

THE LEGISLATIVE ASSEMBLY OF MANITOBA
10:00 o'clock, Tuesday, June 3, 1975

Opening Prayer by Mr. Speaker.

MR. SPEAKER: Presenting Petitions; Reading and Receiving Petitions; Presenting Reports by Standing and Special Committees; Ministerial Statements and Tabling of Reports; Notices of Motion; Introduction of Bills; Questions; Orders of the Day. The Honourable House Leader.

ORDERS OF THE DAY - GOVERNMENT BILLS

HON. SIDNEY GREEN, Q. C. (Minister of Mines, Resources and Environmental Management) (Inkster): Yes, Mr. Speaker, would you proceed with the adjourned debates on second readings in the order in which they appear on the Order Paper.

BILL NO. 26 - THE LIQUOR CONTROL ACT

MR. SPEAKER: Thank you. Adjourned Bill No. 26. The Honourable Member for Fort Garry.

MR. L. R. (BUD) SHERMAN (Fort Garry): Mr. Speaker, with respect to Bill 26, there are just one or two comments that I would like to make, and they derive in substantial part from the debate that has gone on on the legislation up to this point and from the comments of the Member for St. Johns yesterday with respect to the drinking age. It's the drinking age and the determination of the drinking age that is of primary concern to me in consideration of any legislation having to do with the Liquor Control Act itself. I feel that when we're opening up the Act to amendments of this kind, we should also be opening it up, sir, to a reassessment and a re-examination of its effect and its impact on society and its acceptability with respect to the objectives that all Manitobans have for not only the values of our society but for the safety and protection of our society.

The Member for St. Johns, in the course of his remarks yesterday during which he was responding to and commenting on suggestions emanating from this side earlier, said that he found that the lowering of the drinking age to 18 had, thus far at least, been acceptable to him. At least I believe that is what he said. That's the inference I drew from his remarks, that he was not dismayed by the overall effects that that age reduction may have had. I gathered that he said that he hadn't seen that any of the dire predictions that had accompanied the decision of a few years ago to lower the drinking age to 18, had in fact been realized or come true. I wish to suggest at this juncture, sir, and here I'm speaking not for my caucus, necessarily, but for myself, that we may be fast approaching the time when a re-examination and a re-consideration of the drinking age at the level at which it's currently pegged, is due.

The Point made by the Member for St. Johns and others that maturity is not a definitive age level, or cannot be determined definitively by selecting an age level, is certainly a valid and a well-taken point. The problem, however, is that the lowering of an age of activity, such as the drinking age, brings with it opportunities for abuse of that legislation at earlier ages than those laid down in the law. For example, when the drinking age was 21 there certainly were many members of our society who participated in drinking at 17, 18 and 19, and probably all of us in this House who have ever indulged in alcohol at all were drinking at that age. The argument that was raised against the lowering of the drinking age at the time this House took the step to lower it, was that in lowering it to the age of 18 you are effectively lowering it to the age of 16 or 17, and I think that the evidence points to that conclusion, now that we have been operating at this age level for some time.

The carnage on our streets and our highways through traffic accidents and death attributable to drinking, and particularly attributable to under-age drinking, should be a situation and a problem of concern to all of us, and I suggest to the Member for St. Johns and others that all of us should be taking a look at the evidence, statistically, of the kinds of tragedies that are resulting from mixing alcohol and automobiles and immaturity. It's true that many young persons of 18 are entirely mature. It's true, as the Member for St. Johns has suggested, that many persons of 30 and 40 are not mature, but you can't take the argument that some people are not mature at 30 and use that to work to the disadvantage of the rest of the 25-year-olds. The logical kind of conclusion to base one's thinking on in these areas, Mr. Speaker, is that with the age in process, hopefully in most cases some maturing does come. And, of course,

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(MR. SHERMAN cont'd) not all persons of 30 are going to be mature, but there's a better chance that people are mature at 30 than at the age of 15. One can conclude fairly surely, I would suggest, that young people, people in our society, are not likely to be mature at the age of 14, 15 and 16. Hopefully, most of them will be mature at the age of 30. So that to use the argument that maturity cannot be pegged to a particular age as an excuse for introducing and following a lower drinking age is, I think, a specious argument, sir, and is a dis-service to the young people in our society.

The problem of difficulty in the area of traffic particularly, related to under-age drinking, is not unique to Manitoba, it's not unique to this jurisdiction by any means. As all members of this House are no doubt aware, jurisdictions across the length and breadth of North America are wrestling today with this problem, and some states in the United States have legislation introduced before them calling for re-examination of the lower drinking age that they earlier introduced. It's either, I believe, the State of Maryland or the State of New Jersey that at this present time is considering legislation that would restore the former drinking age of 21. In that state, the drinking age now is 18, such as it is here in Manitoba.

The legislation before the House proposes that it be raised to 19, 20 or perhaps even 21, and there is nothing in that kind of measure that implies that persons of 18 are not capable of being mature. What it implies and suggests very clearly is that because of the age being fixed at 18, many immature persons under the age of 18 are able to do damage to themselves and others through access to alcohol. The persons engaged in the management and operation of licensed premises are, to a substantial degree, to be criticized or faulted for this condition, I think. It seems to me there is vast room for improvement in the policing of these institutions and in the enforcement, the strict enforcement of the age limit, so that those under age cannot have access to alcohol and cannot thus do themselves and others damage. But it's an extremely difficult job to enforce that kind of measure unless the society moves to formalized identification cards and formalized I. D. procedures which, for many of us, smack of authoritarianism and control which we would like to avoid. I know that waiters, waitresses, proprietors of licensed premises, live daily with the difficulties that develop when they try to turn certain customers or patrons away on the grounds that they think those customers or patrons are under age. There is ample evidence available to any member of this Legislature who wishes to go and talk to persons engaged in the hotel and beverage service and food service industry, that under-age drinkers who are inclined to be aggressive and ambitious in pursuit of their drinking activities, can cause grave difficulties for waitresses in particular, and for waiters and for proprietors of licensed premises, and rather than get into the difficulties that develop when a hostile or belligerent juvenile does demand service in their premises, many of these persons, particularly the waitresses and waiters, take the line of least resistance and serve that customer or patron.

This, of course, happens relatively at any age regardless of where the legal drinking age is fixed, but it moves up in the scale as the legal drinking age moves up in the scale, sir. And where you get violations of persons aged 19 and 20 drinking when the legal drinking age is 21, you get, under our conditions, violations which see persons of 16 and 17 and perhaps many even younger, drinking because the legal drinking age is 18. This is where the difficulty for those young people, for their parents and for society generally comes in when you lower a drinking age as we did in this House a few years ago.

The Member for St. Johns in his comments yesterday also pointed to Bill 24 and the fact that that legislation legalizes the participation and the membership of persons under 18 years of age on the University of Manitoba Students Union Corporation Board. I think that the member stretches a point when he tries to equate the two arguments, sir. He suggests that because we pass legislation in this House saying you don't have to be 18 to be a full-scale member of the University of Manitoba Students Union Incorporated, that we have somehow established a precedent here that recognizes that 18 is no magical age in particular that endows persons with the capabilities of meeting all the responsibilities of citizenship. But I don't think you can equate that argument with the kinds of arguments that we're responsibly charged with considering when we're looking at the Liquor Control Act, because the persons to whom the Member for St. Johns is referring with respect to the University of Manitoba Students Union are persons who are paying fees to go to the University of Manitoba, and who are automatically, under the legislation, members of that student body and many of whom are in university at age

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(MR. SHERMAN cont'd) 16 or 17 due to academic ability and who, because of the fact that they're paying fees at the university, certainly have a right to exercise a voice in the affairs of that student body, formally or informally. To jump from that legalized condition to the whole aspect of maturity and responsibility in the area, for example, of the Liquor Control Act, I suggest is a jump that cannot logically be made, sir. The two conditions, I suggest, cannot be equated in any way.

I would hope that in the course of the next year that all members of this Legislature would be concerned with the state, condition and extent of under-age drinking, and the carnage and damage that results from it, and that we can look fairly and objectively in succeeding Sessions at the drinking age as it stands at the present time, and at the advisability of retaining it or revising it.

I believe the experiment has been worthwhile in going to a drinking age of 18. I'm not so sure that those who've had juvenile sons and daughters killed in automobile accidents resulting from abuse of the law would agree that the experiment was worthwhile, but I think that on balance it has been worthwhile because we're living in an environment of different values, different principles, from those that obtained 20 years ago, and certainly there is some validity to attempting to make our drinking laws conform more closely with those that prevail in other parts of the western world.

But I don't think because we've undertaken the experiment that it necessarily provides us with the definitive answer to the question, Mr. Speaker, or that it necessarily locks us into a condition that can never be changed. I think that now that we have lived with this reduced drinking age for a few years, we have time and we have the responsibility to stand back and assess what the results and the impact of that lowered drinking age have been. And if we find that it is leading to serious abuses, producing tragedies and damage at the teen-age level, then I think we have a responsibility in ensuing Sessions to re-examine that step and to consider seriously and responsibly whether the drinking age in this province should not be raised. One more year might make a tremendous difference. I don't suggest that, should we decide to raise it, that we go back to age 21. I think young people today are more mature than they were 20 years ago and that there is no validity probably to going back to something like the age of 21. But one year in the late teens can make a tremendous difference in the ability of young people to handle themselves and to handle their responsibilities to society generally. The possibility of fixing the age at 19, such as is the case, I believe, in British Columbia and some other jurisdictions in North America, the possibility of an age at that level rather than 18 might provide us with a situation that spares the tragedies that seem to be tearing our teen-age society right now with the legal drinking age that we have.

I think that what we need to look at the thing objectively and dispassionately and responsibly is statistical evidence, and I don't pretend to have that in front of me. I speak from particular conditions, particular situations and particular tragedies that I've been exposed to, either through my constituents or through the news media, and I'm sure that every member of this House has a catalogue of similar situations and similar problems and tragedies to which he has been exposed in the last few years. And I think that on the basis of that kind of situation we should, as responsible legislators, charge ourselves with seeking out the facts and the statistical evidence so we can re-examine the question objectively and knowledgeably. Hearsay opinions, whether it's the opinion of the Member for St. Johns or is my opinion, or the opinion of any other member in this House, is not good enough on this argument. What we want is a statistical comparison and some documented evidence of what is happening to society, particularly our youthful society, with the age where it now stands. If there is no appreciable, measurable, demonstrable damage, then I go along with the Member for St. Johns. If there is demonstrable damage, then I think during the lifetime of this Legislature we have a responsibility to take a look at what we did in lowering the drinking age, and to re-examine it and to ask ourselves whether we should not raise it once again.

MR. SPEAKER: The Honourable Minister for Corrections.

HON. J. R. (BUD) BOYCE (Minister for Corrections and Rehabilitation) (Winnipeg Centre): Mr. Speaker, briefly, before we send this bill to committee, I'd just like to raise two points that have been referred to. One is the age and the other is the cost. Briefly, Mr. Speaker, if I thought the Member for Fort Garry's point would move society towards a solution of the problem, then I would support it. But he asks, or rather he alludes to statistics that he

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(MR. BOYCE cont'd) . . . hasn't got access to. I would be prepared to make available to any member of the House any statistics that they want to look at in this regard. There are tons of them.

And one of the problems in this area, as in many areas, is that people forget the differences between the words 'hypothesis', 'theory' and 'fact'. Much of the information that is floating around is in the area of the hypothetical, very little of it is in the area of theory, which is - perhaps a better way to put the words, would be that a 'hypothesis' is just an educated guess; and a 'theory' is the way it appears to be; and a 'fact' is that which we say is the ultimate in human knowledge is, that's the way it is, within the terms of our limitations. There's very little in the area of fact relative to this whole problem of the insistence of society to have access to alcohol. But one thing that does seem to permeate all the literature, is that age really is irrelevant; that the problems occur at the age of 12, for example. We have people in the Province of Manitoba who are alcoholics at the age of 12.

The one thing that does appear - as I started to mention - was in a casual relationship, ambivalence is the one that keeps cropping up, the ambivalence of society, ambivalence of parents. When you say that people should be limited to having legal access to alcohol at the age 18, in many instances the people who become involved with the services provided by the various agencies, we find that where they get this alcohol is at home. They dilute vodka - I don't know what the parents drink by the end of the week when their vodka bottles are becoming mostly water. But most of the alcohol that is obtained by the people under 18 - and I'm thinking more or less the 12, 13, 14, 15 year olds - is stuff that is removed from the home. And of course having reached 51 years of age in our society, I have attended many parties, and I would suggest on many occasions at these parties the inventory is not too closely checked and some of the younger people are availing themselves of this fact.

The cost. People were saying something earlier about the revenue which is generated through the taxation of the sale of alcohol. The best, which is not too good information that we have available, are figures that were supplies to us by the Minister of Health at the federal level, the Honourable Marc Lalonde, and it appears that in Canadian scenes, it cost us \$1.1 billion which, if we take that on Manitoba terms, would probably cost us about 100 millions of dollars in related cost to the sale of alcohol. I mean, such things as people that are in bed in hospital, people that cause accidents - and really we have no idea of what the final line is in the use of alcohol within our society, such as something as obtuse as rash judgment of our legislators or anything else. The fact that alcohol has been with mankind for some time, and will continue to be with mankind, is the position that I have to deal with. And once again - I've said it before, and I will say it again - the Chairman of the Liquor Control Commission is in my judgment trying to move Manitobans to an attitude of responsibility as best he can. This is the most difficult task that he has undertaken. But with these brief words, Mr. Chairman, I would suggest we send it to Committee.

MR. SPEAKER: The Honourable Member for Roblin.

MR. J. WALLY MCKENZIE (Roblin): Well, Mr. Speaker, I shall be very brief as we deal with this bill, which expands the outlets for wine retail stores and changes the regulations for the price setting of beer and that. The point, though, that I want to raise as we move this bill along, is that I feel that the time is past due in the province for the members of this House and the public to sit down and take a look at the past 10-15 years record of the sale of alcohol in our province, and I think the information of the Honourable Minister that just spoke previously to me substantiates my argument, when he said that a lot of the information that's floating around today is hypothetical.

Well, if that's the kind of information that he has in his office, then I think we better get busy real quick and see where we're going, because the information and the statistics and the facts that I see before my eyes are not hypothetical - they're real, and they're serious. Because the government of this province have a monopoly and they have complete control and the authority to regulate the alcohol use, alcohol consumption, etc., etc. And the fact that those figures are soaring and increasing year after year is not hypothetical. That's a fact and it's real. And I think, due to the way of life that whatever we are, or the sentiments of the Honourable Member for Fort Garry, there certainly is increased unrest today amongst the people of this province about the increased consumption of alcohol; where, how far are we going; are we going to be able to deal with this type of a social problem as it continues to be before our

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(MR. McKENZIE cont'd) . . . eyes every day; the increased concern of many people on the streets today; in some cases interruption of business, the business sector, which is caused by alcohol; the increased anxiety in the family homes of our province.

I think, Mr. Speaker, that before we pass this bill along, the Honourable Minister would surely tell us when are we going to have a complete review of the bill, the Act, the operations of the Liquor Commission, and should it be an all-committee, all-party committee of the House, or is the Minister prepared to appoint people to set it up, and let's go back and do something similar to what the Bracken Commission provided, a complete and total review of the Act and its operations, the whole story of alcohol consumption and the effect it's having on our people: the licensing procedures, which it appears to me now is pretty well handled from the Cabinet room, and I think that should be reviewed; the age of majority, as the member spoke before me, and other jurisdictions now are recognizing that maybe we should take another look at that subject.

So I would hope that in his closing remarks the Honourable Minister will give us some idea if in fact he intends at all to take another look at it or set up an all-party committee of the House or he's prepared to do it himself. But I think in the sentiments that are being expressed to me by people in my constituency, the time is due and I think we should do it at the earliest possible date. Thank you, Mr. Speaker.

MR. SPEAKER: The Honourable Member for Souris-Killarney.

MR. E. McKE LLAR (Souris-Killarney): Mr. Speaker, I'd just like to say a very few words on this Bill at second reading. I must say that I agree with the Member for Roblin who just spoke, that a study needs to be taken, because I can remember so well when Mr. Bracken made the study back in the middle 50's. At that time the Liberal-Progressives were in power and in 1956 here the Act was amended with a totally new outlook in the delivery of liquor in the Province of Manitoba. Now it's 20 years ago since this study was made, and I agree with the Member for Roblin, that I think whether it's a study by the members of the Legislature or whether it's a study by an individual who could make a total review of the Act, I think it should be done. Why should it be done? It's because I think that we're going through a different age. We've amended the Act about nearly every session and the Act is completely changed from when it was first brought in in 1956, and for that reason I think that this study should be taken.

Now I think that the idea that the former government back in the 50's under Mr. Campbell, I think the idea was right, when they brought in an individual, Mr. Bracken, being a former Premier of the Province of Manitoba and a former Leader of the Progressive Conservative Party. He was an individual who had a great knowledge of the province and the people within the province, and did an excellent job providing leadership in the Liquor Act. And I can remember so well at that time the responses of the people. They thought he was going to far, but I think his review of the Act has proved worthwhile.

Now many things that are in the Act . . . Mention was made, pardon me, by the Minister of Corrections this morning about the leadership the Chairman of the Liquor Commission is giving to the Province of Manitoba. Well that might be argumentative in many cases, but I was really surprised when he wanted to get on the National Hockey League, you have an advertisement on there to tell the people not to drink, because goodness knows, I think he did more to create more drinking within the Province of Manitoba than anything. Because once you advertise, whether it's negative advertising or positive advertising, people tend to drink more. Just the mere fact that you flash an ad on, telling people not to drink, sure enough they go the fridge or grab something and they'll start to drink. This is people's habits. I know, this is what happens. So I think if you wanted to stop people drinking, no advertisement at all would be the answer to the problem. That's my opinion. So either do that or tell them they've got to drink 24 hours a day and sleep after that.

But this advertising that goes on there, flashes on at different times, I don't see that much television, but it amazes me how the government under this Chairman of the Liquor Commission could tell anybody not to drink for the type of advertisement that he puts on. Maybe I'm different. Maybe I'm different, but my theory is, don't advertise at all. Don't advertise at all. Then you've got no problems. And getting back to the profits from the Liquor Commission, I've never seen the time yet where the profits from the Liquor Commission never paid for the welfare cost in the Province of Manitoba. There's another factor. It doesn't matter whether it's \$30 million \$40 million or \$10 million. I think we made 10 million when I was first elected, but at that

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(MR. McKELLAR cont'd) . . . time the welfare costs were always over 10 million. So it's one of the facts of life that we've got to face and nobody's going to change it.

Now, Mr. Speaker, one other thing. I'd like to congratulate the Minister for bringing in an amendment here that will change the local option by-law, making it possible for the municipalities to pass a by-law and then go to the vote of the people. And I think this is long overdue. Many municipalities - and there's only 11 of them in the Province of Manitoba that haven't had a vote - many of them are these people who are always afraid to go out and get that 20 percent petition. They didn't, well, like doing that. And this avoids that, and I think it's putting the onus on the municipality and this is the way it should be.

Now I know I've created some stir in the Province of Manitoba by these 11 municipalities, one or two in particular. But I phoned up two years ago to the Liquor Commission and I said, "Do you never check to see whether a municipality is wet or dry when you issue a banquet permit?" "No, we never check." That's what they told me. So I said, "Are you not going to check from today on?" "Well, we don't know. We don't know." So I left them two years, and I was getting quite a few letters, and from my own area, that they didn't like it. So I thought that this was a good time to bring it up. Right between elections. Right between elections. It's pretty awkward when a member of the Legislature is supposed to uphold the law and he goes to a wedding dance or something where there's a banquet permit in a dry municipality. So I'm glad the Minister is looking after it.

Now I imagine it's going to be a dry, hot summer from now until October, because they can't have a vote till October. But that's not really hurting myself for it's only four months away, and if there's any weddings in-between, I guess they'll have to go to a town where it's already wet. So that'll look after the problems anyway. But I want to congratulate the Minister on providing this amendment to the Act.

Now I don't know that I have anything else to say. I don't think I have, because I'm going to speak on another bill this morning, and there's no sense in me standing here belabouring. But there's just one thing, and I wonder if the Liquor Commission's studied it. During the debate on Autopac in Room 254, I asked the Chairman, or the General Manager of Autopac, what ratio of accidents are involved in boys under 24, 16 to 24, and do you realize that 4.2 out of every 10 drivers are involved in an accident every year? And then the girls under 24, from 16 to 24, it's only 1.1. Women over 24, 1.1 out of every 10. And the men 24 or over, it's 2.2.

Now I don't know how many accidents are involved that people, the drivers, had been drinking, but I wonder if the Attorney-General could relate to this Legislature here this morning just what percentage of accidents are caused by drinking. I would imagine it would be close to 40 percent but I don't really know. But it really shook me when I was told the ratio of accidents, especially boys under 24, that 4.2 out of every 10 drivers are involved in an accident every year.

Mr. Speaker, that's about all I have to say in this Act and we'll be looking forward to when this bill goes to committee.

MR. SPEAKER: The Honourable Member for Morris.

MR. WARNER H. JORGENSEN (Morris): Mr. Speaker, I feel compelled to rise on this occasion in light of the remarks that have been made by two of my colleagues, from Souris-Killarney and from Roblin. I feel that they have perhaps missed the point that I was attempting to make when I introduced the resolution calling for a review of the Liquor Act. What I was suggesting at that time was not that the Act itself needed that much changing, but that the administration of the Act required some investigation.

What troubles me most about the present situation is the apparent attempt on the part of the Liquor Control Commission to place the burden of responsibility for the increase in alcoholism in this province on the shoulders of the licensed premises. In almost every advertisement that appears and in almost every statement that is made by the Liquor Control Commission, the impression is created that the problem rests with those people who own the licensed premises and are responsible for insuring that the laws are upheld. And one simply has to go through the annual report to get some idea of just what I mean.

In Schedule 2, the Suspension of Licenses, one sees that there are a large number of hotels that have had their licence suspended for various reasons, and yet oddly enough in Leaf Rapids, never has there been any suspension. You know, one would be drawn to the conclusion then in Leaf Rapids that's the only hotel in this province that is not guilty of any violations of

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(MR. JORGÉNSON cont'd) . . . the Act, until one recognizes and realizes that's a government hotel. And all one has to do is to talk to the law enforcement officers up there and he knows damn well that there are as many infractions of the Act in Leaf Rapids as there are in any other part of the province. It's the same thing in the government liquor stores. They try to create the impression that drunkenness and alcoholism is the sole responsibility of the licensed outlet, when only 12 percent of the entire volume of spirits that is sold is sold on those premises. The rest is sold through the government stores. Is the government trying to tell me that there's any difference between a drunk coming into a liquor store, buying a bottle than one going into a licensed premise? Yet this is the impression that's being created. The same thing with wine. Only 16 percent of the total volume of wine that is sold in this province is sold in the licenced premises.

I wish that the Liquor Control Commission would get off this kick of trying to slough off the blame for the increase in alcoholism in this country on the backs of the licensed premise owners. They've changed the Act and they must accept that responsibility. And if there are weaknesses in that Act, and if we have made mistakes in changing, let's examine them and let's correct them. But one gets some idea of how reluctant this government is to admit that they have never made a mistake when we hear the comments from the Member for St. Johns. Time after time he's been rising in this House in the last few days. He is the fireman of the government, attempting to cover up all the mistakes made and make excuses for all the mistakes that they've made.

His comparison yesterday of a bill that was passed concerning the Students' Union with lowering the age of drinking is one of the most ludicrous examples of stupidity that I've ever seen. Can one honestly compare a responsibility that you're giving under 18 students in the University of Manitoba to the lowering of the drinking age? Is there any valid comparison here? Yet the Member for St. Johns would have us believe that if you do one, that it's quite in order to do the other. As if drinking and operating a student union were comparable forms of endeavour. But that's the measure of the kind of arguments that have been put forth in this House time after time by the Member for St. Johns. Now one understands the reason why the former Member for Thompson used to make remarks about him and his activities within the Cabinet. We're now beginning to recognize the kind of influence that he had.

Sir, I will echo the call for a re-examination of the operations of this Act, because I honestly believe that some of the things that are going on within the administration of the Liquor Control Act need to be revealed, need to be publicized and need to be examined. And I wish the government wouldn't be so sensitive about the fact that during six years in office that they've made a number of mistakes and that they would honestly examine those mistakes with a view to correcting them instead of constantly coming into this Chamber and attempting to cover them up.

In dealing with one section of the Act, Mr. Chairman, that's the extension of retail outlets for wine distributors in this province, I want to say that I don't think one can have any serious quarrel with the separation of wine outlet stores with those stores that sell spirits. But as was pointed out by my colleague, the Member for Birtle-Russell, there seems to be some inconsistency in the government's approach in this whole question since they just last year - not the government's approach but the Liquor Control Commission's approach and I presume that the government must accept the responsibility for that, for the removal of certain brands of wine from certain areas of this province - it seems to me that there is an inconsistency here that they should examine.

On the whole, the granting of retail licences for the selling of wine, in my view, is a step that I do not criticize, but I wonder why it is only going to be granted to those manufacturers of wine who are licensed to manufacture in this province. Does that mean that only their particular product is going to be available for sale in those wine stores, or will they be able to stock all of the brands of wine that are authorized to be sold in this province? I would hope that the Minister when he closes debate on Second Reading of this bill would answer that question. And further, if these outlets are going to be placed in areas other than just in the City of Winnipeg, is that going to be left to the discretion of the manufacturer, or is the Liquor Control Commission going to compel them, as they seem to be compelling licensed premises all over the province, to carry all brands of all products in all quantities that are dictated by the Liquor Control Commission? Is it going to be left to the discretion of a retail outlet as to where they will locate, what brands they will carry and how the wine stores will be operated?

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(MR. JORGENSEN cont'd)

It seems to me, Mr. Speaker, that if they're going to be serving any useful purpose then the purpose should be to attempt to promote the intelligent drinking of wine, and as has been pointed out earlier in this debate, the use of wines during meals can add a great deal of enjoyment to a meal, and if that is better understood by people who consume the wine, I think that a great deal more enjoyment, a little more sensible use of that kind of a beverage will result. I would hope that when the Minister responds to the questions that have been raised on all sides of this House, that he will endeavour to answer some of the questions that have been raised and give us an idea of just how the new provisions are going to be operated so that members in going into the committee will have a better idea of just what the provisions of the bill really are.

MR. SPEAKER: The Honourable Attorney-General shall be closing debate. The Honourable Minister.

HON. HOWARD PAWLEY (Attorney-General)(Selkirk): I intend to speak but a short time here, I would prefer to leave many of the questions that were raised to be answered during the Law Amendments Committee. But I do think there are some areas that we should deal with, and that is particularly in respect to the question of wine stores and the supplying of varieties of wines in the province. I think a number of facts should be presented because they are facts; that Manitoba, of all provinces in Canada, has the widest selection of wines in their stores of any province in Canada, by far. And the progress during the past two, three years on the part of the Liquor Control Commission in broadening and enlarging the number of wines, imported wines particularly, in their stores has been just short of phenomenal. It is my understanding that there's 300 and some wines listed by the Manitoba Liquor Control Commission in Manitoba and that far outdistances any other province in Canada.

I also think that there should be some recognition of the fact that the Manitoba Liquor Control Commission has led all provinces in a policy of encouraging consumption of low alcohol content wines in contrast to consumption of high alcohol content wines. This has been done by first eliminating those wines from the listings, some year ago, that could only create maximum consumption in a short period of time of maximum alcohol content at the lowest price, and at the same time developing a pricing structure that would relate the cost of the wine to the alcohol content of the wine. So that, in fact, most of the wines in the Province of Manitoba were reduced in price last year. Reduced in price. Which again is just a little short of certainly the total exception across Canada, where the commission deliberately set about to reduce the price of low alcohol content wines in the Province of Manitoba.

In respect to the specific provision before us, it only envisions the same sort of applicability as is made available to breweries in the Province of Manitoba where each domestic brewery manufacturer is entitled to a store in order to sell its products. I believe Labatt's has one store just at the corner here, a stones throw from this building. And with domestic wine manufacturers they, too, will have one store - not only to sell their own wines but also it's understood that a selection of wines will be made available representative of imported and domestic wines of other manufacturers. They will be made available in those stores as well.

I would like to just comment briefly upon the statement that the Honourable Member for Morris has made at different times, that the Liquor Control Commission and/or its Chairman is persistently and constantly attempting to impose the burden of responsibility for drinking abuse in this province upon the backs of the licensees. I think that is an unfair statement. I think all that the Commission has been attempting to do is to emphasize that there is not a low, not a mediocre, not a lackadaisical requirement on the part of licensees in this province, but is in fact a very high responsibility on the part of the licensees in this province because they have been provided with a license to sell liquor, and by the very fact that they have been presented with a license to sell liquor certainly they have a very high responsibility, not one that should be taken lightly by anyone in our society, because the laws pertaining to liquor do have to be enforced with impartiality and with strictness. If they are not, then certainly those laws can lead to - and I need not list the problems that can result from sloppy, ineffectual enforcement of liquor laws, i. e. consumption, service to intoxicated patrons. Who for a moment would not want strict enforcement of those laws in the Province of Manitoba? The service of liquor to underaged drinkers. Who would not want strict enforcement of those laws in the Province of Manitoba? And if anyone breaches those laws, who would want lackadaisical, sloppy enforcement of those laws in the Province of Manitoba? I'm surprised, Mr. Speaker, that

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(MR. PAWLEY cont'd) . . . there are members who by the very implication of their remarks would seem to be recommending a lower standard, a light acknowledgement of the very heavy responsibility that is presented to licensees in this province in order to enforce the very heavy trust that is imposed upon them by society when society sees fit to entrust those licensees with the sale of liquor in this province.

I just wonder whether or not honourable members have defined very carefully in their own minds what the end result could be of lackadaisical enforcement of existing liquor laws in this province. Because generally we hear comments about the extreme abuse of liquor laws in this province and the economic and social effects that can result from those liquor laws. And I want to hasten to say that it's not just licensees that have a responsibility. I think liquor abuse, excessive consumption, is a result of many factors and certainly society as a whole has to accept responsibility. Certainly many of the problems that relate to liquor abuse, broken homes, accidents on the highways, injuries, death and economic loss are the result of economic factors in society. There is no question that - you know I was . . . and I think this is somewhat relevant, Mr. Speaker, - and the Honourable Member for Birtle-Russell also heard these comments a little over a week ago by Professor Belan at the university - they dealt with the entire question of crime in Canadian society. And if you relate the numbers of inmates in our institutions from 1942 to the present time and co-ordinate those number of inmates to economic indicators, that you will find that during periods of low unemployment the number of inmates drop in our institutions and in period of high unemployment the number of inmates rise.

Well, Mr. Speaker, I think in many ways we will find that where there are economic problems, where there are problems of poverty, where there are problems of unemployment and distress of the soul, then at the same time problems of alcohol arise within our society. I think that that is such an accepted fact that it is hardly one that would be worthy of challenge.

MR. SPEAKER: The Honourable Member for Birtle-Russell.

MR. HARRY E. GRAHAM (Birtle-Russell): Will the Minister permit a question?

MR. PAWLEY: Yes.

MR. GRAHAM: Since he raised the issue of the Crime Prevention Seminar, does he agree with the Moderator that capital punishment should be reinstated?

MR. PAWLEY: Mr. Speaker, I see no relevancy to the issue of capital punishment in this debate. My position has always been very clear insofar as capital punishment, to the extent that capital punishment serves no useful purpose as a deterrent in our society. And I think all the records of history disclose that very clearly.

So, Mr. Speaker, although members opposite may take this matter very lightly and very frivolously, this is a matter I think of extreme concern to each and everyone of us in society. It is not one that we want to unload onto the licensees of this province, although I say they have a very heavy responsibility and that heavy responsibility should not be minimized by any of us. Certainly those of us in government have an extremely heavy responsibility on our shoulders and certainly Opposition has a heavy responsibility, all of us have a total responsibility in the entire area of liquor control. And it certainly would be, I'm sure, the last thought on the mind of the Chairman of the Liquor Control Commission to make anyone a scapegoat, anyone a scapegoat in the Province of Manitoba for problems relating to liquor, because it is a matter that has been with us so long that it can only be dealt with by a united effort on the part of all groups in our community that are concerned about this total area.

QUESTION put, MOTION carried.

MR. SPEAKER: Bill No. 41. The Honourable Member for Pembina.

MR. HENDERSON: Could I have it stand, Mr. Speaker.

MR. SPEAKER: Bill No. 43. The Honourable Member for Brandon West.

MR. EDWARD MCGILL (Brandon West): Mr. Speaker, the Honourable Member for Gladstone adjourned this debate on my behalf. I'm prepared to speak now.

MR. SPEAKER: Very well. And, it will then carry on to someone else, is that correct?

MR. MCGILL: Correct.

MR. SPEAKER: Thank you. The Honourable Member for Brandon West.

BILL NO. 43 - AN ACT TO AMEND THE HEALTH SERVICE INSURANCE ACT

MR. MCGILL: Mr. Chairman, Bill No. 43 is an Act to amend The Health Service Insurance Act and we're concerned at this stage with the principle of the Bill. If there is a principle involved here, Mr. Speaker, it's by inference in that part of the bill which deals with the restriction on the sale of real property.

Mr. Speaker, I believe that this part of the bill does reveal a principle, or at least a policy of this administration in respect to the future of Personal Care Homes and I think that it needs to be considered very carefully in consideration of the whole thrust of this particular piece of legislation.

Mr. Speaker, just so there will be no misunderstanding on the area in which I am now concerning myself, I would like to read into the record this particular part of the bill: "No hospital or personal care home that has received payments under this Act shall sell or dispose of any real property without the consent of the Minister, and the Minister may impose conditions on the granting of any consent given for the purpose of this section."

It was during the discussion of the estimates that a question was asked of the Minister as to the future of the private proprietary care homes under his administration and I think the Minister answered fairly directly in that respect that it was his opinion that there should be no enlargement of that area within the present provision of personal care and extended care beds. And it was also I think inferred by his remarks - although I do not have them as he made them precisely, the Hansard not yet being available I think of those debates - I think it was pretty clear that there would be in effect a freeze on the number of beds provided by the private sector for personal care or extended care.

Well there have been difficulties in this area certainly and they are similar to those experienced by other public or semi-public institutions who receive the majority of their funding from provincial sources. We have been suffering through a year or two of rather extreme inflationary pressures and these become very apparent where budgets are established a year in advance and where costs rise in the interim. So that institutions, like the universities and like personal care homes who face rapidly rising costs, are having extreme difficulty in meeting those additional costs with budgets that do not have the flexibility to provide this ability to meet claims for increased wages and for other costs of operating. So there is an extreme pressure on the personal care homes in this area as there has been in other institutions funded by the Provincial Government.

There is a feeling then that the only way that a personal care home can meet increased costs is to somehow cut or pare their expenditures and then of course there will be an assertion that somehow the quality of the care is being reduced. Mr. Speaker, no doubt these are the reasons why this government is intent at the present time on at least freezing the extent of the involvement of the private sector in the provision of personal care and extended care beds. This did not become an issue until of course the Medicare coverage was extended, the health coverage was extended to include this kind of health service.

So, Mr. Speaker, certainly the intent of this Bill seems to be that the government will prohibit any further entry, or exit in fact, of the private sector in this field. Certainly it will tend to eliminate any other entry into the field, and this particular provision of the bill will probably eliminate any intended purchaser in the field. So that in effect it is in a manner putting those proprietary care homes that have been funded entirely in a private way in a very difficult financial position. Immediately this becomes law their opportunities to extricate themselves from difficult financial situations arising from fixed budgets and rising costs are going to be extremely limited.

I think it should be borne in mind, Mr. Speaker, that the proprietary care homes, that is the private sector operated homes, were given no per capita bed grants in the first instance, there was no incentives involved to assist them in building these facilities. There were no long-term low interest loans provided, there were no exemptions from building or sales taxes or any reduction in municipal taxes. These homes in fact paid their full way in respect to all of the taxation, municipally and provincially, and federally. So there is quite a difference in the effect which this bill will have upon the approximately 50 percent of the total personal care and extended home beds that are now operated by the private sector. And of those approximately 2,400 beds about 1,600 I am told have been built since 1964, so they're in the category of relatively new facilities, and it could be assumed that bank loans apply and that bank financing is involved and still is and there are mortgages of course that are in effect and have to be discharge

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(MR. MCGILL cont'd) . . . by payments annually by the operators.

Up to this time the owner of such a home has had the right to offer it for sale and attempt, if he finds that his operation is becoming difficult for him to continue to provide service, he has had the opportunity to seek a buyer and to obtain the money to dispose of the debts which he acquired in building the facility in the first place. But now, Mr. Speaker, if the government succeeds in this present bill and freezes the possibility of any sale or disposal of the facilities then the operator is really in a very tight position indeed. He relies entirely, or almost entirely on his provincial government for his major sources of income and he is more or less, and will be locked in very definitely by the intent of this bill.

Mr. Speaker, I think what needs to be considered now is the effect of this bill upon this particular segment of the personal care and extended home bed facilities. About half of those I am told are operated by semi-public or other levels of government or philanthropic institutions. I don't think this really is going to apply there, because there is not the likelihood of such semi-public institutions being offered for sale. They will find ways perhaps to in the long run, as hospitals will do, to meet the tight budgeting restrictions and the funding that is now applied to their operations. But what the bill really does is concentrate, not on hospitals, not on semi-public institutions or philanthropic, but directly on those nursing care homes that are owned by the private operators. I think that we should ask the government, should insist that this government give reasonable attention and care to providing relief for the personal care home operators if they are to deny them the opportunity of disposing of their assets without the consent of the Minister. This to me, Mr. Speaker, means that the government needs to be in a position to offer to reimburse, to take over these facilities. And if this is to be the policy - and I imagine that there is a considerable amount of money involved here - if all of the privately owned personal care homes, just considering the more modern ones, it might be in the neighbourhood of \$30 million to \$35 million. If the government is intending to eventually bring these into the control directly of the Department of Health and Social Development, then this should not be allowed to drag on for a period of years, because ultimately it will result in some decline and diminishment in the value of these assets. Once the government has decided to close all other avenues of sale immediately by restricting the market, they are in a sense causing some decline in the value of these assets to occur.

Mr. Speaker, the government has pretty clearly indicated its policy directions in respect to personal care facilities. It's pretty clear that no more homes will be built by the private sector. It's also pretty obvious that those private operators or proprietary operators who are now in the field are going to be limited as to the way in which their operations can be changed or terminated. I would ask the Minister to explain clearly what are the timetables involved here, what are the avenues of relief offered to the owners of personal care homes still in the field. I think they deserve a very fair and just treatment by the government. There should be some independent review board established to determine the value of these assets, and some clear indication given to the operators before too many weeks or months go by as to the intention of the government in respect to these facilities.

MR. DEPUTY SPEAKER: The Honourable Leader of the Opposition.

MR. SIDNEY SPIVAK, Q. C. (Leader of the Official Opposition)(River Heights): Mr. Speaker, I only have a few remarks to make and it will just take a few moments, just simply to add to what the Honourable Member from Brandon West has presented from our point of view. I think the way in which he presented it has been brought forward in a reasonable way to try and elicit from the government really what its position is and the difficulty we have. And this is not only in this particular piece of legislation, but in other pieces of legislation in this Session as it has in the past, is to determine what is intended and what is unintended. Sometimes we find ourselves in the position of reading into the legislation things that were unintended but nevertheless the drafting of it would provide an interpretation that would support that kind of position. And if that's the case, the government must clarify it and must, I think, assist in changing and altering the drafting. We've had that in some of the other bills and we'll be dealing with that in Law Amendments. But at this point, I say to the Minister very clearly, in terms of its overall health policy as it has evolved in the last period of time - and there has been some confusion - we think that we on this side and the people in Manitoba as well, are entitled to know what is the government's intention. And I would hope that he would answer directly the questions that have been put to him by the Member from Brandon West and that this matter then would be clarified.

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MR. DEPUTY SPEAKER: The Honourable Member for Souris-Killarney.

MR. McKELLAR: Mr. Speaker, before the Minister closes debate on Second Reading, I think I should just say a word, for two reasons. In my constituency in the Town of Killarney, there is a private nursing home operating at the present time and it will operate until the new personal care home, almost a new hospital, is opened this coming year. One of the things that's always disturbed me is that these people who devoted a lifetime in the personal care of the people of the Province of Manitoba, people who needed that type of care, are now being given a kick in the pants and told they're no longer wanted in the Province of Manitoba. The day that the new personal care home opens in Killarney, these people will be put out to pasture and told that their service is no longer required, and their investment in that particular home will be left with them to solve their own problems.

Now I don't know if that's good or bad or whether that's progress, or whether it isn't progress. But it always disturbs me when the government comes along as the big daddy in the Province of Manitoba and tells the people that the private industry is no longer wanted. And this is an actual fact. And this bill really frightens me for many reasons. And the Member for Brandon West pretty well explained my thoughts, because I have a mother who is in the Central Park Lodge in Brandon and has been there for ten years. She's 85 years of age right now and she was very ill when she went in there 10 years ago. And I must say my mother's life has been extended because of the type of care that she's been given. Now the government might come along and say, well, she could have got the same care in a public nursing home as what she got in the private nursing home. Well, I don't know whether she could have or whether she couldn't have, but the matter of the fact is this company that owns Central Park Lodge has invested a lot of money in Brandon, they've invested a lot of money in other parts of Canada and are doing an excellent job. And when they built their homes, they didn't come to the government for assistance, as the Member for Brandon West has said, they went and used their own money and their own investment money to provide a service to the people of Manitoba.

Now the government will likely say, well, they're making a profit. Well, what's wrong with a profit? What's wrong with a profit? If the government has control of this, if they take over all the personal care homes in the Province of Manitoba, it'll operate the same as Autopac—I'm sure of that — the same as Autopac. But we'll never know how much it does cost. We'll never have an accounting, because we'll never get an individual accounting to see whether each individual personal care home is operating on a profit or even operating within their budget. We'll never know from now on. Now I suppose the Minister will come along, the Acting Minister will say, well, this is partly under the control of the local board in that particular area. But after reading this bill, practically the Minister is responsible for everything. The board cannot hardly move; they can't set their rates; they can't provide anything without the approval of the Minister responsible for the Department of Health and Social Development. So the local board — their hands will be tied, completely tied, now that the 20 percent involvement by the local areas is no longer there. And I can see real problems, Mr. Speaker, real problems. Real problems in most of the communities, because they'll never know, they'll never know from day to day where they stand. And I'm really frightened, because this is another area where the government's getting total involvement, taking over another service provided by the private industry in the Province of Manitoba. I don't know what is coming next.

I'm scared of other bills here dealing with the health of the people of the Province of Manitoba in their hospitals. I'm scared of what's going to happen to the small hospitals too. And one by one, Mr. Speaker, one by one, the government keeps chipping away, chipping away at what the people in our local communities fought for and stood for and paid for. And one by one you're taking that away from them. And with a swoop of the pen, or the swoop of Royal Assent of this bill, you're taking over all the nursing homes in the Province of Manitoba.

Now I guess the Central Park Lodge could convert this. They're on Victoria Avenue opposite from the Red Oak Inn and they could convert into a hotel. That's the next best thing they could do, if you decided with a stroke of the pen they are no longer wanted in the personal care field in the Province of Manitoba. And I suppose another hotel wouldn't hurt in the City of Brandon, because from time to time they're short of hotel space. But that wasn't what it was set up to be. And there's other personal care homes operate for private companies too in Brandon. But this is the thing that frightens me. People who are willing to invest their money to provide a service, they're now being kicked in the rear end telling them that they're no longer

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(MR. McKELLAR cont'd) . . . wanted. And we, the big daddy in the Province of Manitoba can do things better and bigger for the people of Manitoba. I think you need a combination, you then have a balance, private and public. But let's not go all for one or the other.

And this is where the government are making a mistake, making the biggest mistake of their lifetime. You'll live to regret it. And why will they live to regret it, Mr. Speaker? Simply because once you get a monopoly, you've got troubles like you've never even dreamt of. And they're going to have troubles. And I hope all their dreams at night keep them awake 24 hours a day, because until that happens they'll never realize the mistake they've made. The biggest mistake of your lifetime, when you decide to take over everything in the Province of Manitoba. I don't know what they're going to take over next, Mr. Speaker, but it frightens me what's happening. And goodness knows, the people out in my area are frightened, they're frightened silly. And I tell you . . . --(Interjection)-- What did you say, Mr. . . . ?--(Interjection)-- Well they're getting pretty hostile, I tell you, they're getting pretty hostile too. I'm glad to see you backed off what your original intentions up to a point, but behind the scenes you're buying farms right and left. But you're trying to go along with the Land Use Program, which you never even thought of up until the members of our side brought it to your attention. . . brought it to your attention. I see you put it in the report.

But the Member for Radisson, he amazes me. He's got more thoughts on what's good for the people - I'll get back to you - What's good for the people of the Province of Manitoba - and I never hear him get up and speak. I never hear him get up and speak and express his logic to the people here. This is the place you're supposed to debate. This is the place you're supposed to tell what your thoughts are. The only place he tells them is from the seat of his pants. That's the best way he can speak.

Now, Mr. Speaker, I just want to close by saying, it's about time, it's about time this government stopped taking over everything in the Province of Manitoba. There must be some logic in the minds of all the backbenchers if the Cabinet don't have any logic. There must be. Surely some of them look at the private field and say there must be some good about it. But every day we get another bill - let's wipe out the private industry in this certain field and then we'll control everything from the cradle to the grave. And you're doing it, between 48, 52 and a few more bills, from the cradle to the grave we're being controlled.

MR. SPEAKER: The Honourable Minister of Urban Affairs.

HON. SAUL A. MILLER (Minister for Urban Affairs)(Seven Oaks): Mr. Speaker, some of the members have to go to a mining bill meeting, so I agreed to adjourn the debate so they can hear my replies this afternoon. So I would move, seconded by . . .

MR. SPEAKER: Just a minute. We have a bill before the House.

MR. MILLER: I'm moving adjournment.

MR. SPEAKER: Very well.

MR. MILLER: I would move, seconded by the Minister of Corrections and Rehabilitation, that Bill 43 be adjourned.

MOTION presented and carried.

MR. SPEAKER: Bill 44 (Stand). Bill 47 (Stand). Bill 48, the Honourable Member for Morris. (Stand). Bill 52, the Honourable Member for Souris Killarney.

BILL NO. 52 - THE DENTAL HEALTH SERVICES ACT

MR. McKELLAR: Mr. Speaker, I'd like to say a very few words on this because I guess I'm as knowledgeable about dental work as anybody, having had two full plates to express myself, and sometimes they bob up and sometimes they bob down. But in my 17 years in the Legislature here, we have had some unusual expressions. And I'll never forget - I think it was about 1960 or 1961, somewhere back there - we were having a committee meeting on denturists. This has been a favourite problem that has gone on and on here. And I don't think there's anything that got tracked over any more than false teeth have in this Legislature over the years.

But I want to tell you an unusual story here. And we were in Room 200 that given day listening to brief after brief by people coming in, and this one man came in and he brought in about two sets of full plates, uppers and lowers. And he went on to say that he was in favour of the denturists, naturally. But he brought in his mother-in-law's false teeth, uppers and lowers, and he said these are made by dentists . . . she couldn't wear them, she couldn't talk, she couldn't eat. So then he had these uppers and lowers that were made by denturists, and lo and behold, she never had so much satisfaction with her false teeth in all her life. So he praised up the denturists. But I thought it was most unusual when a man would bring his mother-in-law's false teeth in to prove a point. I never saw that done before here in the Legislature, and it really amazed me. Now, I don't know whether the government are getting mixed up with mother-in-laws' false teeth in this bill, or whether the false teeth are getting mixed up, or whether they're getting mixed up with children.

A MEMBER: . . . stop mothers-in-law from talking.

MR. McKELLAR: Yes, that's right. We asked that man where his mother-in-law was that day, and he thought she was home.

I want to say a few words on Section 2. Anything that's good for the teeth I should be in favour of. But here again we get the government involved, and this is the thing that annoys me. Not the teeth, I couldn't care less, I think protecting the teeth is the answer. I wish I had my own teeth, many many times. But maybe there is a responsibility somewhere along the way, of protection of our youth. But I often wondered, if we threw all those darn soft drinks away, and a lot more things if the kids' teeth wouldn't be a lot better. I know I've got a boy, and lo and behold, he sneaks over to the store - I don't know where he gets the money - and he gets a soft drink. And that coke just eats up teeth like it eats up So no wonder we're having trouble with the children of the day, all these soft drinks that are around for them to buy. And money seems no object any more.

So we've got the government going into the business. We've got the government going to hire people - my goodness, of all the things we can't do under the regulations - further powers to the Minister, they can practically do everything. And I think the Member for Assiniboia mentioned - he just wondered how far the government are going to go into this particular field. What parts of the province are going to enter into agreements with the municipalities or school boards, where they're going to start and when they're going to finish, and what plan do they have in setting out this master plan for prevention and treatment of dental services in the Province of Manitoba.

You know, I see that they can hire practically anybody within the Civil Service Act, employ dentists and technicians and everybody along the line. Does that mean that rural Manitoba is going to get the same service as the City of Winnipeg? Because this is one of the problems we've always had mentioned by different members here, that we have problems getting dentists and retaining dentists here. And I must say we have very good dentists in Glenboro, Souris, Boissevain and Killarney, in my area. And I sure wouldn't want to vote for something that might cause them to leave their several communities. Now how is this going to blend in? This is what I'd like to know. What agreements have been worked out with the Manitoba Dental Association? Have you got an agreement at all? Have you talked to them? Or have you just told them what's going to happen? Because I would like to know before I vote on this in second reading, whether the Dental Association have ever been told where they're going to fit into this whole program? Are there going to be contract dentists in several areas, like the dentist at Killarney? Can he contract with your department and serve a useful purpose, rather than to bring a dentist in to that particular community? What service can he provide or is he going to provide? The same applies in all the other communities.

These are the things that people are asking me, because they're fighting too. That if you bring another dentist into all these communities to service all the children's teeth in the

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(MR. McKELLAR cont'd) rural - like the younger, say, up to 12 years of age - will this not affect their business and their practices? I don't really know. I'm always a little - ever since Autopac debate, I've always been a little doubtful when I see governments entering into another field. Maybe this is progress - maybe I'm of the old school, or that I always thought that people could think for themselves better than the governments do than for them. Maybe that's the reason why I'm always suspicious. But I would like to know, are the municipalities going to pay any part of this cost? Is it all going to come from the government? Are they all going to be permanent employees, or are they going to be partial employees or contract employees?

And one other thing that has always bothered me here, I see that in Exemptions and Liabilities . . . Now, I don't know whether governments have any further rights, but if a dentist, private dentist, pulls a tooth and hurts the jaw bone of a particular person and that person sues the private dentist, he's got to appear in court and defend himself for his actions. Now I see that under this particular section of the bill, there's no liability can be made against an employee of the Department of Health and Social Development under this dental service. Now why should that be? They're just as liable to commit a failure or have a bad day in the mouth of an individual, a student or, like, a young person, just the same as a private dentist. Why should they not be sued the same as a private dentist? I don't know why they should be given that protection.

Now I don't think there's much I have to say in this particular bill. But I'm looking forward to committee, where we'll make a judgment at that time and ask a lot of questions as to what's going to happen in the future with this bill.

MR. SPEAKER: The Honourable Member for Minnedosa.

MR. DAVID BLAKE (Minnedosa): Thank you, Mr. Speaker. I just wanted to say one or two words on this bill before it passes into committee. I certainly favour the concept of oral hygiene, and certainly there's a place for dental care for children in the younger years when it's important that their teeth get started in the right direction - and there are certain other areas where some assistance is probably very necessary.

I don't know whether I could support at this particular time, when we're all worrying about inflation and government spending, if I could support a full ranged dental care program. Because it's extremely costly, and the more of these programs we ask for, naturally the more we're going to be taxed. And I think that is a problem facing people today, that they're getting a little fed up with taxes, and I don't think that we can afford to increase that to any great extent to bring in these types of programs.

I wanted to comment on a remark that the Member for Assiniboia made yesterday, that in the 1969 election when he was going around, he asked every mother if she favoured free dental care for children, and there was an overwhelming 'yes' vote. And there's no doubt about it, that if you ask them if they would like free glasses and what not for their children, naturally they would all like it. A remark from the Member for Pembina took my fancy. He says, they'll take cash too if you offer it to them. And this is so very true - that naturally they're in favour of these programs, you can't knock it. But they have to just look at the whole picture and realize that someone has to pay for it. And I share the concern that has been expressed by many of my colleagues on the lack of supervision, and hopefully there won't be a lack of supervision on the trained technicians being turned out and allowed to do just a little more than the original preparatory work that is done by a dental hygienist for the dentist, and then maybe some cleaning up work with the patient afterwards. I can certainly see where that is going to reduce the cost of some of our dental work.

I know there are other areas. I've been most fortunate with my family. I have five children and they all have exceptionally good teeth so far, although they have the same problems that my colleague from Souris-Killarney has, they seem to find funds for pop very regularly and I agree I don't think that's good for their teeth at all. But there are other people - and good friends of ours had three youngsters, and each one of them required the services of an orthodontist that ran them something in the neighbourhood of \$1,500 to \$2,000 for each one of their youngsters. Now that's a pretty heavy burden for someone to carry, but I would say that was a real exceptional case. And there could be some provision for assistance in areas like that where they do have exceptional circumstances.

But I know these programs are not being brought in without some cost. Everyone is

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(MR. BLAKE cont'd) talking about cutting government spending, and there's no possible way we're going to cut government spending if we keep demanding these programs, good as they may be. And well intentioned as governments are in bringing them in, someone has to pay the bill - and that is the area that concerned me. I don't criticize in any way the need for proper dental care in children, and teaching them proper oral hygiene in the early years. It's very important to maintaining their teeth in later years when they don't have to go through the problems that my colleague from Souris-Killarney has in having them changed regularly. If they can maintain the first set they have, many of these problems will be overcome, and that's worth many many dollars, there's no question about that. So, Mr. Speaker, I just wanted to register my concerns on how many of these free programs we're going to bring in, and just how much it's going to cost, because there's no possible way we're going to cut government spending if we keep bringing in these programs, good as they may be and well intentioned as the government might be in bringing them in.

MR. SPEAKER: The Honourable Minister of Urban Affairs.

MR. MILLER: Thank you, Mr. Speaker. I'll be closing debate on the bill. I want to thank honourable members for the many comments they made on Bill 52 and indicate to them that I recognize the difficulty in trying to walk the narrow line between Bill 52 and 53, because they are companion bills, they are in tandem I think, Mr. Speaker, you were quite right in allowing the kind of latitude you did, because it's almost impossible to confine yourself to the one bill. Having said that, I'll try to limit myself to Bill 52 only and deal with Bill 53 as we come to it.

Now, Mr. Speaker, when Bill 52 was introduced by the Minister of Health a week ago, I think it was, he indicated that the, that by introducing this bill, the government was preparing the base for the development of a Children's Dental Health Program, that's basically what we've been talking about all the time. It's a Children's Dental Health Program. I know that many people talk in terms desirous of having a broad dental health program, whether it be Medicare or the equivalent of Medicare, but we know that it is just utterly impossible at this point. I've indicated this a year ago when there was some confusion as to what was being talked about. We are not planning a coverage on the scale of Medicare, we are talking about the beginnings of a children's dental health program. And as he introduced in the bill, the intent is to specify the range of dental services which can be delivered under the plan, and the variety of delivery mechanisms which might be used for the delivery of the services under the plan - and I stress 'under the plan'. I'm sure members will notice that the Act would allow government to utilize existing private services as well as government services.

So it's very flexible, and that's one of the reasons why some of the criticisms, that we are not being more specific. I'm suggesting we shouldn't be more specific, because by tying us down in an attempt to be very specific in the bill at this point, we would have to know well in advance exactly the nature of the program in every town, village and hamlet in Manitoba. And we're going to have to play it by ear. We decided months ago the only way to do it is to allow for flexibility, so that in certain communities where district health plans come into being, it could be under a board of a district. It will be delivered in a school, a room can be made available. These are the kind of flexibilities that are required.

Now, I believe the Honourable Member from Assiniboia referred to a study by the Manitoba Dental Association on a children's dental health program. He suggested that the government was lax in discussing matters with the dental profession - and I believe other members brought up the same question. As a matter of fact, I believe three or four members did. The study that the Member for Assiniboia was referring to was requested by the government in a letter which the Minister of Health sent to the MDA on February 20 of this year. He requested a meeting with the MDA to hear the Association's views, and suggested a joint government association committee be established to examine the dental health plan in Saskatchewan and also the Association's proposals and views on it. The committee held meetings at which the MDA had opportunity to express opinions and ideas, and after the Association presented their views, the Minister, as recently as last week, met with the executive of the MDA and they were given a list of questions relating to the report which he requested that they answer. I might add, that in the letter which accompanied the MDA proposal of April 15, which is very recent, the following statement apparently was made: "The Association is encouraged and delighted by this opportunity to express its views and hopes that the discussions for

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(MR. MILLER cont'd) implementation of a children's dental health program may continue." And in a letter from the President of the MDA to the Minister, the statement was made: "The members of our Association will be encouraged to learn that the MDA is going to have positive input into the development of a plan for Manitoba's children."

So, in the light of the facts, Mr. Speaker, I believe it's obvious that the government is going to great lengths to consult with the dental profession and to give the profession every opportunity to put forward its ideas. But recognizing that in the final analysis, it's the government who has the responsibility to implement a plan to bring it into being, to decide the scope and the extent of it, how fast we'll move, how fast we can move considering the cost restraints, the manpower restraints. And so that in no way can the program itself be subject to any veto or control by an outside body. The government believes that in order to provide equitable dental services to children in the province, the control of the program, therefore, must rest within the government because, as I say, we have to control the tempo with which it develops. And any program which is developed will require large expenditures of public funds over a lengthy period and, therefore, the government must assure the rational expenditure of these funds. Now I would agree with all members that the program must be studied carefully, that we have to take it step by step to avoid some of the criticisms in the past where we've launched full-blown programs when, in fact, they weren't ready to be launched full-blown. I know this has happened in the past, and rather than - some of you who know me know that I like to take things very slowly, step by step, and let things build to a natural fruition as we're ready to administratively cope with it, and we're ready to financially cope with it. I know, and I recall where members opposite in the past have complained with some justification that the government rushed into programs without adequate preparation, without the ability to really deliver that program. Now in the case of a dental program for children, the government really recognizes the magnitude of this kind of program, and is taking considerable time to review programs elsewhere and to look at alternatives and studies in other provinces, and we're still continuing on that. And I'd venture to say that every avenue is being explored with the hope that we can learn from the successes and failures of others, whether it be Quebec, whether it be Saskatchewan, whether it be some American, United States' experiment - and, of course, even Australia, New Zealand.

The bills are written, as has been indicated, giving a great deal of flexibility to the Minister or the Lieutenant-Governor-in-Council, so they don't tie the government to a pre-determined direction; so we can in fact move at a pace which we can absorb and in a direction which will provide a dental health program which all of us, all legislators, can be proud. And they'll allow for necessary flexibility as required to assure the best possible service for Manitoba's children, because it is the children that we are concerned about. The plan, as this is now, would be to start with, let's say, the six year olds, the first group - or perhaps the five year olds, those that are coming into the school system for the first time. One of the problems of dentistry - and it has been indicated by members opposite, and I think members of this side of the House - people by and large don't like to go to dentists, and I don't think the Member for Lakeside - he was mentioned as being someone who didn't like going to dentists - he's not alone. I think it's a popular conception, and it's recognized that people don't run to dentists unless they have to. And this is one of the problems. We have to reach children at a very young age, to make them very conscious of oral health, to try and imbue them and teach them the need and the necessity and the desire to develop the right attitudes in the care of teeth. So that almost from the beginning, they develop good habits, good dental habits. So that the people they come in contact with will teach them how to use dental floss on a daily basis, how to adequately brush their teeth, even to include nutrition as part of the teaching program. So you have a combination of both prevention and treatment. Because it isn't enough just simply to address ourselves to the problem of curative dentistry. And I must - you know, I give credit to the dental profession and dental school generally. They moved away from the straight curative and now recognize that in fact with proper treatment starting at an early enough age with proper attention, most if not all of the problems in later years can be avoided. And this is the aim of the program. You start with a child young enough and if the child is seen every six months regularly, if the child is taught and encouraged by the dental health workers, to accept the fact that keeping one's teeth in shape, using dental floss regularly, is the same as is washing one's hands before going to dinner, in other words changing the attitude that now

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(MR. MILLER cont'd) exists, that, in fact, we can have a generation growing up which will not require the kind of attention and the costly dental work in the years to come. It will take a long time. This is not something that's going to have an impact within a year or two. If two decades from now Manitoba can point to an adult population and say, there are the results of the dental program and because of that we have a much higher percentage of people with healthy teeth - their own teeth as the Member from Souris-Killarney pointed out, he hasn't got his own - I think we will have achieved a great deal.

Some members opposite, you know, indicated their concern about costs, and we share that concern, but we do know this. We do know that we want to avoid going - you know in hindsight one can see how things should have been done, perhaps Medicare is an example - we want to avoid having to depend totally on the private sector. We have to use the approach of a team effort in this field. We have to develop para-professionals, para-dental workers, they're called health workers or health - what's the term, I forget - I'll call them dental nurses for the lack of the right definition here. So that these people with the adequate training can, indeed - if we can get enough of them, if we can get them working in the field with good training - and by good training I mean the kind of training which they're undergoing now in Saskatchewan, which is a two-year program, a very intense program. I'll show you how intense it is for an example. The dentist who graduates from dentistry is a very skilled person, he has studied anatomy - he has studied many aspects of the anatomy and biology of the structure of the mouth, of the body for that matter, but to the extent that he is filling teeth he may have had during all his years of training, he may have filled maybe 50, 50 sets of teeth. The course in Saskatchewan is geared to be so intense because the work that these people do is limited. It's limited to what is within their abilities, within their scope and within their training and it's 24 months of intensive work, so that by the time they get out into the field, they have not drilled 50 teeth but they've filled 500 teeth. So they have acquired a skill . . . as the Leader of the Opposition pointed out yesterday, one can acquire a great deal of skill simply by narrowing the work done by a person to the point where they do it day after day after day after day, they become very expert at it.

Concern has been expressed about supervision, about the quality, and I know this. I know that the quality of care in Saskatchewan is no longer being questioned, that in fact the quality of care is high. That great pains are taken to ensure that no one is doing anything in the mouth which they are not fully qualified to do. That there is supervision. The question of to what extent a qualified person will diagnose. That's the way it works. Diagnosis is done by a dentist, the X-ray is read by a dentist, the dentist prescribes the treatment and then, and only then, is the treatment carried on and performed by the dental nurse, who follows whatever's required or whatever the dentist has indicated is needed. So the program is a good one, has achieved great success.

There's been a concern expressed that we are again entering into the private sector and disturbing the private sector, and that really the dentists could handle the job. But you know, no one has really prevented the dentists up to now from expanding and doing their thing if they could - and I'm not critical of them - but they tend to live in the larger cities and this is a fact of life. We must also remember that they are only treating about 40 percent of the population because, again as I said earlier, most people avoid a dentist and not all parents take their children to dentists. As a matter of fact those who need it most aren't taken to dentists. That's maybe one of the problems. But if it's tied in with the school system, and access to the child when he's at school, or when he or she is at school, then you get them, as I say, when treatment and prevention can be most effective; when fluoridation can be most effective and teeth can be fluoridated; when sealants can be applied, so that two years down the line the tooth is still there and doesn't have to be pulled. It is this kind of preventative treatment on a mass basis which is what really counts. So when I hear suggestions that perhaps they're going to be putting dentists out of business, I say there's no fear of that. They're only dealing with about 40 percent of the population now. If the plan goes operative - when it goes operative - we'll be dealing with 100 percent I hope, of all children, at least my target is 80 percent. If we can arrive at that in the next three years I'll be happy.

The plan is I say to start at Grade 1 and then the next year, Grade 2 and then Grade 3. And it's already been indicated in other jurisdictions where if you start with a child and see that child every six months, that in the second year the amount of work required is far less,

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(MR. MILLER cont'd) and in the third year it's less again. So the efficiency of the system improves, because there was question about the costs, somebody mentioned something about a \$350 cost per child per year. I don't know where that figure came from. I know that the most recent figures in Saskatchewan indicated something like \$85.00 per child per year. But whether it's 85 or 100, I don't know, and it's really not important, not really my greatest concern now.

Certainly we want to get a plan which is as efficient as possible, but we want to use people who are trained adequately - and now I'm drifting on into 53, so I'll stop right there. I'll try to avoid that. But we have here a bill which will make possible the introduction of a children's dental health program, and this bill is necessary if we're going to have anything in Manitoba. It will be a plan under which we will work with the private dentist certainly. At the same time it will be a plan where the dental health workers will be employees, they could be of the department, they could be of a district health board, there's various ways which it could go. And in the final analysis it will be the beginnings of a plan which will evolve slowly. If anyone expects that by next year we're going to be covering all the six-year olds of the province I have to say to them, no. One of the difficulties is manpower, as it is in all fields, and we have to find that health manpower, and has to be trained. But again, I'll deal with that under Bill 53 where I'm drifting off again, and it's very difficult not to.

So I would simply ask that this bill go to committee, where it can be discussed and where I hope and expect - as indicated by the Leader of the Opposition who recognized dent-care, or dental health, was a logical extension by the government into the whole field of health, is just one other facet of the health of a person and it was logical to go into that field. He recognized that and I give him credit for that. So that despite its shortcomings it is a bill that is essential, if we are going to enter into the field of children's dental health, and for that reason I would urge members opposite to support the bill so that we can start working towards implementation of a plan as quickly as possible.

MR. SPEAKER: The Honourable Member for Swan River.

MR. JAMES H. BILTON (Swan River): Mr. Speaker, I wonder if I might put a couple of questions to the Minister, if I have your permission, for clarification.

MR. SPEAKER: The Honourable Member for Swan River.

MR. BILTON: My first question to the Minister if I may is, is there to be any federal financial input into this program, and if not now does he anticipate it in the future?

MR. SPEAKER: The Honourable Minister.

MR. MILLER: No, Mr. Speaker, there will be no federal input into this program. As to the future - I look into crystal balls but I never guess what I see - I really couldn't at this point even take a stab at guessing what the Federal Government may or may not do at some future date. Today there is no input that we can look forward to.

MR. BILTON: My second question to the Minister, Mr. Speaker, is in the planning, I would ask the Minister if it is intended to intensify this effort in Northern Manitoba where it is so sorely needed?

MR. MILLER: Yes. Mr. Speaker, certainly as the program develops we will try to move where the need is greatest, on that basis - you know it makes sense, it's logical and I'm sure people in other parts of Manitoba will understand this - where there is a great need, and Northern Manitoba is one of those areas, then we will try to move first into those areas, because they have nothing, literally, and we have to try to meet that need first.

MR. BILTON: I thank the Minister for his replies, Mr. Speaker.

MR. SPEAKER: Pleasure of the House to adopt the motion? Agreed. So ordered. Bill No. 53, the Honourable Leader of the Opposition is absent. Bill No. 53.

MR. WARNER H. JORGENSON (Morris): Mr. Speaker, the Leader of the Opposition is attending at another meeting at the present time. He's asked me to tell the Minister that as far as he's concerned the bill can pass on to second reading. If the Minister chooses to close debate now he can.

BILL NO. 53 - THE DENTAL HEALTH WORKERS ACT

MR. SPEAKER: The Honourable Minister of Urban Affairs.

MR. MILLER: Thank you very much, Mr. Speaker, and I thank the Member for Morris. There was considerable debate on this particular bill, which is the Dental Health Workers Act, and I want to correct one - he's not in his seat - but the Member for Fort Rouge who in his comments, he seemed to indicate that he understood that the Act was a Dental Workers Professions Act, and that's certainly not the case. So if he's under that misapprehension I want to go on record as correcting him. It is not simply an Act to recognize the dental workers as a professional society. This is not the case.

What the Act really does, it removes the control of the dental profession over dental auxiliaries from the Dental Association and places in control of the board. Because right now the Dental Association has total and absolute control over all workers in the dental field, far more than I think most other professions have. The Dental Association today controls the activities of dental auxiliaries. They have to prove their educational program. Now even doctors don't have to prove programs at the University of Manitoba, at the Faculty of the Medical College. Nor do they have to prove programs in various medically health-related programs. They're certainly consulted and they're used in their advisory boards but they don't have the control to say yea or nay to any educational program. But the Manitoba Dental Association does have that.

In order to develop a rational dental program and to train the appropriate manpower, because that's really the key to it all, we are moving to make it possible for a university or the community college or any other agency that the government might decide on, or all three, depending where it is, to launch programs of studies, of courses, to train the necessary manpower, because the government cannot really make a commitment to the public to deliver services without the manpower to fulfill this commitment. Otherwise it's just a lot of words.

This doesn't mean, as I said, that the government will not consult with the dental profession or the Dental Health Workers Associations on the development of programs, on standards, etc., because I can assure you they will be very much involved, they have to be.

I believe the Member for Fort Garry expressed concern over professional standards for dentists and I suggest perhaps he should read the bill again. The dentists in private practice will continue to exercise self-government under the Dental Association Act as they have up until now. There is no intrusion whatsoever into the private dental field. The dentists will continue to practice as they have, either in solo practice or in group practice or whatever way they're doing.

See, while it is true that the Manitoba Dental Association will no longer have the control over the programs of study for the Dental Health Workers in this program, on the other hand, the dentist is still permitted to hire someone, as they do now, and they train them themselves, they train the dental assistant themselves, some of them feel they can do a much better job than anybody. They train them exactly the way they want them, they want him or her to work in their office depending on the kind of practice they have, and over a year or two that person becomes very proficient and performs for the dentist. That's entirely still up to the dentist and we're not interfering in that aspect at all.

However, if the assistants that train in the dentist's office wish to be certified then he or she would have to be examined and certified by the board. The member did say yesterday that the recipients of existing dental services would suffer as a result of this Act. He's incorrect. Those people who are now seeing a private dentist and those private dentists who are now performing services and offering their services, they in no way are going to be affected by what is before us.

There was concern about the other matters, the fact that the Act makes provision under regulations for services which can be carried out with or without the supervision of a dentist. And these regulations will be worked out in detail, in consultation with both dentists and dental health workers. As I indicated before, the suggestion that somehow a bunch of amateurs are going to be working in the mouth of children, on the teeth of children, and they don't know what they're doing, is just not a fact, and this is certainly not the way we would go. The program of studies they will be undertaking is two years, highly intensive. The diagnosis is done by a dentist and the X-rays are taken by a dentist, the treatment is determined by a dentist; the dental nurse simply follows the treatment procedure as it is laid down. The nurse does not go beyond the limits of his or her qualifications, and a dentist will be available in the event that a

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(MR. MILLER cont'd) dental nurse finds some complication or something that she's not sure of; then the dentist is available to consult with, to ask for a check, and as well can be referred for actual work to the dentist so that the dental nurse does not get in beyond his or her abilities.

You know, the suggestion was made that if we left things alone, the dental profession could somehow do it all anyway, and why are we getting into this thing. Well, the fact is the dental profession can't. As I indicated earlier, only about 35-40 percent of people go to the dentist. If this plan goes operational, we're going to need a lot of manpower, we're going to need manpower. You know, looking back to Medicare, if we had perhaps thought in those days - and now with hindsight we can do it - of launching the program, the Medicare program, not in the way it was launched, simply by saying fee for service, everyone can go to a doctor, that's the plan; instead of that, if we had developed manpower, the para-professionals, the paramedics, the nurse practitioners, the home care programs, all the programs that are now coming about - if we had done that, perhaps some of the high escalation of costs might have been contained, I don't know. But certainly, it would have been a lot easier, and certainly in a dental program, it's absolutely essential. Because to take someone who has spent 5, 6 years in studying a profession so it becomes highly skilled, and then not to use his skills to the maximum, to the maximum ability, really makes no sense. It's far better to use the dentist with his fine skills that he's acquired, and knowledge that he's acquired, to use him to guide others, to oversee others - others who with a different kind of learning experience - and I'm not going to say a lesser one - but a different kind of learning experience, have become expertise, but in a very narrow range of the whole field, and they can because of the intensity of their program, deliver a high quality within that range. And so the ideal system is having somebody with the skill overall, but then using the people who are trained to do a specific procedure, and they do it well because they do it day after day after day after day - you know, literally hundreds of cases - and their efficiency improves and their expertise improves as they keep doing it.

And, of course, you know, the question about Northern Manitoba was just asked, rural Manitoba - certainly that is an area where there is a shortage, despite any numbers of ratios that might be used - is very deceiving. You can have a very good ratio of dentists to population, but the problem is that the dentists aren't always in the right parts of the province. There's a fairly high ratio in Winnipeg but there's very little in Northern Manitoba. So it's this sort of problem which we have to try to overcome.

The Member for St. James suggested the bill would, in his words, erode the education system in Manitoba and, if I heard him correctly, it would no longer require a dentist to study at an educational institution. Now I can't believe he said that and, therefore, I must assume that I misheard it. But if he did say that, the bill doesn't interfere in any way with the training of dentists. That's still in the Faculty of Education, that's controlled by the Senate of the University of Manitoba, the government has nothing to do with it whatsoever. I think the MDA has, but certainly not the government, and the bill therefore doesn't interfere with the training of dental hygienists at the University of Manitoba either. That program is still on.

Now someone did ask the question, could people who have been through various programs like the Red River program, the community college program, the dental hygienist one - could they plug into this particular program we're conceiving? And I have to tell him that, yes. Those who have received training, let's say, as dental hygienists; instead of attending at the University of Saskatchewan, let's say - or the college in Saskatchewan where this training is done - for two years, could probably do it in one year and get the necessary certification. Now a suggestion has been made or proposed, that why should we go to Saskatchewan, why shouldn't we develop our own facilities and training here in Manitoba? Now, Mr. Speaker, it's interesting, because if ever a field needs rationalization, it's the field of post-secondary training in any discipline. We once set up a few years ago, IPCUR, known as the Interprovincial Committee on University Rationalization, and it got nowhere. It got nowhere, because every province wanted to do its own thing. I think the only place it works is in the veterinary school, the one that Saskatchewan or Manitoba sends students there. Now it could be that Saskatchewan cannot provide enough places for Manitoba and we may have to go it alone.

But frankly, I would like to think that between Manitoba, Saskatchewan and perhaps another province, we might be able to set up one very very good training institution for dental

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(MR. MILLER cont'd) health workers, and we all use these facilities rather than having to go it alone, re-inventing the wheel all the time. It's not as efficient, it cannot be as high quality, it lacks many things if you start diffusing and dispersing the training facilities. So I don't know at this time whether in fact the two provinces will be able to work out something on a long-term basis. I am pleased that Saskatchewan has agreed to take some students initially - those with some training on a one-year basis, those without on a two-year basis, and in the meantime, we are exploring what we might do in Manitoba. And I'll tell you frankly - I don't know if the Minister agrees or my colleagues agree, but if we can come to some understanding with Saskatchewan where one major facility can be developed for training of dental health workers, I would opt for that rather than every province, or every part of the province, doing its own thing. It's costly; I don't think it's efficient; it's difficult to get the right kind of instructors, the right kind of teachers, the right kind of professionals - and instead of them being spread over two, three, four provinces and all over hell's high acre, if you can concentrate them in one place, then you know you've got good quality teaching and you know that you've got the best. And on that basis, I would - as I say, I'm pleased that Saskatchewan is co-operating with us and although I can't at this time say to what extent we'll have to depend totally on Saskatchewan, or whether we'll have no choice but to develop something within Manitoba, it's too early to say. But certainly, by sending students to Saskatchewan now, we have an opportunity to launch the program just that much sooner, because it took Saskatchewan two years just to launch a training program. They've been through all that, you know - and when I think of the kind of work and effort that's going to be required to start a training program for dental health workers, I know it's going to be a long process, and if we can utilize and learn by the experience of Saskatchewan and utilize what they've done, then we're going to save ourselves an awful lot of time - and time is money, not only in dollars but in human resources.

Mr. Speaker, I think that really I've covered most of the points that were made. The suggestion that somehow the Manitoba Dental Association could meet the needs of the children of Manitoba without a program of this kind, or without a Dental Health Workers training plan, I cannot accept. They have never been able to meet them, for various reasons - as I say, people don't go to dentists - they're busy, they're very busy, dentists work very hard; it's not an easy profession, it's a tough one. No one is, you know, looking around for business right now. We need a program which is effective, which is set up to handle children on a volume basis, where the delivery is brought out to the school rather than hopefully just to attract children or encourage them to come into a dentist's office. I'm convinced that we can only do it through this kind of plan, a plan which is government-sponsored - and how the details will be worked out with the Dental Association, have not yet been determined - but a plan that will be sponsored by government. Because dentists could have, if they had really wanted to, they could have hired dental auxiliaries, they could have increased productivity, they could have lowered fees because of that productivity - and some have, I suppose, but others haven't. I know that there's been an increase of 20 percent recently in the dental fees. They have the right to do it; it's their own practice and business, and they can raise them as they want - and now they've told us in no uncertain terms, that in the case of social allowances, the province is going to have to pay the going rate. And again, this is their right to do - you know, they have the right to either accept or reject plans.

We are convinced that unless the government program is introduced, that in fact we'll never get at the problem of dental care - and to deal with dental care, you have to get in at the very beginning with children. The key is with children, so that in years to come, the cost of dental care will be much less than it would otherwise be. So I think this is a necessary and essential bill, which in the long run will prove of great benefit to Manitoba's children, and therefore to Manitobans as a whole.

QUESTION put, MOTION carried.

MR. SPEAKER: Bill No. 29. The Honourable Minister of Labour.

HON. RUSSELL PAULLEY (Minister of Labour) (Transcona): I wonder, Mr. Speaker . . .

MR. SPEAKER: Call it 12:30?

MR. PAULLEY: Call it 12:30.

MR. SPEAKER: Very well. The hour being time for adjournment, I am now adjourning the House, and the House will reconvene at 2:30 this afternoon.