

THE LEGISLATIVE ASSEMBLY OF MANITOBA  
2:30 o'clock, Monday, March 25, 1963.

Opening Prayer by Madam Speaker.

MADAM SPEAKER: Presenting Petitions.  
Reading and Receiving Petitions.

MR. CLERK: The petition of Associates Mortgage Credit Limited, praying for the passing of an Act to authorize the petitioner to carry on business in the Province of Manitoba.

MADAM SPEAKER: Presenting Reports by Standing and Special Committees.  
Notices of Motion.  
Introduction of Bills.

HON. STERLING R. LYON, Q.C. (Attorney-General) (Fort Garry): introduced Bill No. 58, an act to amend The Time Sale Agreement Act.

HON. GEORGE HUTTON (Minister of Agriculture and Conservation) (Rockwood-Iberville) introduced Bill No. 61, an Act to amend The Dairy Act.

HON. CHARLES H. WITNEY (Minister of Mines and Natural Resources) (Flin Flon) introduced Bill No. 2, an Act to amend The Provincial Parks Act.

HON. ROBERT SMELLIE (Minister of Municipal Affairs) (Birtle-Russell) introduced Bill No. 8, an Act to amend The Local Government Districts Act.

HON. STEWART E. McLEAN, Q.C. (Minister of Education) (Dauphin) introduced Bill No. 20, an Act to amend The School Attendance Act.

MR. MAITLAND STEINKOPF (River Heights) introduced Bill No. 70, an Act to amend The Greater Winnipeg Gas Distribution Act.

MR. OSCAR F. BJORNSON (Lac du Bonnet) introduced Bill No. 38, an Act to incorporate Pine Falls General Hospital.

HON. DUFF ROBLIN (Premier) (Wolseley): Madam Speaker, I beg to move, seconded by the Honourable Attorney-General, that Madam Speaker do now leave the Chair and the House resolve itself into a Committee of the Whole to consider the proposed resolutions standing in my name and the names of the Attorney-General, the Minister of Labour and the Minister of Education.

Madam Speaker presented the motion and after a voice vote declared the motion carried, and the House resolved itself into a Committee of the Whole with the Honourable Member for St. Matthews in the Chair.

MR. ROBLIN: Mr. Chairman, His Honour the Lieutenant-Governor having been informed of the subject matter of the proposed resolutions, recommends them to the House.

MR. CHAIRMAN: Resolution No. 1. Resolved that it is expedient to bring in a measure to amend The Soldiers' Taxation Relief Act by providing for the exemption from taxes to the extent of not more than fifty dollars in any one year, on the property of soldiers in receipt of a military pension by reason of being disabled, to the extent of at least seventy-five per centum of total disability and in consequence thereof, increasing the payments that will be made from and out of the Consolidated Fund to municipalities pursuant to the Act.

MR. ROBLIN: I think, Mr. Chairman, that most members will be familiar with the general tenor of this legislation. It will be recalled that following the first great war legislation was introduced to provide a measure of relief from municipal taxation for certain categories of veterans. In days gone by, for reasons of financial stringency I assume, this was restricted to those pensioners who were in receipt of a 100 percent disability pension, or of the pension widow of any soldier, or the widowed mother of a deceased or totally disabled soldier confined to hospital, or a totally disabled soldier confined to hospital for not less than three months in any one year. In recent times there have been some changes in this Act gradually extending its ambit, and this is another one of these measures. It is proposed here that the level of pension disability shall be changed from 100 percent pension to a 75 percent disability pensioner.

Numerous requests have been received, particularly from amputees and those who have suffered physical mutilation as a result of war, that their cases were not receiving adequate consideration; because while they were very seriously disabled, it was not to the extent of 100 percent and that some measure of relief should be provided for them. So, after due consideration, it was thought advisable to recommend that we should lower the percentage of pension

(Mr. Roblin, cont'd).... from 100 to 75 percent, mainly to take care of these cases which seem to us to be deserving. Members will recall that when the estimates were before the House, that there was an increase provided under this item. It has been \$15,000; it is proposed to raise it to \$18,000. Actually, it's a little difficult to say how much more money will be required. We won't know. In the last year of record, \$12,000 actually was expended, although \$15,000 was provided. It is now proposed to increase that level to \$18,000. I believe that the extra \$6,000 between actual payments and the new estimate will be adequate under the circumstances.

MR. MORRIS A. GRAY (Inkster): No doubt we'll all agree with this. My question is: How many is affected; and secondly, if you buy a hungry man a cup of cocoa, you might as well buy him a meal. If it's necessary; if it's urgent; why not wipe out all the taxes of that particular individual.

MR. ROBLIN: The old saying, "moderation in all things, nothing to excess," I think probably could be applied to this present measure.

MR. RUSSELL PAULLEY (Leader of the New Democratic Party) (Radisson): Mr. Chairman, I just have one comment and it's of a similar nature to my honourable colleague from St. John. If memory serves me right, and I must confess that I didn't look up the Act, but if memory serves me right this \$50.00 deduction has remained the same for a considerable period of time. Now I appreciate the fact that the resolution does increase the numbers of those that will be eligible to receive some relief from municipal taxation over the number that formerly received it at a 100 percent, but I do think that when the government was considering a resolution of this nature they should have taken into consideration, not only the increase of those eligible from the 100 percent pensioner to the 75 percent pensioner, but also, I think, that they should have taken into consideration the total amount of rebate -- and I think I'm more or less correct in saying this -- almost a rebate on municipal taxes; and I do think that the government should have taken into consideration the dollar value of the pension now, as previously, in the light of the rapidly increasing municipal taxes. The fact of the matter is, Mr. Chairman, that a \$50.00 rebate in taxation at the municipal level today doesn't really achieve the purpose. Now this is pretty well true of urban areas, a \$50.00 rebate in taxes is only tantamount to, I would say, the equivalent of \$25.00 under former legislation. I appreciate the fact, and I'm sure the committee appreciates the fact that as a private member we cannot increase or present a resolution calling for the increase; but I do think that the government, when they were considering this matter, should have taken into effect the net obligation on the part of a pensioner who rendered service for his Queen or King and country and the relationship today of the municipal taxes insofar as their pension is concerned. While I appreciate the fact that this will alleviate, to some degree, a few people, the First Minister himself has admitted to this House that insofar as the overall picture is concerned, it's only going to amount to approximately, in accordance with his estimate, a sum of \$3,000.00.

MR. ROBLIN: \$6,000.00.

MR. PAULLEY: Yes, well even let's take the higher figure, Mr. Chairman, of \$6,000.00. I again say that this is insignificant insofar as the need, to use the phrase of my friend the Minister of Health, the needs of people who are on fixed pensions, whether it's the 75 percent or 100 percent. It seems to me that this is not rendering any service to these people when the Provincial Treasurer says that out of a budget of about \$121 million for this province, it will only mean an increase in expenditure of about three to six thousand dollars for this very important purpose.

MR. ROBLIN: Mr. Chairman, if my honourable friend wants to speak, let him go ahead.

MR. SAUL CHERNIACK (St. John's): Mr. Chairman, I'm sorry I popped up a second too soon; I would rather have heard the First Minister's reply. However, I'd like to deal with this very briefly, Mr. Chairman, but before doing so may I understand just how this works. Do I understand that the provincial government will make a grant to the municipality on account of the real property taxes to the extent that the exemption is given to a veteran who qualifies? -- (Interjection) -- That is correct. Well, Mr. Chairman, I want only to point out that the principle behind this is, to my way of thinking, an acceptance of the principle that the group of which I am part have been saying, and that is that there are categories of people who are entitled to consideration. I see there's no reference here to either a means test or a needs

(Mr. Cherniack, cont'd)... test, and the Honourable the Minister of Health had made the point last Friday that he felt that a needs test was the proper thing because that would be done on the basis of what a man's income and expenses are rather than just holus bolus giving him a payment. In this case, a man who is disabled may still have ample means with which to govern his internal economy and yet there is a grant being made which apparently is not subject to measure as to his needs. That's one point I think I should make. I welcome the government's bringing in an extension of the principle which I think is right and which apparently they think is right in the case of veterans but not necessarily in the case of old age pensioners.

I would make another point, Mr. Chairman. I am sure that there are many disabled veterans who are tenants, and I think it is well known that when costs go up -- when municipal taxes go, rents go up. I'm not aware that there's anything in this Act, and I'm easily subject to correction because I don't know the Act or the administration that well, but as I understand it, there's absolutely no provision made to help the veteran who is renting premises. In other words, apparently you must own land in order to receive the benefit of this grant, but if you have not acquired sufficient equity to own land, and if you rent your home, then apparently there is no compensating assistance by the government under this same Act, the principle of which should apply to all who are disabled and qualify otherwise. So it seems to me that this does not go anywhere near as far as it should go to alleviate the difficulties which disabled veterans are suffering.

MR. ROBLIN: Mr. Chairman, I think that all who have spoken so far are on common ground, and that is that no very great claims can be made for this particular piece of legislation in respect of the magnitude of its application, and I think I made no such claims myself when I first spoke. It is but a small step, and I am the first to acknowledge that fact. However, when one considers that it represents an increase of 50 percent in the charges on the public purse in connection with this particular matter, it perhaps can be presented in another dimension. All of these various increases, and there are many scattered throughout the estimates, have to be fitted in to the whole, and it is an extremely difficult matter to make sure that one has brought the right judgment to bear on the distribution of the tax monies that are available. So that we make no extravagant claims for this, merely saying that it offers some additional assistance to those in this particular category.

Dealing with the question of money, the value of money, that point, of course, is one that is well understood. Fortunately, the federal government have been increasing pensions to people in this category fairly regularly, I think, so that represents something on the credit side as far as they are concerned, although I must admit that we are sticking to the same value as has been in the statute for some time. So we're on common grounds on that score.

With respect to the point about need being raised, I'm afraid that need is included in this regulation because as members who have had a chance to look at the Act will know -- perhaps I should have mentioned it--this applies only to those who have no other pension; no other source of income, except the pension or the Old Age Security Pension, so it's limited to those categories of people and thus there is a needs element attached to it. So all I suggest is that this is worth doing. I by no means say that it is an ambitious or all encompassing measure.

MR. PAULLEY: Mr. Chairman, I just want to make one comment. I agree with the First Minister, insofar as the legislation, that it is on the basis of a means test -- or needs test, just so that I don't get into an argument with the Minister of Health. I appreciate the fact, as the Honourable the First Minister has pointed out, that the federal authorities have increased the basic pensions to veterans; but I think that even he might possibly agree with me that to a large degree this has not taken into consideration too much the overall rapid increase in the field of municipal taxes for which purpose this legislation was first enacted. It was first enacted, if I recall correctly, in order to alleviate, at the local level, the situation in respect of these pensioners; and also, to prevent, at the local level, any question of the confiscation of their properties through non-payment of taxes by the municipalities. I implore the government to take another look as to whether or not -- and again as I've said once or twice already, I appreciate the broadening of the field of those that are eligible for this grant-- but I do say to the government and implore them to take another look at the relative value of the \$50.00 deduction today as it was at the time the legislation was last amended here in this House.

MR. J. M. FROESE (Rhineland): Mr. Chairman, just one brief question, and this refers to the part in the resolution which referred to the extent of at least 75 percent of total disability. How often do these veterans receive an examination, or when is this based on? Is it based on the latest report?

MR. ROBLIN: Mr. Chairman, I'm afraid that the question of veterans' pensions does not lie within the scope of my authority or knowledge, except to say that generally speaking there is a review made on pensions, I believe at fairly reasonable intervals, and particularly at the request of the pensioner. That's where they usually arise. If he thinks that his disability is more severe, becomes more severe as time goes by, he then asks for a review of his pension. There's a good deal of that goes on and I think that's the most active way in which pensions are reviewed at the present time, but I'm merely giving my general impression. That does not come within the scope of my authority.

MR. CHAIRMAN: Resolution be adopted? -- Passed. Resolution No. 2. Resolved that it is expedient to bring in a measure to amend The Jury Act by providing, among other matters, for the payment from and out of the Consolidated Fund, of additional remuneration for jurors in certain circumstances and for payment of out-of-pocket expenses, over and above travelling expenses, incurred by jurors in attending at court. The Honourable Attorney-General.

MR. LYON: Mr. Chairman, the only words I will attempt to discuss at this stage are the words "in certain circumstances", and to explain to members of the committee the reference that is made there. The Bill will propose that monies be paid over and above the regular \$9.00 per diem rate allowed to jurors; that a maximum payment of up to \$12.00 per day may be made to jurors where, in the opinion of the presiding judge, a juror has suffered undue hardship by reason of his attendance at the court. On the recommendation of the judge, these monies may now be paid out by the Comptroller-General. This is the recommendation that has been made in many quarters; made in this House. It was made particularly recently by one of the justices who handled a long trial and he felt that some provision of this sort would be a very sensible one to have in order to pay some due account of the extra time that is given by persons who serve in this public capacity.

The second provision relates to the payment of "out-of-pocket" expenses for jurors who reside more than 30 miles from the place where the sitting of the court takes place. At the present time, the only payment that can be made in this regard is travelling expenses, and it is felt that the actual out-of-pocket living expenses should be made available to jurors who must come for some distance greater than 30 miles. These can be certified by the sheriff of the judicial district and paid by the department. There is a controlling valve in the provision so that the Attorney-General is required to pay only those expenses that are deemed to be reasonable. We don't wish people to be taking advantage of a very special accommodation, or expensive accommodation while they're engaged on these jury duties. Those are the two money provisions of the Bill, Mr. Chairman.

MR. ELMAN GUTTORMSON (St. George): Mr. Chairman, how does a juror make application for the additional money if he feels he should get it?

MR. LYON: It is all done on the certification and on the recommendation of the justice who is in charge of the jury on the particular trial.

MR. GUTTORMSON: No. I mean, does the juror apply to the judge himself?

MR. LYON: I would imagine, although there's no procedure set forth that the initiation of the matter must come through the office of the Justice of the Court. If a juryman were interested in availing himself of this extra provision, he would of course have to convince the judge who was presiding that there was undue hardship.

MR. ARTHUR E. WRIGHT (Seven Oaks): I'm wondering whether the judge will use the means test or the needs test to determine this.

MR. CHAIRMAN: Resolution be adopted? -- Passed. Resolution No. 3. Resolved that it is expedient to bring in a measure to amend The Winter Employment Act by providing, among other matters, (a) for authority for the government to enter into agreement with, and to guarantee indebtedness of, The Metropolitan Corporation of Greater Winnipeg, Local Government Districts, and local committees established under the Act, with respect to projects carried out under the Act, for which payments would be made or might be required to be made from and out of the Consolidated Fund; and (b) for authority to pay amounts from and out of the Consolidated

(Mr. Chairman, cont'd).... Fund in respect of projects carried on in unorganized territory over and above the contributions made under the agreements relating to the projects. The Honourable the Minister of Labour.

HON. OBIE BAIZLEY (Minister of Labour) (Osborne): Mr. Chairman, I believe this is self-explanatory. It clarifies the authority to contribute either in whole or in part to approved winter works projects.

MR. GRAY: Mr. Chairman, when can we expect a proposed resolution dealing with the unemployment situation in general? This is all patchwork.

MR. CHAIRMAN: Resolution be adopted? -- Passed. Resolution No. 4. Resolved that it is expedient to bring in a measure to provide for the approval, ratification, and confirmation of an agreement between the Government of Canada and Government of Manitoba, dated the thirteenth day of July, 1961, under which the School Lands Fund transferred to the province under the terms of an agreement between the Government of Canada and the Government of Manitoba, dated the fourteenth day of December, 1929, and which fund is part of the Consolidated Fund, and school lands, which are Crown lands, may be administered and disposed of in such manner as the province may determine instead of in the manner for which provision was originally made in the said agreement dated the fourteenth day of December, 1929. The Minister of Education.

HON. STEWART E. McLEAN, Q.C. (Minister of Education) (Dauphin): Mr. Chairman, if it would be in order, I suggest that you read the next resolution as well since the two are complementary.

MR. CHAIRMAN: Next resolution. Resolved that it is expedient to bring in a measure to provide for the making of grants from and out of the Consolidated Fund to colleges affiliated with the University of Manitoba.

MR. McLEAN: Mr. Chairman, as I've already indicated, these two measures are complementary and provide a system under which grants for operating purposes will be provided to the colleges which are affiliated with the University of Manitoba.

The first resolution on the Order Paper relates really to the source of funds; the second with regard to the detailed arrangements in which the grants will be paid. The second Bill is a reasonably complicated one, outlining in detail, as I say, the means by which this proposal will be carried into effect, and I think that on second reading will be a useful time in which to consider the measure in detail.

MR. CHAIRMAN: Resolution be adopted?

MR. GILDAS MOLGAT (Leader of the Opposition) (Ste. Rose): Mr. Chairman, the first resolution indicates that the agreement was signed on July of 1961. Is there a reason why this was not brought in the House last year? We've had one session since then and the House was not advised or were not asked for their approval at that time. Could the Minister indicate why this was so?

MR. McLEAN: Mr. Chairman, I don't believe that it would be proper to discuss matters that have been before the Executive Council for consideration. There may be all sorts of factors that influence anything that is brought forward or anything that is not brought forward. I think no useful purpose would be served in presenting that information to the Committee.

MR. CHAIRMAN: Resolution be adopted?

MR. MOLGAT: Mr. Chairman, it seems to me though that the government proceeds to make agreements, a year now -- a year and a half ago, almost two years ago -- and the House sits and does not advise the House. Are there many other agreements that the government has signed of which the House is not aware?

MR. ROBLIN: I think probably that my honourable friend will see the point if I tell him that the complementary legislation was only dealt with by the federal Parliament at its last sitting, so now it's our turn to deal with it. There's no real significance to the delay.

MR. MOLGAT: ..... answered my point, Mr. Chairman. What I was wondering about is if the government proceeds to make agreements and then doesn't advise us. If there are many of that nature then we would want to know, but if the federal has not acted upon it yet that's fine. The time now is for us.

MR. ROBLIN: I just want to make it clear, Mr. Chairman, that there are a great many agreements that the government makes which are not notified to the House. This one is of

(Mr. Roblin, cont'd)..... statutory character and, therefore, should come before the Legislature.

MR. CHAIRMAN: Resolution be adopted? -- Passed. Committee rise and report. Call in the Speaker.

Madam Speaker, the Committee of the Whole House has adopted certain resolutions, directed me to report the same and ask leave to sit again.

MR. W.G. MARTIN (St. Matthews): Madam Speaker, I beg to move, seconded by the Honourable Member for Dufferin, that the Report of the Committee be received.

Madam Speaker presented the motion and after a voice vote declared the motion carried.

MR. ROBLIN introduced Bill No. 40, an Act to amend The Soldiers' Taxation Relief Act.

MR. LYON introduced Bill No. 55, an Act to amend The Jury Act.

MR. BAIZLEY introduced Bill No. 46, an Act to amend The Winter Employment Act.

MR. McLEAN introduced Bill No. 19, an Act to confirm a certain agreement between the Government of Canada and the Government of Manitoba.

MR. McLEAN introduced Bill No. 67, an Act respecting grants to colleges affiliated with the University of Manitoba.

MADAM SPEAKER: Before the Orders of the Day, I would like to attract your attention to the Gallery on my left, where there are thirty Grade 9 students from the Pembina Crest School. This school is situated in the constituency of the Honourable the Attorney-General. They are there with their teacher, Mr. Froese. We welcome you to the Legislative Assembly this afternoon; we trust that your visit with us will be a happy one and that it will prove helpful to you as you continue your studies. May what you see and hear in this Assembly today inspire you to greater interests in the working and undertaking of this, your Manitoba Legislative Assembly.

MR. J. E. JEANNOTTE (Rupert's Land): Madam Speaker, through a clerical error, two words and the figure 1 were overlooked by the typist who typed my amendment last Friday to Mr. Desjardins motion. By leave of the House, may I be allowed to add at the end of my amendment the words and figure "From Grade 1".

MADAM SPEAKER: Has the Honourable Member leave of the House? -- Agreed. Orders of the Day.

HON. GEORGE JOHNSON (Minister of Health) (Gimli): Madam Speaker, before the Orders of the Day, I'd like to lay on the table of the House a return to an Address for Papers dated March 15th, 1963 on the motion from Mr. Peters, the Honourable Member for Elmwood.

HON. GURNEY EVANS (Minister of Industry and Commerce) (Fort Rouge): Madam Speaker, before proceeding with the Orders of the Day, I should like to lay on the table of the House, the report of the Manitoba Trade Commission. This report represents the views not only of the government officials and employees, but also the members of the Commission itself. Copies will be distributed and honourable members will be quick to note the reference in there to the probability of Great Britain's entry into the Common Market. It just goes to show how quickly events develop in these days. I think, however, the conclusions that the report comes to are not altered by that fact. I should like to very briefly pay tribute to the members of the mission who came from outside government circles; who took the trip at their own expense; who spent a great deal of time and effort and thought on the mission itself and in the preparation of the report. I think they have advanced our interest by doing so and we should express our appreciation to them.

MR. FROESE: Madam Chairman, before the Orders of the Day, I would like to direct a question to the Honourable the Minister of Health. I should have given notice -- if he cannot give the information, I'll have an Order for Return. The information I seek is the request for the per diem rates charged by each of the hospitals in the province for the years 1957 to 1962 inclusive.

MR. JOHNSON: Madam Chairman, with respect to that request I don't know about the per diems in 1957, but we would be able to provide the honourable member with the per diem rates set in each of the hospitals of the province from the time the plan came in to being, but I couldn't guarantee him anything before that. Would the honourable member possibly ask for an Order for Return in this matter?

MR. FROESE: I'll do that.

MADAM SPEAKER: Order for Return standing in the name of the Honourable the Leader of the New Democratic Party.

Although I have permitted observations on behalf of the honourable members after my ruling, they were out of order. I have reconsidered my ruling and the House is now in possession of the Order for Return in its original form, and the same is out of order.

MR. PAULLEY: Madam Speaker, I gather from you that the Order for Return is out of order and I, with great regret, must challenge your ruling in this matter.

Madam Speaker presented the motion.

MR. PAULLEY: Yeas and nays please, Madam Speaker.

MADAM SPEAKER: Call in the members. The motion before the House, shall the ruling of the Chair be sustained?

A standing vote was taken, the result being as follows:

YEAS: Messrs: Alexander, Baizley, Bilton, Bjornson, Carroll, Cowan, Evans, Groves, Hamilton, Harrison, Hutton, Jeannotte, Johnson (Gimli), Klym, Lissaman, Lyon, McDonald, McGregor, McKellar, McLean, Martin, Mills, Moeller, Roblin, Seaborn, Shewman, Smellie, Stanes, Steinkopf, Strickland, Watt, Weir, Witney and Mrs. Morrison.

NAYS: Messrs: Campbell, Cherniack, Desjardins, Froese, Gray, Guttormson, Harris, Hryhorczuk, Johnston, Molgat, Patrick, Paulley, Peters, Schreyer, Shoemaker, Tanchak, Vielfaure, Wright.

MR. CLERK: Yeas, 34; Nays, 18.

MADAM SPEAKER: I declare the motion carried. Second reading of Bill No. 18. The Honourable Minister of Agriculture.

MR. HUTTON presented Bill No. 18, an Act to amend The Women's Institute Act, for second reading.

Madam Speaker presented the motion.

MR. HUTTON: Madam Speaker, I am sure that the Honourable Member for Lakeside would be interested in hearing an explanation of this Act, because I'm sure that during his 14 years -- I believe that was it -- as Minister of Agriculture for Manitoba, he probably got to know the Women's Institute pretty well. I think, Madam Speaker, that the Act reflects the changes that have taken place over the years in rural Manitoba, the fact that we have less farms; less farmers; and a much smaller rural population than formerly. The amendments deal with provisions for reduced membership in terms of quorums, in terms of the requirements to establish a Women's Institute local, and generally brings the Act in line with conditions as they exist in rural Manitoba today.

Madam Speaker put the question and after a voice vote declared the motion carried.

MADAM SPEAKER: The Honourable Minister of Labour.

MR. BAIZLEY presented Bill No. 36, an Act to amend The Apprenticeship Act, for second reading.

Madam Speaker presented the motion.

MR. BAIZLEY: Madam Speaker, the object of this amendment is one of these Boards that has representation of employers, employees and representation from the Department of Labour and the Department of Education, and this is to give authority to appoint alternate members to this board so that they can have their meetings at regular intervals. There has been some difficulty in having the necessary representation to these meetings and it is felt with alternate members being provided, they will be able to carry on in a businesslike manner.

Madam Speaker put the question and after a voice vote declared the motion carried.

MADAM SPEAKER: The Honourable the First Minister.

MR. ROBLIN presented Bill No. 39, an Act to amend The Legislative Assembly Act for second reading.

Madam Speaker presented the motion.

MR. ROBLIN: Madam Speaker, this was pretty thoroughly ventilated in the Committee of Supply and I really have little to add to what was said at that time.

MR. D. L. CAMPBELL (Lakeside): If my honourable friend was going to speak at this time, I would defer to him, Madam Speaker, because I was going to adjourn the debate. If my honourable friend wishes to speak it would be quite in order.

MADAM SPEAKER: The Honourable Member for Rhineland.

MR. FROESE: I was going to adjourn the debate also.

MR. CAMPBELL: If the honourable member prefers, as he seems to, to hear my words of wisdom first, I would be glad to move, Madam Speaker, seconded by the Honourable the Member for Ethelbert Plains, that the debate be adjourned.

Madam Speaker presented the motion and after a voice vote declared the motion carried.

MADAM SPEAKER: The Honourable Minister of Agriculture.

MR. HUTTON presented Bill No. 3, an Act to amend The Land Drainage Arrangement Act, for second reading.

Madam Speaker presented the motion.

MR. HUTTON: Madam Speaker, I'd like to point out that the explanatory note in the Bill is incorrect. I don't know what happened there, but it has no relationship at all to the provision of the amendment, which merely will permit a trustee in a drainage maintenance district to expend \$200 rather than \$100 without the approval of the Board.

Madam Speaker put the question and after a voice vote declared the motion carried.

MR. ROBLIN: I beg to move, seconded by the Honourable Minister of Health, that Madam Speaker do now leave the Chair and the House resolve itself into a Committee to consider of the Supply to be granted to Her Majesty.

Madam Speaker presented the motion and after a voice vote declared the motion carried and the House resolved itself into a Committee of Supply with the Honourable Member for St. Matthews in the Chair.

MR. CHAIRMAN: Resolution No. 54.

MR. JOHNSON: .....my salary, I thought I would take this opportunity to distribute to the honourable members of the committee -- I have sufficient copies here -- a summary of the hospital construction project as of December 31st, 1962, and this gives the three schedules here which pretty well give all the information; and also, a comparative statement of revenue of expenditure from '59 to '63, which I think will give the honourable members a good idea of the expenditures since the plan came into operation and might be helpful; and lastly, I don't want you to think I'm being egotistical, Mr. Chairman, but I think it would help to answer many of the questions that were brought up the other evening by the Honourable the Member for St. Boniface -- some of his points -- an article which I had the pleasure of writing called, "How Many Hospital Beds." I have enough for every member of the House.

MR. PAULLEY: .....the Minister goes on and gets his salary, if it is going to be given to him, whether or not he's been able to make any progress in having submitted to the members of the House, or at least the leaders of the other parties, a copy of the Annual Report of the Hospital Commission. I'm sure that he can readily understand the inconvenience to which we are placed at the particular time, being in a position of trying to discuss the estimates of the department, and in particular the question of hospitalization, without having the report.

MR. JOHNSON: Mr. Chairman, I appreciate this and over the weekend was in touch with the Hospital Commission. The annual report is just now in the hands of the Comptroller-General for auditing. This is the report as at the end of December. By the time the report is compiled and the auditor's statement is prepared -- it has to be prepared before I can table this report -- and that will be done just as soon as it possibly can. The Commission Chairman has been in touch with the Comptroller-General this morning, however, it isn't available today. I can point out to the members of Committee that with the information I'm passing around today-- the annual report gives the statement as to the end of the year and, as I say, this is in the Comptroller-General's hands and it's just a matter of days before this is tabled -- but I think between the statement which I made the other evening and the material that the honourable members have on hand, I think, as I recall, the bulk of the material in the annual report last year hinged on these points. However, we have this perennial problem yearly and I just wanted to make these comments.

MR. PAULLEY: I would just make this comment, Mr. Chairman. If memory serves me right, in previous years we did have copies of the report. If I recall correctly, last year and also the year before, the Leader of the Liberal Party and myself at least were given tissue copies of the report of the Commission prior to the report being officially tabled in the House, and we found this most useful. The Minister refers to his remarks that he made the other day. I presume he means on Friday last, in the evening. We haven't Hansard before us at the present



(Mr. Paulley, cont'd).... time in order that we may be able to diagnose his remarks of Friday night, so we're at a loss both ways.

MR. LAURENT DESJARDINS (St. Boniface): Mr. Chairman, first of all I would like to express my gratitude to you, Mr. Chairman, for recognizing me, for allowing me this great privilege of speaking on this estimate. By the way that the First Minister seems to be able to use this Committee to suit his advantages, I was beginning to have doubt of ever having a chance to speak again. But I simply must marvel at the cleverness of the First Minister who, with the help of his associate and assistant the leader of the opposition to the official opposition, prevented me from defending my stand last Friday.

MR. PAULLEY: Mr. Chairman, I accept the tenor of my honourable friend's remarks. I don't want to get into a hassle of what occurred, but the fact of the matter is there was no collusion at all.

MR. DESJARDINS: Mr. Chairman, do I have the floor?

MR. PAULLEY: I'm on a point of privilege.

MR. DESJARDINS: Who has the floor, Mr. Chairman?

MR. PAULLEY: Mr. Chairman, I'm raising on a point of privilege.

MR. CHAIRMAN: I think that inasmuch as you made the statement, the Leader of the New Democratic Party is explaining his point.

MR. PAULLEY: I'm speaking on a point of privilege, Mr. Chairman, and the point of privilege is the remarks as uttered by my honourable friend the Member for St. Boniface, implying motives insofar as I was concerned and association with the First Minister, of which there is none; and also, I would say, a reflection on you yourself in the debates on Friday night. There was no collusion; I stood up, as it was my right as a member of this Legislature, and if you recognized me it is not the subject of any criticism of any other member in this House.

MR. DESJARDINS: Mr. Chairman, I'm so hurt to feel that some members here seem to think that I would think for a minute that things are not exactly on the up-and-up. I would not ask my leader at this time, but I would ask anybody on the other side could they think of one incident this year, or even last year, that would indicate that you are not an independent and most unbiased chairman. You see, there's no answer. No, I just want to say, Mr. Chairman, that I simply marvel at the cleverness of the First Minister. You remember, these were his words: Mr. Chairman, I've no objection to letting the Leader of the NDP speak." Wasn't that clever? I mean, you can see that I used the power of suggestion and so on. No, I think that he was so clever on this occasion, clever indeed, that he gave me a chance to discuss this with friends of mine that are members of different boards -- two different boards of two different hospitals. I've had a chance to discuss this thing and what he was afraid to listen to Friday, he'll hear it today.

You see, Mr. Chairman, my friends tell me that I was right. They agreed that when someone is in a position to accept praises, he should also be the subject of criticism if he is not living up to expectations. They suggested that I ask the Minister to disclose the salary of this honourable gentleman and then let the people of Manitoba decide if a man earning this salary and running a \$30 million enterprise should be kept in cotton batten. They also suggested that I ask the Minister why he established this Manitoba Hospital Commission and took some powers away from the former director -- or the former commissioner, if this plan was going so smoothly, so nicely, as was indicated last Friday. They also told me, Mr. Chairman, that by trying to be honest and by going direct to what I thought was the source of trouble, that I had made a political faux pas. In these cases, it seems that we would be better by going around. By referring to the head of this department, I was giving the Minister a chance of being a big hero by defending this poor helpless man and in this way no blame was attached to him at all. Well, Mr. Chairman, I agree with my friends that I made a political faux pas, but in view of what the Minister said on Friday that he took all the blame, it seems clear to me that the Chairman of the Manitoba Hospital Plan was working under, and is working under the orders of this Minister.

The Honourable Minister stood here on Friday and told us how wonderful his department was. It reminds me of another prominent leader who regards himself as a man of destiny, and no one should dare question him or criticize his department in any way, shape or form.

(Mr. Desjardins, cont'd) . . . . Well, Sir, the Minister had better realize that just as he has responsibilities, the rest of us here also have our own responsibilities and he has no monopoly on sincerity. I say to him that the progress of this generation is not only to the credit of the government but to the people of Manitoba. We must admit Sir, that they also play some role in their own destiny.

The Honourable Minister is proud of all the "firsts" of his department. I wish to say to him at this time that he certainly won't become the First Minister to pass his estimates without criticism from the opposition. We will continue to offer constructive criticism, and if he doesn't want to accept it as such, it's his business; it's his responsibility. Apparently the Minister does not even like to receive sincere congratulations. Well he can rest assured this afternoon he won't have to worry about this. If he endorses everything that was done by the Chairman of the Commission, and if this man is working under his orders, then I was wrong in thinking that he was doing such good work. If he's not doing such good work -- if the Minister is not doing such good work, he should be and will be criticized.

Today I say to him that the government, the administration and the government, that the administration of the hospital must be improved. Can the Minister deny that the government speaks of retaining the autonomy of hospitals, yet introduces many administrative directives, such as salary freezes re senior administrative personnel, maximum limits on operations, budgets, etc., which reduces hospital administration to department manager. Isn't it true that the government lacks understanding and co-operation and treats the administrators in the hospitals in a dictatorial way? And here, Mr. Chairman, I would like to explain that I'm referring mostly to the Winnipeg Regional Hospital Council, that is the Hospitals of Greater Winnipeg area. The Honourable Minister talked about the meeting held between the board members and the members of the Associated Hospitals of Manitoba. Why does he tell us that at these meetings nothing was said about the proposed freeze of salary; nothing was said about the budget; but when these administrators returned to their offices, the directives from the Chairman of the MHC were sitting on their desks. Why doesn't he tell us this? Does the Minister remember that last year the government attempted to expropriate hospital plans without compensation to owners by introducing a specific section in The Hospital Act? Does he remember that? Isn't this an example of government distrust of hospital boards and voluntary groups, Mr. Chairman? Aren't these cases where policy decisions are made by the MHC without prior consideration of the matter of hospitals or their association? Was I wrong in stating this last Friday?

How can the government expect to gain support of hospitals and their personnel if they make some unreasonable and unnecessary attempt -- there shouldn't be any interference with the autonomy of these hospitals. There should be more discussions with the different hospital personnel before final directives are sent to them. It is a fact, Mr. Chairman, that the government shows little, if any, consideration of the administrators of these hospitals. By these actions the Manitoba Government is suggesting that without government pressure, hospitals and doctors together would use the facilities of these institutions without worrying about the cost and the need. This is the suggestion we get. It is my conviction, Sir, that all possible means should be taken to have an atmosphere of mutual confidence in this field of common effort for the benefits of the patients and the subscribers of the plan. Without this co-operation Mr. Chairman, these unimportant directives will destroy the enthusiasm so essential of the voluntary workers and, in time, will weaken the quality of the care; the interest in research; and the community support. It would be regrettable if the spirit that has supplied Manitobans during many years, free care, should now be subjected to such a control by their new partner, by the government. Soon the government will have to carry the load and a large portion of our population would no longer have any access to the kind of care that they wish.

On Friday, the Minister said that the government did not have a pile of money that could be dipped into at will. This, Sir, was an unfortunate remark. Again he showed that he did not have much confidence in these people that administered hospitals long before this plan came into force; long before the Minister had anything to do with hospitals. I, too, Sir, am concerned about this cost. This is why I say that the cost of the administration of this plan, \$1 1/2 million, is much too high and that it could be reduced if the MHC would use the services of qualified hospital personnel. This is why I say the government should rely more on the ability,

(Mr. Desjardins, cont'd).... accuracy, knowledge and experience of our qualified hospital people instead of duplicating their services. In spite of the size of the MHC personnel, many matters require consideration, and approval of government takes long periods of time for assessment and result in an unnecessary delay of important services.

Mr. Chairman, the government is becoming too involved in operational administrative problems of hospitals. The government assumes responsibility to pay hospitals for services rendered, but the care of the sick should not be regulated like that of facilities like highways and utilities. Hospitals wish to establish a good level of care and introduce required services, but are being discouraged by these actions of the government.

It is clear that the government's estimate of the Manitoba Hospital Service Plan cost for the years 1961 to '63, as tabled in this House, were under-estimated in view of limits placed on budgets, and now the people of Manitoba are made to suffer. Could the Minister explain the delay in paying deficits of previous budgets and also in approving these budgets? Why the delay, the constant delay? As I said before, this Minister cannot take suggestions. I mentioned the incident involving a nine year old boy who died after being refused admittance to a hospital. I was very careful not to blame anyone, but suggested that we should be even more careful. I wonder how any of us would feel if this boy had been our son.

The Minister also took my question on the St. James and Grace hospitals as an indication that I was against these projects. All I was doing, Mr. Chairman, was reminding him that last year he had stated that the schedule would be a year or two and that no grants would be forthcoming to the Grace Hospital before 1965-66; and at the time, Mr. Chairman, he wasn't even contemplating a hospital in St. James. I was greatly in favour of this hospital last year, and I still am.

Then he says he doesn't know what I'm talking about when I mentioned that earlier decisions were reversed in the case of Grace Hospital. With your permission, I will read, Sir, from February 8th, 1963, the Free Press: "Grace Hospital to stay; old section to be rebuilt; St. James project goes ahead. Plans for construction of a 250 bed Salvation Army Hospital in St. James and reconstruction of the Army's present Grace Hospital on Arlington Street were announced Friday by Premier Duff Roblin and Salvation Army spokesman. Cost of the two projects will be \$9 million, to be paid by the provincial and federal governments, the City of St. James and the Salvation Army. Work on the St. James project will start late this year or early next year. It is scheduled for completion on 1966. The second phase involving the rebuilding of the old part of the Grace Hospital will follow completion of the St. James construction and is scheduled for completion in 1968. The plan for maintaining the present Grace Hospital as an active treatment facility reverses earlier decision" --Reverses earlier decision -- "the earlier plan that called for it to be transformed into a T. B. treatment centre. Health Minister George Johnson said the new decision was made after prolonged negotiations. He said the change of plan was decided in light of the need of the Greater Winnipeg area." I was just asking him why this change at the time, Mr. Chairman.

Mr. Chairman, the Minister also stated that the Blue Cross did not deliver as per their contract, and this is certainly not the case. The Minister was annoyed because I stated that some people were paying for something that they weren't receiving. The spirit of the Act or not, Mr. Chairman, we have a compulsory plan. People are paying for care, but some of them are not receiving it. I realize, and I said that on Friday, I realize that this is a problem; but nevertheless this problem exists and we can't sweep it under the rug. It might be that some adjustments will eventually have to be made. He also talked as though many people were getting free hospital care without paying premiums. It would be advisable for him to explain that this care is not free, and that the people of Manitoba are paying for these more unfortunate people. These cares and the money for these cares are not coming from Heaven.

Mr. Chairman, I also spoke of the false impression often given by the government that it was paying for 80 percent of the cost of construction of hospitals, Mr. Chairman. I also brought in the fact that some expenses paid by the plan should rightly be the responsibility of the welfare department and it has no business being charged to the people that are paying for this plan, such as boarder babies, babies of unwed mothers who are maintained in hospitals much longer than they should.

Mr. Chairman, from May 12th to the 18th, National Hospital Week will be celebrated all

(Mr. Desjardins, cont'd) . . . . over North America. This year's theme: "Is Today's Hospital Career Centre for Canada's Youth?" Of course this should not be taken over by the government, but what is the government doing to assist the Manitoba hospitals in achieving this aim? I understand that the Willard Commission was to report on personnel and education. Where is this report, Mr. Chairman? With all these new hospitals being built, we will require qualified staffs. We need to educate the youth of our nation to let them know about the careers available in these fields. Although the hospitals always provided the education for their personnel in the past, the opening of the MTI will modify this to a point. Why does the government not have formal talks with the hospitals regarding the setting up of MTI? That is in regard to training people in this field.

Mr. Chairman, the government is also guilty in delaying implementing a pension program for our Manitoba hospital personnel. Apparently the Leader of the NDP isn't too worried about this. I guess these people are not well organized. They're not organized enough to interest his Party. He would sooner curtail debate and brag about the good management in the Province of Saskatchewan. By the way he forgot another first for his Party. Yes, the CCF Government in Saskatchewan was the first government in Canada to chase the doctors out of the province. This government doesn't believe -- (Interjection) -- I'm careful, I'll stand for my rights. This government -- I don't remember them being in power anywhere else. It must be that they were the first. This government which does not believe in strike breaking, Sir, was the first to bring in doctors and oftentimes doctors inferior to the Canadian doctors that we have here. No wonder the Leader of the NDP agrees with this Minister when the government is robbing these hospitals of their autonomy. Yes, Sir, the way this is going now, we will have real socialism because those people -- (Interjection) -- what's wrong with that? The people of Manitoba can tell you what's wrong with real socialism. -- (Interjection) -- I'm not worried about Ontario, I'm talking about right here in Manitoba. And what's wrong with socialism? You'll have your answer when you don't want -- you don't want the help of the communists, when they say "Vote NDP". That might be an indication of what's wrong with socialism, the way we're having it here and the way you people want to bring it in.

MR. JOHNSON: Mr. Chairman, I am rather disappointed with the Honourable Member for St. Boniface. In all sincerity, I really don't think that he intended to impute the statement he made, imputing some incompetence of the Chairman of the Hospital Commission the other evening. However, it was said. I would point out to the Honourable Member from St. Boniface that the remarks must cover the Hospital Commission per se. It isn't any individual on the commission who is to blame for the lack of confidence which he feels the hospital administrators of Manitoba have in the operations of the commission as it is run today. However, this is a matter of opinion. His speech pretty well followed a line that I -- obviously he's been doing some homework -- and some of the points brought out in the speech give away certain points as to the possible root of origin of his information. I give him credit for this and certainly, as I've said in this little thing I circulated today, "How many hospital beds in Manitoba", I think in that little note, if you will read it, I have tried to point out that the government has a responsibility in many fields of endeavour. I think the sheet which I've distributed, which shows the considerable amounts of public funds and the increases each year in meeting the needs of the hospitals in the Province of Manitoba, gives some indication of the massive sums of money involved.

Certainly I have no monopoly on sincerity, nor do I want to hide under any false pretext in any way, but I would confidently point out to him that I am interested not only in meeting, say the salary needs of the administrators of Manitoba's hospitals, but in the judicious expenditure of public funds placed in trust. I can inform this committee, Mr. Chairman, in all sincerity, that from the day the plan began and on occasions before the commission was formed, on a few occasions members of hospital boards and members throughout the province and members of my commission were concerned as to what base line do we use in sitting down with hospitals and approving salary ranges. For my honourable friend's information, it is no secret. The Chairman of the biggest public utility in Manitoba makes \$15,000 a year, a Deputy Minister's salary, and I would point out that this is much lower than many of the senior administrators of Manitoba's hospitals today. I think we have to constantly -- (Interjection) -- well considerable. I think we have to be very careful in the charges that are made in this way.

(Mr. Johnson cont'd) . . . . I am frankly quite disappointed because so many of the points raised have had the fullest venting and the fullest discussions between member hospitals and board chairmen, and I have charged the commission with this liaison with all these groups. When I spoke to the commission the other day, I had been advised that, I think on an average -- now I may stand correction -- but I think it was around at least monthly if not twice a month that members of the commission had been meeting with members of the Associated Hospitals talking to board chairmen repeatedly.

I think that the day the plan came in, in which I came into this office, here was the plan in being; we had to develop many policies; and on many occasions the chairman or the commissioner at that time told me, and he told me he had told his predecessors, that it would take four or five years, six years for this operation to settle down, to iron out the kinks, to get the understanding in the many areas of endeavour and joint partnership involved in the partnership arrangement between hospitals and the commission. We have to have guide lines. This whole matter was discussed with chairmen of the boards recently. Did they want our figures and what we thought were adequate costs in determining budgets? Would that help them as guide lines? We don't send them out as directives. If the hospitals want to pay more, that's their business; but most of them requested and wanted these guide lines.

Certainly I, without hesitation, will advise the committee that, on occasions, when salaries in particular may seem to be out of line and it has been brought to my attention, I have to give them the closest scrutiny, because after all we have to use everything possible in the administration of public funds to be sure that the maximum services and that the right thing is being done. Certainly the Associated Hospitals and the administrators of this province, the senior administrators, the experienced men have given invaluable advice. Without them many things would have been so much more difficult. We knew from the beginning that the budget problem would continue to nag us, but certainly I think the committee can appreciate the fact, as one administrator said to me: "I think that this budgetary routine is a little combersome. Just give me the money, I know how to spend it." Well, I know how to spend money too if you give it to me, but we have to go through this. We have to have a consultant division; we have to have a budget division; these are all increased expenditures in our administration also, which didn't exist in any previous scheme.

I think we have to look at this thing and give it some of our human compassion. It's the easiest thing in the world to criticize a utility that means so much to every single Manitoban, and we have to, when government is involved to the extent that we are with 100 percent of operating costs and over the long haul 80 percent of capital costs, we have to have a measure of understanding. When I have sat down with board chairmen of the leading hospitals in this province, I have found a wonderful spirit of co-operation that's across the table. I have had the fullest co-operation from every major hospital, every small hospital in this province. I don't know where all these things are really coming from. I think they should be vented wholly by the people, who feel this strongly about the actions of our commission, with our whole commission. I'd like to be present because certainly we should be criticized. The day to day operations of this big facility certainly leave a lot of doors open for criticism. I'm not saying it's perfect by any means. I'm not saying it is perfect; I'm just saying that we are doing our level best, with a most competent staff, to examine most carefully every hospital budget that comes before us; to seek that measure of understanding with the people administering the care, that we can. I would draw also to the attention of the committee -- and I say this unrehearsed -- in that here we as a government agency, collecting the money and we don't render the service. This is rendered by the individual hospitals concerned and does need because of this factor, needs this increased understanding and trying to sort out these matters.

As far as the Commission is concerned, it became only too apparent to me after the Commission was operating, as I expressed to the House and I do so sincerely again as I did last year, that I found that the Commissioner of Hospitalization, as he was known, certainly needed some help and another pair of hands in meeting with the many groups that come in. We reorganized the plan so that the Executive Director of the plan and the staff process the budgets through a set way, and this gives the Commissioner, with representatives, an opportunity to sit back and look hard at some of these policy decisions; and they are serious and major decisions that we're walking into each time. I didn't want to imply in remarks the other night that the Blue Cross didn't

(Mr. Johnson cont'd) . . . . . deliver; I don't think I meant that. I just wanted to point out that we need this understanding. The government in running this Act, certainly it is the full understanding with the hospitals and the Commission that emergencies shall be admitted; that they would always be able to take emergencies and that there would always be the need for scheduling of work and so on. The government has a responsibility, not only in this field but in hundreds of other areas, as I tried to outline in introducing the estimates.

I think, too, that the matter of boarder babies has received extensive reviews by both the Associated Hospitals, the government, the Commission, the Welfare Department, and we're continuing to look at this most difficult area. However, we can report progress.

If talks -- the Honourable Member for St. Boniface refers to talks with the MTI. I haven't had a chance to check into this, but from the moment the Minister of Education asked us what we wanted at the MTI, my department, under my Deputy Minister, took the matter in hand; and as we decided to move our own school into the MTI, we approached the people working in these hospitals, and it was my understanding that the technical people were certainly involved and if they didn't report to their boards -- I think just recently the Hospital Commission realized that possibly the hospitals hadn't officially, at the board level, been brought into these discussions. I'll check on that, but I believe at that point the Commissioner contacted the hospitals and our department concerning the whole future of this program. However, it was my understanding in the development of this facility, that we had the fullest concurrence from the schools operated at the two major hospitals in Winnipeg and that they agreed wholeheartedly. I know the technical people did.

I think that the Honourable Member from St. Boniface must realize that with the government dispensing 100 percent pretty well of the operating costs of hospitals, and under the present system which we enjoy in Manitoba of self-autonomous boards, that we have to get together as often as is necessary to overcome some of the problems that are so sweeping. There was an honest difference in the opinion concerning the method of handling the Pension Fund and I expect this will be resolved any day now. However, it's a tremendous undertaking.

Certainly we expect to be criticized, but I think the honourable member would be -- I think we should criticize the Minister of the department or the government. We're responsible for the operation of the plan and the Commission, just as we are with I guess the Hydro or any other major commission. I think the Honourable Member from St. Boniface will agree with me that to blame any single individual for the lack of co-operation or for a dictatorial attitude or a determination, which he implied, to fight off partnership concept, I think that this really isn't a fair evaluation of the whole matter.

Now that's really all I wanted to say at this moment. There are many points that could be brought up in a facility of this magnitude, but I think that the sheet which I have passed around indicates the tremendous growth and the tremendous amounts of public funds that have been expended, and I compliment the staff and the Commission. It's always been a wonderment to me how they were able to handle all this as efficiently and judiciously as they have over the past five years.

MR. DESJARDINS: Mr. Chairman, I'm glad to see that the Honourable Minister is talking about co-operation. This is exactly my point. This is what we want. He mentioned the question of the Commission, but he must remember that this Commission has just been named a few months ago and this plan was in much before that.

Now I'm not going to start a debate on who should be blamed. Friday I tried to put the blame where it seemed to come from, where the lack of co-operation was coming from. I've explained today that maybe I've admitted that probably this was a political faux pas, so I'm not going to come back and discuss this again, but I will say to the Honourable Minister that we certainly realize the work that has been done. For four years we've been getting up here and congratulating the Minister. But as I said before, we have our responsibilities too, Mr. Chairman, and when we see certain things that are not quite right; when we see certain delays; certain things that are leading; you see there is a danger. There's some people here awhile ago that told me what's wrong with socializing hospitals and so on. You see the great danger that we're facing.

Now we understand this business that they can't go crazy with these salaries, but this is an example. These meetings that the Honourable Minister is speaking about; they did happen. There was a meeting with the members of the Board and the Administrators. The Honourable

(Mr. Desjardins cont'd) . . . . . Minister said that he gave instructions to sit down and talk these things over, but this wasn't done. This is my point. While they were out there at a meeting, nothing like this was discussed, and when they got home there was a letter on their desk telling them that these salaries were going to be frozen. You see this is the thing that they don't like, and I think they are right. They are ordinary intelligent people and they'd like a chance to discuss these things.

Now the Minister says that he might have given orders. Now he knows why I put the blame where I did on Friday. Maybe he gives the orders, I don't know that, but the fact is that these meetings were held and things like that wasn't discussed; nothing about the budget. Now nobody is gullible enough to think that these people will operate without a budget; I'm not suggesting this. But when the Commission requests that these budgets should be in by October 15 -- and they haven't even got those budgets back at all. Last year the final budgets were approved in July. They have this little yellow book that they gave estimates. Unless they provided for a six percent increase, just in salary and now this year, just this figure, three percent of the approved -- of the approved -- they're working a deficit, but three percent of the approved budget of 1961. You see this is not even the budget of '61 -- of the approved budget. They work on a deficit, so this year they're coming and this time it's at the most, four percent increase, and all the time the Commission itself admitted and projected for an increase of six percent just for wages, and 65 percent or so of hospital budgets deal with wages, and this is what I mean. These people that were all ready to go in coalition last Friday; don't they realize what this means? They're the people that want to defend the people that are working in these hospitals. What will happen if they're restricted like this? These people have no say in this salary increase at all. It's a contract that has been signed.

We know that this is difficult, and I did say on Friday, I mentioned this young boy that wasn't admitted. I took the trouble of saying that this is difficult, but for the love of God let's double-check, because that could be our son. Is there anything wrong in saying that, Mr. Chairman? Wouldn't you say that if it was your son? Then I also said that we should co-operate a little more, and I said that the point is that it was a compulsory plan and that people were not being able to get into the hospital. I know that the Minister is doing everything he can. I was just bringing him this problem because it is a problem. I don't know enough about law, but isn't it a possibility that some day we'll be sued? If we're charging for this and if they can't get the care, there's something wrong. Maybe you can't blame anybody; maybe this is not feasible, I don't know; but something is wrong. This is why again, Mr. Chairman, I question why this change. We received a schedule. I asked three different questions at three different times of the Minister about the St. James Hospital. He said, "No, they will not get anything. We have to follow the schedule." Well, that's fine, and then they had to follow the Willard Commission. It's not these acute beds; we weren't going to start building brand new hospitals every day, because eventually by having care for people that didn't need the acute care, well then it would relieve beds for acute patients.

All right, this was realized on Friday and I still realize it now, but there is one thing wrong; there's lack of co-operation and the people feel it. It's not just to say, "well what do they think this is, they can just come in and get the money that they want?" Like the Minister said, "I know how to spend money." Again when he says that, does he believe that those people that are being operating these hospitals for so long are just going to spend and spend and spend money? We know that there will have to be a budget, I know that, but let's give them a chance to discuss these things with us. They don't like to get a letter -- they're at a meeting, nothing is said, "how are you, let's have a little chat" -- and then they come home and find on their desk that these salaries are frozen; you can't do anything about salaries. And then the budget -- you'll have to budget because we have to meet our budget. We made a mistake when we projected this and now the people of Manitoba will suffer for this. You're not building a highway. How can you say, even without seeing the budget, how can you say to certain people, "well you can't go more than three percent." Why three percent? Why not four percent? Let's close some hospitals if we have to. You see we're limiting these people. Certainly there has to be a budget and certainly they will not accept everything that's being done, but let's have a chance to discuss these things. This is my point. It's not that bad, maybe, but we need more co-operation. Let's remember; let's give a little trust to those people. Let's give them a little credit.

(Mr. Desjardins cont'd) . . . . . They've been doing that for a long time and they say themselves that there's too much money being spent in the administration of the Plan; there's too much duplication. There's a lot of things that they can do themselves. They don't feel that they are being trusted.

Now I would like to say, and the Minister seems to indicate that because I'm a chairman of a board that this is one hospital. I know members of different boards of a lot of different hospitals, and I can say very sincerely that I've talked to many of them and they all agree with me that there's need of a little more co-operation. So this, Mr. Chairman, again I say this is constructive criticism that we are offering the Minister. I think that he should look into it because there's certainly something there and we need all the co-operation possible if we want to continue making this plan a good plan and the best plan in Manitoba.

MR. PAULLEY: Mr. Chairman, I listened with great interest to my honourable friend from St. Boniface and his flamboyant floundering epistle this afternoon, and after listening to him I don't know where he stands, whether he's for the government or against the government; for the hospitals or against the hospitals, whether he's for a hospitalization plan or whether he's against it. Possibly some time later in the debate on the Department of Health he will coldly stand before us and tell us exactly where he stands, because I'm sure that I at least as one of the Members of this Committee cannot gather from my honourable friend's remarks where he stands on the question of hospitalization. As a matter of fact, there is some question in other fields as well, but I'm particularly interested in this one at the present time.

My honourable friend tackles, and it's not my position here to attempt to come to the defence, particularly of the Hospital Commission or certainly of the government, and I don't know of anyone who is a greater critic of the government or more critical of the government than we are in this New Democratic group here in this House -- (Interjection)-- Yes, we do support them in such things as they're doing that are, in our opinion, for the well-being of the people of Manitoba. But I will say this, Mr. Chairman, and I remind my honourable friend the Leader of the Liberal Party that when we stand up and we support the government in doing what they do, we're not like them, stand up and support them and then stab them in the back the minute after it is done. We at least have enough conscience when we stand up in this House and support something that we'll carry it through, unlike my honourable friends to my right. --(Interjection)-- Give you instances? I'll give you one right now on the whole field of hospitalization. Here is one of your colleagues, the Member for St. Boniface, laying into the socialistic plan of hospitalization here in the Province of Manitoba. Their Party, back in the year 1919, promised a comprehensive and full health plan to all of the citizens of the Dominion of Canada. It wasn't a hospitalization plan, it was an all-embracing plan that covered medicare that he made reference to here, and I'm going to refer to it in a moment. As introduced in Saskatchewan, it included all aspects of health care -- 1919 -- (Interjection)-- There's some that make the comment that it's still a brand new plan because of the fact that the Liberals or any other government in the Dominion of Canada has never ever used it, so of course it's still brand new.

But this is the ideology of my honourable friend, or it was of his party at election time. I notice also, Mr. Chairman, that it's their ideology today, and I warn the electors of Canada, "beware of Greeks bearing wooden soldiers or false gifts", because certainly that is what they have done ever since 1919. --(Interjection) -- It is a little mixed, I agree -- I agree. I agree that the phraseology is a little mixed -- (Interjection) -- That's right, the phraseology may be a little mixed but the basic philosophy is still the same. And while the speech may be mixed, I'm sure that it's not very comforting to the ears of the man of the calibre and the qualifications of the Leader of the Liberal Party who has to review, even though through my lips, the review of his Party in the last forty years or so in the Dominion of Canada.

My honourable friend from St. Boniface is speaking in connection with the pension plan that's being considered at the present time. I'm quite aware of the difficulties that are going on in respect of setting up a pension plan in the hospitals of Manitoba. I'm glad to be on the mailing list of the Associated Hospitals of Manitoba, wherein they're stating all the difficulties that are being met at the present time in respect of pension plans. But I think I've got more faith, Mr. Chairman, in the Associated Hospitals of Manitoba than the honourable spokesman, presumably the Member for St. Boniface, because I think they have enough intelligence -- I'm



(Mr. Paulley cont'd) . . . . . sure that they have -- to lay proposals and counter-proposals before the Commissioner of Hospitalization. If my honourable friend the Member for St. Boniface would only take the time and trouble to read of these reports, I'm sure that half of the "guff" that he presents to this House would not be uttered.

He mentions the fact of the question of medicare -- and I must make reference to that in Saskatchewan -- and the question, as he says it, of strike-breaking in the Province of Saskatchewan during the medicare battle there a year or so ago. I want to tell him that so far as the medical profession are concerned, in any utterance or statement that I've seen on behalf of the doctors of Saskatchewan, they maintain that there was no such thing as a strike and regret it very much that this term was applied to them. I regret very much when the Honourable the Member for St. Boniface will stand up in this House and reflect on the capabilities and the qualities of the doctors that did come from overseas into Saskatchewan or into Canada. We're having them at all times and I suggest that, after they have received their training in the old land, that they are as qualified as the doctors that receive their training here in the Dominion of Canada. I think that it's unbecoming a member to reflect on the integrity and the qualifications, as the Honourable Member for St. Boniface did in his display here just a few moments ago.

He mentioned during his oration here a moment or two ago in reference to welfare babies and babies of unwed mothers that are in our hospitals, and what was the appendage that he put to his remarks? "They're too long in the hospitals." Well, as I understand it, as I understand the operation of our hospital scheme here in the Province of Manitoba, it's incumbent on the medical superintendent of the hospital to declare as to whether or not a patient is in a hospital too long. If it's in his opinion that they are there over length of time, then other arrangements should be made. So maybe my honourable friend is a chairman of a hospital board, but I suggest to him that he use his noggin a little bit and attempt to find out some of the legislation that is here, and some of the rules and regulations. I don't profess to know all of them, but I do know of a few of them and I do suggest, Mr. Chairman, that I know a lot more than my honourable friend the chairman of a hospital board here in the Province of Manitoba insofar as hospitalization and its plan should work.

He makes mention also of the costs of administration. I have raised objections to the Minister of Health about this previously, but there's one thing and one answer that the Honourable Minister, if I recall correctly, had to make, and that is the answer that the costs of administration under our present scheme are only about one-half of what they were under Blue Cross. Under Blue Cross they were somewhere in the neighbourhood of eight percent, and now under this particular socialist scheme that my honourable friend objects to, it's about four percent, and I say that there's a lot of credit coming to the Commission because they've cut down the costs in this field by about four percent. Let there be no mistake, Mr. Chairman, when I say this I'm not buttering up the government but I am paying a compliment to the Commissioner of Hospitalization here in the Province of Manitoba. As a matter of fact, I did have criticisms to direct to the Commissioner and his staff a year or so ago when I had a whole stack of leaflets here on my table dealing with what I thought, or said and thought at that time, was merely advertising for the Government of Manitoba and the costs were being absorbed in the hospitalization. I think I'm correct in being able to state, at least in my observations, that a considerable reduction has been made in this field at the present time. So I say to my honourable friend from St. Boniface, be flamboyant and floundering if you like, but let's be factual and let's be true.

MR. DESJARDINS: Mr. Chairman, if we're going to be factual and true, maybe we should start by telling the Honourable Leader of the NDP that I am not and I've never said that I was a chairman of a board. Now secondly, Act or no Act, there's nobody running any hospitals that I know, that when the doctor would say this baby has been here long enough, he should go home, when he has no home to go to, I don't think they'll throw that baby outside. When they find a place for him, that's fine, and the Minister recognized that point itself.

Now, when he's talking about let the Commission cut down their expenses, when he's talking about how good it is, let him remember to tell the people that are working in these hospitals, 65 percent of this budget, not to ask for a raise the following year -- let him remember this. He's the friend of the people--remember that.

Then he's talking about that I said we had a socialistic plan. I don't want this to get

(Mr. Desjardins cont'd) . . . . .around; this is not what I said at all. I said if this is to be continued without any co-operation; if these hospitals are denied a chance to discuss -- the owners of these hospitals denied a chance to discuss some of these things; then our friends will be happy because the government will take over. They might as well take over all these hospitals, then we will have socialism. And this is the socialism that is leading us to communism, Mr. Chairman, this is it. -- (Interjection) -- You stand up and you refute that -- you refute that then -- you refute that -- you refute that. Isn't that socialism if you want to take the hospitals away and these people would not have any say in their own hospital? Would you like that if I go to your house and say I'll tell you what to do here? You'd be the first one to kick me out. Well then, be straight. If you want to cut the salary, if you want to cut the salary well be frank about it. -- (Interjection) -- Yes, you know it all, eh?

MR. PAULLEY: Mr. Chairman, I just want to make one brief comment if I may on the last statement. From what the Honourable Member for St. Boniface has said in respect to the definition or interpretation of socialism, he's just as ill-informed on that as he is on the operation of the hospitals in Manitoba.

MR. DESJARDINS: Mr. Chairman, I hope that I will continue to be misinformed. I'm not too interested in the remarks of the honourable member from the NDP, and neither are the people of Manitoba judging from what's going on in these last elections. Mr. Chairman, I wonder if the Honourable Minister would, at some later date maybe, give me the salary of the Chairman and the Commissioner of the Manitoba Hospital Plan.

MR. JOHNSON: Mr. Chairman, the Chairman and the Commissioner of the Hospital Plan -- I can give him that. The Hospital Commission Chairman makes \$15,000 a year, which is lower than the administrator of a 250 bed hospital in Manitoba. The Commission members are paid \$3,000 a year for their part, and I can inform my honourable member that they have been spending two days a week since summertime -- one day a week and then two days a week once September came, reviewing with the 99 hospital boards in the province not only the Willard Report and the variations and discussing the whole problems of each hospital with them, but the various groups who are directly involved with the hospitals.

I would also like to tell my honourable friend the member for St. Boniface that two years ago we asked the hospital association to make a recommendation to us concerning executive salaries because this was a brand new area, and the association informed us that they chose not to do so. Because of the problem being a continuing one for us, I discussed the matter with the chairman of the commission and we did decide to carry out a special study to ensure the most judicious expenditure of public funds in the future. I think these are areas of endeavour which government was never into before in the past, and this is a matter, as a matter of fact, which I have discussed with Ministers from other provinces with considerable concern. Certainly we have some very wonderful people in the hospital field in Manitoba and they're certainly worth the monies which the boards recommend they receive, however, I think in the administration of the hospital commission in Manitoba, we must constantly keep these problems before us and try to develop base lines which will give guidance to the commission in meeting the wishes of the several hospitals.

Just to put the Honourable Member from St. Boniface at ease -- I haven't seen Hansard from the other night -- but I want to put the matter of the Grace Hospital -- I think we can settle that matter very quickly. The Willard Report, as you recall, didn't contemplate this coming into operation until 1966, I believe, and the grants would be available in '65 for that hospital. Following the negotiations between the commission and the Grace Hospital, with the tremendous opportunity here which the people of St. James expressed their opinion on very decidedly that they were anxious to have a hospital in that area, we reviewed the construction program in the light of development; reviewed the reasons why the Willard Commission or the Hospital Survey Board had come to the conclusion they had in the original report; and had very prolonged negotiations with the Grace Hospital and very properly so. This is a lot of money and a major decision. I was happy in working through our construction grant formulae and so on -- and we feel, you see, that it is our duty as a government and a commission to give every co-operation to these voluntary boards. It was their decision; they wanted to go to St. James and we had to accommodate them if we possibly could and if we could justify it in the public interest in the over-all picture. That finally was resolved and they are going ahead a little bit ahead of schedule because of some

(Mr. Johnson cont'd) .....other projects being somewhat delayed, and will give us this increase in acute hospital beds in this regions, by 1966 we presume, and grants were advanced one year. In addition to that, an arrangement was made that by that time, in the opinion of the commission, with the changing picture and taking everything into consideration, that the present Grace Hospital could by that time be renovated and continue to serve as a 250 bed hospital at its present site. Both the Salvation Army, the authorities, the board of that hospital and ourselves, are most pleased with this final arrangement. I just thought I would give that information on this particular matter.

MR. DESJARDINS: Mr. Chairman, I think this might please the Honourable Minister to say that nobody on this side, that is of this Party, feel that the people of the commission are overly paid. In fact, after all the nice things that we've heard about the chairman he's probably underpaid. This was just information that we want as we have no report in front of us. Again for the last time, this question of St. James, we are very much in favour of this; we understand; but the point is that last year I was trying to make the point that it might be difficult to stick to the schedule too much if it was felt that certain communities such as St. James and certain people such as the Salvation Army were ready to go ahead. This is what we meant last year and we're in complete agreement with what has been done, Mr. Chairman.

..... continued on next page

MR. CHERNIACK: Mr. Chairman, there's a few points that I'd like to draw to the attention of the Honourable Minister. I had made a note of these points, but there seems to be a point that I would like to draw to the attention of the Honourable Member from St. Boniface. He has stated that he does not want to be educated about socialism and it is far from me to try to educate an unwilling mind, but I am quite prepared to inform other members of the House who might be interested that I'm not aware that any, any democratic socialist movement is desirous of taking over anything which is being operated for the benefit of people, and as long as hospitals or any other institution is prepared to operate whatever it is responsible for, for the benefit of the people whom it serves, then by all means it should be encouraged to do so. The minute it seems to tend to operate for the benefit of the owners, excluding the benefit of the people then it's high time it should be taken over. I am not aware of any hospitals that are being operated for private gain, for the benefit of the owners as excluded from the people to whom it serves, but if there are such then by all means they have to be taken over when they forget their real purpose. The hospitals I know of, especially in the Greater Winnipeg area, no matter in whose name title rests, are still being operated for and on behalf of the people in Greater Winnipeg and to the extent that they continue to do so, then by all means they should be allowed to administer the funds which are provided by the people for their benefit.

There are just a few matters that I do not think that the Honourable Minister has commented on as fully as he might have and I would like to draw them to his attention. Neither in his remarks, and I missed some of them on Friday night, but I don't think that the latter part of what he had to say dealt with anything but the speech of the Honourable Member from St. Boniface. On Friday, I don't think he dealt in any way with the entire field of geriatrics. It may well be that the problems of geriatrics are interspersed in the budget somewhere, but it seems to me that this is becoming recognized as so important and an all embracing field that it deserves special consideration, both from the Minister and his department, and I would like to hear him comment as to the plans or the work of the Department in the field of geriatrics.

I would also like to draw to the Minister's attention that there was a little bit in his debate of last year on the home-care programme and as I recall it he spoke of the fact that there were negotiations with the Federal Government on that. I do not recall that much has been said yet on the question of the home-care programme or the development of day-care as he himself mentioned was being carried on by the Allen-Memorial Hospital in Montreal and which he seemed to accept as being worth doing. I'd like to know, just have a report on what the government is doing and planning in this budget to do to develop the home-care programme.

I also notice an item in the Budget Item 2 (b) 10 where there's \$5,500 set aside for what is called medical care. I don't know if he means medicare or if he doesn't, but if he does not then I would certainly suggest to the Minister that be it socialist or be it conservative, he is going to be tackling the problem very soon of a comprehensive medical care plan for the people of Manitoba; and whether he likes it or whether he doesn't like it, or whether the honourable members who sit to the right of this group like it or call it anything that they please to call it, there is not the slightest doubt in my mind that the work that is being done in other provinces will be brought right home to roost in Manitoba and work will have to be done, doctors will have to be prepared, people will have to be educated and the government will have to have plans made ready very quickly as to the form in which they will be introducing some comprehensive medical care scheme. So that I would suggest that if it could be done within the budget as it is before us well and good and if it can't be then the Minister had better start looking for those funds that he needs for research in order to get ready for what is definitely coming, and I need only add to it that if it is not brought in by this administration it will be brought in by the next administration, no matter what party is in power.

However, there is some form of medical care plan that this government has. I didn't hear any pride expressed in connection with it and I believe that's understandable because I'm under the impression that it is so restricted that it really doesn't do very much as it is. I remember on the election platforms, there was (Interjection) -- wrong department, I'll wait for the next one. I always thought that a plan of medical care ought to be in health, but apparently it's in welfare, and this may be part of the attitude of the government in thinking in terms of welfare being the proper place for taking care of the health needs of the people of Manitoba. Be that as it may, I'll be glad to leave it over until the next department.

(Mr. Cherniack, cont'd.) . . . .

One other matter, Mr. Chairman is that of the cost of drugs. I read with interest in last year's Hansard the Minister's acknowledgment that the costs of drugs are a real problem for many of the people of Manitoba. He said there "the provision of drugs is a very important adjunct and this again is something where we will need some federal assistance in controlling the cost of drugs". I'm glad he put it in the sense that "we will need some federal assistance", which to me means that he acknowledges that it's a problem which is not entirely that of the Federal Government, but is one which this government should be charged with. If he needs assistance from the Federal Government, I would very much like to hear what has happened in the last year to attempt to gain the assistance, and I would point out to the Honourable Minister that there is much that could be done even on a local basis -- when I say local, I mean provincial basis -- in the field of attempting in some way to control drugs. I don't know the figures and I assume the Minister does, but they must be available as to the difference in cost in the hospitals once they instituted the policy of insisting that prescriptions be made on a generic name basis. I think it is most interesting that the doctors feel that if prescriptions are done on a generic name basis, rather than a trade-name that there is immediately a saving involved to the patient. I'm always amused at the fact that we have druggists, pharmacists who attend many years of schooling and then turn out into the selling of anything other than drugs, and I feel that this is one field where in the use of generic names the druggist's knowledge and experience can be brought to the fore where he is given the responsibility, which I believe he can handle, of providing the drug which is really required by the doctor. The trouble is that so many doctors are so busy these days, and making lots of money while they're doing it, that they don't take the trouble to find out the generic names of those drugs which the last detail man sold them on. And if this is intended as a criticism of doctors, then to some extent it is meant as a criticism of doctors who do not find it possible to provide that very important service which I think they owe their patients and that is to see to it that the drug that they prescribe are within the means of the people receiving it. Might I suggest that the government could in its education program with doctors, do some real spade work in selling to the doctors the idea of using generic names or whatever idea is necessary to acquaint the doctors with the fact that not only must they worry about their own economic position -- which doesn't worry me at all, but seems to worry them -- but that they should also be deeply concerned with the economics of their patients. I would look forward to hearing from the Honourable Minister on these points that I've raised.

MR. FROESE: I listened with a great deal of interest to the Honourable Minister's report last week and the questions that I will pose to him, I hope they're not already answered with what he said in his speeches, because I've tried to listen and tried to get the information and yet haven't been able to get it.

Dealing with the Manitoba Hospital Services Plan, I take it that this is a Crown agency, and I would like to have the Minister define just what functions require the Minister's approval and how is the plan responsible to the Legislature? Just what functions does the Legislature have or what responsibilities in regard to this plan? I would like to know the autonomy of the local boards? How far does their autonomy go and when does the plan take over? I would like to know the actual checks that are being made by the department on rising costs -- I suppose budgeting comes into this. I would also like to know the changes that were made since last year by regulation -- such as between the Canadian Government and the province, if there were any. And a further question: we received a sheet on the comparative statement of revenue and expenditures of the Manitoba Hospital Commission, dated March 22nd, 1963. Is this the only statement that we will be getting as far as the actual expenditures and the whole financial statement of the Hospital Plan for the past year? I don't think we received any as yet.

Then I've two other questions -- one in connection with the Altona Hospital. I'd like to know the situation there. Apparently they approved a debenture and later on found that the cost would be much larger and therefore were at a stalemate. I'd like to know the developments and whether this thing has been settled. And since the Winkler vote carried recently I wonder if the Minister could tell us when we could expect commencement in the building program.

HON. ABRAM W. HARRISON (Rock Lake): Mr. Chairman, we've heard many of the

(Mr. Harrison, cont'd.) . . . things that are wrong with our hospital situation in Manitoba during the debate and I think that we should hear some of the things that are right about it. I'm prompted to speak this afternoon through an experience that I had in my youth. I was unfortunate not to have an emergent operation for a twist in the bowel. I had to wait some eight hours for the train to arrive at the depot and then spend another three or four hours on the train enroute to the Morden hospital. The operation was successful and I am here today, but that points out exactly what our hospital situation was some 30 years ago. In the area that I live in we had a hospital at Morden, 80 miles away; we had a hospital in Brandon, 80 miles away and we also had the Winnipeg hospitals. Those were the hospitals that we had to depend upon for operations, whether they were emergent or not; but it demonstrated to me in a very vivid way the need for hospitals in rural Manitoba and I determined at that time that I would support any measure that would bring hospitals to our area. And that may have prompted me in the fact that I did enter politics -- I felt that I should, in a personal way, be able to help the hospital situation in that area. As Member of Killarney I did help to organize the hospital at Killarney--the district hospital there. I was glad to assist the Mayor and the committee of Killarney people in finding ways and means of building a hospital and financing one in the Town of Killarney. It has been very successful in filling the needs and has been financially successful and has been what it was intended to be, a hospital and a workshop for the doctors in the area.

At a later date the hospital at Cartwright was organized, financed by the municipality and grants from the provincial government of the day. This is a small hospital and is regarded as a workshop for the local doctor and they were able to induce a doctor to establish a practice in Cartwright as a result of providing a hospital for him.

At Crystal City, a hospital was organized and built in that area and Dr. Corbett was the doctor of the day. He later left Crystal City and settled in Devil's Lake. One half of his practice was in the State of North Dakota adjacently south of Crystal City, and today the citizens of the state of North Dakota and of the southern area of Manitoba make use of the Crystal City hospital. It's international in operation and it fills a need of that area. Many emergency operations are performed in Crystal City hospital and difficult operations are also performed there as we have a skilled surgeon in charge.

Pilot Mound, which is five miles away, also organized a hospital and established a hospital in the town of Pilot Mound. Many thought that that was too close to the Crystal City hospital, but events have proved that there is a need for hospitals in both towns and they are both successful. The son of the pioneer doctor in Pilot Mound has his office adjacent to the hospital and he is, in a large measure, responsible for the success of that hospital there.

We also organized a hospital at Baldur, to fill the needs of that area on the north side of the lakes. It has been very successful and has filled the needs of the area -- so successful that it was necessary to enlarge that hospital last year and it is now in successful operation and is also servicing the medical needs of a large area.

Today in Rock Lake constituency we have now five hospitals operating successfully. Twenty-five years ago there was none. The governments of the day sponsored and helped the establishment of these important institutions and today in southern Manitoba we're not dependent upon city hospitals and trains that are able to get through and on time. The present government is of course, unable to take all of the credit for these hospitals, but they are at the present time making it possible for these hospitals to function in the manner in which they best service the communities in which they are situated. It certainly is an inspiration to go into these small hospitals, the workshops of the doctors and see the work that they do and the cures they effect on their patients. It's a wonderful inspiration and it's a credit to the government of the day that they're able to do this in contrast to some 30 years ago when there was no hospitals and we were dependent upon successful operations of transport services. Today our doctors are highly skilled; they come from the universities with degrees; they have operation experience before they arrive and take over their practices. This has all been established in my term of office and they were very badly needed. I do not take too much personal responsibility for it. I did support it and I think it was the right trend for our health services to take. It's a breakthrough from the pioneer doctor who operated on the kitchen table alone to the useful medical practices and scientific knowledge that the doctors have today, and the rural people are certainly happy about their health services in rural Manitoba.

(Mr. Harrison, cont'd.) . . . They're hopeful that the government of the day will extend, to some extent, the services that they do provide. We know that there are operations that cannot take place in the country because of their very nature and of the equipment and experience that is required. But the government of the day in southern Manitoba and I expect in the rest of the province have made rapid strides in the treatment of medical diseases and disabilities and I am sure that all of the people of Manitoba will give credit where credit is due and they will say "God Bless the Department of Health in Manitoba" and that the present Minister will long remain in office.

It would not be surprising if the same trend has not spread over all of Manitoba. I believe it has and the incident of disease is less, infant mortality will be longer. Manitoba has a medical service that it can be proud of and I'm sure if there's one thing in the rural areas of Manitoba today that the voter will stand up and say "God Bless You" is the fact that we have one of the best health services and hospital services in Canada today.

I have four hospitals in my constituency, possibly more than most people have; we are within 10 miles of the Killarney Hospital which I helped to organize and which is doing a splendid job in health services in rural Manitoba. I would not be surprised if the same trend has spread over the entire area of Manitoba and that people are demanding and are getting better health services in the towns and villages of Manitoba. As a result, Manitoba's citizens are living longer; their infant mortality is less. Manitoba today has a medical service that it can be proud of and we hope and trust that there will be no slackening off in health services in rural Manitoba.

It's all very well to stand up and criticize the Minister of Health or the Department of Health on what they have done or what they have not done, but it's certainly a credit to them that in rural Manitoba they have come a long way -- I don't say that the present government has done all that it should do or all that it can do or all that is being done, I do not say that the former government was not moving somewhat in this direction -- but we're happy and thankful that in rural Manitoba we have health services that we did not have before; and we have services that we are prepared to pay for and are paying for. It's admitted that the present Minister of Health is one of the best health ministers in Canada; that he's efficient, progressive, and I would suggest that we should pay his salary, that he earns it, and that health services and hospitals will progress under his direction.

Now I should like to say a word or two about Ninette Sanatorium that is also in my constituency. As you know it was established there many years ago as a treatment of T. B. I remember the day that when a person or a patient became infected with tuberculosis, they put up a tent in his backyard and they moved him out there in the hopes that the fresh air would cure him and alleviate him of his distress. They have since that time established a T. B. sanatorium at Ninette and the incident of T. B. is much less than it used to be, very much progress has been made in treating and eliminating and preventing the diseases of T. B. It is certainly a success story and I'm sure that our present minister had a part to play. The success has been so great that there are those in Ninette in my constituency that are a bit apprehensive -- and I say that advisedly -- that T. B. may be entirely eliminated and they will lose the Ninette Sanatorium. It is a good plant and most of us hope that that is what will take place, that it will no longer be used for the treatment of T. B. I, myself, think the day will arrive when T. B. will be conquered and will not be a serious disease in Manitoba. This plant is located at the end of Pelican Lake; it's a very pretty sight and I'm sure that if and when that day arrives that those buildings will be utilized for other purposes -- what they would be or by whom I would not attempt to say at the present time. At the present inmates or patients in the sanatorium are a cosmopolitan lot. We have Eskimos there from the Arctic Circle and we have Chippawa Indians from the North, and every nationality you could mention are there together, enjoying the atmosphere of their surroundings and taking treatment and gradually conquering the incident of T. B. I'm hopeful, as I know most people are, that these infected people will return to a normal life and the infection will be entirely eliminated in the Province of Manitoba. That may not take place in our lifetime, but I think it's a goal that we should all set our sights on. We all hope that it will be soon. I tell these people not to worry, that they're coming out whole and clean and they will some day enjoy a useful life and will be happy and back with their families again. The incident of T. B. as we know it is declining and

(Mr. Harrison, cont'd.) . . . medical science no doubt will conquer this terrible disease in the years to come. The Department of Health is doing a wonderful job and the Minister is, in the treatment of this disease and we hope and trust, as I'm sure he does, that some day it will be no more.

The health of our constituency of Rock Lake is well looked after with all the four hospitals and the sanatorium. We are very thankful to the Government of Manitoba that these facilities are available, and that we are using them, and the day will come when the health of Manitoba, particularly when tuberculosis will be much better than it is today and it is much better today than it was 10 years ago.

The Department of Health is doing a fine job in Rock Lake constituency and we hope that they long remain in office to continue this good work.

MR. NELSON SHOEMAKER (Gladstone): Mr. Chairman, I suppose that what I have to say I could say a little later on in the estimates under Alternative Care, but it still comes under this resolution so it doesn't make much difference whether I say it now or then or both. I was out of the House on Friday evening and did not hear what transpired or what caused the apparent dog-fight that developed and just now we receive the Hansard No. 25, and I was so interested in what the Honourable Member for Rock Lake had to say that I haven't even read the Minister's statement yet. But it does appear that he said something that upset certain members of the House and I guess that's understandable that it would be so.

It does make me wonder, Mr. Chairman whether the Honourable Minister of Health is finding it a little easier with his estimates this year than he did last year. He said out at Elmwood when he was speaking to a nominating convention out there that if he had a bigger majority in the House -- to quote him: "Provincial Health Minister, George Johnson, hinted Monday" -- this was November 13th -- "that a bigger majority for the Roblin Government in the coming election would be a shot in the arm for the health and welfare programmes that he had pioneered for three years. The Gimli doctor indicated that a stronger Roblin Government would have an easier time maintaining its present health and welfare schemes and introducing new ones". That's what he said, Mr. Chairman, that's what the paper reports that he said, and in listening to him this afternoon, I question that, because they did get a greater majority -- by one I think -- it may be two or three more -- but he does seem to be having, should I say not an "easy" time with his estimates. In the same newspaper report it also says that he called Manitoba Hospitalization the greatest piece of social legislation since confederation. Now, I'm inclined to agree with that, but my honourable friend wasn't in the government when that legislation was put on the books. In fact my guess is that my honourable friend was out at Gimli and registered there under the Plan, because as I remember it, we had to be registered by May 31st, did we not, of 1958? And probably my honourable friend not knowing at that time that he would be Minister of Health, registered out at Gimli, and probably there are a lot of people in Gimli that wish that he were still out there because I understand that he was one of the best doctors in the province. I'm not saying that he isn't one of the best Ministers in the House. In fact, Mr. Chairman, you have heard me say and so has the Honourable Minister on more than one occasion that if prizes were given out for the various Cabinet Ministers that I would place him at the head of the class. And I haven't changed my mind; he still remains there as far as I'm concerned. So I do want to congratulate my honourable friend and certainly congratulate the staff, because -- I will repeat what I've said before that in the field of health and welfare I'm certain there isn't a member in this House that bothers the staff more than I do and I get great co-operation from them and I want to thank my honourable friend for that.

Now, my honourable friend was the Minister of Health -- I keep saying Education, I guess it's because of the fact we're getting an education today. The Minister of Health will recall it was on March 24th, 1959, that I introduced a resolution in the House -- the journals will show that and I have before me the Hansard No. 9A dated March 24th, 1959. There's an error here; I didn't catch it at the time, Mr. Chairman, but I will read the Resolution, it was a very brief one. It's Shoemaker speaking. "Mr. Speaker, I move, seconded by the Honourable Member for Rockwood-Iberville" and that wasn't the present member, "Resolved that consideration be given to the advisability of broadening the Manitoba Hospital Services Plan to include the care of patients in nursing homes." Mr. Chairman, do you know what



(Mr. Shoemaker, cont'd.) . . . they've got in Hansard here. For "broadening" they've got "broadcasting". I didn't catch it at the time. Well I'm still broadcasting about this one. Now I spoke at some length; that's four years ago or nearly that and then the Minister of Health spoke immediately after I sat down. "Mr. Speaker: Are you ready for the question?" and Mr. Johnson gets up and very briefly, this time, just one paragraph, and here's what he says -- the last sentence. "And in view of that I would like to lend my support to the proposition that the government do everything they can to bring certain types of homes within the Plan, if at all possible", I was speaking about alternative care and nursing homes and he more or less agreed to the resolution. Then Bobby Bend got up and spoke, not briefly, but he spoke, and he says; "this resolution in my humble opinion is certainly one of the most important ones on the Order Paper at the present time". And then my honourable friend the First Minister got up shortly after that and he more or less went along with the Minister of Health, Bobby Bend, and myself and he was about as brief as Bobby Bend. Neither of them were very brief but -- I don't know whether I can find here where the Honourable the First Minister, but in principle he agreed with the resolution. He thought we should be doing more in this field of alternative care and I still maintain that we should be.

Four years ago I limited the resolution to nursing homes. In the interval -- the four year interval -- they now talk about alternative care and it's really one and the same thing. It just so happens that my next door neighbour -- the neighbour living in the next house to ours to the west -- you can go and dig up and find out who it is if you like -- I've neighbours on both sides; this is the one on the west. He went into the hospital on November 8th and they removed him from the hospital to the Brandon Assiniboine Nursing Home -- is that what they call it -- The Assiniboine Nursing Home in Brandon? -- on March the 8th, I think. That is, he was in the Neepawa Hospital for four months and it is true that the doctors told his wife that gosh, he shouldn't be around here this long, that they should remove him to some other alternative type of facility, because it was a fact, and I'll admit it, that he would have been just as well taken care of in a nursing home or in his own home, as far as that goes, if she had been able to look after him; but he is practically paralyzed. She was unable to look after him. She was prepared to make a stab at it if there was home nursing care available -- someone that could come in three or four times a day and look after him. In the meantime and during the four months that he was in the Neepawa Hospital, I had been battling back and forth with the department attempting to get him Social Allowance and a Medicare card and eventually I was successful in getting the Medicare card and then that was the factor that decided that they would move him to Brandon, and that's where he presently is. I suggested, while he was in the Neepawa Hospital for four months -- we'll say 120 days -- the cost to somebody was \$17.10 a day for Neepawa, isn't it? I think that's the figure. So that the services cost him then, say \$2,000. Now I don't know what the per diem rate is in the Assiniboine Hospital in Brandon, but I do know that in certain nursing homes and certain other alternative care homes that they are providing a service of some kind at about \$5.00 a day; therefore if he could have been removed to some other alternative care home, someone would have saved roughly \$1,500.00. And this is the thing that seems to be bothering me to some degree; that we're not providing sufficient numbers of the alternative bed care.

The Manitoba Hospital Services Plan, as my honourable friend for St. Boniface pointed up this afternoon, and certainly another doctor here points it up, that it would appear that the province are selling a plan that is a bit misleading. Now I don't know, Mr. Chairman, when this little pamphlet came out, because there's no date on it, but I think it came out about the time that there was an increase in premium, because there was quite a bit of advertising went out at that time to try and convince the people of this province that it was still a good deal at \$72.00. There was a great advertising campaign went on at that time and I think I got about six of them. So my guess is that this came out about that time. "What you can expect from your MHSP in the event of accident or illness" that's what it's termed. "The brief and simple story of how your MHSP assumes responsibility for the cost of hospital care leaving you worry free to concentrate on recovering your good health." Well that's a little misleading, I say. Now it goes on to say, "your plan, the MHSP is your plan, paid for by your premiums plus contributions by the Federal and Manitoba governments. The basic purpose of your plan is to enable sick people to get well under circumstances which leave them free from the worry of

(Mr. Shoemaker, cont'd.) . . . hospital bills. Genuine need is the only requirement for admission to hospital. Your MHSP certificate is your assurance that your hospital bills will be paid by the plan at standard ward level and for as long as it is medically necessary for you to remain there." That's the end of the quote and then it goes on to say, "the very best care" and all this and so on. Well that is hardly true. Mr. Chairman, I'm suggesting when you or I or anyone else in Manitoba is obliged to get out of a hospital bed and go into another bed-nursing home or call it what you like -- and where we have to pay the care, it is hardly true, this statement that's in here, because it says -- it leaves you worry free as long as you require medical attention. Well I'm sure that if I went into the Assiniboine Nursing Home in Brandon or if they moved me, that I would be expected to pay the shot. The other -- well I'm not certain, Mr. Chairman, whether this one is up-to-date either, because there's no date on here, but they're still handing out this -- The Manitoba Hospital Services Plan, an explanation of it, and it indicates the same thing, and it isn't -- it isn't quite true, I don't think.

A Winnipeg doctor -- I'm quoting from the Free Press -- I think this was probably quoted Friday night, I don't know, I wasn't here, but Free Press, January 21st, 1963, "A Winnipeg doctor who says he is speaking on behalf of a large number of his colleagues, Friday accused the present government of selling compulsory hospital insurance under false pretenses." Well I wouldn't go quite that far, but I do say that there is a long story here. I do say that he's partly right on that -- maybe a little exaggerated. He also points out, and I think my honourable friend for St. Boniface did the same thing, there there is a drastic shortage of acute hospital beds. Everybody seems to be saying that: "1,700 can't get into the hospital; hospitals bursting at the seams, Tribune, February 1st, 1963. And here's an interesting one and I hope that my honourable friend will make some comment on this one. "The generalized hospital to free -- hostel, pardon me -- the General -- they mean the General hospitalized hostels to free needed beds". I'm sure my honourable friend has probably read this. They refer to a hostel type -- he calls it a "a little brother hospital" where they would provide care at a less rate of cost and thereby relieve some of these acute hospital beds for the really urgent cases.

Now, Mr. Chairman, my honourable friend the Minister of Health agrees with this. I think he does. I'll find out when I sit down. But he did agree with this in January 15th, 1962, because from the information services section, dated January 15th, 1962, an article headed, "Wider support sought for alternative care" and that's in quotations, "Johnson lists areas where assistance can be expanded". And the third paragraph, quoting -- I suppose this is what Dr. Johnson is saying, "Since hospital care became universally available there was an understandable reluctance by patients to leave the hospital and to face the costs of care in nursing homes, hostels, boarding homes and the like" said Dr. Johnson, "as well with the rising cost of drug therapy which is an ensured service to in-patients of hospitals. Doctors face pressure to admit patients to hospitals to avoid this expense". And when he goes on to outline what he thinks should be done; and I agree with him. He says: "the Federal Government does not share with the province the cost of home attendant service, home visiting nursing services, medical services, medication and physiotherapy which the province makes available to patients on Social Allowances. Dr. Johnson asked for a 50-50 cost-sharing arrangement for the further development of organized home care." Now Mr. Chairman I would like to ask my honourable friend how successful he has been in getting the Federal Government to share 50-50, as he requested here a year ago. I hope that he will be able to tell us that that is now a fact, that the Federal Government are paying more and more in this regard. (Interjection) That's right. This would be a good time, I suggest, for the Prime Minister to make an announcement that he intends to do these things.

Now, Mr. Chairman, you have heard what I have said and what the Honourable Minister has said in this regard, and I have a letter here from a doctor -- I hope you don't make me table this because there's no date on it but it's at least three years old -- I can tell you that. He's a good friend of mine and presently he's in England taking post-graduate work. I'm just going to read one paragraph of what he says: "The care of the aged becomes increasingly difficult. We do not have nursing home accommodation, nor do we have adequate hospital space for chronic and convalescent cases. MHSP should be extended to cover nursing home care and grants should encourage construction of this type of accommodation as is the case with hospital construction. I would estimate that over 50 percent of the cases in our hospital are beyond the

(Mr. Shoemaker, cont'd.) . . . age of 65." Now what this doctor -- he's saying two things, Mr. Chairman -- he's saying that it is a fact that 50 percent of the patients presently in the hospital are over the age of 65 and could be served just as well in a nursing home or some other alternative care -- he's saying that. And then he's saying that the Federal Government and -- or the Provincial Government should make grants available for alternative care facilities on the same basis as they make it for hospitals -- at least on a 50-50 basis. That's what he's saying in this letter here. I have one here from the Matron of the hospital, a date on it, July the 18th, 1959, pointing out the same thing. Now conditions haven't improved very much since that day, I suggest -- in this particular field, they haven't. In fact I think that it is impossible, and maybe my honourable friend will tell me, but I think it is impossible at the moment to get a license to build a nursing home or an alternative care home. I don't think that you could get a license if you applied for it. (interjection) Well, they're studying this thing. That's why. They're studying it. (interjection) Well, if my honourable friend has some new plans in this regard, all I'm asking is for him to let us hear about them.

Now, Mr. Chairman, I have a clipping here from the Neepawa Press, March 17th, 1959, and I'm sure my honourable friend can read it from there, from where he sits. "Growing need here" and this is in Neepawa, "for nursing home." That was on March 17th, 1959. They go on to say how badly we need a facility of this kind in Neepawa. March 20th, 1962: "Proposed quarter of a million dollar home for the aged at Neepawa". And then the whole story -- I wish I had time to tell it to you, Mr. Chairman, (interjection) unless I continued until 5:30, or stop at 5:30 and continue again because (interjection) All right, I'll do that, Mr. Chairman, just to please the members on this side of the House. I'm sure it won't please them on the other side. But (interjection) they certainly have not.

About two or three years ago a fellow died in Neepawa and left his entire estate of about \$35,000, and left a will leaving it to the Town of Neepawa for the express purpose of building a home for the aged and infirm alike "without the stigma of charity". That's an exact quote from his will. We feel the need for this type of thing in Neepawa -- I think it should be -- but with the apparent small grants that are available for it, we can't proceed with it -- it's next to impossible to proceed with it. So I wrote a letter to the -- this comes under welfare, Mr. Chairman, so I suppose that you could stop me if you wanted to -- but it's part of the story. So I wrote a letter to the Deputy Minister of Public Welfare just outlining the conditions of the will and so on and so forth. I received a letter from my honourable friend the Deputy Minister of Welfare because he has been of great assistance to me in the past, and I guess I should read it: "Thank you for your letter" because to get the whole story you've got (interjection) yes, "Thank you for your letter of January 8th, 1963, and the information it contained on the \$30,000 bequest which the Neepawa Council intends to use in support of the construction of an Old Folks Home" -- well that is a little misleading there because it was more of a nursing home. "This type of home you mention raises a matter that is at present under active consideration by the New Care Services Offices for the Aged and Infirm. I believe it would be an advantage to all concerned if an informal meeting could be arranged to discuss the matter. It seems desirable that such a meeting should include yourself, the Neepawa Town Council and a representative of the Osborne Home Board who have expressed interest in this subject. We would send the senior officials of the Care Services Offices. I would be happy to arrange for them to attend such a meeting should you so request," -- as I said before, they are very co-operative -- "I believe I should tell you at this time that there is no legislative grant support set out for the nursing home type of facility." There wasn't in January; there may be now. I hope there is. "However, under the Elderly Persons Housing Act, a copy of which I'm enclosing, along with our booklet on hostels and information to sponsors, there is provision for support of facilities which are required "in the main" to be residential. On the subject of borrowing funds from the Central Mortgage and Housing Corporation, I know that at present such loans apply only to facilities set out under the Elderly Persons Housing Act. Here too, there are the considerations that although the corporation will extend a mortgage on housing units alone at any time, it will only consider lending money on the hostel when the project includes a number of housing units and then the amount of the hostel loan will be limited to a percentage of the hostel cost equal to the number of housing units built. This is to say that if the project was made up of 15 housing units and a 30-bed hostel, then Central Mortgage and Housing

(Mr. Shoemaker, cont'd.) . . . Corporation would consider extending a mortgage on the hostel portion of up to 15/30th -- fifteen over thirty -- this housing unit would receive full mortgage support. Your understanding that the per diem rate set to cover the cost of care in the home would include sufficient to pay the daily maintenance and redeem the indebtedness is in the main correct. Assuring you of our department's interest and co-operation. Yours very truly, Deputy Minister of Welfare." Now -- (Interjection) that was January 11th, 1963 -- not very long ago, Mr. Chairman -- and I hope that that has been changed.

I know that my honourable friend has gone a long way towards building elderly persons' housing accommodation -- they've gone a long way in this regard. But I suggest that we have not gone far enough in the field of alternative care, and I suggest that if the grants that are presently made available for elderly persons' housing, if that's all that we can expect towards the construction of nursing care, or alternative care, it will not be enough. It will not be enough. Just this afternoon we received the summary of hospital construction projects as at December 31st, 1962, and it lists the construction -- well what was completed last -- from '58 to '62 and the proposed projects -- and if I read it and interpret it correctly, it seems to me that the cost of building, the cost of building a hospital, that is the cost per bed, is now \$20,000. I would like to ask my honourable friend if I am correct in my assumption here. On schedule (1) of the sheet that was laid on our desk a little earlier today, the first one, they're listed alphabetically, is Arborg: seven additional beds costing \$138,000, and if that isn't pretty close to \$20,000-- a bed, then I don't know how to figure. Near the bottom there's a 222 bed hospital for a total of nearly \$5 million and to me that works out at \$20,000 a bed, too. And certainly you cannot afford -- no community can afford to build a home for alternative care if the only grant that's forthcoming is the one that is presently forthcoming under Elderly Persons Housing of say -- what is it? -- Twelve fifty a bed under the Elderly Persons Housing, or something of that nature, I believe.

MR. CHAIRMAN: I call it 5:30 and leave the Chair until 8 o'clock.

TRANSLATION OF MR. JEANNOTTE'S SPEECH -- Friday, March 22nd, 1963 (Page 563)

MR. J. JEANNOTTE (Rupert's Land): Maintenant Madame la Présidente j'aimerais dire quelques mots au sujet de l'enseignement du français au Manitoba. Le sujet Madame n'est pas nouveau car voilà déjà longtemps que nous en parlons ici et là et même sur le plancher de cette Chambre. Comme vous voyez Madame maintenant nous faisons du progrès. Nous avons toujours l'espérance et je crois que nous approchons toujours vers le but. J'aimerais en ce moment citer les paroles de Monsieur Jean Desy, ancien Ambassadeur du Canada en France qui disait alors "Dans notre pays deux groupes linguistiques s'affrontent depuis deux siècles. Une connaissance plus répandue des deux langues officielles serait sinon le principal du moins l'un des moyens le plus efficace de rapprochement entre des populations destinées à vivre côte à côte". Si notre pays devenait vraiment bilingue en plus d'en tirer pour lui-même des grands avantages directs il donnerait au monde un salutaire exemple de bonne volonté et de compréhension mutuelle. J'aimerais aussi en ce moment tout particulier féliciter mon ami, l'honorable député de St-Boniface pour ses belles paroles et de la manière dont il nous a présenté ce sujet.

Translation: Now, Madam Speaker, I would like to say a few words on the subject of the teaching of French in Manitoba. The subject, Madam, is not a new one as it has been discussed here and there and even on the floor of this House now for a long time. As you can see, Madam, we are now making progress. We always have hope and I believe that we are nearing our goal. I would like at this time to quote Mr. Jean Desy, who was at one time Ambassador of Canada to France. At that time he said: "In our country, two linguist groups have faced each other for two centuries. A wider knowledge of the two official languages would be, if not the principal way, the most effective way of bringing together two populations destined to live side by side". If our country became really bilingual, besides acquiring for itself direct and great advantages, it would give to the world a beneficial example of good-will and mutual understanding. I would also like at this time to congratulate my friend the Honourable Member for St. Boniface for his kind words and for the manner in which he has presented this subject.