



# **STANDING COMMITTEE ON HUMAN SERVICES**

## **Hansard Verbatim Report**

**No. 35 – April 19, 2010**



**Legislative Assembly of Saskatchewan**

**Twenty-sixth Legislature**

## STANDING COMMITTEE ON HUMAN SERVICES

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[The committee met at 19:00.]

**The Chair:** — Seeing as it's now 7 o'clock, the chosen hour of the committee to begin its meeting, I will call the committee to order. Good evening, everyone and to those of you at home, I would like to welcome you all to the deliberations of the Standing Committee on Human Services.

We have a very busy agenda this evening, our first meeting. We're considering the estimates of the new budget. This evening we will first be reviewing the estimates of the Ministry of Advanced Education, Employment and Labour, followed by the Ministry of Health estimates. The Assembly requires the committee to review the estimates for a number of ministries. They will include votes 37 and 169 of the Ministry of Advanced Education, Employment and Labour; and vote 5, Education; vote 32, Health; and vote 36, Social Services.

Committee members, as I mentioned a few moments ago, on the agenda today we're here to examine the main estimates for vote 37 and vote 169 AEEL [Advanced Education, Employment and Labour] outlined on pages 29 and 162 respectively in the Estimates book. With us in attendance tonight, we have a number of Labour officials, so if questions go outside those parameters we will have to adjust for that.

Before we begin, I'd like to introduce the members of the committee. They include Mr. Broten and Ms. Junor from the opposition side. Substituting tonight, we have Mr. Iwanchuk for Ms. Junor. On the government side, we have Minister Reiter — substituting for him tonight is Mr. Allchurch — Ms. Schriemer, myself as the Chair, and Mr. Glen Hart. Oh, and Ms. Doreen Eagles, I'm sorry, Doreen.

First of all, we'll be tabling a document from the Office of the Information and Privacy Commissioner, *Investigation Report H-2010-001: L & M Pharmacy Inc., Sunrise Regional Health Authority, Ministry of Health*, dated April 17, 2010.

**General Revenue Fund  
Advanced Education, Employment and Labour  
Vote 37**

**Subvote (AE01)**

**The Chair:** — We'll now examine votes 37 and 169 of Advanced Education, Employment and Labour. I'd invite the minister to introduce his officials and open with his statement before we go to questions for committee members.

**Hon. Mr. Norris:** — Thank you very much, Mr. Chair, members of the committee, for the opportunity to appear before the committee once again. Before offering a brief overview of the ministry's budget, I'd like to take this opportunity to introduce some key members of our team. And the ministry provides important supports as all of us know.

I'd like to start with Clare Isman, our deputy minister; Mike Carr, associate deputy minister responsible for labour, employee and employer services. Back behind us, Reg Urbanowski, the assistant deputy minister of advanced education and student services; Rupen Pandya, assistant deputy

minister, immigration services; Karen Allen, executive director, corporate services; Rhiannon Stromberg, senior executive assistant to the deputy minister; Pat Parenteau, director of legislative services. As well as Glennis Bihun, executive director, occupational health and safety; Laverne Moskal, executive director, labour standards; Fred Bayer, the registrar of the Labour Relations Board; and Scott Mitchell, the executive assistant to the CEO [chief executive officer] of the Workers' Compensation Board. Again, thanks very much for the opportunity to offer those introductions.

I'd like to start by sharing an important administrative point with you, Mr. Chair and other members of the committee, before we get into some of the numbers themselves. For members who have reviewed our estimates — the estimates of the Ministry of Advanced Education, Employment and Labour — in the past, I think it will become obvious and apparent that there's a difference in the way our information is displayed this year. The ministry continues to evolve, and as it does, changes have been made to the estimates display this year to more accurately reflect the ministry's work plan and associated funding that is provided to programs that have common objectives. This is about creating a display that helps the public to understand the key priorities of the ministry and the allocation of public funds being provided to achieve these objectives.

Before taking your questions, I'd like to just add a few additional points about the estimates. Throughout the ministry's deliberations, we've been guided by the principle of making prudent decisions on how best to sustain Saskatchewan's economic growth and, importantly, how best to ensure that we're sharing the benefits of this growth with people right across the province. And finally, we're doing so in a fiscally prudent framework, a framework that the people of Saskatchewan certainly have come to expect from this government.

This budget reflects a number of goals. First, we continue to support and nurture a highly skilled and educated workforce. This is for both intrinsic — that is, the value of education in and of itself for its citizenry — as well as instrumental purposes. Secondly, as a ministry we continue to help ensure that we're fostering the continued development of diverse and dynamic and cosmopolitan communities and that this work is defined by a spirit of inclusion that is helping to celebrate and reinforce the differences across our communities as well as the unity that presents to our province. And obviously, importantly, we continue to work to help foster safer, more fair, and productive workplaces for all the people of this province.

Regarding post-secondary education, the ministry's budget overall is \$846.1 million, an increase of \$7.7 million. It provides a significant amount of support for post-secondary education, a very vital investment especially when it comes to our students. Universities, technical institutes, and regional colleges receive an additional \$26.8 million in operating funds, an overall increase of 5.1 per cent.

This budget also provides 97.7 million in support for students through programs like the graduate retention program — an initiative we introduced as one of the promises that we kept

upon coming into government — the provincial training allowance, continuing with enhancements from last year.

Student loans, grants, and bursaries continue to be improved. In fact several new enhancements in student financial assistance are being introduced including — and I want to reinforce — including thanks to the really powerful and enlightened input from the Saskatchewan student council coalition as it has existed for the better part of the last year. The students of this province have had direct impact and input into these student loan enhancements. Some of these include helping to reduce the interest rates on repayable Saskatchewan student loans and taking automobiles out of the deliberations on student financial assistance. While there is always more to do, these measures will ensure that post-secondary education is both affordable and accessible to learners while also ensuring that our institutions and programs continue to be defined by excellence, innovation, inclusion, and their effectiveness.

I want to speak specifically to a very important element of our investment in this area. The 2010-11 budget provides \$38.8 million in direct funds specifically for First Nations and Métis post-secondary education and training that is directly to our students. That's a 5.1 per cent increase over last year's budget. That's certainly consistent with broad visions that we have, not only as a government, but through the Canadian Council of Ministers of Education and advanced education that we have come to identify as a key priority right across the country.

In addition to this investment, the ministry provides an estimated 125 million through indirect support for First Nations and Métis students attending universities, SIAST [Saskatchewan Institute of Applied Science and Technology], regional colleges, programs, regional colleges, and associated programs as well as a range of other institutions and through a range of training programs.

This financial commitment is critical, absolutely vital for First Nations and Métis people to accomplish a number of objectives, as we look at contemporary Saskatchewan, to help these individuals meet their full potential, to help ensure that their families and communities are also positioned to continue with growth and development and, obviously and importantly, to help bolster the economy of our province. This is a shared benefit, again, one that reflects and reinforces both intrinsic and instrumental values consistent with contemporary Saskatchewan.

Regarding labour market development, our overall commitment to employment and job skills training remains as strong as ever with investments of over \$100 million. That's an increase of almost 1 million, year over year. In addition this budget provides 5.9 million for employment assistance for people with disabilities — about a 4 per cent increase over last year.

Members of the committee will also know that some of our programs have been altered and changed, some reduced. We took this action because these programs were not consistently meeting the needs of workers nor employers, in fact, nor taxpayers across Saskatchewan. So we have retooled some of our services, and we continue that process of examining a range of programs and institutions under way, regarding skills training, to ensure that they produce long-term employment

prospects for those who need it most. And I certainly look forward to additional discussion in the coming hours and days regarding some of these initiatives.

I'd like to address an important issue within our ministry, and it was an issue that was raised in the Legislative Assembly last week; that is our commitment to the Status of Women's office. The member from Regina Walsh Acres incorrectly and inaccurately stated on April 15th that this is not surprising since the government cut \$41,000 from the Status of Women's office in this budget. The budget, in fact and for the record, for the Status of Women's office is \$435,000 — an increase, though modest, of \$3,000 from the 2009-10 budget.

Through efficiencies we have added \$44,000 to programs and services to facilitate the work of this office and its partners in examining and addressing gender-based issues with an aim of ensuring greater equality to Saskatchewan. I think it's important to put that on the record because that has been inaccurately conveyed to the people of the province through the Legislative Assembly.

I'll turn now to a couple of highlights regarding helping to ensure that our province continues to grow and prosper.

We've spoken about investing in Saskatchewan post-secondary education with a special emphasis on First Nations and Métis people. We also are obviously interested in ensuring that our expats return to Saskatchewan, and now's a great time to come back to the province. In fact we see a number helping to contribute to the population growth that is close to 30,000 since the 2007 election. This stands in stark contrast to the decade prior to the 2007 election where 35,000 people left the province.

An important element to this isn't just about inviting back our expats. It's making sure that we're also extending warm welcomes to newcomers from across the country and around the world. Immigration, as articles in the Regina *Leader-Post* and Saskatoon *StarPhoenix* reinforced today, immigration maintains an important role within our provincial strategy. The total budget for immigration will be close to \$13 million. Our target for the '10-11 fiscal year will be of going forward with 3,400 nominations through the Saskatchewan immigrant nominee program, and we remain on track to undertake that work.

[19:15]

We're also doing what we can to effect a smooth and welcoming transition for newcomers. Funding for settlement of newcomers in the '10-11 budget will be 6.9 million, a slight increase from last year's budget. Importantly we also want to make sure that, as people are arriving, we've put in place and continue to work to ensure that more protections are available to these newcomers. It's one of the reasons that this government has come forward with a program integrity unit. That is a peculiar name for really services being offered in conjunction through immigration, labour standards, and occupational health and safety to ensure that our newcomers have access to assistance that's required. And to date this program is working quite effectively.

Regarding occupational health and safety and really promoting

safe and healthy workplaces, the allocation for labour and employer services is \$12.1 million. This sees a slight savings of approximately 1.7 per cent over last year's budget, and I anticipate we'll address some questions on this later this evening. I want to reference several other aspects of the estimates related to this particular area of the budget.

The '10-11 budget for occupational health and safety is 7.3 million. This will enable the branch to maintain the same level of service as has been afforded this past year. It means that occupational health and safety officers will be able to conduct more than 4,000 inspections of workplaces right across Saskatchewan this year. It also means we'll be able to maintain the same level of rigorous enforcement regarding our health and safety legislation. For example, preliminary numbers indicate that there were 794 stop work orders issued in '09-10 alone. This is a 150 per cent increase over the '07-08 period and more than a 260 per cent increase from the last year of the NDP [New Democratic Party] in power.

On another front, the labour standards branch conducted over 2,000 investigations in '09-10. Through these investigations, labour standards identified a total of \$1.5 million being owed to employees. In the same time frame, labour standards has 15 cases for prosecutions before the courts with 14 cases resulting in successful convictions.

There is positive news in several areas. These are just some examples. Others include the workplace injury rate in Saskatchewan to be in decline for the seventh consecutive year, demonstrating a bipartisan commitment to safer workplaces. It's now at 3.4 per cent, a 7 per cent drop over 2008 alone. This brings the seven-year decrease to more than 30 per cent. This comes on the strength of nearly 1,000 fewer time loss claims and a substantial reduction in the number of work injury claims reported to the Workers' Compensation Board for 2009. Undoubtedly we still have much work ahead in order to bring the number of workplace injuries and fatalities to the only acceptable number; and that number is zero. I'm encouraged by the steady progress we are showing as evidenced by these numbers. This demonstrates that many sectors right across the province are working more safely, but again we know there's more to do.

This budget also means that we are able to deliver on a wide range of safety education initiatives through WorkSafe and various partnerships with both the public and private sector. And we will continue to educate young workers about their rights and responsibilities in the workplace.

In fact, as part of the Saskatchewan Party initiative, we finally put in place a minimum age of employment in this province. Unbelievably Saskatchewan was one of last provinces not to have this. We've ensured that this is in place. Just this past February, we continued with our efforts around the minimum age of employment by launching an interactive young worker readiness certificate course. The course helps 14- and 15-year-olds to be safe and successful in the workplace by educating and testing them online regarding employment standards and health and safety information. This certificate needs parental consent and is required to be on file with their employers. From what we are hearing, it is receiving very positive reviews by students, by teachers, and by employers.

This is just one more step that we've taken to ensure that our students put greater emphasis on success in schools while at the same time allowing them to gain a little bit of employment experience along the way. Other initiatives to ensure that we're protecting our young workers include no more than 16 hours of work per week; no working early in the morning nor late at night on school days; as I've said here, parental consents; and of course this test.

I also want to acknowledge the work of the Saskatchewan Labour Relations Board which has virtually eliminated the backlog of old applications. As we came into office in 2007, there were some 30 applications that had not been addressed, some going back as far to 2004. The board is now administering applications in a timely and efficient manner, certainly a testament to the professionalism of those on the board. It has also implemented a new electronic database as part of the project to improve its efficiency and its services to citizens. This, while simple, is a significant step forward to ensure that we maintain effectiveness and efficiency. Phase one of the project has been completed under budget, I'm happy to report.

In summary, the 2010 budget is responsible and forward-looking. It allows Saskatchewan to continue to gain momentum as — while we're not immune from what's going around us — as Canada pulls away from other countries and certainly continues to move towards greater certainty regarding the world financial situation.

In summary this budget, especially as it pertains to the Ministry of Advanced Education, Employment and Labour makes strategic, effective use of public funds in positioning our province to tackle new challenges and most importantly to ensure that we're helping to take care of the people of the province of Saskatchewan. Mr. Chair, committee members, I look forward to the opportunity to share in the deliberations tonight and contribute what we may. Thank you.

**The Chair:** — Thank you, Mr. Minister. We'll now take questions from committee members. Mr. Broten.

**Mr. Broten:** — Thank you, Mr. Chair. Thank you to the minister and all the officials for being with us this evening and being prepared to answer questions. Thank you also to the minister for his opening remarks in order to have that taken care of for the subsequent times of questioning. I know you're . . . tonight we have agreed to deal with the labour issue in particular, but getting it done in one fell swoop makes sense. So I know my colleague from Fairview will be happy to carry on with the questions related to labour. I believe we had agreed for two hours of questioning with the labour focus exclusively. So just noting the clock that it's now 7:22, the amount would be about an hour and 40 minutes that we'll get finished tonight and carry on with the rest on another occasion. So with that, thank you everyone for attending. And I'll hand it over to our Labour critic, Mr. Iwanchuk, if that's all right with the Chair.

**The Chair:** — Mr. Iwanchuk.

**Mr. Iwanchuk:** — Thank you very much. And welcome to the minister and his officials. Tonight we have a number of . . . I wouldn't want to say that it was an interesting budget. I think in terms of the labour and employer services, we see reductions. I

think the minister categorized it somewhat differently than that. I guess for our part we would see it probably as cuts.

We find that perhaps a little alarming considering this year in terms of occupational health and safety and the reality as to what is happening in the workplaces in Saskatchewan. Perhaps that's where I would like to start with my questions. And I would ask, because in terms of the cut that we are seeing here, the number of deaths that we have in Saskatchewan, January 1st, 2009 to December 31st, 2009.

**Hon. Mr. Norris:** — Thanks very much, Mr. Chair. From the 2009 annual report of the Workers' Compensation Board — it's on page 1, 2009 — and we can see under the heading fatal claims accepted, that number is 26.

**Mr. Iwanchuk:** — At the presentation from the Workers' Compensation Board, the yearly, they quoted me a figure of 30 — January 1st, 2009 to December 31st, 2009. So my question would be again, how many deaths did we have in the workplace for the year 2009?

**Hon. Mr. Norris:** — Once again, Mr. Chair, I'll just go back to fatal claims accepted. It's on page 1. And this is part of the annual report. This is for the public record.

**Mr. Iwanchuk:** — My question is straightforward. My question is, irrespective of the reports in that, in terms of your department, how many people were killed in the workplaces in 2009 in Saskatchewan? And so you're telling me 26? Is that your department's final and official . . .

**Hon. Mr. Norris:** — Actually the reference I made, Mr. Chair, is very clear. That is, on page 1 of the 2009 annual report of the Workers' Compensation Board, this number is 26.

**Mr. Iwanchuk:** — Because you started out by talking about accuracies, I'm simply asking a question. Does your department know how many people were killed in workplace fatalities in Saskatchewan in 2009, effective January 1st to December 31st, 2009? And you're saying 26.

**Hon. Mr. Norris:** — Actually what I'm saying is, as reported in the Workers' Compensation Board annual report . . . [inaudible interjection] . . . Mr. Chair, I'm just trying to follow through with the question that's been asked. And that is the reference, as I understand it. What I'm trying to do is say for the public record, this is part of the annual report of the WCB [Workers' Compensation Board]. This provides a vital reference for the people of this province, and that number is 26.

**The Chair:** — If the member would . . . He's allowed to ask the question. If he'd allow the minister to answer in his own way, then you can move on to the next question.

**Mr. Iwanchuk:** — Well the minister rephrased my question, but for the record I want to note that the minister answered to my question, then he hasn't answered my question because I did not ask him what's in the WCB report. I asked him, the question was simply straightforward to the minister — I understand we are here doing estimates for Labour — the question was, how many deaths or people killed in workplaces in Saskatchewan for 2009? And he says that he's answering

from what the WCB report. He can do that, but he's not answering my question.

So I'll move on. In terms of costs, do we have any idea what it cost for the years 2008, 2009 for advertisements regarding workplace injuries in our province? How much money was spent on . . . whether that be . . . And we can talk about preventative programs overall, and if there's a breakdown to advertisements.

[19:30]

**Hon. Mr. Norris:** — Thank you, Mr. Chair. The global number for WorkSafe Saskatchewan which would oversee a range of activities — included within that would be communications — and that would be \$890,000. I'll get the associate deputy minister. This is, by the way, reported on page 73 of the Workers' Compensation Board, again a public document tabled recently in the legislature. But I'll get Mr. Carr to speak to some of those details.

**Mr. Carr:** — Thank you, Minister. Under the WorkSafe partnership, the significant and the largest investment that is made is in communication. And so it will have led to the television and radio and print media advertising that you've seen under the WorkSafe Mission: Zero logo. And that would have been an expenditure something around that \$800,000 number that the minister has spoken to.

**Hon. Mr. Norris:** — If I may, Mr. Chair, I'll just add that, importantly, the budget of the Workers' Compensation Board is contributed through employer contributions. And that's certainly noteworthy within the context of these deliberations.

**Mr. Iwanchuk:** — The budget on that same document that you were talking, speaking from was the . . . It's approximately for 2009, 890. So it's 900,000 and 1,329, so a \$400,000 difference. Am I reading that correctly then?

**Hon. Mr. Norris:** — I'm sorry, Mr. Chair, I don't understand the nature . . .

**Mr. Iwanchuk:** — The document that was read from is the WorkSafe Saskatchewan in the Workers' Compensation is 890,000. And it's for 2008, it's at 1,329 — a cut of 400,000.

**Hon. Mr. Norris:** — I think importantly this is part of a broader strategy. In the '08 year what we were able to do is certainly put greater emphasis on the use of a variety of commercials, especially television commercials. And what we were able to do was, as more workplaces accept the significance of occupational health and safety and workplace safety, we've been able to tailor some of that marketing more effectively and efficiently. And so yes, we were able to find some savings.

**Mr. Iwanchuk:** — Now in numbers of fatalities for 2008, do you have those? January 1st to December 31st.

**Hon. Mr. Norris:** — Thank you, Mr. Chair. Again I'll make reference to page 1 of the annual report of the Workers' Compensation Board and that is fatal claims accepted. For 2008, that number is 22.

**Mr. Iwanchuk:** — So just to read from that chart, probably the proper reading in terms of after 2007, in two years there's an increase of five, and in the previous three years, there was an increase of four deaths, fatalities?

**Hon. Mr. Norris:** — Yes, we can account for some of this as it relates to cancer through asbestos and motor vehicle incidents and accidents certainly vary year to year. And there would be some other specifics, but those two helped to, helped to highlight part of that explanation.

**Mr. Iwanchuk:** — How many deaths this year were as a result of falls?

**Hon. Mr. Norris:** — There were four this year.

**Mr. Iwanchuk:** — And in terms of previous years, how does that compare?

**Hon. Mr. Norris:** — The record would be 2005-06, there would've been five; '06-07, two; '07-08, that year of transition, one; and last year, two. So I would say there's a bandwidth there over the course of the last four or five years that has seen it fluctuate from five, four, down to a couple, and as low as one.

**Mr. Iwanchuk:** — Overall the fatalities, or least the fatal claims accepted, is at the high end this year, for 2009 — not this year, but 2009 — at 26.

**Hon. Mr. Norris:** — Certainly I think in this sensitive area, it's one of the reasons that our government, the government of Brad Wall has brought forward Mission: Zero, because I think the members, all members from both parties would, as we reflect on these tragic deaths, one is too many. And certainly there's more work to do in this area.

**Mr. Iwanchuk:** — In terms of the money spent, just so that I can understand clearly, getting back to the WorkSafe Saskatchewan, the \$400,000 less, was this money redirected within the department? Was it just simply not used?

**Hon. Mr. Norris:** — As I mentioned, as we stood Mission: Zero up, and some of the aggressive advertising and marketing that went with that, we ensured that there were sufficient dollars put in place to get that aggressive jump across Saskatchewan. And what we've done since is ensured that the investments are prudent and allow us to continue to build on that initial start-up.

**Mr. Iwanchuk:** — Now do you have a breakdown of the number of investigations handled by the occupational health and safety branch? I think you went over some of the figures, but for 2008, 2009, and then now in 2010.

**Hon. Mr. Norris:** — For '09-10 — some of these are still preliminary as we're still gathering, but I think the member will get the point here — for the conductive workplace inspections in '09-10, 4,785. We'll keep that number kind of in mind as we walk backwards chronologically. The year before, 3,851. The year before, 3,658. The year before, that being 2006-07, 3,621. I'll try to reinforce the point. In 2006-07, 3,621 workplace inspections; this year, 4,785 — a significant increase by any measure.

The issuing of contraventions including cessations of work notices and compliance assurances in '09-10, directly to the question, 6,262; in '08-09, 5,735; in '07-08, 4,550; in '06-07, 4,480. To make the comparison, '06-07 year 4,480; this year, 6,262. Again a significant increase by any measure.

Stop work orders: 794 for this year. Last year, '08-09, 775. The year previous, 317. And in '06-07, the number being 210. Again to reinforce the point, from 210 stop work orders issued under the direction of the previous government in '06-07, 210; this year the number being 794 — the number significant regarding improvement.

Regarding occupational health committee and supervisor training programs offered: 226, that's for '09-10. In '08-09, 212. In '07-08, 208. In '06-07, 193. Again for point of comparison, in '06-07, 193; in '09-10, 226. Again a significant increase.

Regarding occupational health committee and supervisor training participants, those actually engaged: in '09-10, directly to the question, 4,744 people. In '08-09, 4,651 people. In '07-08, 4,000 people. And in '06-07, 3,866. Again for point of comparison, in '06-07, 3,866 people participating in these processes; this year '09-10, 4,744. Again by any measure, a significant increase.

[19:45]

What I would like to add, Mr. Chair, is despite the progress that's being made, and I can demonstrate as I have already today the empirical reference for the progress that is under way, there is still much to do and there are additional measures. But what I think I'll do at this stage is just simply allow that public record to stand and look forward to the next question.

**Mr. Iwanchuk:** — Could the minister advise me of the number of staff through those same periods that were in occupational health and safety.

**Hon. Mr. Norris:** — Sure, happy to do that. We'll begin in, at present, in '09-10, the number is 80. In '08-09, again 80. In '07-08, 85. In '06-07, 76. And '05-06, 75. So you can see over the course of the same comparative frame of reference, that is from '06-07 to the current information that we have, there's been a modest increase, four or five individuals. And the numbers that we have — and we can get into specifics if you want, further breakdown of what the officers actually look like — it's much tighter than that. The range is from 38 in '05-06 to 41 at present. So it gives you a sense for very modest increases regarding the number of people. I think the statistics speak for themselves.

There's more work being done. Certainly the level of activity across the province continues to increase. That being said — and this is where I'm certainly mindful — we know there's even more to do. The culture of safety is one where the government has a leadership role to play, but certainly we know it's a shared responsibility. And there's only one number that's acceptable and that is zero regarding workplace injuries and deaths. We're still a long way from that.

**Mr. Iwanchuk:** — Does the department have any idea of how

many workplaces where there are no functioning occupational health and safety committees?

**Hon. Mr. Norris:** — Thanks very much again, Mr. Chair. Again, we'll go through some statistics. I think that that offer . . . Although there's certainly more room for improvement, that the trajectory is certainly one that marks progress.

The '09-10, and the record comes in from the 11th month, 95 per cent of all employees are covered under occupational health and safety committees. The year previous, '08-09, that was 92 per cent. And the year previous, that was '07-08, that transitional year between the previous government and the new government, that was 90 per cent.

So it gives you a snapshot in time to say that from 90 per cent to 95 per cent in the course of two and a half years. While there's certainly more work to do, it demonstrates, I think, the fact that again there is certainly a key and vital leadership role for the government to play. But there's also a shared responsibility, and I think these committees and their memberships really highlight that we are making some progress in this area regarding memberships; certainly more to do, by all means.

**Mr. Iwanchuk:** — Could the minister comment on what he is doing with the further 5 per cent that do not have occupational health and safety committees?

**Hon. Mr. Norris:** — Sure. Consistent with over the course of the last number of years we have three individuals, three full-time equivalents, dedicated to ensuring that this capacity regarding committees continues to build up, as well as increasing the effectiveness of those committees already in place.

**Mr. Iwanchuk:** — Is there any contraventions or legal responsibility or fines if you do not have a functioning occupational health and safety committee in a workplace?

**Hon. Mr. Norris:** — Certainly there would be a number of activities with respect to thresholds and the elements of which I'll turn over to Mr. Carr, but this is an area where we put increasing emphasis on education. And so there are some specific steps; certainly contraventions are included in this. We would consider that part of the educational process. And obviously prosecution remains an option as well. Mr. Carr, if I can, I'll turn that over to you.

**Mr. Carr:** — Thank you, Minister. The work that our unit within OH & S [occupational health and safety] undertakes is to encourage and create awareness within the employer community as to their obligations with respect to occupational health and safety committees or safety officers within their work units. That effort starts by making contact, issuing a letter from an officer or issuing a notice of contravention if there's no positive response to that initial contact. And where those contacts have been made, we have found that employers move into compliance, create the committees or the officer required under law and create a situation where they move into compliance. So we've yet to have to prosecute under the provisions of the statute.

**Mr. Iwanchuk:** — The number of, do you have the number of

employers paying Workers' Compensation Board there?

**Hon. Mr. Norris:** — Again, Mr. Chair, I'll make reference to this document, public document, that is the 2009 annual report of the Workers' Compensation Board. Active employer accounts — and again I'll, if I may, just make some contextual references here as well as giving the specific — in 2009 there were 38,354 employers recognized by the WCB. The year prior, 35,946. The year prior, 34,364. The year prior — that is now 2006 — 33,438. And 2005, 32,851. Again the reference being 2005, 32,851; 2009, 38,354. So we can also see, as a number of indicators demonstrate progress, we also see that there are increasing numbers of employers covered by the WCB.

**Mr. Iwanchuk:** — Do you have any idea how many employers who should be covered are not covered? Or is this reflective that we have 100 per cent of employers covered that by law should be?

**Hon. Mr. Norris:** — Thanks very much, Mr. Chair. Again what I'll do is I'll give some of the substantive examples to Mr. Carr. Importantly on this, we're working with the Canada Revenue Agency, and this is an effort to ensure that we are being as attentive and focused as we can to ensure that we have an accurate understanding of those that should be.

Mr. Carr, why don't I turn that to you to follow up that?

**Mr. Carr:** — Thank you, Minister. The employer accounts unit with Workers' Compensation Board undertakes a significant amount of activity every year to reach out and determine whether employers who are employing people in the province of Saskatchewan are doing so without applying for appropriate coverage from WCB. They spend a fair amount of time looking at reports of injury, ensuring that the employer of record is in fact covered and has been contributing to WCB. As well, as the minister had suggested, they work with the Canada Revenue Agency to ensure that there's an understanding of who an employer might be working with in the boundaries of the province of Saskatchewan.

We also are aware that, in terms of projects undertaken within the province of Saskatchewan by non-resident employers, that there is a fair amount of work that the employer accounts people do to reach out and let those project owners know that they require a clearance letter from WCB before they can let the contract to a non-resident employer.

**Mr. Iwanchuk:** — Mr. Chair, my question was, since you have contacted Revenue Canada, some number of the outstanding employers that should be contributing to WCB that are not.

[20:00]

**Hon. Mr. Norris:** — Again, thank you, Mr. Chair. We have some rough numbers. This isn't precise because of the nature of that relationship. Initially it was anticipated approximately 8,300 businesses would be contacted — 3,500 registered with Revenue Canada but not with the WCB, and 4,800 registered with the WCB but not with Revenue Canada. To date approximately 3,200 employers had been contacted by the WCB and 636 new accounts have been registered.



And so we anticipate that there will be 7,500 businesses, employers contacted. Again these are initial estimates as we attempt to work through this. But you can see that that work is certainly under way.

**Mr. Iwanchuk:** — If I could just get some clarification. There's a few, quite a few numbers that you put forward there. The last number I heard was roughly 7,500 employers. Or perhaps if you could just give us the number that . . . or sort of, if you could, on an active file, that you feel that there were 7,500 employers out there that were not, that should be participating with WCB but are not, and you've contacted a certain amount. Is that . . .

**Hon. Mr. Norris:** — Initially the estimate was somewhere in the range of 8,300. Again some registered with Revenue Canada but not with the WCB. Others registered with the WCB but not with Revenue Canada. To date approximately 3,200 employers have been contacted by the WCB, leading to 636 new accounts that have been registered with the WCB.

The estimate, as we continue to work through this process — and I'll get Mr. Carr to highlight some of the chronology here of how this has evolved and I think quite quickly — we anticipate that while 3,200 or thereabout have been contacted, we anticipate that that number's going to grow to 7,500 that will be contacted.

Mr. Carr, maybe you can walk us through a bit of the chronology and how this partnership has actually evolved.

**Mr. Carr:** — Thank you, Minister. The particulars here are that the employer accounts and revenue branch at WCB felt that there was a gap in the number of new business registrations in the province and the number of businesses who were seeking coverage from WCB.

In response to that, they struck a memorandum of understanding with CRA [Canada Revenue Agency] and in doing so have agreed to carry out work trying to identify those employers that were not on their rolls. In doing that they've reached out and touched on a number of activities and going into workplaces. The registration campaign commenced in June of last year and to date, as we said, there's been approximately 3,200 contacts made, out of which 636 employer accounts were established.

Now there's a number of reasons why an employer may not end up having an account with WCB. It may be that the only employees in the business are in fact the principal owners in which case coverage would not be obtained.

So in the circumstances that the minister's described it's expected that WCB, through their employer accounts people, will continue to canvass and survey approximately 7,500 businesses by the time they're through. And out of that we expect that we'll see a continuing growth in the number of registered employers. It's important to point out that this is simply one activity that they're engaged in along with their normal line of business which would be to contact project owners and deal with what I described earlier to you with respect to any contractors providing work on a project.

**Mr. Iwanchuk:** — We could in fact . . . The number of 8,000 could be larger if you added the project . . .

**Hon. Mr. Norris:** — This is a relatively new initiative. It's one that we're pleased to be working with Revenue Canada on. These numbers are estimates, initial estimates. We're seeing some progress. You know, I think as that work continues we'll get a better sense of more refined numbers but, you know, certainly the work that's under way, the anticipation is that 7,500 employers are going to be contacted.

**Mr. Iwanchuk:** — It's a number of questions that probably arise from this but certainly, do you have any idea on the number of accidents that would occur with somebody that's not paying WCB?

**Hon. Mr. Norris:** — Again thank you, Mr. Chair. And I'll just have a couple of remarks and then I'll turn that over to Mr. Carr. Workers in Saskatchewan are covered under the WCB even if their employers are not registered. And, Mr. Carr, maybe we can walk through what that looks like on the ground. And certainly an important addendum to that relates to occupational health and safety legislation, and that applies regardless as well. So, Mr. Carr.

**Mr. Carr:** — Thank you, Minister. The expectation under *The Workers' Compensation Act* is that workers who are injured in the course of their employment would enjoy coverage unless there was a specific exemption to the work that they were undertaking. The particular provisions of coverage for injured workers in situations where the employer has yet to register is that WCB would then, would receive a claim. OH & S would also perhaps be notified. They would start an investigation to determine cause and effect. WCB would offer the individual coverage and then seek a remedial payment from the affected employer and would cause that employer to become immediately registered with WCB.

So in the normal course of business, one would expect that not only would there be an avenue for workers in that environment to have access to occupational health and safety; there's also an expectation that if they suffered a work-related illness or injury, that they would have remedy through WCB unless there was a specific exemption from the legislation. And in that case, one would expect that the civil remedies would apply to that situation and that employer.

**Mr. Iwanchuk:** — The next question would be the number of permanent disabilities that you have.

**Hon. Mr. Norris:** — The number in 2009, again this is based on page 1 of the Workers' Compensation annual report: 638 for 2009; 2008, the number was 511; 2007, that number was 575. So it gives you a look. Certainly this is an area of concern for the government, for the WCB, and I know, well beyond that, across a broad range of stakeholders. In fact, those conversations are under way, that relates to the severity of injuries.

**Mr. Iwanchuk:** — Do you have a record of how many return-to-work arrangements you have?

**Hon. Mr. Norris:** — This may come close to answering

directly, and we'll endeavour to actually drill down and get additional information for you on this. Return-to-work percentages through the WCB, as reported in the annual report, page 1, there is a breakdown between secondary treatment centres and tertiary treatment centres. And so we can go through some relative participation rates here but we can actually drill down further and endeavour to get you some additional details.

So on the secondary category, what we see in 2009, 98 per cent; 2008, 88 per cent; 2007, 88 per cent; 2006, 92 per cent; 2005, that's 87 per cent. So we see a bit of a bandwidth there between the high 90's . . . or sorry, the high 80's and low 90's. The tertiary treatment centres in this category: 83 per cent for '09; in 2008 that was 81 per cent; in 2007 that's 82 per cent; in 2006 that's 87 per cent; and 2005 that's 81 per cent. Again, a bandwidth with a range between the low to medium 80's.

**Mr. Iwanchuk:** — Perhaps you could explain that. I'm not certain, when you say 92 per cent, for example, is that based on all injuries that there are return-to-works?

**Hon. Mr. Norris:** — We'll let Mr. Carr get into some of the details for you.

**Mr. Carr:** — Thank you, Minister. No, the percentage that's described here in the annual report, as I understand it, is the results of those injured workers engaging in early intervention, early return-to-work strategies, and engaging in active secondary and tertiary treatment. And so it's actually a percentage of those who engage in that treatment and the outcomes that they achieve.

**Mr. Iwanchuk:** — Perhaps I should rephrase my question. The return to work, because that's . . . We sort of seem to be talking about treatment. I was in fact thinking return to work where people are actually at work, those who have returned to work and are actually at work for some period of time. They might be receiving treatment, they might not; but that was my question.

[20:15]

**Hon. Mr. Norris:** — Thank you, Mr. Chair. And if we don't quite have this, then happy to take some additional questions. This comes from the WCB annual report, page 23, under the heading internal, and there's a bar graph under the heading of return to work. There's an actual measure and then there's a very explicit line and that is target. And it helps to just see with reference to the WCB and in fact the work that's under way in the partnership between the ministry and the WCB.

So beginning directly with this year, that number is 94 per cent. The target, and the target remains constant, that's 92 per cent, so 2 per cent above target. In '08 it was 93 per cent; again the target of 92. In '07, 92 per cent with the target at 92. In '06, 93 per cent; in '05, 93 per cent. So a very narrow bandwidth, all of which over the course of the last five years between 92 and 94 per cent, all of which either reaching or exceeding that target.

**Mr. Iwanchuk:** — Is there still a special prosecutor for cases for the department? Is there actually a staff member?

**Hon. Mr. Norris:** — Thanks very much for the important

question. There is an individual with responsibilities for dedicated prosecutions regarding occupational health and safety and labour standards. Importantly, this person is embedded within the Ministry of Justice. If I may, Mr. Chair, I'd like to just offer a snapshot over the course of the last three years as far as levels of activity. Directly pertaining to this year, '09-10, files sent to the Ministry of Justice, 55; prosecutions initiated, 32; prosecution convictions, 11.

That gives you a sense or a reference point. So files sent to Justice again this year, 55. Last year, that is '09-08, 26 files sent to Justice; prosecutions initiated, 19; prosecution convictions, 16. In '07-08, files sent to Justice, 18; prosecutions initiated, 11; prosecution convictions, 13. I just want to give again that reference — files sent to Justice, 18 in '07-08; 26 in '08-09; 55 in '09-10.

**Mr. Iwanchuk:** — Does the funding appear under Advanced Education, Employment and Labour? Or how does the budget for the prosecutor appear?

**Hon. Mr. Norris:** — A few years ago \$60,000 was transferred from the ministry to the Ministry of Justice, and the Ministry of Justice was granted one FTE [full-time equivalent] on this file. So there have historically been the transference of those dollars to help embed and empower that individual.

**Mr. Iwanchuk:** — Just a few questions under the harassment unit. If I guess we could just start with the number of employees and who we all have in place and maybe just start there.

**Hon. Mr. Norris:** — That number remains at three occupational health officers.

**Mr. Iwanchuk:** — Is there an arbitrator in place?

**Hon. Mr. Norris:** — Just for clarification, Mr. Chair, I'm assuming you mean adjudicator. We actually have two in place.

**Mr. Iwanchuk:** — Is there a budgetary figure for 2009-10 for the adjudications?

**Hon. Mr. Norris:** — Again we can return to the committee with very precise numbers. There were five adjudications, and a range would be between — for total — between 25 and \$30,000 on that. But again we can return to the committee with the very, very specific numbers.

**Mr. Iwanchuk:** — Another question is the cost. I don't know if you break down the cost for the harassment unit separately from the other budget.

**Hon. Mr. Norris:** — We've got that here, and I'll give you both projected and actual. And the projected was \$204,000 and the actual for '09-10 — these are both '09-10 — the actual was 199,809. So it gives you both figures.

**Mr. Iwanchuk:** — Do you have a further breakdown on the number of investigations leading to . . . and then mediations part and then . . .

**Hon. Mr. Norris:** — This is pretty detailed, so what I'll do is I'll ask Mr. Carr to actually walk through total cases of alleged

harassment, those that fit within the category of personal harassment, those that fit within the category of prohibited grounds, and then an overall response to harassment inquiries, if that's okay. We'll give you that, those numbers and that breakdown.

**Mr. Carr:** — Thank you, Minister. In terms of harassment inquiries, that would be contact with the branch with a concern or question about harassment, last year there were 864 of those inquiries: 760 of those related to issues around personal harassment, 101 of those were addressing issues around prohibited grounds for harassment. If you look at the number of investigations conducted, there were — and official complaints received — there were 243. Of those, 211 were allegations around personal harassment and 32 were around prohibited grounds. And as was mentioned previously, five of those ended up in an adjudication.

[20:30]

**Mr. Iwanchuk:** — The minister spoke of the Labour Relations Board in terms of the wait times for cases. Perhaps you could expand on wait times comparisons for length of time taken to do cases.

**Hon. Mr. Norris:** — Mr. Chair and committee members, in order to facilitate a direct response, I'm pleased to introduce Fred Bayer. He's the registrar of the Labour Relations Board. And Mr. Bayer, what I'll do is, I'll just ask you to proceed along with some general statistics about productivity, effectiveness, efficiency, and then from there if there are some additional questions, we'll return to them.

**Mr. Bayer:** — Thank you, Minister. Committee members, good evening. My name is Fred Bayer. I'm the board registrar. We have not completed our statistics for the annual report in its final form, but I have some numbers that we believe are accurate at this point.

For the fiscal period 2009 ending March 31, 2010, there was 168 applications that were addressed by the board or concluded by the board. 122 of those were by order of the board in either an affirmative or a negative or, as I say, a granting or dismissal of the application. 46 of them were concluded with the assistance of myself or one of my staff or by withdrawal of the parties or the agreement by the parties to adjourn the matter *sine die*. In that instance, we only had one application for the year that was adjourned *sine die*. And one goes back to 2007 that we achieved resolve with the parties.

As far as the decisions or orders as the board has completed this year, there were 72 granted, 50 dismissed, for a total of 122. Because of the new legislative requirements for votes to be taken in regards to certifications, rescissions, and the like, there was a total of 204 orders issued by the board for the fiscal period, as compared to the previous year, 266.

Of note the 266 in the previous fiscal year, 67 were related to the previous board members and the true number was 199 orders made by the current board. So in comparison, when you compare apples to apples, it's 199 versus 204. So we have exceeded last year's numbers by five.

Total applications received for fiscal period, 147 applications. 83 of the 147 were disposed of this year and there remains 85 ongoing as of March 31st . . . [inaudible interjection] . . . Yes, sir, we do, Minister. The number of hearing days that we had this year were 68 and we averaged, from the point of the last hearing of a decision to the conclusion, by order, on average 71 days . . . [inaudible] . . . with our annual report from the previous year, which indicated averages much or significantly higher in the tables that were reported in the annual report.

**Hon. Mr. Norris:** — Good. Thank you.

**Mr. Iwanchuk:** — How many applications for certification did you have in 2009?

**Hon. Mr. Norris:** — And again there may be some . . . There may be additional questions, Mr. Chair, that come from this and we'll endeavour to offer that information either tonight or in future sessions.

The applications: 45 were completed regarding certification; 34 were granted, 11 dismissed. That being said, the number of applications that came forward were in the low 60's and again we'll get the actual number. Some of these remain works-in-progress. And regarding days to have concluded this important work, in '09-10, 69 days. And again we can get a more complete breakdown, but in '04-05 as reference, that took 80 days at that point. So it gives a reference. Certainly we're happy to provide more complete analysis, but the work proceeds apace. And certainly to have 45 concluded, again, 34 granted and 11 dismissed.

**Mr. Iwanchuk:** — Could the minister explain how . . . was it 2004-2005 you said, how you're comparing the two procedures in terms of certifying these are applications for certification?

**Hon. Mr. Norris:** — Sure we can. We're happy to talk about the methodology here. Mr. Bayer, if you may.

**Mr. Bayer:** — What we have done is, with our computerized database we are now able to review applications since 2001 to date, the date upon which they are filed and the date upon which they are heard and the date upon which they are concluded by either order of the board or some other action, usually withdrawal by the party or agreement between the parties.

In reaching that number of 80 days, we took a sampling of the applications received in that fiscal period '04-05; broke out the number of certifications; pulled them from our database from the date the application was made to the date that the order was issued; again either dismissing or upholding the application or the application being withdrawn, it being concluded, sir. And that average was 80 days. And that number can be detailed by order, by applicant, by employer. We have that ability now with the Labour Relations Board. So we used that same calculation.

Although the legislation requires us not to provide that, it allows us to track our internal performance and see if our administration can be improved upon and we are able to confidently go forward and, quite frankly, advise this committee that we are improving on that number — in other words, speeding up the time.

**Hon. Mr. Norris:** — If I may, Mr. Chair, it makes reference (a) to the excellent work that's under way by the new board. I mean we're making progress there. I think it also speaks to the significance of this new database. And this was a piece that, while it remains a work-in-progress, it's allowing us to work more effectively and more efficiently.

And certainly the comparison that I've used previously is we were working with the equivalent of kind of a card catalogue and the Dewey decimal system. I'm not that far off, am I? And essentially we've moved comfortably into the late 20th century. So while it remains a work-in-progress, I am very pleased with the work of the members — certainly very impressive. And as we continue to build out this database, it's going to provide greater opportunity to have a 21st century system for keeping records of the Labour Relations Board. And I think this is important obviously for members of this committee, for all members of the legislature, but also for the people of the province.

**Mr. Iwanchuk:** — Do you have numbers for these applications for certification, and the numbers from when the application is put before the board, or sent in, to the number of days before a vote is held?

**Hon. Mr. Norris:** — We certainly have access to those, and we're happy to get those to the committee members in the coming evening or evenings that we'll be here. We'll get those numbers for you.

**Mr. Iwanchuk:** — Yes. I'm still not certain, in the comparisons from the previous system — because you have a system now where you apply and there's a time period and then you have a vote, and comparing that, going back to 2001, I think you said — how you compare that when before there was a card check system of application. What times are you comparing here? I'm a little confused on that.

**Hon. Mr. Norris:** — Mr. Chair, we'll endeavour to walk through in a little bit of detail here. Fair question, as the system has changed both through legislative amendment — that's part of this government acting to fulfill well over 100 of its promises and this relates to the democratization of the workplace and especially as it pertains to secret ballots, a provision that has the support of about 75 per cent of the people of this province, so there is the legislative piece — but importantly there is also the capacity now as we're proceeding apace with the database. So we'll try to answer both the context, or respond to both the context as well as the actual methodology. Mr. Bayer, why don't we begin with you and then we'll also ask Mr. Carr to enter into our response.

**Mr. Bayer:** — Thank you. The old system, if you will, was a card system and that provided evidence of support for the certification or rescission, whatever the case was. If in fact there was an application for certification and it met a certain threshold, the board would consider that application and it was issued. An order flowed from that committee or that panel ordering the certification of the workplace if the board deemed it appropriate.

When we compared the numbers from the old system to the new system, which is a vote system which is mandatory both

under the rescission and under the certification process, we took the span from the date the application is filed with the board to the date upon which the board renders its final decision. And under the old system again the application would come in, the thresholds would either be met or not met and an order would flow either disposing of the application or ordering the workplace certified. Not necessarily a vote although it was an option available to the board.

Under the new system, you have the mandatory vote system following the date of application and there is a time period between the date of application and the direction for a vote. Up until eight months ago, the board would have to go to the panel, establish a panel to review the application, and issue the direction for a vote. What we have done to assist in expediting the process, the executive officer, the Chair of the Labour Relations Board, Chairperson Love, has the ability on his own initiative to review the matter void of a panel and as an executive officer of that board, issue the direction for a vote.

[20:45]

That direction comes to myself and we employ or engage board agents to conduct the vote depending on what the size of the constituents are. From there the vote takes place by secret ballot. It may or may not be tabulated, based on the direction for vote. Once tabulated, it goes to a panel and the panel considers that application either in a public forum or in camera if there's no opposition. And an order for certification or an order for rescission flows.

Again when we compare 2004-05 to the current fiscal period, we are going from the date of application to the conclusion of that application by order. The only difference is, under the current legislation we have one step in between and that's the vote process. But we are comparing apples to apples when we consider time frames, sir.

**Hon. Mr. Norris:** — Thank you. Mr. Carr.

**Mr. Carr:** — Thank you, Minister. Really I think that's a very full explanation of the rationale and the methodology in play and I really have nothing left to add. Fred did a great job.

**Hon. Mr. Norris:** — Well I think what I'll do is I'll add this. And Mr. Bayer made reference to the previous threshold versus the current threshold, and this is vitally important. The previous threshold was 25 per cent. It was the lowest by, I think I'm on the record as saying a country mile across the country. And what we've done is ensure that the threshold is consistent with best practices across the country with specific reference that I'll use in Western Canada. And that is in British Columbia the threshold is 45 per cent, in Alberta it's 40 per cent, in Saskatchewan 45 per cent, and in Manitoba 40 per cent.

So what we've done is ensure that we're aligned with best practices, not only in the country but most specifically in Western Canada, eliminating that gap where we used to really stick out as an anomaly within the country. And what we've done is ensure that we are now part of a 5 per cent bandwidth across Western Canada. This is important because it allows for much great continuity for those both within the country and outside the country interested in various aspects and most

especially this important component of labour relations in contemporary Saskatchewan.

**Mr. Iwanchuk:** — Do you have numbers between . . . average numbers of the time between the application and the vote?

**Hon. Mr. Norris:** — Mr. Chair, once again we're happy to provide those in coming sessions to the members of the committee.

**Mr. Iwanchuk:** — A further question: is the board ever convened between the time of the application and the vote to consider any issues surrounding the certification application?

**Hon. Mr. Norris:** — Thanks very much again, Mr. Chair. We'll endeavour to provide some general insights into this issue, mindful that we're present tonight in order to address budgetary questions. And I say that with complete respect for all the committee members and that is, Mr. Bayer and Mr. Carr will have some general comments. For obvious reasons, I want to be very careful to ensure that the procedures, processes, and operations of the Labour Relations Board maintain the integrity of the current operations as I think fitting.

So we'll do our best, Mr. Chair, to respond, but we'll also be a little bit cautious here. Not in any way attempting to obfuscate, in fact the efforts will be to address the question, at the same time ensuring that we respect the autonomy and integrity of the Labour Relations Board. Gentlemen.

**Mr. Carr:** — Thank you, Minister. I'll speak really from my experience as a member of the Labour Relations Board for nine years in the previous system of card check-off. It was not in that environment unusual at all to have parties seek to intervene prior to the disposition of the application. And so it was often the case, where a hearing was required, to address particulars around defining the appropriate unit for the purposes of bargaining, ensuring that the voters or that the list of employees was appropriate for that bargaining unit. And so applications would flow from time to time when applications for certification were brought forward to the board. Fred is better able to speak to the experience of the board since the amendments to *The Trade Union Act* most recently under Bill 6.

**Mr. Bayer:** — Thank you, Mike. Minister, Chair, the current practice of the board is, upon receipt of an application either for certification or rescission, is to ensure that the board actually captures the wishes of the constituents, that being the individuals involved, whether they be seeking a certification or a decertification.

If there is a contest or an objection to the process or to the application — say in the instance of a application, usually by the employer for an application for certification; or perhaps another union seeking certification in that workplace; or in the alternative, a rescission by an individual, and the union representing those employees at the workplace chooses to object to it — the board acknowledges those objections as it is required by the legislation. However what the board does do is it ensures to get the wishes of the collective at that bargaining . . . or the proposed bargaining unit or at the existing constituent base.

And we will go in with our board agents and conduct the vote, based on the statement of employment that's provided, and acknowledge any contested individuals who would be voting in that process and capture the secret ballot. And that ballot box, or boxes depending on how large a group we're talking about, will remain sealed until further direction by the board. And if I understand the question correctly, the question was, is there a time frame or something between the time that the app is made and the vote is captured; another hearing perhaps.

We are trying very, very diligently to ensure to capture the wishes of those people in the event that the workplace is seasonal and we have no more constituents in the workplace to conduct the vote or we have a shift in employer status, etc. So we want to capture the wishes of the people as quickly as possible.

**Mr. Iwanchuk:** — I have a number of questions more, but I'll just maybe shift here a bit into the worker's advocate — the number of staff, the number of applicants that are presently are in the system.

**Hon. Mr. Norris:** — The number in the office is there are nine advocates.

**Mr. Iwanchuk:** — Now I don't know if clients or cases or how you reference that, if they're the same or you count one person with numerous cases. How many cases presently? Or if there is a different number for clients?

**Hon. Mr. Norris:** — Thank you, sir. There were . . . And I'll offer again an initial snapshot here and then we're happy to, we're happy to drill down. The office of the worker's advocate responded to over 1,680 telephone inquiries. This is for '09-10. There were 455 files opened; 95 went through to the intake, 360 proceeded to the advocates, 360 appeals were filed to the WCB. This includes both to the appeals department and at the board level.

If I may, I'll just proceed. The average wait for service was two weeks via the intake officer and six weeks at the advocate level. And there is ongoing work of 284 open files. And, Mr. Carr, if I understand correctly, there's no backlog.

**Mr. Carr:** — That's correct.

**Mr. Iwanchuk:** — It wasn't clear whether you had files that are completed, like resolution . . . [inaudible].

**Hon. Mr. Norris:** — The number, 360 appeals filed at the WCB, so essentially being transferred from the office of the advocate through to the WCB, and again the length of time varying from two weeks through to six weeks. Mr. Carr, why don't you walk us through a few additional details here.

**Mr. Carr:** — Thank you, Minister. The number of files closed in the fiscal year were 353. The average time to intake, for a file to be assigned through the intake process, was a little over two weeks. The average number of weeks for an advocate to be assigned to review the file and to carry on the work following that was 5.6 weeks. The number of assigned files at intake were 95; number of assigned files to advocates, 360; number of appeals carried on through the intake officer, 42; and number of

appeals filed by advocates, 318. So the total number of files closed by the intake officer was 67. Total number of files closed by advocates, 353 in the fiscal year.

**Mr. Iwanchuk:** — So in the short time that we have left — and I'll be returning to some of these — the overall in terms of allocations, where we have cuts to occupational health and safety, to labour standards, to the Labour Relations Board, to the worker's advocate office, what was necessary here that to have cuts to all these departments or areas of work within your department?

[21:00]

**Hon. Mr. Norris:** — I'll have our deputy speak more directly, but, you know, I think the frame is really important here. And that is, as we've demonstrated — our team has demonstrated, and the great work of the ministry officials is vital here — certainly we continue to increase productivity. And there's a lot more to do.

But these savings that have been realized come without reductions to FTEs. These are based on efficiency targets that have been put in place after very careful deliberation and based on our track record. And what I'll do is, I'll ask our deputy, Clare Isman, to provide a bit of a snapshot on savings for the taxpayers of the province and why we're very confident that the work that's under way will increase in effectiveness, will increase in efficiency, will increase in transparency, and help the province of Saskatchewan move — though not fast enough — but move towards that goal of Mission: Zero. Clare.

**The Chair:** — Mr. Minister, before you begin, we're just about out of time here. So I'll just ask for this response, and then we'll move on to the next order of business.

**Ms. Isman:** — Thank you, Minister. In light of that, I'll be quick. What you'll find across the ministry's budget is we've identified about \$1.8 million of effectiveness and efficiency target savings that we will endeavour to find through the course of this year. And part of that you will see is noted as part of the reduction under the worker's advocate. We've simply distributed it across the ministry.

Our commitment is to increase productivity and client service while at the same time finding the efficiencies that we believe we can find if we engage our employees in such reviews. If we find that there are less savings to be found in one area, we will simply reallocate them later in the year to somewhere else where there potentially are efficiencies. But we have distributed them across all of the votes and subvotes in an effort to encourage our employees to work with us to see where we can find such savings and efficiencies as we go forward.

**The Chair:** — I'd like to thank the minister and the officials for presenting before the committee today.

Just a point of clarification, a comment made by one of the members when we began. Committee with the minister here is before the committee, so that is two hours that we have been before the committee tonight.

I'd like to thank the minister for presenting tonight. We will

move to the next order of business in vote 32 with Health. Very quickly, first we will take a five-minute recess and convene after five minutes.

[The committee recessed for a period of time.]

**General Revenue Fund  
Health  
Vote 32**

**Subvote (HE01)**

**The Chair:** — Good evening, ladies and gentlemen. We'll resume with the second part of our meeting tonight. We're moving on to vote 32, Health. I'd like to welcome Minister McMorris and his officials this evening. If the minister would like to introduce his officials and make a statement before we begin.

**Hon. Mr. McMorris:** — Thank you very much, Mr. Chair. I have a really quite a lengthy statement to make, but before I do that I wanted to introduce the officials that are seated beside me and behind me. I won't introduce them all unless they come up to the table and have some input, and then we'll introduce all the officials at that time, or the official that approaches the table.

To my left is Dan Florizone, the deputy minister of Health. And to my right is Max Hendricks, the assistant deputy minister of Health. Over my left shoulder is Dr. Louise Greenberg, associate deputy minister; to her right would be Duncan Fisher, special advisor to the deputy minister. Over my right shoulder to the far right would be Lauren Donnelly, assistant deputy minister; and to her left would be Ted Warawa, the executive director of financial services branch. So those are the officials that we have directly behind me, and we have many other officials that can help, many very talented officials behind me that can help as we go through the estimates tonight for the hour and a half that we have, or maybe a little bit less than an hour and a half.

As I said, I have a fairly lengthy opening statement which kind of sets the stage for the remainder of the estimates. I won't have nearly the statement to make in other estimates as we move forward, but tonight I just kind of wanted to kind of set the groundwork as to what the '10-11 budget has to offer and the reasons why we are putting this budget forward.

I am proud to say that this government have taken a revolutionary approach to examining health care services in this province. We launched the Patient First Review. We knew that there would be incredible implications for health care in Saskatchewan, and we are now seeing similar consultations occurring in many other jurisdictions across Canada. Saskatchewan is once again leading the way in how we think about health care in Canada by putting the patient experience first.

Moving from opposition to sitting government, this government understood that we must continue to listen to the Saskatchewan residents who face challenges accessing health care services. We gathered together the perspectives of people who use the health care system and their families, providers of health care

services, health care leaders, and other stakeholders.

Through our intense province-wide consultation during the Patient First Review, residents told us about positive experiences with knowledgeable and caring health care providers. We also heard stories of disappointment, frustration, and confusion when trying to access health services at all levels. We heard time and time again that residents seek quality health care for the dollars that they are spending. They want timely access, safety, and improved performance.

With their guidance, the government is in a position to respond. The Patient First Review has provided us with a template to address long-standing issues that affect patients who are ultimate customers and owners of the Saskatchewan health system. The commissioner's report, *For Patients' Sake*, and the recommendations in it are forming the basis for fundamental improvements to the way the health system serves Saskatchewan people.

The government supports the three guiding principles of the Patient First Review: patient first as a core value in health care; the need for continuity in the health system; and the need to empower front-line providers to deliver family- and patient-centred care. Our government believes so strongly in the Patient First Review and its guiding principles that we have provided \$7 million in this fiscal year for a Patient-First Initiative Fund that will be used to support this cultural transformation.

Clearly excellent care is delivered in the province daily. Our front-line care providers are dedicated to protecting the health and safety of our residents. However the Patient First Review is a reminder that we need to adjust the health system's culture to ensure that patients become and remain the focus of health care.

Based on the Patient First Review, we have taken a critical look at Health and made strategic investments in programs and services in the 2010-11 budget. The Ministry of Health already has a number of initiatives under way that complement or directly support the Patient First Review including the Saskatchewan surgical initiative, the physician recruitment strategy, and our 10-year human resources plan.

This government identified that reducing surgical wait times is critical to improve the patient experience in Saskatchewan. Immediately following the release of the Patient First Review last fall, I asked a group of health system leaders to develop an ambitious plan to transform surgical care in Saskatchewan. We brought together a team of experts to consider the challenges from all perspectives. This team of physicians, surgeons, nurses, former patients, and health care administrator was asked to envision a surgical system that guaranteed no one wait more than three months for their surgery within the next four years.

[21:15]

I am pleased to say that we rose to the challenge and that we have a blueprint. We have a plan, the surgical care initiative. This government has provided \$10.5 million in the 2010-11 budget to support surgical care initiatives including 300 additional surgeries and 25 additional CT [computerized tomography] scans.

We believe that we have adequate capacity in the current surgical system if only we could eliminate the backlog of surgical cases that are waiting. But clearing the backlog of surgical patients is only one aspect of the Saskatchewan surgical initiative. This initiative is about transforming the surgical patient experience in Saskatchewan so that people will receive superior surgical care now and into the years coming.

Some of the initiatives in the plan, such as pooled referral or third party service delivery, are indeed focused on increasing surgical capacity. Reducing the number of falls and injuries sustained by seniors will help to manage the demand on the surgical system as our population ages. Other recommendations such as standardized safety checklists in operating rooms and the program to prevent medical errors — medication errors, sorry — reflect the patient and family-centred concerns to safety. If we can deliver procedures more safely, then we reduce the risk of complications. Not only do we improve the experience for the patient, but we eliminate the need for the patient to return to the acute care system.

We are also implementing newer, leaner processes that will not only improve the quality of patient experience with the health care system but also improve the environment for our providers. For example, projects like Releasing Time to Care frees our health care providers to deliver more direct patient care. There are currently 18 hospital wards throughout the province that have implemented Releasing Time to Care, and another 18 are prepared to make this dramatic improvement. Most of the recommendations sound simple, and many of them are. But when dealing with an issue as complex as health care, we sometimes lose sight of the simple solutions that keep the patient first.

In keeping with our government's focus on a patient-centred health care system, this government has dedicated new resources to recruitment and retaining physicians. In Saskatchewan we are very fortunate to have such a dedicated group of physicians who often go beyond the call of duty for their patient. However, Saskatchewan has fewer family physicians than the national average, and we have fewer specialists and retain fewer of our medical graduates. This is the legacy inherited by our government, but is a challenge that our government needs to face.

Physicians are in great demand, not only in Saskatchewan, but across Canada and around the world. Travel anywhere in this province and you will hear how we need to do more to attract physicians and retain those who are practising here. During my time as the Minister of Health, it has become clear that a more strategic approach must be taken if we are to see real gains in physician numbers. This government has seen real success in our efforts in recruiting and retaining nurses, and now we need to broaden our approach and turn our focus towards physicians.

First we saw the need for Saskatchewan to train and keep its own physicians. This government has turned the tide on medical seats in the province of Saskatchewan and has increased enrolment at the College of Medicine. We are now on track to implement our commitment of 100 undergraduate seats and 120 resident positions within our first term.

As important as it is to create these medical seats, it is a

long-term strategy. It will take some years to see more doctors complete their education. This government needs to take immediate action to address the physician shortage that is being experienced now. Therefore we announced a physician recruitment strategy for Saskatchewan. Currently physician recruitment is largely a responsibility of health regions, communities, and, probably more importantly, the individual physician practice. We needed to create a central coordinating agency to guide the recruitment strategy and enhance the coordination of recruitment efforts across the province.

The physician recruitment board will establish the operational and strategic plan of the agency, focusing on the retention of Saskatchewan medical grads, promoting Saskatchewan as a great place to practise, and examining innovative ways to ensure that our province has the advantage over other jurisdictions looking to attract the same physicians.

The new physician recruitment agency will bring together the many facets of recruitment, working closely with health regions and communities to address their needs for physicians. It will be a one-stop point of contact for medical students and physicians seeking to set up practice in Saskatchewan. The physician recruitment agency will adopt best practices and unique approaches to attracting and retaining doctors. For example we have medical student ambassadors in place that have begun our social marketing campaign. These efforts are targeted at new medical grads, ensuring they know that we want them to stay and set up practice right here in Saskatchewan.

Only a few weeks ago it was my pleasure to announce \$2 million from the Ministry of Health and Advanced Education, Employment and Labour towards distributive medical education led by the Saskatchewan Academic Health Sciences Network. The distributive medical education will increase the number of physicians trained in rural centres, which is key as a physician trained in rural Saskatchewan are much more likely to remain in rural Saskatchewan.

The shortage of physicians did not happen overnight, and finding solutions will take some time and effort. But this government has allocated 3.5 million in the 2010-11 to the agency to see that this important work gets under way immediately and that we start to reverse the trend seen in this province over the last over the last number of decades, over the last decade.

I am happy to report that in the last two and a half years under our government we have seen an increase of 72 general practitioners and 92 specialists into the province. That's an increase of 164 physicians working today since our government has come to power. This government will see to it that this trend continues with our physician recruitment agency and the positive momentum we have from our landmark Patient First Review.

In addition to these uniquely Saskatchewan initiatives, this government has invested more in autism services in 2010. More and more Canadians are being diagnosed with autism, increasing the demand for health, education, and social services to better assist these children and their families each and every day. To help these families cope with autism, this government implemented a provincial strategy for autism services in 2009,

investing \$6 million annually to supplement the services already in place.

Informed by representatives of autism support and stakeholder groups, the autism framework and action plan enhances access to effective and efficient autism services and supports. The action plan is intended to address gaps in the continuum of care and apply a coordinated approach to evidence-based supported interventions. Each health region is in the process of implementing the action plan, ensuring that autism spectrum disorder support is available to residents throughout the province.

A key component of the strategy is ensuring that the regions have the necessary treatment and program personnel. I can report today that 13 of the 15 autism spectrum disorder consultants and 11 of the 18 support workers have been hired and recruitment efforts continue to fill the remaining spaces. In addition to these dedicated staff and the interventions they provide, province-wide training opportunities are offered for parents, caregivers, and professionals to ensure that Saskatchewan has a pool of trained individuals who are qualified to deliver a variety of interventional strategies.

As well, seasonal programs and respite funding is available to assist individuals and families that require support during off-school hours. This approach not only provides direct services to children but builds on the network of support around them in their homes and in their communities. We are currently examining further enhancements to this system of supports and how we can best serve those Saskatchewan residents with autism spectrum disorder.

In 2010-2011, the government has increased the annual autism services funding by \$2.5 million, bringing the total investment this year to \$5.5 million. With these new dollars, additional therapy services and respite services will be available to support individuals with autism throughout the province. Of course every child is different and for children with autism, each treatment plan is different. Access to evidence-supported treatment and intervention strategies is necessary to meet the individual needs of children with autism. These new resources will be targeted and assessed to ensure that the action plan is best serving these children and their family. Once the framework and action plan has been fully implemented across the province, the ministry will review the process to measure its success and determine any recommendations for the future.

Whether it's autism programming or the Saskatchewan surgical initiative, the government is continuing to invest in health care in a strategic, patient-focused fashion. In the current economic climate, health care spending has come under the microscope and we are committed to seeing effective and efficient health care services within the means of our government. The Ministry of Health intends to be a model to other government ministries and agencies as we implement a lean approach to health care, a method that continues to put the patient first while making the system work smarter.

We have made significant progress on a number of fronts, but more needs to be done. By encouraging innovation and efficiencies in the health care system, this government will be able to continue to advance cancer and cardiac care,



hemodialysis, and mental health services in the years ahead. We must continue to support front-line services and deliver high-quality health care services in a timely fashion while reducing Health's footprint in the provincial government.

Although we are not the only jurisdiction facing challenges of rising health care costs, I believe we are leading the way with innovative and meaningful solutions that will improve care to the persons who matter most — the patient. Thank you very much and I would be pleased to answer any questions that the committee may have.

**The Chair:** — Thank you very much, Minister McMorris. Ms. Junor.

**Ms. Junor:** — Thank you, and welcome to the minister and his team of officials. I was going to be fairly general tonight. I may touch on some particular points but I wanted to just do a general overview of the budget as presented in the budget book. And my first question is basically to the increase of . . . What is the increase to the health districts, which we were told was \$127 million? And we're also told that 100 million of that was going to address the SUN [Saskatchewan Union of Nurses] contract and the new hires of nurses. So that leaves 27-point-something-million as new money to the health districts. And can you tell me to begin with, how many health districts ran a deficit in '09 and '10 and what the total was and what each one ran?

[21:30]

**Hon. Mr. McMorris:** — I guess first of all I'll answer, I think it was your second question first. I'll answer regarding the health regions and which ones are running deficits and which ones aren't.

I think, first of all, not all the numbers are in because the fiscal year just ended, you know, a week and a half ago or so, or on Friday. What we have right now, preliminary numbers are on operating deficit. About seven health regions are running a deficit, and the total of that deficit is about \$7 million. On a \$2 billion operation that deficit is minimal but that is a deficit. Roughly about seven are.

On the health regions and the lift to the health region, the lift to the health regions has been 5 per cent. So some of that money is toward targeted programs. It doesn't all show up, but it is 5 per cent, which is more than enough to cover any additional SUN contract as well as a number of other initials that we'll be asking the health regions to undertake.

**Ms. Junor:** — So the page 82 in this book, the budget summary book, it says there is an estimated deficit in the health districts of 76 million. The forecast, this is what's estimated for this coming year. What was forecast for last year is 136.9. And so I'm not exactly sure where your 7 has come from, where your book says 136.9.

**Hon. Mr. McMorris:** — So as I mentioned in my previous answer is that the operating deficit is about \$7 million. There is some capital issues and it goes into amortization. On a summary financial statement, which gets fairly complex . . . And I'd be more than glad to have Ted Warawa come up and explain the

details of the \$7 million — well, not necessarily the details of the \$7 million operating deficit — but when you get into the amortization of capital and how all that works through a summary financial statement, he'd be more than glad to kind of walk you through those details if that's what you'd like.

**Ms. Junor:** — What I really would like to know is, where this amount of deficit will show up. Will it be a debt that the . . . Like I've been on Treasury Board. I've been in the Ministry of Health so I understand that the districts have run deficits in the past, which then translates into debt, accumulated debt. So I'm asking then, is this the accumulated debt up to this point, 136.9?

**Hon. Mr. McMorris:** — I'd think it'd be valuable to have Ted Warawa, who is the — well I already said it — executive director of financial services branch to kind of walk us through the fiscal picture.

**Mr. Warawa:** — Thank you. The summary financial statements that you're referring to, they show the consolidated funds of the health authorities. So that includes both the operating account and the capital account. So what the minister had mentioned on the operating deficits is included in that number. What the remainder is, because regions amortize their capital but account for cash for capital as it comes in, is essentially the difference between cash funding and amortization in capital.

So in any given year, there's about \$120 million worth of amortization in the system, and to the extent that your capital funding is above that, you'll have a surplus in the capital account. To the extent it's less than that, you'll have a deficit.

So that's the bulk of the number and the changes that you're seeing in the summary statements . . . [inaudible interjection] . . . No, it doesn't because it's amortization.

**Ms. Junor:** — So we don't see an accumulated debt here? This is more . . . So when did the accumulated debt, when was it cleared off?

**Mr. Warawa:** — It's not. In the same summary statements, I believe a few pages over, you'll see a statement of debt for the health regions.

**Ms. Junor:** — What page?

**Mr. Warawa:** — Page 86. And so the debt is about 89 million estimated for this year. So it's been about that level for a number of years. It's actually come down. But the debt isn't cleared off.

**Ms. Junor:** — Is this accumulated or is this this year's debt?

**Mr. Warawa:** — That would be the accumulated debt that they hold. That would be the debt that they hold, so it would include any accumulated debt over time.

**Ms. Junor:** — Okay, so that's \$89 million which is sitting somewhere.

**Mr. Warawa:** — That's right.

**Ms. Junor:** — Registered against the province's debt load.

**Mr. Warawa:** — That's right.

**Ms. Junor:** — Has there been any paydown of any of that debt to any of the districts when they . . . At the end of their fiscal year, do they even out or zero out, or are they allowed to carry a deficit?

**Mr. Warawa:** — They've been carrying that debt load for a number of years. The bulk of that debt is historic CMHC [Canada Mortgage and Housing Corporation] mortgages that the regions hold for . . . back in the '70s and '60s, they created long-term care facilities and used CMHC to borrow for those facilities. So they still carry about \$50 million of that debt, which is part of this. That gets paid down every year by a little bit.

There's other debt, some associated from past deficits or operating debt. They've also incurred debt for other capital projects such as the Saskatoon parkade. So every year a bit of that debt gets retired, and they have provision for it, to retire that debt.

But every year we also add to that debt amount. For the amount that you'll see that there's a slight increase, the bulk of that reason, net of reductions that we've had in debt due to retirement, we've also added energy performance contracting debt, where they have a source of repayment that is utility savings. So we allow them to borrow in order to undertake energy saving renovations to their facilities and that would be in that number. So on net, between what we retire through the regular course of retiring that debt, paying off on those mortgages, we may add to it for things like energy performance contracts. And so that's the reason for that change in debt.

**Ms. Junor:** — And the interest on the debt, where is that displayed?

**Mr. Warawa:** — It's not. It would be held as an operating amount in the RHA's [regional health authority] budgets.

**Ms. Junor:** — Are they expected to pay interest on their own debt?

**Mr. Warawa:** — They do pay interest on that debt.

**Ms. Junor:** — When you mentioned CMHC, I just recently was handed a piece of paper showing me some facilities, most of them long-term care, that had mortgages on them. And one of the CMHC mortgage was till 2040 or something, but it was at 10 per cent. Now is there any way you can renegotiate those mortgages? Like some of them were 10, one was 10, but some of them were 5, 6, 7 and they were for a long time out. So it's costing these facilities and these districts a lot of money.

**Mr. Warawa:** — We have looked at it in years past, and I think we'll look at it again this year. The difficulty is CMHC does count on that mortgage revenue, and so there's a penalty associated with early repayment. So you have to come with terms. Just like you would on your own mortgage if you want to early retire, there's a loss of revenue on their side that they'd want compensation for. So even though we locked in at a higher

interest rate in the past period, to retire it or to buy it back, you may well be paying a penalty depending on what their revenue needs are.

**Ms. Junor:** — But they will negotiate?

**Mr. Warawa:** — Yes, they will talk.

**Ms. Junor:** — That was just a sidebar because it just made me think of that 10 per cent mortgage from CMHC. So moving along on just on the general questions, I know there's a staff complement decrease of about 30-some FTEs. If you can tell me what jobs have been deleted and what programs they were attached to.

**Hon. Mr. McMorris:** — So the target, the number that was mentioned, is certainly a target that we plan on meeting through the Ministry of Health. Much of it is done through attrition. There are number of vacancies, quite a few vacancies right now in the ministry. And the ministry is right now going through a strategic planning process to make sure that we have the proper complement of personnel in the proper areas, as we have, you know, initiatives such as surgical care initiative maybe or the physician recruitment strategy to make sure that we have the proper complement in those places. But most of the reduction will be seen through attrition, and it's not a long ways off of some of the numbers that we've seen in the past.

**Ms. Junor:** — I moved on too fast actually. I had some more questions about the health districts and their budgets. Saskatoon was projecting a \$14 million deficit at the end of the fiscal year '09-10, and now you're saying that only seven districts have ran up to 7 million total. How did Saskatoon get rid of their 7 million so quickly? . . . [inaudible interjection] . . . Or 14 million, sorry.

**Mr. Warawa:** — The \$7 million is a net number from all the regions. So that would be offset against regions that are running surpluses as well.

**Ms. Junor:** — Some are running enough — 14 million — to wipe that out? Districts are running surpluses of that much?

**Mr. Warawa:** — They're operating . . .

**Hon. Mr. McMorris:** — So the announcement by Saskatoon at 13, that gets into some of the issues around capital and capital funding and some long-term care, but capital which Ted already talked about. Their operating deficit is looked at to be around \$6 million. When you offset that over the 12 health regions, you know, the number being 7 million aggregate from all the health regions that are running deficit offset by regions that have seen surplus in operating.

**Ms. Junor:** — Does Saskatoon then get the \$6 million wiped out by taking money from another health district or do they carry that deficit?

[21:45]

**Hon. Mr. McMorris:** — So at the end of this fiscal year if they're at a \$6 million deficit, that is carried forward. They have to manage that into the next fiscal year just as they've had to

manage, you know, all the way over years past. Some years they're in deficit position, some years they're in surplus position, and they manage that through the next fiscal year. And it varies.

I mean there has been . . . This isn't the first time that a health region has run a deficit. They all work extremely hard to make sure that they balance out. But again I would say that when you look at the total spend on all the health regions — over \$2 billion, you know — some years there may be a small surplus, some years there may be a small deficit. I would say \$7 million in the total spend of health regions is a small deficit. Each region will handle that on their own as they move forward.

**Ms. Junor:** — I've had several regions speaking already about the difficulties they're going to have to actually do that. Saskatoon has said they will have a \$14 million deficit — that's the last I've heard — plus they will end up having to, now you say, absorb the 6 million or budget differently so the 6 million is zeroed out for next year. So that really does pretty much eliminate any increase they received and are already talking about what programs and staff they'll have to cut, as are other districts. Interestingly enough, one was not going to fill their autism strategy position to make up for their lack of funding.

So I'm wondering how districts are going to manage when, at the beginning of my comments I said we were told in our briefing about the budget that of the 127 million new dollars, 60 million I believe was mentioned as what would be needed to meet the contract obligations of SUN's contract, 40 million for the new hires in SUN, new nurses. That's 100 million of the 127 million, so how do you divide up the other 27 million so the districts get a 5 per cent lift?

**Hon. Mr. McMorris:** — You know, as we move forward, a 3 per cent lift overall in Health and a 5 per cent going to the health regions is not the numbers that we've seen in the past. You know, as all of government, every ministry has looked at how they can reduce the spend in their area. Health has been no different. We have seen a 3 per cent increase so on a pure dollar value it's the biggest increase in government. But overall, it's not what Health traditionally is used to.

What it would look like if we were to go at the status quo and then back down to 5 per cent — status quo was roughly 8 per cent, and back down to the 5 per cent — we're looking at a reduction in spending, which isn't really quite accurate because it isn't a reduction in spending. It's a reduction from the status quo, of where health regions would like to be or health regions would expect, of about \$35 million. \$35 million in a \$4 billion operation, or in health region land over \$2 billion, is not a large amount.

But that being said, we are challenging the health regions. We know we're challenging the health regions to find efficiencies. Is everything that they have done and the way they have done them for the last however many years — and we could, you know, debate how many years — is that the way they should continue to conduct business into the future or should they look for efficiencies and savings within the business that they are doing right now?

And I have been very impressed with not only the CEOs but the

board Chairs to take up the challenge. It would be easy to say, no, we just need more money, and you haven't funded us to what we think we should get — and throw up their hands. That isn't what is being done, I don't find, in health region land. I would agree with you that there are some . . . Absolutely they're concerned, and they are working diligently to meet the targets that we have set, but most health regions are up for the challenge and are looking at ways to find efficiencies.

You know, we talk about a \$6 million deficit in the Saskatoon Health Region. Last year the operating budget was about \$804 million in the Saskatoon Health Region. A \$6 million deficit is less than 1 per cent in their operating budget. That's not a huge number; 1 per cent variance is not a huge number. We are challenging the health regions at a reduction from status quo. That doesn't mean that we're spending less. We're spending less than what they expect at status quo, but we're increasing by 5 per cent to the service deliverers, the health regions.

There are many initiatives that the health regions will be looking into as we move forward. I've strongly said that we don't want to see services reduced but there are efficiencies that can be gained. Each health region is looking at some of those efficiencies right now. I know Saskatoon Regional Health Authority has signalled some. There's issues around a shared services agency that can look at group purchasing that can certainly find some savings. There are a number of initiatives that we can move towards.

I mentioned just briefly the Saskatoon Health Region. And they're working on some attendance management issues, looking at trying to save on overtime, on sick time, on WCB. I think Saskatoon is the one that's been vocal so far, but I think you'll see other health regions looking at finding those efficiencies. I think there're some out there. Just doing it the same way as we've always done it is not the way business is going to be conducted as we move forward. And sometimes it takes a challenge like this to have health regions look at the business that they're doing and look at how we can do it, do it better.

I can tell you that there are other efficiencies to be gained, the lean process being driven out into the health regions and looking for efficiencies on the lean side. The one area that I know much better would be the Releasing Time to Care. And some of the initiatives that health regions . . . And I wouldn't say it's the health regions. What I would say it is the employees within a health region that have embraced Releasing Time to Care, and it is unbelievable the efficiencies that they have found on the wards that this has been rolled out in. There's 18 wards in the province right now. We're rolling it out into another 18 wards, but I would advise any of you, and especially the critic, to go visit a couple of those wards and see the efficiencies that are being gained.

If we're asking for the health region to absorb 1 or 2 per cent, or in Saskatoon 1 per cent, the efficiencies on, you know, on some of the programs and I'll again speak for Releasing Time to Care, you can see that there. And Releasing Time to Care isn't to turn money back into the system, it's to turn time back into the patients, allow the health care providers to provide more time in front of the patients by finding efficiencies within their own ward. And when you allow the providers themselves to

look for solutions and for management to embrace those solutions and enact those solutions, it's an extremely, extremely powerful initiative.

**Ms. Junor:** — I can see that, because having been a nurse for many years I know that no one ever paid attention to anything we ever said, and it would be refreshing to have that happen. I was just visiting a long-term care facility where this certainly hasn't reached their place yet. No one is paying attention to anything that they've suggested that would save money or make patients' lives better.

But back to this, the districts get the money that they're getting and the status quo would have been 8 per cent. I think it's pretty safe to say that 80 per cent of the money that is spent in the health districts is spent on human resources. So if there's going to be efficiencies it's not going to come from bulk purchasing; not enough of it's going to come from bulk purchasing.

And so if districts or regions are going to be faced with trying to meet a budget that is basically . . . Because 3 per cent is a zero basically and they're going to end up having to cut some programs because it is basically heavily, heavily weighted in HR [human resources]. And if they go to vacancy management — which many of them do; that seems to be the fallback position — to go to vacancy management to manage deficits, then you're also, you're also cutting into the gains you have made with staffing up in many of the units. So I think it's going to . . . I guess the proof will be when the year's out and we see how the districts did, which I think that they're going to try very hard but I can't see actually how they're going to make it.

The lean process, which I want to talk about quite a bit more, but just off the top I just want to say . . . I mean driven out isn't probably a good word, a good phrase to use about how you're driving it out into the health care, into the health regions. I think it's probably more acceptable if it's taken out and basically shared rather than driven into it, because it seems to have the connotation of the Toyota.

And I've had people call and ask me, like what is this lean thing and so I looked, I looked up a fair amount of it. And Dan and I have had this conversation about lean many years ago and this isn't a Sask Party initiative by any means.

But there's a couple of things in lean, and this can be for another conversation but I just want to flag it for Dan to explain it to me. If we're going to do this, in lean on the . . . When they talk about it through copying what, say, Toyota does for TQM, Total Quality Management, one of the things they said was, there's a big focus on cross-skilling, which I'd like to have some comments on and that will be for our next conversation; and also on constant video surveillance of the workplace.

So those are two of things that raised red flags for me when I was reading it just briefly. So we'll have that conversation but you can, you know, flag it and maybe tell me what you want to tell at that time.

So back to . . . I don't expect you, Dan, to, you know, you don't have to comment now, but I do want to talk about lean in a bigger way later on.

But I just want to get back to the budget book itself and just ask for a few things, like the provincial targeted programs and services on page 90 of the budget book. There's a drop in that money, about \$13 million. Can you tell me what is going out? I just might . . . Yes, about 13 million.

It's under allocations, right under Canadian Blood Services. It says provincial targeted programs and services have a decrease of 13 million.

**Hon. Mr. McMorris:** — There's a couple of things I just wanted to say before I answered your last question. And you were talking about health regions and they'll work hard and can't see them . . . You don't feel that they can meet the targets. I think that health regions will certainly take up the challenge. There is not one issue; there is no one thing that will help them meet the target. It will be a combination of things.

You said shared services won't do it. No, it won't do it unto itself but there a number of initiatives that health regions will be tracking and working on to find efficiencies. And not that you'll eliminate it completely but just to get a grasp of the money that's spent, we're asking for a \$35 million savings. This past year, RHAs and the Cancer Agency paid a total of \$60 million towards sick time and \$87 million towards premium rates. Now we can certainly work towards premium rates and a reduction in that when you have a greater complement of health care professionals. We have seen an increase of well over 500 registered nurses in the province that we will really hope that will see a reduction in some of the premium time salaries.

And as well as some of the sick time . . . Because one of the things that was said over and over again when we were in opposition is just because of the sheer lack of health care providers, and in this case nurses, that people were feeling burnt out at work and sick time was utilized perhaps more than what we had hoped. And by increasing the number of health care providers and particularly registered nurses, we hope to see some savings.

I mean that is an increase of . . . That is a payment of \$147 million last year between RHAs and the Saskatchewan Cancer Agency for two pieces, sick time and premium time — \$147 million and we're looking . . . That's just one piece of the overall initiative to try and see \$35 million worth of savings. We're not saying that \$35 million worth of savings is going to come from those pieces, those two pieces alone, but it's \$147 million spent that hopefully we can find some savings on as well as the shared services organization, as well as lean, as well as a number of initiatives that I think the health regions are going to be very accepting of.

[22:00]

And I know if you wanted to start talking about the lean concept, Deputy Minister Dan Florizone would love to get into that and that would pretty much take up the rest of our time. So we won't allow that to happen in this setting but when we have two or three hours of estimates we can start with that and Dan can finish it.

On the other piece, I'm just trying to think of what the other . . .

**Ms. Junor:** — Targeted programs and the 13 million reduction.

**Hon. Mr. McMorris:** — Targeted programs. Yes, the targeted programs. Most of that is around the relocation grant money. We have done very well in bringing nurses, in retaining our graduates, bringing nurses to the province. Some health regions were receiving money for foreign trained graduates. We're looking at reducing that spending on that. We seem to have a bit of a momentum building, I think, in the province. People are looking at the province to come to, not go from.

And when you see some of the stories and headlines coming from other provinces and some of the contracts that are being offered, I think that we've got a very good recruitment strategy, and that is our recent SUN negotiation and the contract and the partnership that we have and the working relationship that other provinces are very envious of the working relationship that we have with our registered nurses, and now in this province. And I think that is a great recruitment tool, as well as a contract, as we move forward.

**Ms. Junor:** — And they missed you at their convention. Also under this the same heading, the allocations, I see the Health Quality Council is losing money as well. Can you tell me why that is?

**Hon. Mr. McMorris:** — When we looked at all the budget items, of course we looked at where we could find savings. What we have asked the Health Quality Council to do is to continue to do what they have done and supply a great service to the health system and evaluating programs that we have.

You know, it was the Health Quality Council that kind of searched out Releasing Time To Care and moved that initiative forward. They're also the ones that are seeing that being implemented and the support for that being implemented around the province. We expect that to continue.

The Health Quality Council had some savings, some retained — I don't know if you'd call them retained earnings — but some savings from previous years. So it is felt and they feel that they can continue on offering the great work that they offer throughout the province, as we move forward, on the budget that they have been allotted in this fiscal year.

**Ms. Junor:** — The next one, and this one really concerns me is because it's SHIN [Saskatchewan Health Information Network]. The health information network is losing about \$4 million out of this budget, and could you tell me how that will impact the electronic health record development?

**Hon. Mr. McMorris:** — Last year the funding to SHIN was \$14 million more. And so it is felt that with the slight reduction this year, with the money that was put in last year, that all the projects that have been started can move along, continue to move along. We don't see there being any negative effect. Due to the extra funding that was put into SHIN last year, we don't see any negative effect as far as continuing on with the electronic health record, as we move forward.

**Ms. Junor:** — So to that point, where are we with the electronic health record?

**Hon. Mr. McMorris:** — I'm going to allow Max Hendricks to answer this question. He has certainly a very in-depth grasp on it.

**Mr. Hendricks:** — Things are actually proceeding quite well with the implementation of the electronic health record. As you're aware we've implemented more RIS/PACS [radiology information system/picture archiving and communication system] sites. We'll be opening Regina this fall or actually this spring. We've done it in Saskatoon, Prairie North, Cypress, and so we continue to fan that out.

The PIP [pharmaceutical information program], as you are aware, has been successfully implemented in most pharmacies in Saskatchewan. We continue to implement the hospital-based systems, the Sunrise Clinical Manager in our large regional and urban hospitals.

And so now actually what we're doing is we're taking it to the next phase, and we're building the glue that will bind all these repositories together. And that's the complex part of it. And so we've started work on that. Our hope is to actually have lab repositories up and running within the year.

The interesting thing too that we have going along with this is that with the electronic medical records that we're now rolling out into physician offices, there's an increased demand for access to these repositories. So we're optimistic that we'll have functional systems to support the physician offices.

**Ms. Junor:** — Is there still the policy that the department supplies the physician offices with the computers and the support to run the programs?

**Mr. Hendricks:** — Yes, we provide a payment to the physicians to help them in their change of management and support. And it's an administrative payment based on monthly payment, and then also a per fee transaction for every bill they submit with their electronic medical record.

**Ms. Junor:** — You mentioned PIP, and we do have a document tabled, but most of us have seen it already. And in the document, this was about the breach of security in the Sunrise Regional Health Authority with the pharmacy. And the commissioner that reviewed this, the Privacy Commissioner, recommended that there's some changes happen to PIP.

He recommends the changes to the PIP accreditation process and to the log-on procedures by the pharmacists, any pharmacist who seeks to view the PIP database. And the second recommendation is that he recommends that Saskatchewan Health develop a policy to revoke or suspend user access temporarily or permanently for a registered user that views personal health information contrary to HIPA [*The Health Information Protection Act*]. Is that being worked on?

**Hon. Mr. McMorris:** — I think what I'd like to say first of all regarding the PIP program is that, you know, this breach is certainly disconcerting. And we take it very, very seriously, especially when the Privacy Commissioner has weighed in and made some recommendations only last week. And so we're looking at that, and I'll comment on that in a little bit.

But what I would say in the five years since PIP has been up and running that patient records are far more secure. You know, it's a better, a safer, faster, and a more secure system than we ever had prior to PIP being introduced, back when it was kind of a paper base. And so I will say that it has been a very good functioning program that really has provided citizens of Saskatchewan some strong security.

That being said, the breach that the Privacy Commissioner looked into is disconcerting. He's made a couple of recommendations, which you've identified which just came about in the last week or so. We are looking at that and working with the College of Pharmacists to see how we can deal with those recommendations.

When it talks, starts talking about suspension, that's when we have to bring in Justice then because that becomes a legal issue. It's a fine line. I mean we want to . . . You know, the education piece, those are kind of issues we think we can move on working and making sure that . . . I mean some of that work is already being done. But better to educate the pharmacists to make sure that they understand how the system works, number one, but how important it is that there aren't any of those breaches of security. Because ultimately what we want is pharmacists to completely buy into this program and utilize it because it's good for patients.

And so if you start just running with deterrents, then you risk the issue of buy-in from pharmacists. That's why we're working very closely with the Pharmacists' Association and Ray Joubert to make sure that . . . You know, we can look at these recommendations, but we can look at them with first of all the security of patients' information in mind, but also with the fact that we want utilization of the system.

**Ms. Junor:** — Not at the expense of the privacy of the patients' information. So I'm sure pharmacists would agree that anything that would make the system better — and I don't think they're any happier than we are about this reflection on their profession — so I think they'd be quite willing to move this forward.

Before we leave that page of provincial health services, under goods and services on that same page 90, there is almost a \$7 million increase. And what is actually under goods and services? And why the \$7 million increase?

**Hon. Mr. McMorris:** — I'll turn it over to Max.

**Mr. Hendricks:** — That \$7 million increase is primarily the result of accommodation expenses for the new provincial laboratory and increased vaccination costs for provincial immunizations.

**Ms. Junor:** — Say the last part again. Sorry.

**Mr. Hendricks:** — Increased costs for vaccines for provincial immunization programs.

**Ms. Junor:** — The programs? All immunization programs?

**Mr. Hendricks:** — I would think so, yes.

**Ms. Junor:** — Okay. Not just H1N1 or anything, right?

**Mr. Hendricks:** — No. For all immunizations, yes.

**Ms. Junor:** — Okay. And the salaries have decreased. Does that mean that there's more FTEs coming out of there as well?

**Mr. Hendricks:** — Yes. That's reflecting the \$1.4 million expected administrative savings from FTE reductions.

**Ms. Junor:** — And we don't know exactly what programs that will impact.

**Mr. Hendricks:** — Not at this time.

**Ms. Junor:** — It's done by vacancy management again. Okay.

On the next page there's regional targeted programs and services that have gone up by a significant amount. Can you tell me what they are? Were they captured in your opening statement? What exactly are they? What amount for each of them? And where are they going to be situated?

[22:15]

**Hon. Mr. McMorris:** — So as you had mentioned, there is a significant lift and it catches a number of things. And I'm just going to identify a couple of the initiatives. I won't identify all because part of this deals with compensation and some of that compensation is still under negotiation or in negotiation. So I'm not going to itemize dollar value too far but some of the areas that this catches that have already been announced, the wait-list initiative for \$10.5 million, the autism enhancement services for 2.5 million. There are a number of other areas such as the cardiac care centre here in Regina, some funding that would go to that. Chronic kidney disease, some funding that will go to that. So there are . . . The midwifery rollout would be another area.

So there are a number of things rolled into that but I won't get into the exact detail. Some of the dollar values have already been made public, but there is compensation. A big part of that is compensation which, as you can appreciate, are under, some of them under negotiation.

**Ms. Junor:** — Which I guess would be a good place to start then about when we're taking about the allocations for medical services, fee-for-service and non-fee-for-service. There is an increase in both of those budgets, and what is that anticipated to do? Is that to meet the obligations that you are anticipating under the new SMA [Saskatchewan Medical Association] contact?

**Hon. Mr. McMorris:** — There are a couple of things again. And it wouldn't be appropriate for me to get too specific on this, but a large part of that is increasing utilization on fee for service. So there is some of that, and there is also a large portion that will also be dealt with through bargaining some outstanding contacts.

**Ms. Junor:** — So this will somewhat address the anticipated settlement with the SMA?

**Mr. Hendricks:** — It's spread between fee for service and non fee for service, but yes.

**Ms. Junor:** — And what about negotiations with PAIRS [Professional Association of Internes and Residents of Saskatchewan]?

**Hon. Mr. McMorris:** — All of that's rolled into this whole piece.

**Ms. Junor:** — What is the status of the negotiation with PAIRS?

**Mr. Hendricks:** — As you know, the university bargains with PAIRS. They are currently in the process of actually putting together a package that they will submit to government to seek mandate approval for those negotiations. So we are not directly involved, but the university tells us that they will have us something in short order.

**Ms. Junor:** — There is a high degree of frustration actually among residents because of the . . . And I'm getting emails, which I've never seen before. I've never had residents email and now I'm getting a deluge of them. Their response to the physician recruitment strategy has not been positive. And I'll just read you one comment:

Over the past month, two high-profile governmental initiatives aimed at increasing resident physician recruitment and retention have received news coverage. I am writing to illustrate how these programs will not only be ineffective, but may actually worsen the province's ability to retain and recruit Saskatchewan trained resident physicians. The vast majority of residents were not consulted before the initiation of these programs and the estimated cost of these programs is 5.5 million dollars. To let you know, the general response of residents when they hear of these two recruitment proposals is sarcastic laughter. Nobody wants to stay in this province if we are treated with a complete lack of respect during our residency. If you took the 5.5 million and put it towards resident salaries, your recruitment problem would be solved. This resulting 20% raise would have been a significant step in restoring our desire to stay in the province.

That's just a portion of one of many that are coming. And like I said, I find this quite different from any other year I've been involved because I have never had residents actually be so open in their comments. So it I think reflects . . . There's been mention of the lack of a contract and lack of meaningful, respectful negotiations with PAIRS. And they do think the university's doing a not bad job but they haven't got the money. So they're looking to the funder, which is Sask Health.

So I just wanted to share that with you to show that there are many more of those kind of comments coming about the physician recruitment strategy, and perhaps a solid contract with PAIRS would do a lot to fix some of the recruitment issues.

I'm also going to move along to some of the new programs. I'm assuming the optometric services and the dental services increase are because there's new programs anticipated. And what would those be?

**Hon. Mr. McMorris:** — I want to comment on your comment and then I'll answer your question second, regarding the email that you received from a resident. And that's, you know, that's very, you know . . . We don't like to hear that. It's disconcerting. But I will say that just from my experience meeting with and talking to many of the residents, medical students and the residents that I've talked to, they have been quite happy with the consultation that has gone on.

First of all when we first started talking about a physician recruitment strategy, the ministry did great work and talked to all the interested parties — the med students, the residents, the SMA, the College of Medicine, all the very parties that were involved — and received input. And it was a great experience because what we heard from the medical students and the residents isn't necessarily what we heard from, perhaps, the SMA or the college faculty or other people or the College of Physicians and Surgeons, who all have their idea on how we can attract and recruit, recruit and retain our medical students and residents.

But they were, the medical students as well as the residents, were consulted, I think, quite broadly when we first started our strategy as well as, as we've moved forward with our strategy. In fact there is a member of PAIRS on the physician recruitment agency as well as somebody from the Student Medical Society actually on our recruitment agency. So if they say they are not having any input, you know, I'd be surprised on that because their associations do.

Their associations had great input on the makeup of a strategy. They're having input on the agency that has been put in place because they're represented. There is a representative person on those various groups. You know, unfortunately there'll be, I guess, individuals that felt that they weren't consulted with, but I would say that, from my experience talking to some of the medical students that I've talked to and some of the residents, they've never had as much consultation with a government wanting to know their views as what they've seen over the last two and a half years.

On the optometric and the dental, the increases in that area, the most part on both would be the increase of utilization to reflect, again, an increase in utilization and that's where the dollar value would go.

**Ms. Junor:** — So is that again the same answer likely for the prescription drug plan increase? Is that utilization rather than more new drugs?

**Hon. Mr. McMorris:** — Again, you would be right when you said that you assume that the increase in the prescription drug plan would be on utilization. That's part of it. That's a large part of it. It's also, you know, there's an increase or inflation factor that needs to be factored in for the drugs themselves.

But I will say that it's heartening when you see the increase at this level compared to what we saw, you know, six and seven years ago when drug plans were increasing at 12 and 13 and 14 per cent. We're seeing that flatten out a little bit and some of those huge increases dropping, you know, quite often due to the use of generic drugs that are being used now to help flatten that cost, to help drive that cost down. So yes, it is an increase

mainly through utilization and partly through inflation, but certainly not the increases that provincial governments were faced a number of years ago, at certainly a much higher percentage of increase than what we're seeing this year.

**Ms. Junor:** — And under the same heading, family health benefits have been cut. Why is that, and what is cut?

**Hon. Mr. McMorris:** — Okay. I guess as we've seen an increase in utilization in a couple of other areas, we're seeing a decrease in utilization in this area as well as the issue around the chiropractic coverage and reducing that down to 12 treatments for family health benefits. So that would see a reduction as well because in the past there was an unlimited use of chiropractic service. We have kind of followed along now in this instance with other provinces to cover 12 treatments for people that are receiving family benefits. BC [British Columbia] is only at 10. Manitoba is at 12. And we have moved to the 12 and it's been well documented. There's many provinces that don't cover that.

**Ms. Junor:** — And we've had this conversation. But I see when we're talking about chiropractic, if you're covering 12 — 12 treatments for a certain income people — there's nothing in that estimated 2010-2011 budget for chiropractic services. Where does that show up?

[22:30]

**Hon. Mr. McMorris:** — So the, I guess the larger portion of the chiropractic was kind of a line item that went from the number that it was down to zero. There is always a portion in the family health benefits program that covered chiropractic. And that's why you're going to see a reduction, because it was an unlimited amount of chiropractic service, now it's down to the 12.

But there's also, as I said, that there is a decrease or a decline in utilization, and it's really quite significant when you look over the last, the last eight years or seven years. At one point we had, you know, well over 59,000, 59,679 receiving services from the family health benefits program. We're down to 42,800 receiving benefits through the family health benefits program. That's quite a significant reduction. We see a reduction from last year actually of families that are having to require or utilize these benefits that are provided through government.

**Ms. Junor:** — This isn't a reflection of any decrease in the benefits or any more onerous process to access them?

**Hon. Mr. McMorris:** — Pardon me?

**Ms. Junor:** — This decrease in the use of family health benefits isn't a reflection of a more difficult process to access them or cutting out some access to them in any way, shape, or form?

**Hon. Mr. McMorris:** — No, it isn't. You'd see that. You know, the main decline has started in about '06, '07 and it has been a steady decline since. So I don't believe it's because it's more onerous to receive. I don't believe that at all. I think there's less people that are relying on that. They're not in the income level that they would have to rely on the family health

benefits plan through government.

**Ms. Junor:** — So the income levels haven't changed at all over the years?

**Hon. Mr. McMorris:** — So no, it really wasn't a major change in that. That is determined through Social Services and they index, not every year, but periodically. The big change was in '04, '05 when they increased the income thresholds. So that was kind of the big change, but since then it's determined by Social Services on that threshold, and that is indexed on a periodic basis.

**Ms. Junor:** — We're going to go a few more minutes, I guess. So I am going to go to the capital assets acquisitions column. And there was 10.4 million or almost 10.5 million last year. This year there's 250,000. What does that mean, that there are no capital projects being started in Health?

**Hon. Mr. McMorris:** — So the majority of that would be the completion of the provincial laboratory. Excuse me, that has been funded so that the drop-off of course has been funded, and it doesn't need to be funded as we move on because it's been completely funded. So the main drop-off is the issue around the provincial laboratory. And if you want to get into details around the amortization and all of that, I'd be more than glad to call Ted up again to answer those questions.

**Ms. Junor:** — Oh, I think we've had enough of Ted's explanations for tonight, thanks anyway. But what I would like to ask, as just subsequent to that comment about capital projects, what capital projects are going ahead this year?

**Hon. Mr. McMorris:** — So there are a number of projects that are moving along and will hopefully be completed. Money has gone out to the health regions for a number of projects starting with the Regina General Hospital maternity and newborn care centre. So there's money out in Regina Qu'Appelle for that. The Dubé Centre in Saskatoon; the Humboldt hospital renovation; as well as Oliver Lodge, a long-term care facility addition; there's some money has gone out to the health regions to carry on with those projects to see them to completion.

**Ms. Junor:** — Any new ones anticipated for this year?

**Hon. Mr. McMorris:** — I guess what I would say to the question is that as we move forward through this fiscal year, health regions have a number of initiatives that they're going to be seeing, you know, they're going to be planning for and scoping for, as well as the fact that a budget and a half ago or two budgets ago, when we put out about \$100 million for the VFA study that showed deterioration or disrepair of many of our facilities, there's still roughly about \$60 million out in region land that they'll be working to spend and repair facilities as we move forward. So there is lots of capital out in health region land.

As projects come forward, as the planning and the scoping come forward, projects such as the Moose Jaw facility, Prince Albert, North Battleford, Lloydminster, as well as the long-term care facilities, as those are worked on and the scoping and the planning is put into place and because that's going to take some time, some are further ahead than others. There's also the



children's hospital that we need to make sure that we are doing the right thing on that facility in Saskatoon. So there's a number of initiatives that need to be looked at and are moving ahead.

The money is in health region land to do the scoping, to do the planning. The capital dollar, the exact dollar to build the facility isn't needed at this time and we believe that when that dollar was needed, we'll be there. But there is a lot of work for health regions to do through this next fiscal year, such as the \$60 million that's sitting out there to go towards renovations and repairs of the existing facilities.

**The Chair:** — Thank you, Mr. Minister. Seeing as it's 10:40, we'll wrap up the committee meeting for the evening. I'll ask for a motion to adjourn consideration of estimates for the evening. Mr. Hart.

**Ms. Junor:** — Are we saying thank you?

**The Chair:** — Yes, I will right now. Thank you, Ms. Junor.

Agreed and Carried. Thank you to the committee members and the minister and his officials for staying at this late hour. And thank everybody that's watching and have a good night.

Ms. Junor, you'd like to add something?

**Ms. Junor:** — I was just going to say thank you to the minister and his officials as well.

[The committee adjourned at 22:41.]