. Ideologically it doesn't make sense, doesn't make sense. Here we are in the dying days, and it simply doesn't, doesn't add up. And so today, Mr. Speaker, you know, those folks over there, they appreciate the editorial *The StarPhoenix* board has come up with. You know, they'll come in, and maybe they're picking and choosing what editorial they live by. You know, this one is bad; this one's good. You know, you should try to be consistent and really think and listen to these folks. They're thinking, they're hearing from the public as well. They're hearing from the public as well.

But here's one from Steven Lewis, and it was in today's paper on page 6 in *The StarPhoenix*. And I think this one makes a lot of sense. Now they may not, I mean, but I think he's got something interesting to say. Now Steven Lewis is the president of Access Consulting Ltd. and is adjunct professor of health policy at Simon Fraser University:

Whether the Saskatchewan government's legislation to allow private MRIs is good public policy depends on what problems it wants to solve, and whether the proposed solution will solve them.

That's the question before us really. Does this make any sense? Does this make any sense in the dying days of session and of the four years of this government that all of a sudden they throw this Hail Mary pass? You know, I don't know what they're hoping for to come out of this. But when we have people talking about long-term care, when we have people talking about the \$40 million consulting contract to John Black, when you have people talking about the hyperbaric chamber in Moose Jaw, when you have people talking about the situation in Craik, the list is long of where people are demanding innovations. The list is long. Emergency rooms, today we had a situation about emergency rooms, a situation that was tragic, tragic. And we can all identify with that. That's something that we need innovation on. That's something we need innovation on.

So what is the problem they're trying to solve here? Is it a deflection as we wrap up the session? I think it is. I think it is . . . [inaudible interjection] . . . And the fellow from Moose Jaw, the fellow from Moose Jaw does not want to talk about the hyperbaric chamber. He doesn't want to talk about that. Clearly he wants to talk about MRIs. That's what he wants to talk about.

And I think, Mr. Speaker, from the situation that we have, where we have people coming to the legislature, as we did today and we've had in the past, to talk about a whole host of problems — whether it's long-term care, whether it's fees for ambulances, whether it's emergency rooms, you know — the list goes on. And people are losing faith with this government, as we saw with the nurses, where it was 1 in 4 who thought lean was not a bad idea. Now we have, it's 1 in 10, 1 in 10. There are some serious challenges in health care, serious concerns.

Now I want to quote a little bit more from this article, "MRI law wastes money, makes system less fair" by Steven Lewis. And I go on, and I quote:

Saskatchewan has doubled capacity since 2007. The question is whether all scans are genuinely needed and clinically appropriate. Before 2007, were there legions of undiagnosed patients whose health status was compromised due to inadequate MRI access? Has the doubling of capacity improved patient outcomes? I know of no studies that answer either question. We have no clear idea of what the doubled capacity has achieved, except more scans.

There is a growing, physician-led movement across North America called Choosing Wisely. Physicians started the campaign to raise awareness of a growing concern in contemporary health care — overuse of services. Many tests and procedures do nothing to improve patient care or outcomes, and some — like excessive CT scanning, which subjects patients to high doses of radiation — actually cause harm.

Adding MRI capacity without identifying and eliminating inappropriate scans simply feeds the beast. Doctors have come to realize that more is not always better. Policy-makers should take note.

And I think this is something the minister should pay attention to. And if he can make his case on what has been the impact of the number of scans that we've had, the increase . . . And I'm hoping and I think everybody hopes they're all . . . You know, we're disappointed when we hear that services that have been paid for have not actually been useful. In fact they're harmful. We're all disappointed in that. So we're all hoping that good things will come out of this. It's a great thing when we hear that the doubling of capacity since 2007, but the question really is, so what's been the impact? What's been the impact? Has it been really the priority that we should have set? Or should we have paid attention to the people in Craik? Should we have paid attention to the people in Moose Jaw about the hyperbaric chamber? Should we have paid more attention to long-term care? Should we have done more about ambulances and more about mental health?

And we know, and we know those are real challenges. Those are real challenges. So clearly, you know, I've been on both sides of the House. I know how difficult it is to make decisions about budgets. You have to make difficult decisions, I understand that, but you should make it on evidence. You should make those decisions on evidence, and we see no proof of evidence from this minister today.

Nobody is . . . he's not said who's, who called for this. He's not brought forward any proof of evidence that this would be a worthwhile initiative. Now maybe there is, maybe there is. And if there is, we're very happy, we're very happy to take a look at it and read through it, and we will do that. But when we have such a thin speech from the minister, on the third-last government day of the session on such a significant bill, leaves a lot of questions open.

So, Mr. Speaker, this is how Steven Lewis asks the question. And this is one, I think maybe they've got it all figured out over there, so maybe they're going to become the administrators of this process. But what he says, he asks, "So let's see the accounting in full light of day. And then there's fairness." He asks, this is the fairness. And I'm quoting:

Suppose Harriet and Jim go to their doctors on the same day with the same symptoms. Both doctors send them for an MRI. Harriet pays for a private scan three days later. Jim gets his four months later from the public system. The scan results reveal that both need surgery. Harriet's diagnosis is confirmed 117 days before Jim's. How will Harriet not get her surgery before Jim? If she does, she has paid to jump the queue.

Maybe the government is clever enough to figure out how to prevent that, but I can't.

And that's really, that's the big question. How do you do that? How do you do that in fairness to everyone involved? You've made a promise to Harriet. You get this scan, you get the information, then there's sort of a half-promise there that's left in silence. What do we do? People are expecting that they will get the next thing happen, right? But in fairness, they were in the line together for public, for services from the public system. And if we let Harriet jump ahead of Jim because he didn't have the money to pay for a scan, that's not fair. That's not fair. And that's a real problem.

So, Mr. Speaker, he goes on to ask . . . This is what he says, "MRI scanning presents the government with a golden opportunity to apply an appropriateness and equity lens to policy-making. Appropriateness is one of the Ministry of Health's formal . . . [policies]."

And that's so true, appropriateness and equity. We can do a lot of things. We can do a lot of things. But we know a lot of things don't help, and we know that a lot of things may give false hope. And we know that a lot of things cost a lot of money. So it's all about being appropriate, and that's what the Ministry of Health's role is.

And also there's a sense . . . And we have a strong tradition here in Saskatchewan — we've always been worried about this government in terms of its sense of equity — here we have a strong commitment to equity right across the board here in Saskatchewan. Whether you are rich or whether you are poor, it doesn't matter; all people are equal when it comes to health. And we value that, and we value that as Canadians. We value that as Canadians.

So I have some real questions about this when it comes to this kind of process, and so does Steven Lewis. Where is the

Ministry of Health in this innovation when he asks about that?

[15:45]

Now, Mr. Speaker, there has been several letters so quickly written, and we'll see many, many more about this. But I do want to get on the record some of these letters because they are so thoughtful. So this one is from Gilbert Will, and he writes in the *Leader-Post* "Wrong way to fix MRI wait list." He writes:

Here we are again: the government has done its polling and has come out with another way to push private health care.

The government has had time to fix the MRI . . . list since the last time it floated private MRI scans, yet it seems . . . [to have] done nothing, but polling. The premier should be ashamed for not fixing this problem.

I know I can get a private MRI, but it shouldn't come to that. If we need more MRIs done, then get it done. The government wants to grow this province and that must include building health capacity, and not just for MRIs.

The government spent large sums of money on the lean process, but it has failed to fix this simple problem. We pay taxes to cover the bills . . . [but] that isn't enough . . .

So there's, you know, I think that's exactly what we've been talking about, exactly what we're talking about.

Now here in *The StarPhoenix*, a letter written by Stan Rice. Stan Rice writes that:

New legislation that allows private, for-profit operators to charge patients to access an MRI ahead of those who cannot afford to pay or choose to access the public system creates two distinct problems.

The first is allowing private operators to provide insured services in our health-care system. Numerous American studies have shown that not-for-profit health care agencies consistently provide better quality and safer care than for-profit agencies.

The second issue is allowing people to pay for a private MRI. Access to health care should be based on need, not ability to pay. This principle has served us well for decades. The SP quoted Premier Wall saying in 2008, "Offering medical services such as an MRI for a fee seems to be outside the Canada Health Act (CHA) and is an area where the government doesn't want to tread."

Alberta was forced to repay patients for medically necessary MRI scans that were deemed to be in contravention of the CHA.

So, Mr. Speaker, it goes on and it concludes:

. . . Saskatchewan MRI wait . . . [lists] are the second best in Canada. Wall has a choice. He can continue to strengthen our public health system, or venture forth in a way that's extremely risky.

And here's a letter in the *Prince Albert Daily Herald*: "MRI decision will lead to every man for himself?" Albert King writes that:

If I have decided that I was going to purchase an airplane ticket to anywhere, knowing that the person beside me was going along at my expense, how would I feel?

Then why would I pay twice as much as I should so that this person rides free, and gets there at the same time as me to see the same surgeon at the same time as me. I would look around and notice that there were people coming in and filling up the waiting . . . [list].

The airline would be over booked, they were trying to find more planes and pilots, they were not able to and therefore hired more pilots from another airline.

And you can see where this is going about the human resources capacity, stealing from the public sector and creating this for people who really need services, and then creating this idea that if you want to jump ahead, then you can.

Mr. Speaker, we'll wait, and we'll see more letters I'm sure in the days ahead. We have CUPE [Canadian Union of Public Employees] Saskatchewan, they have added their voice to this concern. Tom Graham says those with large wallets can get MRIs quickly while the rest will have to wait. He points to the provinces which use a pay-for-use model and studies have shown an increase in overall wait times, and that again is so true.

But I want to . . . And I know that many others will want to get into this debate, but I want to have two physicians, and what do they say about this? What do they say about it? And this is a story from *The StarPhoenix* just a couple of days ago on May 8th. SMA president quotes private MRI plan, and I quote from the paper. The president of the Saskatchewan Medical Association is skeptical of a government plan to allow MRIs, saying the proposed cut structure may not be viable. It goes on to say:

The provincial government has tabled legislation that would allow private clinics to offer MRIs to paying patients — as long as they offer one free to another patient.

[The doctor says], Dr. Dalibor Slavic, whose term as SMA president ends today, said the two-for-one plan would make it difficult for radiologists to cover their costs. As for passing the added cost to the patient, he said most people would rather get a cheaper scan in Alberta.

There is another idea. I hadn't thought about that. So if you're paying more in Saskatchewan and if you're already thinking you're going to pay, then you probably will end up going to Alberta. So that's what Dr. Slavic raises and he says, and I quote: "The concern among the radiologists is that it's going to be a two-for-one deal where they are going to have to cover the cost."

And it's very interesting that, you know, and he does raise this and this is one that I think that we have to think about. You know, it's interesting as we think about the history of innovation. You know, he raises again like Dr. Lewis around the appropriateness of tests:

Although the patient would still require a doctor's referral, Slavic said the appropriateness of the MRI should be the main concern. He said many couples have paid for [and he quotes] "entertainment ultrasounds" to look at a pregnant woman's abdomen since they became available. "Will this open up that possibility?"

So there's a lot of work that needs to be done beforehand and that's the kind of thing I think Dr. Lewis has really, really raised. And I think that, as I said, when we have the long list of health care concerns that have come to the House over this past spring session, whether it be long-term care, whether it be the ambulance fees the highest in the province, whether it be emergency rooms and the overcrowded services, overcrowdedness of emergency rooms, we have a lot, a lot of work.

And here is Dr. Ryan Meili, and you know, both sides of the House . . . And I'm glad to see that he's doing a lot of work on poverty and these folks over here have come to appreciate his good work. And so I'm glad that Dr. Meili has also jumped into this because this is his primary area. He is a physician and he does want . . . And you know, when I've heard him speak . . . And he really does talk about the holistic approach to health care that we need to take and not an obsession with testing. But really we need to look at the root causes of what's happening in our health care. He really has some questions. And so what he says, and I'll quote:

This past week, Saskatchewan Premier Brad Wall took to Twitter to ask the question "Is it time to allow people to pay for their own private MRIs in Saskatchewan like they can do in Alberta?"

And so and it goes on to say:

It's a real problem. For that reason we should be wary of false solutions, and look first to evidence before rhetoric takes over.

The best place to look for evidence is the province Wall references as a model: Alberta. Many Saskatchewan residents have sought out care in Alberta's private MRI clinics, giving the impression that the experiment there has been a success. It turns out, when we take a closer look, that things are not so rosy in the land of private MRIs after all.

Perhaps the most surprising fact is that the wait list for an MRI in Alberta, rather than having been shortened by the presence of private imaging clinics, is actually the longest in the country.

In Canada it's the longest. And we want to emulate Alberta? We want to go to that . . . [inaudible]. As the minister would say, he's paving a road and this is the road that he wants to pave.

According to the Canadian Institute for Health Information (CIHI), patients in Alberta can wait from 87 days . . . to up to 247 days . . . compared with a 28 to 88 day wait [list] in Saskatchewan. These waiting lists exist despite Alberta having the second highest number of scanners per capita in

the country, suggesting that [there's an] overuse may be a problem — a phenomenon that may actually be exacerbated by excess capacity.

It may seem counter-intuitive that the public wait list would lengthen in the context of more MRI clinics and scanners. It appears that capacity, in the form of physicians and technologists, is siphoned off from the public system by parallel patient-pay . . . [system], a pattern that has been seen in surgery as well as imaging.

And he goes on to say:

More troubling yet is the question of equity. If an MRI scan is the limiting factor for getting a surgery, and I can pay for my scan, I get to have my publicly-funded surgery before someone in as much need but less able to pay out of pocket. This is the principal reason that the existence of patient-pay MRI clinics, as Wall pointed out . . . is against the Canada Health Act.

This is also the reason that Alberta has in recent years:

. . . moved away from the patient-pay model. Many of the private clinics charge the public system for the scan and charge the patient a premium on top. Alberta was also forced to repay some patients who had paid for medically-necessary scans out-of-pocket.

He goes on to say:

Expanding hours of use, training programs for personnel, and the number of machines in the public system is another. [We can all learn from] Anyone can learn from their mistakes, a true leader learns from the mistakes of others. Saskatchewan should look closely at the experiences of other provinces before choosing a path [and as the minister would say, "paving a path," choosing a path] that, while seeming to offer solutions to our challenges in healthcare, could actually make them worse.

And that's Ryan Meili, and I know those folks over there listen to Dr. Meili and they've often quoted him. And I hope they quote him when they think about the MRIs. This is a problem.

And you know, Mr. Speaker, as I said, we know there is a lot of reasons that we're looking for innovation from this government in health care. There are a lot of needs. And they should just think about the people who have been in the galleries, the people who have been in the galleries since March and in the past years, who have called for better long-term care, better long-term care for our parents, those who we love dearly and are put in dangerous situations because there just hasn't been the resources put forward.

Emergency rooms, like we learned today . . . We need to really think about that. What are the innovations there? What about ambulance charges? When we know they're the highest in Canada, the highest in Canada, why are we putting forward MRIs this way when we really have a challenge there?

Mental health. Mental health, we had a study done last year, a study done last year, and this government has done nothing with

it. They're saying they're taking some time to think about it. We know, we know that's a huge issue, and too many families are faced and touched with that. And it's a tragedy when they are because it can manifest in so many different ways.

There are challenges before us, and I look forward to hearing from my colleagues on this. And as I said, I was disappointed in the minister's comments who didn't really set out the plan, didn't talk about who called for this. This is a real problem. And if we're in the final, the dying days of this session in this four years of this government, and this is how they think they're going to change the channel — change the channel — because you've got to know, Mr. Speaker, and they will talk about how they've been on the doorstep, but if . . . I'd be surprised if, when they're on the doorstep, that they've not heard about long-term care. Clearly, clearly people are talking about that. Clearly people are talking about that, and they're looking forward to hearing about what the Ombudsman's going to say about that. And there's going to be demand for resources, and we know the government has to be ready for that.

But if they're going to say no, we want to do this MRI scheme where some will pay for one and get one free and how that'll work and then they're going to do an evaluation after a year, I've got to tell you, we have some real, real concerns about what's happening here.

As Dr. Steven Lewis talked about, this government and this ministry has a real obligation to look at equity and look at appropriateness of training. And so many people are talking about what's really gone wrong, what's really gone wrong in Alberta, and how they're backing away. They're backing away from it because it just doesn't work. It doesn't work at all.

Mr. Speaker, I know that many of us will want to talk about this so at this point, Mr. Speaker, I'd like to move adjournment of Bill No. 179, the Act respecting licensing and operation of MRIs. Thank you, Mr. Speaker.

The Speaker: — The member has moved adjournment of debate on Bill No. 179, *The MRI Facilities Licensing Act*. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried. I recognize the Government House Leader.

Hon. Mr. Cheveldayoff: — Thank you very much, Mr. Speaker. To facilitate the work of committees, I move that this House do now adjourn.

The Speaker: — The Government House Leader has moved that the House do now adjourn. Is it the pleasure of the Assembly to adopt the motion?

Some Hon. Members: — Agreed.

The Speaker: — Carried. This House stands adjourned to 1:30 p.m. tomorrow.

[The Assembly adjourned at 16:00.]

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