

Legislative Assembly of Alberta

Title: **Tuesday, April 18, 2000**

1:30 p.m.

Date: 00/04/18

[The Speaker in the chair]

head: Prayers

THE SPEAKER: Good afternoon.

Let us pray. Lord, renew us with Your strength. Focus us in our deliberations. Challenge us in our service of the people of this great province. Amen.

Please be seated.

head: Presenting Petitions

THE SPEAKER: Hon. members, a little patience. Today we have a few of them.

The hon. Member for Clover Bar-Fort Saskatchewan.

MR. LOUGHEED: Thank you, Mr. Speaker. I'd like to table a petition signed by over 100 residents of the Drumheller, Rosedale, East Coulee, and Carbon region who support "the reinstatement of front license plates."

THE SPEAKER: The hon. Member for Wetaskiwin-Camrose.

MR. JOHNSON: Thank you, Mr. Speaker. I'm pleased to table a petition signed by 121 Albertans mostly from the Wetaskiwin-Camrose constituency urging the government of Alberta "to reinstate the front license plate on all vehicles registered in Alberta."

THE SPEAKER: The hon. Member for Edmonton-Centre.

MS BLAKEMAN: Thank you very much, Mr. Speaker. I'd like to present I think the third in a series of petitions signed by a committed group of 63 individuals from the Edmonton area who are urging the government "to take a more enlightened preventative approach and add . . . medications and therapies to the Alberta Drug List to ensure the health of an aging society."

Thank you.

THE SPEAKER: The hon. Member for Edmonton-Gold Bar.

MR. MacDONALD: Thank you very much, Mr. Speaker. I have a petition that's signed by 571 Albertans from Lethbridge, Coaldale, Coalhurst, Magrath, and Raymond. These

residents of Alberta, petition the Legislative Assembly to urge the Government of Alberta to introduce legislation requiring a minimum of two people on shifts from dark to daylight. Employers must be responsible for their employees' safety! We are asking the Legislature of Alberta to pass a "Tara McDonald Law" to protect employees' lives.

This petition has been organized by Deb Dore and family, and this is Tara McDonald's mother.

Thank you, Mr. Speaker.

THE SPEAKER: The hon. Member for Edmonton-Manning.

MR. GIBBONS: I have a petition signed by 239 Albertans from Lethbridge, Pincher Creek, Waterton, and Cardston urging "the government of Alberta to stop promoting private health care and undermining public health care."

THE SPEAKER: The hon. Member for Edmonton-Calder.

MR. WHITE: Thank you, Mr. Speaker. I rise today to table with the Assembly a petition from 245 residents of Alberta from Lethbridge, Coaldale, Coalhurst, and Medicine Hat. They do "urge the government of Alberta to stop promoting private health care and undermining public health care," sir.

Thank you.

THE SPEAKER: The hon. Member for Edmonton-Glenora.

MR. SAPERS: Thank you, Mr. Speaker. I have two petitions to present to the Legislative Assembly this afternoon. The first is signed by 75 residents of Edmonton, and their petition reads as follows: "We the undersigned, are in favour of adequate funding for our present medicare system, and are opposed to private-for-profit hospitals in Alberta."

The second petition, Mr. Speaker, is signed by 143 residents of Calgary, Cochrane, Edmonton, Westrose, St. Albert, and Sherwood Park, and their petition in support of public health care reads as follows.

To the Legislative Assembly of Alberta in Legislature Assembled:
We the undersigned citizens of Alberta petition the Legislative Assembly to urge the government to stop promoting private health care and undermining public health care.

THE SPEAKER: The hon. Member for Edmonton-Riverview.

MRS. SLOAN: Thank you, Mr. Speaker. I'm pleased today to rise and table a petition signed by 280 citizens of the communities of Lethbridge, Taber, Coaldale, Brooks, Cochrane, Morley, Raymond, and Carmangay. The citizens are petitioning the Legislative Assembly "to urge the government of Alberta to stop promoting private health care and undermining public health care."

THE SPEAKER: The hon. Member for Edmonton-Norwood.

MS OLSEN: Thank you, Mr. Speaker. I, too, have a petition to present to the Assembly signed by 276 Albertans from Edson, Peers, Sangudo, Mayerthorpe, Evansburg, Barrhead, Tofield, Didsbury, Olds, Carstairs, Seba Beach, Carvel, St. Paul, Elk Point, and Dewberry. It states:

We the undersigned citizens of Alberta petition the Legislative Assembly to urge the government to stop promoting private health care and undermining public health care.

THE SPEAKER: The hon. Member for Edmonton-Meadowlark.

MS LEIBOVICI: Thank you, Mr. Speaker. I have a petition this afternoon as well. It's signed by 136 Edmontonians, and the petition urges the Legislative Assembly to "reinvest in the public health system rather than support private for profit health care systems."

Thank you.

THE SPEAKER: The hon. leader of the third party.

DR. PANNU: Thank you very much, Mr. Speaker. I have a petition signed by 531 Albertans from Edmonton, Sherwood Park, Fort Saskatchewan, Devon, Donnelly, Girouxville, Falher, Jean Cote, St. Albert, Leduc, Ardrossan, Spruce Grove, Warburg, Wabamun, Tofield, Bon Accord, Hinton, Grande Prairie, and Morinville. This brings the total number of signatures on the petition to well over 16,000.

Thank you.

head: Reading and Receiving Petitions

THE SPEAKER: The hon. Member for St. Albert.

MRS. O'NEILL: Thank you, Mr. Speaker. I would ask that the petition I tabled in the Legislature on April 6 be now read and received.

THE CLERK:

We the undersigned residents of Alberta petition the Legislative Assembly of Alberta to urge the Government of Alberta to provide respective Regional Health Authorities with the flexibility necessary to provide the delivery of publicly funded, publicly administered overnight surgical services cost-effectively and efficiently through the contracting-out of such services if deemed necessary.

THE SPEAKER: The hon. Member for Calgary-Buffalo.

MR. DICKSON: Thank you. I'd ask if the petition I presented the other day with respect to concerns about privatization of health care might be read and received, please.

THE CLERK:

We the undersigned citizens of Alberta petition the Legislative Assembly to urge the government of Alberta to stop promoting private health care and undermining public health care.

THE SPEAKER: The hon. Member for Edmonton-Rutherford.

MR. WICKMAN: Thank you, Mr. Speaker. I would ask that the petition I tabled yesterday in opposition to changes to the health care system be now read and received.

THE CLERK:

We the undersigned citizens of Alberta petition the Legislative Assembly to urge the government to stop promoting private health care and undermining public health care.

THE SPEAKER: The hon. Member for Edmonton-Glengarry.

MR. BONNER: Thank you, Mr. Speaker. I request that the petition I presented from 951 Albertans requesting that the promotion of private health care and the undermining of public health care be stopped now be read and received.

Thank you.

THE CLERK:

We the undersigned citizens of Alberta petition the Legislative Assembly to urge the government of Alberta to stop promoting private health care and undermining public health care.

THE SPEAKER: The hon. Member for Spruce Grove-Sturgeon-St. Albert.

MRS. SOETAERT: Thank you very much, Mr. Speaker. I would ask that the petition I tabled yesterday regarding the concerns that people have about the privatization of health care be now read and received.

THE CLERK:

We the undersigned citizens of Alberta petition the Legislative Assembly to urge the Government of Alberta to stop promoting private healthcare and undermining public healthcare.

THE SPEAKER: The hon. Member for Edmonton-Gold Bar.

MR. MacDONALD: Thank you, Mr. Speaker. I request that the petition I presented to the Legislative Assembly on Monday, April 17 on behalf of 40 Albertans requesting that the promotion of private health care and the undermining of public health care be stopped be now read and received.

Thank you.

THE CLERK:

We the undersigned citizens of Alberta petition the Legislative Assembly to urge the government to stop promoting private health care and undermining public health care.

THE SPEAKER: The hon. leader of the third party.

DR. PANNU: Thank you, Mr. Speaker. I request that the petition I presented yesterday be now read and received.

THE CLERK:

We the undersigned residents of the province of Alberta hereby petition the Legislative Assembly of Alberta to pass a Bill banning private for-profit hospitals in Alberta so that the integrity of the public, universal health care system may be maintained.

head: Presenting Reports by
Standing and Special Committees

MS GRAHAM: Mr. Speaker, the Standing Committee on Private Bills has had certain bills under consideration and wishes to report as follows. The committee recommends that the following four private bills proceed: Bill Pr. 1, Benevolent and Protective Order of Elks of the Province of Alberta Repeal Act; Bill Pr. 2, William Roper Hull Child and Family Services Amendment Act, 2000; Bill Pr. 4, Calgary Municipal Heritage Properties Authority Amendment Act, 2000; and Bill Pr. 5, Calgary Foundation Act. I request the concurrence of the Assembly in these four recommendations.

THE SPEAKER: Would all members of the Assembly in favour of concurring with the report, please say aye.

HON. MEMBERS: Aye.

THE SPEAKER: Opposed, please say no. So ordered.

1:40

head: Notices of Motions

THE SPEAKER: The hon. Deputy Government House Leader.

MR. ZWOZDESKY: Thank you. Mr. Speaker, I rise pursuant to Standing Order 34(2)(a) to give notice that tomorrow I will move that written questions appearing on the Order Paper stand and retain their places with the exception of written questions 14, 15, and 16.

I'm also giving notice that tomorrow I will move that motions for returns appearing on the Order Paper stand and retain their places with the exception of motions for returns 29, 31, 32, 36, 37, 38, and 42.

Thank you.

head: Tabling Returns and Reports

THE SPEAKER: The hon. Minister of Resource Development.

DR. WEST: Yes, Mr. Speaker. I'd like to table answers to Written Question 231 as amended and Written Question 232 as amended.

THE SPEAKER: The hon. leader of the third party.

DR. PANNU: Thank you, Mr. Speaker. I have several tablings. There are two letters, one from Edmonton from Mr. Norman Connors and another from Reverend Janni Belgum, chair, Church in Society Committee, Calgary presbytery, United Church of Canada. Both of these letter writers oppose Bill 11.

Two letters from high school students from Canmore, Mr. Speaker, are opposing any further developments of the Spray Valley. Thank you, Mr. Speaker.

THE SPEAKER: The hon. Member for Edmonton-Rutherford.

MR. WICKMAN: Thank you, Mr. Speaker. I have a number of letters to be tabled, quite a list of people opposed to Bill 11. I'll proceed as quickly as possible and read out the names: Elsa Robinson Brighid McGarry, Carol Ward, Merrienne, Andree-Ann Thivierge, Eldred Stamp, Christina Arnold, Tom St. Clair, John Zurawell, Keith Leal, Mima Cecchetti, Charlene Ball, and a couple of others again by the same Merrienne, plus a list of 25 people who have phoned in the last couple of days asking that their opposition to Bill 11 be known.

THE SPEAKER: The hon. Member for Edmonton-Meadowlark.

MS LEIBOVICI: Thank you, Mr. Speaker. I just have one letter to table this afternoon. It's from Dr. Meredith McKague of Calgary, who indicates her opposition to Bill 11.

Thank you.

THE SPEAKER: The hon. Member for Calgary-Buffalo.

MR. DICKSON: Thank you, Mr. Speaker. Firstly, I'm tabling copies of my correspondence dated April 17 to the Government House Leader with respect to his request for Liberal amendments on Bill 11.

The next three items I'll just do together to save time and say that it's basically a similar letter from three residents in Canmore registering objection to the Genesis proposal for Spray Valley from John MacLeod, Damian Martin-Lamartine, and Riley McGurk.

Thanks very much.

THE SPEAKER: The hon. Member for Edmonton-Gold Bar.

MR. MacDONALD: Thank you, Mr. Speaker. I have a copy of an e-mail to table for the benefit and information of the Assembly this afternoon. It's from Mr. Bob Blakey. He's a striking *Calgary Herald* employee and long-time resident of Alberta, and he's urging "the government to use its legislative power" to resolve that long and bitter labour dispute.

Thank you.

THE SPEAKER: The hon. Member for Edmonton-Mill Woods.

DR. MASSEY: Thank you, Mr. Speaker. With permission I would table five copies of a summary of meetings held with Members of the Legislative Assembly by the Council of Alberta University Students in regards to tuition fees and loan arrangements.

THE SPEAKER: The hon. leader of the third party.

DR. PANNU: Thank you for your indulgence, Mr. Speaker, once again. One more tabling here: five copies of a story appearing in the *Edmonton Journal* today in which the Alberta Association of Registered Nurses calls on the government to axe Bill 11.

Thank you, Mr. Speaker.

THE SPEAKER: The hon. Member for Edmonton-Glenora.

MR. SAPERS: Thank you, Mr. Speaker. I have five copies of an exchange of correspondence between myself and the Minister of Health and Wellness regarding the government's support for contracts with private medical laboratories.

I also have the appropriate number of copies of a single-page document that is entitled Vote No to Bill 11. It was distributed at the rallies in Edmonton and Calgary regarding Bill 11, and it calls for some participation in cyberdemocracy by voting www.voteAlberta.org.

Mr. Speaker, finally, I have five copies of yet the third version of the Bill 11 debate summary for April 11, 2000, from the government of Alberta's web site on the progress of Bill 11 debate.

THE SPEAKER: The hon. Member for Edmonton-Riverview.

MRS. SLOAN: Thank you, Mr. Speaker. I'm pleased today to also table correspondence received from my constituents opposing Bill 11, 100 percent of which are opposed to Bill 11.

My second tabling is the most recent final report, *Children and Youth in Care Review: Listen to Their Voices*, published by the Saskatchewan Children's Advocate office, April 2000. Excellent reading, Mr. Speaker.

THE SPEAKER: The hon. Member for Edmonton-Calder.

MR. WHITE: Thank you, Mr. Speaker. I have two letters to table today, both of which are in opposition to the Genesis plan in the Spray Valley, the first of which is from Peter Vermeulen of north-west Calgary. In brief, he believes that the project "will destroy grizzly . . . habitat, compromise a major wildlife corridor." As well, he believes the environmental protection is of such natural import that it should be in federal jurisdiction.

The second is from Dr. Clive Pryburn from Canmore, and he starts out, sir, by complimenting the government. He admires that which the government has done in the past two years – deficit and provincial debt pay-down – but he does believe that the government is in error allowing this project to go ahead.

Thank you, sir.

THE SPEAKER: The hon. Member for Edmonton-Ellerslie.

MS CARLSON: Thank you, Mr. Speaker. I have two tablings today. They are letters from Steve Arthur of Calgary and Bruce Green also of Calgary. Both are opposed to any further development in the Spray Lakes area of Kananaskis Valley.

THE SPEAKER: The hon. Member for Edmonton-Glengarry.

MR. BONNER: Thank you, Mr. Speaker. With your permission I would like to make two tablings today. They are from Martha McCallum and Dicksie Helm, and both of these tablings urge the government to reject a proposal for development of a high-priced resort/recreational facility in the Spray Lakes area near Canmore.

Thank you.

THE SPEAKER: The hon. Member for Edmonton-Centre.

MS BLAKEMAN: Thank you very much, Mr. Speaker. I'd like to table five copies of a letter to the Minister of Health and Wellness signed by four physicians: Dr. Schuurmans, Dr. Hanley, Dr. Wirzba, and Dr. Mackey. They are asking the government to assign

sufficient priority to the prevention and treatment of osteoporosis, an entirely preventable disease.

Thank you.

head: Introduction of Guests

THE SPEAKER: The hon. Member for Edmonton-Centre.

MS BLAKEMAN: Thank you very much, Mr. Speaker. I'm very pleased to introduce to you and through you to members of the Assembly 30 visitors who are coming to us from NorQuest College today. They are accompanied by their instructor, Elaine Nichols. I did have a chance to meet half of them, and they're a very keen group. I would ask them all to please rise and accept the warm and traditional welcome of the Assembly.

THE SPEAKER: The hon. Member for Olds-Didsbury-Three Hills.

MR. MARZ: Thank you, Mr. Speaker. It's a pleasure for me today to introduce to you and through you 124 grade 8 students from the Olds junior/senior high school. They are accompanied today by teachers Gayleen Roelfsema, Kelvin Beaudry, Garry Woodruff, Jolene Burgeson, April Curr, Kara McDonald, and Terry Miller. Also in the group are parents Gayla Moore, Cathy Kemmere, Dwayne Becker, Sandra Sawkins, Julie Brennen, Bob Loyek, Tami Gardner, Adeline Johnson, Grace Frost, Sharon Pederson, Jean Sutherland, Betty Astell, and Bev Toews. Unfortunately, they can't all be in the members' gallery at the same time, and they will be changing shifts at 2 o'clock, so we could have them pass on the greetings. I would ask all who are in the gallery now to stand to receive the warm welcome of this Assembly.

THE SPEAKER: The hon. Member for Lacombe-Stettler.

MRS. GORDON: Thank you, Mr. Speaker. Today visiting the Legislature are 21 special guests from Erskine school. They are accompanied by their teacher, Mr. Hank Boer, and parent helpers Mrs. Cindy Long, Mrs. Sandy Rairdan, and Mrs. Wendy Volker. Unfortunately, this group is not in the Assembly right now but will be here later. I would like for us to recognize them. I would ask that we give them the warm welcome, and it can be recorded in *Hansard*.
Thank you.

1:50

THE SPEAKER: The hon. Member for Fort McMurray.

MR. BOUTILIER: Thank you very much, Mr. Speaker. It's my pleasure today to introduce two queens of the north. They are good friends of our government, and they truly are two senior citizens that make our province "the True North strong and free." I'd like to ask two ladies who have lived on this earth almost nine decades, Olive Woodward and Marthe Lovett, to stand and receive the warm welcome of all members of this Assembly.

THE SPEAKER: The hon. leader of the third party.

DR. PANNU: Thank you, Mr. Speaker. I'm delighted to introduce to you and to my colleagues in the Assembly today the spokesperson for Friends of Medicare, Christine Burdett, and her son Kevin Burdett, both of whom are sitting in the public gallery. I would now request them to please rise and receive the warm welcome of the Assembly.

THE SPEAKER: The hon. Member for Edmonton-Norwood.

MS OLSEN: Thank you, Mr. Speaker. I'd like to introduce to you and through you and to all members of the Assembly Don Mitchell, who's a representative of the coalition of unions, and their focus is to prevent health care privatization. I wish Don to rise and receive the warm welcome of the Assembly.

head: Oral Question Period

THE SPEAKER: First main question. The Leader of the Official Opposition.

Private Health Services

MRS. MacBETH: Thank you, Mr. Speaker. Last night hundreds of Albertans came to this Legislature, their Legislature, to show their support for public health care and to show their sense of betrayal over this government's private health care policy. In fact, these citizens have been incited to protest by a government that refuses to listen. One way to stop the wrath of Albertans is to withdraw this fatally flawed policy. My first question is to the minister of health. Will the minister finally listen to Albertans, given that the Premier won't, and live up to his responsibility as a minister and a trustee for the health care system and pull his private health care policy?

Speaker's Ruling Inflammatory Language

THE SPEAKER: Once again I'm going to give the daily reminder about argumentative, opinionated, incitive language in the House, and if it continues, I'm going to move on to the next person I'm going to recognize.

The hon. Minister of Health and Wellness.

Private Health Services

(continued)

MR. JONSON: Mr. Speaker, the government is listening to Albertans with respect to this very important and necessary piece of legislation. We have demonstrated this by introducing a number of significant amendments to the legislation. We have committed more time as an Assembly under the government's leadership to debate of this bill than any other piece of legislation on record or certainly since I've been privileged to serve here, and we will continue to proceed as the government.

MRS. MacBETH: Mr. Speaker, my next question is to this minister as well. Can he possibly explain how this government has become so detached, so arrogant that it is ignoring the will of the people when it comes to public health care?

MR. JONSON: Well, Mr. Speaker, with respect to the overall approach of government we are proceeding with this important piece of legislation. We have made health care in this province a priority in terms of our budget allocations, a very significant increase in funding. We are developing new programs and expanding others and improving the quality of health care as resources permit and making health care in this province a priority for the government.

MRS. MacBETH: Mr. Speaker, my third question is to the Minister of Justice. Will this minister confirm that this building will remain open to allow Albertans to show their passionate support for public health care?

MR. HANCOCK: Well, Mr. Speaker, the Legislative Assembly is open to the public. We have public galleries. I would anticipate the

public will be allowed to view the operations of the Assembly from the public galleries tonight as usual.

THE SPEAKER: Second main question. The Leader of the Official Opposition.

MRS. MacBETH: Thank you, Mr. Speaker. In the words of an Albertan who was here at this Legislature last evening: "We've seen the cutbacks, we've seen the promises, and we have seen the lies. It's time Albertans stood up and said: no more." My questions are to the minister of health. Why doesn't the minister live up to his leadership obligation and respect the will of the people?

Speaker's Ruling Improper Questions

THE SPEAKER: The purpose of question period is for hon. members to ascertain information of the government, not to ask questions on behalf of other people, and there are enough precedents in all those documents that have been written with respect to this matter. So I'm going to ask the hon. minister to ignore the usage of the word "lies," which I view as totally inappropriate in the context of the question period, and to focus on the part of the question that he feels worthy of response.

Private Health Services (continued)

MR. JONSON: Mr. Speaker, I would just like to very briefly indicate that our provincial budget, which has been dealt with in this Assembly, is evidence of the priority that the government places upon health care in this province. Within that overall plan are initiatives which are actually leading Canada with respect to innovation and change and certain areas of increased funding. We will continue to place a high priority on quality health care in this province.

MRS. MacBETH: Mr. Speaker, is this minister refusing to withdraw his private health care policy because of the threat of lawsuits by private operators?

MR. JONSON: Mr. Speaker, the answer is no, and I feel it's rather ironic although not surprising given the statements of the hon. leader favoring a two-tiered health care system that she is now on the side of the private operators.

MRS. MacBETH: Mr. Speaker, what was it that caused this minister to invest taxpayer dollars in public health care facilities in Ponoka but to do a complete about-face and recommend private health care facilities for the rest of the province?

MR. JONSON: Mr. Speaker, as the hon. member and opposition leader should know, there is a process. There are criteria which are followed in the approval of capital projects. The government has a very extensive multimillion dollar commitment to new facilities in this province: a new hospital in High Level, a new hospital in Manning, other additions which I would be pleased if my colleague the Minister of Infrastructure would like to outline to the Assembly.

MR. STELMACH: Thank you, Mr. Speaker. With respect to the public dollars that are going into public facilities, I'd like to very quickly inform the Assembly that we have invested over \$947.2 million since '92-'93 in about 276 capital projects. I don't want to take the Assembly's time all afternoon to read off the hundreds of

projects that have taken place and are being constructed in the province today, but new health centres in Airdrie, Drumheller, Fort McMurray, Grand Centre, High Level, Lamont, Manning, Medicine Hat, Peace River, Ponoka, Sherwood Park, Spirit River, Stony Plain. If we have more time this afternoon, I could even add further to that list.

THE SPEAKER: Third main question. The hon. Member for Edmonton-Meadowlark.

2:00

MS LEIBOVICI: Thank you, Mr. Speaker. Time and time again this government has used the Shouldice hospital as an example for its private health care policy. What the government hasn't told Albertans is that Shouldice operates as a grandfathered, licensed private hospital without any contractual guarantees from the government of Ontario, and it's not for profit. So my questions are to the minister of health. Why did the minister fail to tell Albertans that the Shouldice hospital returns its profits to the taxpayers? It goes back to the department of health.

MR. JONSON: Mr. Speaker, as I understand it, the Shouldice hospital is operated under a foundation. I further understand that the physicians that work at the Shouldice clinic are opted out of the Ontario medical care plan, so they can be reimbursed as to the level that the foundation board deems appropriate.

With respect to the grandfathering, Mr. Speaker, I have indicated that this clinic has operated for many years in the province of Ontario. That is nothing that is new to this Assembly; it's been reported before.

MS LEIBOVICI: They operate under the same fee guide.

Given that the government's health care policy is to contract with private surgical facilities, is it the government's intention that these private facilities here in Alberta will return their profits to the taxpayers just like Shouldice in Ontario does?

Speaker's Ruling Anticipation

THE SPEAKER: It seems to me, hon. minister, that on the agenda again today is some discussion on the Order Paper with respect to a particular bill, and there is a clause-by-clause review of a particular bill that's already been scheduled.

Secondly, the Shouldice hospital in Ontario does not come under the ministerial responsibility of anyone in the province of Alberta.

The hon. Member for Edmonton-Meadowlark, do you want to proceed?

Private Health Services (continued)

MS LEIBOVICI: Absolutely.

Will the minister give Albertans a guarantee that private facilities in Alberta will not get a guaranteed minimum for payment of any procedures that are provided in their facilities?

MR. JONSON: Mr. Speaker, to answer the question I have to refer directly to the legislation.

THE SPEAKER: Well, we're not going to do that because we're going to have a discussion clause by clause later today.

The hon. leader of the third party.

DR. PANNU: Thank you, Mr. Speaker. Tens of thousands of

Albertans have attended rallies and health care forums in every corner of this province for the last two months, yet this government refuses to listen. Instead, it insults and belittles prominent Albertans who disagree with this approach. My question is to the Minister of Health and Wellness. What steps will the minister take to correct the harm caused by his chief spin doctor's comment that the president of the Alberta registered nurses is indulging in rhetoric and is just plain wrong?

Speaker's Ruling Improper Questions

THE SPEAKER: I take it that this particular person made these comments in this Assembly? Other than that it tends to be hearsay. Now, hon. Minister of Health and Wellness, if you want to make a comment, you go ahead and answer.

DR. PANNU: Mr. Speaker, it's not hearsay. I tabled the document today in the Legislature.

So let me proceed with my second question.

THE SPEAKER: Hon. leader of the third party, the chair would not know what the hon. member has tabled. Please go ahead.

Private Health Services (continued)

DR. PANNU: Thank you, Mr. Speaker. What does it say about the state of democracy in this province when the president of the Alberta Association of Registered Nurses is not allowed to express principled opposition to government policy without being belittled and insulted by the chief spin doctor in the minister's office?

MR. JONSON: Mr. Speaker, there have been a number of inaccurate portrayals from across the way. There was a case I believe about three or four days ago in question period where I pointed out that on literature from the opposition party the bill was deliberately, I assumed, misnamed so it could create a false impression with respect to the content of the bill. This type of thing unfortunately does occur.

With respect to any particular specific the member is referring to, I think the facts of the case would have to be checked out.

DR. PANNU: Thank you, Mr. Speaker. My last question is also to the minister. Why has this government that he's a member of, which ran in the last two elections on a platform of listening to Albertans, suddenly stopped doing so, choosing instead to steamroll with his policies of health care privatization?

MR. JONSON: Well, first of all, Mr. Speaker, we have I think demonstrated our commitment to having very thorough debate over the legislation that is being referred to. We have spent more time on this bill than any previous bill in this Assembly's history as far as second reading is concerned. We are now into many hours of debate in committee. The government has reviewed the input from Albertans and has introduced a comprehensive set of amendments which deal in very great detail with concerns that had been raised. So the contention of the hon. member I just do not agree with.

THE SPEAKER: The hon. Member for Calgary-Lougheed, followed by the hon. Member for Edmonton-Glenora.

Medical Research

MS GRAHAM: Thank you, Mr. Speaker. It's been recently reported

that two of the country's leading medical researchers are moving to Alberta and specifically to the University of Calgary. These are two skilled and renowned researchers in their respective fields, and their intention to locate in Calgary is a real coup for the province of Alberta. My question this afternoon is to the Minister of Innovation and Science. Can the minister advise whether the Department of Innovation and Science played a role in recruiting these prominent researchers?

DR. TAYLOR: Thank you. The two researchers are Dr. Frank Jirik and Dr. Jay Cross, and both of them are medical doctors and will practise medicine as well. We are excited to have them here.

Dr. Jirik is creating 18 positions for people at the university. These are highly skilled, highly paid positions. He's going to have quite a lab there. Now, what caused him to come here is that he's moving into a new lab that was partially funded obviously by the departments of Learning or Infrastructure through unit funding to the university. Also, we have a funding envelope in our department called the research excellence envelope, which is attempting and is determined to attract research excellence from across the country and across the world. So that applies to Dr. Jirik. His research is in the area of arthritis and cancer and several other areas.

Dr. Cross is coming from the University of Toronto. Once again, the research excellence envelope helped to attract Dr. Cross. Without that, these people would not be here.

MS GRAHAM: Thank you, Mr. Speaker. Further to that answer, I'm wondering if the same minister would say what immediate next steps are being taken by his department to attract other highly qualified researchers to the province?

DR. TAYLOR: Thank you, Mr. Speaker. A couple of steps I might mention. One is the creation of ICORE, the informatics circle of research excellence. It's a \$30 million commitment by this government to attract researchers in the area of computing and information communications technology. We recently placed the ads for people, and we're negotiating right now with a lead researcher in Europe and a lead researcher in the U.S. in the area of wireless and Internet protocol. Researchers are interested in having their research funded, and if we can guarantee continuity of research funding, these people will come.

2:10

Another step: we've just passed Bill 1 with an initial commitment of \$500 million to AHFSER, the Alberta Heritage Foundation for Science and Engineering Research. That will increase \$100 million a year for the next five years to create a billion dollar fund, and we can attract research. We're the only jurisdiction in North America that is doing this. I recently spoke in Seattle, and they had heard about it already down there and were asking me about it and were excited.

MS GRAHAM: Thank you, Mr. Speaker. My final question is to the Minister of Health and Wellness. I'm wondering if the minister can say what policies his department, the Department of Health and Wellness, has in place to increase the number of practising physicians in the province.

MR. JONSON: Mr. Speaker, in terms of people practising in the health care system of the province, we have announced an increase in internship positions available for graduates of the medical schools in the province: 20 this year and a further 20 the following year for a total of 40. We are going to have discussions with Alberta

Learning on an ongoing basis to look at our overall capacity for the training of physicians, because that is certainly a very important matter to be addressed in the longer term.

Further to that, of course we have our rural physician action plan, which has been very successful in attracting physicians to rural areas. Contrary to some impressions that're left by some people, our overall physician component during the last complete year has increased by about 250 physicians in this province.

THE SPEAKER: The hon. Member for Edmonton-Glenora, followed by the hon. Member for Calgary-Fish Creek.

Private Health Services

(continued)

MR. SAPERS: Thank you, Mr. Speaker. When the government handed over facilities and equipment worth millions of dollars to private investor-owned medical laboratories some five years ago, they did so based on a document which I tabled earlier in the Assembly. This document, titled Laboratory Restructuring Proposal, was to serve as a template for this privatization. I'd like to quote from that document.

In Edmonton, Calgary and some other urban communities, the regional boards would be required to enter into contracts or joint venture arrangements with one or more investor owned laboratories to provide comprehensive services.

My questions are to the Minister of Health and Wellness. Will the government be using this laboratory model, this template, for RHAs when they contract out surgeries to investor-owned, overnight surgical centres?

MR. JONSON: Mr. Speaker, first of all, I think it's extremely important to keep in mind that the private sector has played a major role in the provision of laboratory services in this province since well before the advent of the Canada Health Act and the public health care system as we know it. They continued on with the passage of the Canada Health Act, and this is perfectly allowed all across this country under the Canada Health Act's application in the various province.

When the regional health authorities were formed back in the early 1990s, it was necessary to make sure that there was an opportunity on a fair basis for the laboratory companies that had been providing sound and quality service to those areas of the province to have an opportunity to enter into a new contractual relationship with the regional health authorities because the previous governing structure under which they were contracted, the local hospital boards, et cetera, no longer existed.

MR. SAPERS: I think he said no, Mr. Speaker.

I quote again from the government's document. Given the principle

to ensure that provincially funded facilities do not have a price advantage over investor owned labs, regional boards will no longer have access to provincial funding for capital equipment,

are there plans to cut the regional health authorities capital budgets so that public hospitals don't have a so-called price advantage over private hospitals or surgical centres?

MR. JONSON: Well, Mr. Speaker, the reference to plans that the hon. member makes are rather convoluted and vague.

I'd just like to point something out to you, Mr. Speaker, and to the Assembly, and that is that we have in the province today very sophisticated laboratory services, which are serving the province rather well. In the course of reorganizing services around the

regional health authority model, there was realized some \$50 million in terms of overall cost savings. As I've indicated to you before, the material being referred to is material which was needed to be provided in policy terms to bring about the transition to the regional health authorities.

MR. SAPERS: To the same minister: is there a plan for mandatory joint ventures in contracting out between regional health authorities and surgical facilities just like the mandatory contracts that were imposed by your government with the private laboratories?

MR. JONSON: No, Mr. Speaker.

THE SPEAKER: The hon. Member for Calgary-Fish Creek, followed by the hon. Member for Edmonton-Riverview.

Magnetic Resonance Imaging

MRS. FORSYTH: Thank you, Mr. Speaker. The federal government has recently announced a review of MRI services in Alberta and implied that access in Alberta was perhaps less than in other provinces in the country. Subsequently, on Friday of last week the Alberta government announced that both Edmonton and Calgary will receive two more MRI machines. My questions are all to the Minister of Health and Wellness. Could the minister please advise whether Friday's announcement was a direct response to the review by the federal government?

MR. JONSON: Mr. Speaker, the answer is no. I would draw members of the Assembly's memories back to a number of other questions that have been put forward with respect to MRIs and the capacity in various parts of the province for that particular diagnostic service. I have indicated on at least two previous occasions that we have been first of all planning for the expansion of diagnostic services. We have had an expert committee working on that and advising us.

Secondly, we have indicated over the past number of months approvals for MRI units in the Chinook region at the Lethbridge regional hospital, and that unit is up and running now, Mr. Speaker. Approvals have also been given for the installation of MRIs in Red Deer, in the David Thompson region; in Grande Prairie, in the Mistahia region; and in Medicine Hat, in the Palliser region. Very recently we announced the significant expansion of those services going forward in Edmonton and Calgary.

MRS. FORSYTH: Thank you, Mr. Minister. I appreciate the clarification.

Given that the announcements of the new MRIs is welcome news, the fact remains that waiting lists for MRI services are already long now, and it will take at least six months for the new units to be put in place. What, if anything, will the government do to address the current situation in the meantime?

MR. JONSON: Well, Mr. Speaker, first of all, the regional health authorities will be running their existing magnetic resonance imaging units to maximum capacity according to the staff and the resources they have available. I note that they are running far beyond the usual eight-hour days, usually being in full operation about 14 hours a day.

I'd also like to indicate, Mr. Speaker, that there's always provision for an emergency MRI to be done in the major cities should that be needed at any particular hour. There is also in Calgary a plan to enter into a short-term contract with a private MRI facility to provide

additional scans until such time as their two new units are up and running.

MRS. FORSYTH: Thank you, Mr. Speaker. Can the minister tell us whether or not the addition of the two MRIs will be sufficient to adequately meet Albertans' needs for MRI services over the longer term?

MR. JONSON: Mr. Speaker, it is our judgment that when all of the MRI units that have been announced are up and in full operation, we will be meeting the need. We will be providing I believe somewhere in the neighbourhood of 42 scans per thousand of population, which is a measure that's used in comparing the provinces. This would bring them up to slightly over that of the leader right now, which is Ontario.

2:20

Child Welfare

MRS. SLOAN: Children's Advocate reports for the last decade have continuously raised warnings about this government's underfunding of child welfare and the accompanying impacts of the fiscal limitations imposed year after year on these services. Yesterday the fatality inquiry report into the untimely death of Jordan Quinney raised once again these same issues. My questions today are to the Minister of Children's Services. How do you explain your government's inaction in addressing these ongoing issues that have now been attributed to the death of a child in your care?

MS EVANS: Mr. Speaker, the death of a child anywhere is always a tragic loss not only for the family but for all Albertans. I take seriously the responsibility as Minister of Children's Services for the death of any child that is in government's care and protection.

We have fully accepted and acknowledged through the special case review process the recommendations that were made to us. We have in fact instituted and assured and confirmed that the training for all of the workers that was suggested in that review process would be in place so that proper training for workers is in place before they make very important decisions in regards to children.

In the release yesterday that has been provided, we have acknowledged further our belief that those recommendations are appropriate. If there's anything we take some satisfaction from, Mr. Speaker, it's the fact that it's recognized that our department, Children's Services, has followed through with commitments and recommendations made in the special case review.

MRS. SLOAN: To the same minister: what evidence will be sufficient to prompt your cabinet to allocate sufficient funding to ensure that vulnerable children in the care of this government are safe?

MS EVANS: Mr. Speaker, a number of initiatives through the past year have been addressed as it related to children's authorities. The Children's Advocate review has in fact cited some of those areas that we have to improve upon that are areas of emphasis as we review the budgets of the child and family service authorities.

In terms of children that are very highly at risk, the work that we're doing on early intervention, early assessments, the work that we're doing with the Foster Parent Association, the work that we're doing in training child care workers and day care workers, every part of our training, every part of our work with the universities and colleges, whom I met with yesterday, is geared to making sure that in the very first instance when the parent is unable to follow through with the appropriate services and care of the child, we take action, that we assess the situation and follow through. [interjections]

Speaker's Ruling Decorum

THE SPEAKER: I can't believe, hon. members, that when an hon. member is given the floor to ask about the death of a child and when an hon. member of Executive Council is responding, there would be members in this House who have to interject. I just find that astounding.

The hon. Member for Edmonton-Riverview.

Child Welfare (continued)

MRS. SLOAN: When, Madam Minister, will the adequate protection of children in care be a priority for this government equal to tax reform and reduction?

MS EVANS: Mr. Speaker, in the task force report that we released yesterday, *Start Young, Start Now*, we identified that in many circumstances throughout the province there are excellent programs provided, but one of the particular concerns was the duplication of effort and support that is provided. In other words, we are frequently putting support in some areas where other gaps exist.

Mr. Speaker, an assessment of that will be done not only by myself as Minister of Children's Services but by all of the partnering members of the Alberta children's initiative, all of the other ministers who will, as I will, address those areas of program delivery to determine what gaps in fact exist and where the priorities can be given. I feel assured, as our Premier stated yesterday, that where we can provide funds and institute change and where it is demanded and needed, we will do so.

THE SPEAKER: The hon. Member for Redwater, followed by the hon. Member for Edmonton-Mill Woods.

Catholic School Board Boundaries

MR. BRODA: Thank you, Mr. Speaker. Last week the Minister of Learning provided members of the Assembly with an update on a proposal put forward by Alberta's three school board associations related to the formation of separate school districts. As part of this update the minister advised us that school boards across Alberta were meeting last week to vote on this proposal. My questions are to the Minister of Learning. Can you advise us as to what took place at this vote or what the results were?

THE SPEAKER: The hon. Minister of Learning.

DR. OBERG: Thank you very much, Mr. Speaker. The vote was held on Friday. Of the 61 school boards that participated in the vote, 37 voted against it and 24 voted for it.

MR. BRODA: My first supplemental: what are the next steps to be taken in resolving this long-standing issue?

DR. OBERG: Mr. Speaker, the interesting point about this whole process is that following the vote, the school board chairmen that were present agreed unanimously to continue talking about this very important issue and to come up with a resolution of this very important issue as soon as possible.

MR. BRODA: My final supplemental to the same minister, Mr. Speaker: could you please advise us whether a time line has been set to complete this next phase of work?

DR. OBERG: Mr. Speaker, I have not been formally notified of a time line. There has been some suggestion that they are working towards an October time line. I would say, though, that that time line is not hard and fast from my department.

I think what needs to happen is that the three associations need to get together. They need to sit down; they need to come up with a resolution that everyone will understand, that everyone will support and bring it forward to me. It may or may not need legislative changes. It probably will, but that's one of the things we'll be looking at.

Hopefully something will be brought forward in the near future, whether it's October, whether it's August, whether it's December. Again, I'll reiterate that it's a very critical issue to schools in Alberta, and I hope that there is a resolution that is brought forward.

THE SPEAKER: The hon. Member for Edmonton-Mill Woods, followed by the hon. Member for Calgary-Glenmore.

Private Health Services

(continued)

DR. MASSEY: Thank you, Mr. Speaker. It is now day 12 since the Premier promised to release the 30 blank pages of responses from his private hospitals focus groups once the opposition released its research. The government's stonewalling is very reminiscent of the Premier's 90-day health care action plan. It's now in day 1,663. My questions are to the Minister of Health and Wellness. Will the minister stop the nonsense and release the full 30 pages of responses from the private hospitals focus groups now?

MR. JONSON: Mr. Speaker, it is my understanding that this matter is being dealt with according to the legislation and the procedures and time lines that apply.

DR. MASSEY: Thank you. To the same minister, Mr. Speaker: will the minister assure Albertans that the full 30 pages of responses from the private hospitals focus groups will be released and not a sanitized version?

MR. JONSON: Mr. Speaker, I'm quite sure that there are no documents such as the person refers to, and that is dealing with private hospitals.

THE SPEAKER: The hon. Member for Calgary-Glenmore, followed by the hon. Member for Edmonton-Manning.

Foldable Intraocular Lenses

MR. STEVENS: Thanks, Mr. Speaker. Last week the government announced that the softer foldable lens sometimes used in eye cataract surgery will be fully paid for by the public health care system effective April 12. Some people who had paid for this lens from their own pocket before that date are asking where they stand now in light of this change. My question to the Minister of Health and Wellness: will patients who have already paid for this foldable lens be reimbursed by the government for their costs?

2:30

MR. JONSON: Mr. Speaker, the answer is no, if they have not yet been scheduled or had the surgery. There are cases, however, where a person had the surgery scheduled prior to the date of the announcement and also paid for the lens, and in those particular cases they will be reimbursed.

As with many changes with respect to coverage, whether it is

pharmaceutical products or in this case an appliance, there is an upgrading here. Yes, there is an additional area of coverage for the public of this province, but there is also a definite starting date, and the date of this being announced is the point from which people will not have to pay.

MR. STEVENS: Thanks, Mr. Speaker. Again to the Minister of Health and Wellness: will the foldable lens now become the standard lens used in cataract surgery throughout Alberta?

MR. JONSON: Yes, Mr. Speaker, the standard foldable lens will be provided as part of an insured service when cataract operations take place. That is what the change is about. It is an upgrade of the appliance being used. Upon the advice of people working in the field, we have chosen a particular level or quality of lens of the foldable type, and that is what we will be funding.

MR. STEVENS: Thank you, Mr. Speaker. Once again to the Minister of Health and Wellness: why was this change made now?

MR. JONSON: Mr. Speaker, first of all, we covered the solid or rigid lens under our overall insured coverage. The technology, the material used, the type of lenses that are available have advanced in terms of the treatment of eyes and following up on cataract surgery, and after assessing the situation and finding the advice was that there was a clear medical benefit to having a standard foldable lens, we made the decision to provide that coverage.

Private Health Services

(continued)

MR. GIBBONS: Mr. Speaker, the Premier has told Albertans that this government's policy to allow overnight stays in approved surgical facilities will not endanger the lives of Albertans. Well, allowing for overnight stays in private surgical facilities which are not fully equipped, according to the members of the J. Dosseter Health Ethics Centre at the University of Alberta, is a danger to the health of patients and thus ethically is unacceptable. My first question to the Minister of Health and Wellness: how are these private surgical facilities going to cope if a patient experiences complications beyond the ability of the surgical centre to treat?

MR. JONSON: Well, Mr. Speaker, we have currently in the province some 152, as I recall, day-surgery procedures that are provided in a clinic setting. They have been provided for well over a decade. They were provided and approved by the government at the time the Leader of the Opposition was health minister and certainly expanded a great deal at that particular time.

Now, Mr. Speaker, very rarely there are unfortunately occasional cases where they need the services of a hospital emergency ward. Provisions are there to seek additional help and to transfer to an emergency setting for proper treatment when some difficulty arises.

MR. GIBBONS: To the same minister: will this government admit that its policy of pushing for overnight stays in surgical facilities will not improve health care but will put the lives of Albertans in jeopardy by placing them in clinics which are not equipped to deal with a real emergency?

MR. JONSON: Mr. Speaker, the track record, the quality control with respect to what we do have to refer to right now – and that is over 50 day-surgery clinics in this province – is very, very good in terms of safety and quality treatment. They have a very good record

in this province, and I'm sure that same level of quality will be maintained in overnight stay surgical facilities.

THE SPEAKER: Hon. Member for Edmonton-Manning, see what you create with the seeking of opinion? Keep going.

MR. GIBBONS: To the same minister, a question that I asked yesterday: what deal is so important that this government is willing to put the lives of Albertans in jeopardy? [interjections]

MR. JONSON: Mr. Speaker, the member's colleagues were enjoying his question so much, I did not hear. Perhaps it could be repeated.

THE SPEAKER: The hon. Member for St. Albert, followed by the hon. Member for Edmonton-Centre.

Child Care

MRS. O'NEILL: Thank you, Mr. Speaker. This past weekend about 300 child care workers gathered in Calgary to look at what they're calling the wage crisis for child care workers in Alberta. My question is to the Minister of Children's Services. What is the minister doing to address the concerns of these child care workers in Alberta?

MS EVANS: Mr. Speaker, I have met with the network of child care providers who have approached me and identified a number of options that we could discuss. I think that on reflection the operating allowance that was provided for families with children in need was exactly the right way to go. Today we serve more families. We serve families with dual incomes. We are able to provide more money for more families receiving child care.

Mr. Speaker, one of the options that I related in this House last week relative to training is that we could expand in fact some of the options of training, and we're looking at that. We expended \$370,000 last year training level 1 child care workers. They apply for that directly through the colleges, and we subsidize the colleges. As I've stated earlier, one of the ways that we can help enhance the opportunities for retention of staff is assuring that we're providing options and opportunities for training and support of those staff.

Mr. Speaker, one final note. Those same people from the day cares, for example, have determined that they would like to make a presentation to government, and I understand that they will be doing that in the near future.

MRS. O'NEILL: Thank you, Mr. Speaker. My first supplemental to the same minister: in the matter of training needs identified from the special case review in the death of a child, what specific action has been taken in this respect?

MS EVANS: Mr. Speaker, the time of the special case review was prior to the actual implementation and the opportunities for local child and family service authorities to be fully up and running, but since that time there has been extensive work under way with those agencies as well as with child welfare workers to provide and ensure that child protection services training is available for the workers. As I indicated earlier, our relationship is such with Justice that we ensure the adequacy of those courses provided, that child protection workers have in fact got all the training they need, and even those that are home workers and others that are in charge of children at risk or families at risk will always be assured of having been provided services.

Mr. Speaker, we are working on tools for assessing risk from May

until September this year. It is a pilot that we hope will enable us to make sure that we have child care protection workers fully cognizant of all the risks when children are in care, risks that might lead to very tragic conclusions.

One final item, Mr. Speaker. One of the key components of a CPS training program is to know how to identify abuse and to expand and improve information for workers and for that sharing. These are some of the ways that we hope to address some of the tough questions that have arisen as a result of the death of a child.

THE SPEAKER: The hon. Member for Edmonton-Centre, followed by the hon. Member for West Yellowhead.

Private Health Services

(continued)

MS BLAKEMAN: Thanks very much, Mr. Speaker. Political leaders can strongly influence our life. As Kevin Taft said in 1997:

People with differing points of view can be sincerely considered, or they can be called humiliating names. Governments can help people get a fair break and build a better society, or they can further enrich and empower those who are already rich and powerful.

My questions are all to the Minister of Health and Wellness. Why does this government call people left-wing nuts instead of sincerely listening to them?

2:40

MR. JONSON: Well, Mr. Speaker, members of government caucus have, I know, been extensively meeting with people all across this province in their constituencies and other constituencies. They have been reading their correspondence, replying to correspondence, and they have brought their views to the table of government. We have introduced extensive legislation dealing with key issues brought to our attention, so I think we have demonstrated that we are following the proper model and fulfilling our responsibility in government.

MS BLAKEMAN: Thank you. This question is also to the Minister of Health and Wellness. Why does this government not build a better society instead of promoting the privatization of health care, which will benefit a few who are already rich and powerful?

MR. JONSON: Mr. Speaker, first of all, I would like to preface my answer by saying this, and that is that the government is not taking sole credit in any way for what a great province we are privileged to live in. The province of Alberta is a place which is a destination sought by many people in terms of relocating, whether they are coming to do business and to pay taxes and to support our government services or whether they are seniors, which are very welcome, who are coming here to access some of the programs that we have. Our population is growing steadily. We are regarded as a good place to live because of our education systems, because of our health care systems.

Therefore, I think we are following through to the best of our ability in taking our responsibility in government very, very seriously and taking advantage of what is Alberta.

MS BLAKEMAN: After the thousands of people who have protested this weekend and the hundreds more last night, will the government finally tell the truth about why it wants to privatize more health care? Why? Who benefits?

THE SPEAKER: Hon. member, that question violates Standing Order 23(h), (i), and (j) by going to aspersions, so we're going to wrap this up.

In 30 seconds from now we're going to have the Clerk stand up and call Members' Statements.

head: Members' Statements

THE SPEAKER: The hon. Member for Edmonton-Norwood.

Bill 11 Protest at the Legislature

MS OLSEN: Thank you, Mr. Speaker. Last night in this Assembly we saw democracy come through the doors. Nearly 500 Albertans came into their Assembly and made it clear that they want the government to kill Bill 11. They made it clear that their MLAs were elected to represent the public good for Albertans. MLAs are not elected to bend to the wishes of a few who want to get rich by pushing an agenda of private health care.

Democracy is about the will of the people. It is about freedom: free votes, free speech, and freedom of association. Every member in this Assembly was elected to make good decisions on behalf of their constituents. MLAs have a responsibility to listen to their constituents. Listening does not mean nodding in agreement and then dismissing the views of those constituents. It means giving careful consideration to all ideas and looking at all the facts. It requires MLAs to understand the issue at hand and to make decisions based on the collective will of the people. It means, Mr. Speaker, that a democratic Assembly must use its collective wisdom if the people are to continue having trust and faith in the democratic process.

Last night's peaceful protest was a success due in part to the professionalism of the Legislature security. They handled a difficult situation with calm and reason. I would like to commend them for the job they did. They're an important part of the democratic process. Other staff essential to the operation of this Assembly are to be commended for going about their business with calm and professionalism as well.

Tonight we expect another successful demonstration to occur. I know the doors of this Assembly will remain open to the people of Alberta. It is their Assembly, after all. Democracy is not always quiet, and sometimes the will of the people needs to get loud to be heard.

head: Orders of the Day

head: Public Bills and Orders Other than
Government Bills and Orders

head: Second Reading

Bill 207 Provincial-Municipal Tax Sharing Calculation Act

[Adjourned debate April 12: Mr. Paszkowski]

MR. GIBBONS: I'm pleased and proud to stand today to speak in support of Bill 207, the Provincial-Municipal Tax Sharing Calculation Act. This is the first private member's bill to be put forward by the Leader of the Official Opposition in this spring session. It speaks to the importance of creating stable and predictable funding for Alberta's municipalities.

It has been my pleasure for the last three years to hold the position of Official Opposition shadow critic for Municipal Affairs in this Legislative Assembly. In this capacity I've traveled the province extensively, meeting Albertans as well as municipal administrators and elected leaders from both the rural and urban municipalities. In attending the AUMA and the AAMDC regional conferences and their conventions, I've had the pleasure of speaking with and getting

to know about 60 percent of the elected municipal officials in Alberta.

Mr. Speaker, Bill 207 is brought forward with the best intentions. The Official Opposition wants to engage all members in discussion of how we can ensure stable and predictable funding for our municipalities and our communities. It is about realigning existing revenue sources to meet roles and responsibilities. It is not about creating a new source of revenue. The source of revenue we're talking about is the taxpayer. The provincial government must respect the taxpayer and be committed to working with Alberta's municipal leaders toward responsible funding arrangements for communities. Bill 207 is a framework for discussion. That is what Bill 207 and the provincial-municipal tax sharing calculation are about.

Mr. Speaker, I wish to respond to some of the comments made by the Minister of Municipal Affairs regarding this constructive piece of legislation. On April 11 in this Assembly the Member for Livingstone-Macleod raised a point of order so that the Minister of Municipal Affairs could try to avoid debating this bill. These hon. members tried unsuccessfully to state that this is a money bill. They tried to say that this bill is about creating a new source of revenue. As I've already said, this is not about creating a new source of revenue; it is about equitable, predictable sharing of existing revenue. The Minister of Municipal Affairs and the hon. Member for Livingstone-Macleod have both been members of this Assembly long enough to know that political games should not be played when constructive legislative initiatives are presented. I am pleased to let these members know that their reluctance to debate this bill, a bill which is intended to establish stable and predictable funding for Alberta and municipalities, will be widely communicated.

The minister has been critical of this bill on several points. He raised concerns because he feels that there are necessary components missing. As the minister is well aware and pointed out, this is a private member's bill and therefore cannot be what is described as a money bill. When the Leader of the Official Opposition made her opening remarks on Bill 207, she noted that this is a framework for discussion. She also noted the limitations that are placed on private members' bills.

2:50

There are other areas of provincial/municipal relations where the minister has said some troubling things, and I would like to take a moment to clear up this misinformation. In his comments on April 12 regarding Bill 207 the minister indicated that the government is "reviewing the education property tax." This so-called review will see education property tax increase from \$651.2 million in 1995 to a projected \$774.7 million in 2002. This, Mr. Speaker, is a projected increase of 19 percent. The only long-term solutions that the government has publicly suggested for replacing the education property tax are a 4 percent sales tax and a 38 percent increase in provincial income tax. Those figures are from the hon. minister in this Assembly on March 13 of this year.

I think Albertans should be very concerned if this is the type of review currently going on regarding education property tax. I think it is important to note that the MLA for Medicine Hat recognizes the need for realistic long-term solutions regarding the education property tax, and it is seen in Motion 518 on today's Order Paper. This motion states:

Be it resolved that the Legislative Assembly urge the government to explore alternative means of funding education other than through municipal property taxes and to begin discussions with municipal governments to develop new cost-sharing formulas that could be implemented after the provincial government removes requisitions for school taxes.

Mr. Speaker, it is time to develop new cost-sharing formulas. That is exactly what Bill 207 is about.

As I've traveled across Alberta, I've spoken to municipal leaders about this bill. These leaders have been impressed because finally somebody was listening. I impress upon everybody in this Assembly that there are very, very many fingerprints on this particular bill. On many occasions I have heard that the Ministry of Municipal Affairs should include as part of its business plan the creation of a legislative framework which would include municipalities' access to long-term, stable sources of revenue to ensure self-sufficiency and sustainability. Continued reliance on the province for grants and other programs prevents municipalities from becoming self-sufficient. Access to stable sources of revenue is the best way to ensure municipalities will remain sustainable during a high-growth period.

In the minister's further criticism of this bill he alluded to the idea that grants are a more predictable source of income and would in some ways be preferable to relying on a percentage of the tax base for income. These comments were made in the Assembly on April 12, Mr. Speaker. On this point I'd like the minister to note that the government's grants to municipalities have been very uncertain over the past eight years. In 1992, 21 percent of a local government's revenue in Alberta came from the provincial general or specific purpose transfers. By 1998 only 10.2 percent of a local government's revenue came from the provincial general or specific purpose transfers.

Accelerated onetime increases in 1999-2000 and 2000-2001 for these same grants are expected in the general or specific purpose transfers, up to 27.1 percent of local government revenue for 2000. Mr. Speaker, the grant level has gone down from 21 percent to just over 10 percent and now back up to just over 27 percent. How can the minister call that a stable source of funding? In contrast, provincial personal income tax, the taxes that would be the basis of the funding arrangement as proposed by Bill 207, have increased an average of 11.2 percent per year between 1992 and 1999-2000. I think a funding source with a history of progressive increase is a far better base from which to create stable sources of funding than the grants.

Bill 207 is a product of the Official Opposition to forge a new partnership with Alberta municipalities. This partnership, Mr. Speaker, would be based on values of accountability, efficiency, responsibility, and equity. By providing access to a portion of the personal income tax revenue through revenue sharing, Bill 207 recognizes that local government authority and financial resources should correspond to their responsibilities. The Official Opposition believes that we need a long-term vision to sustain our local communities. The ad hoc, reactionary funding announcements from the Conservative government are not acceptable.

The Official Opposition values and respects our fellow leaders in this province and respects the taxpayers. Bill 207 is about respecting the roles and responsibilities for the provincial government and our partners in Alberta's municipalities. The Department of Municipal Affairs in their 2000-2003 business plan has no performance measures for the target of "a coordinated provincial government approach towards municipalities." They also have no benchmark or target for this performance measure:

Level of satisfaction with the Ministry's activities, services, programs, and legislative framework in enabling and promoting a cooperative and well managed local government sector.

Bill 207 is an integral part of the framework for discussion of improvement of provincial/municipal roles and responsibilities in Alberta. A minister whose business plan talks about the need to redefine the relationship with the government but then does not include the targets or benchmarks is hardly in a position to try to

dismiss a constructive piece of legislation which is part of the framework for this discussion.

One of this government's favourite pastimes is being critical of the federal government. It is curious that the Minister of Municipal Affairs would not support a revenue-sharing principle in Bill 207 when he constantly criticizes the federal government for failing to return a fair share of the federal fuel tax to Alberta. The minister is even on record as supporting tax realignment. It makes sense that if the minister would be in favour of the federal government sharing tax dollars with the province, he would also be in favour of the provincial government sharing taxes with our municipalities. Bill 207 would allow for this tax sharing to take place in a predictable way, and this would help the provincial and municipal governments provide the best services to Albertans.

There also seems to be some confusion on the part of the minister as to how Bill 207 would allocate these dollars. On April 12 this minister asked about the money.

Would it be allocated on a per capita basis? Would it be based on personal income taxes paid by the municipality residents? Would it be pooled and redistributed based on the equalization of need formula? Would this income tax revenue be a replacement for other sources of revenue, or would it be in addition to what municipalities already receive from the province?

I'm pleased that the minister has thought through this issue and realizes the questions that need to be asked.

It's also my pleasure, Mr. Speaker, to quote the hon. Member for Livingstone-Macleod as he reads from an opposition press release, a release which was tabled by this minister in this Assembly.

Bill 207: the Provincial/Municipal Tax Sharing Act will allow for the allocation of a percentage of provincial personal income tax revenues on a per capita basis to local government.

The minister also had concerns that under those arrangements those communities which are more prosperous would get richer while other communities would get poorer. The per capita formula would not lead to this situation, Mr. Speaker. The mechanism for this formula would be an agreement between the province and the associations representing municipalities in Alberta: the Alberta Urban Municipalities Association, known as AUMA, and the Association of Municipal Districts and Counties, the AAMDC. The per capita allocation would be based upon the latest census, updated by population figures on municipalities prepared by Statistics Canada and the Ministry of Municipal Affairs.

I commend the minister for his concern about the fair and equitable distribution of taxes. Government grants of 5 percent per litre from fuel sold in Calgary and Edmonton will go directly to those cities, and future allocations of this grant will be tied to the population growth. Interestingly enough, other cities and municipalities will not be able to access this revenue stream even though almost 39 percent of fuel tax in Alberta is collected from outside these two main cities.

3:00

Mr. Speaker, Bill 207 is about equity. This is clear in the per capita formula that is proposed. Revenue sharing has the advantage of promoting greater fiscal co-operation between the province and Alberta local governments and heightens the awareness of specific roles and responsibilities of each level of government within the overall framework. This will result in improved communication and consultation between the levels of government and greater accountability to citizens.

Mr. Speaker, Bill 207 is brought forward before this Assembly to serve as a framework for discussion on revenue sharing between the province and our municipalities. This bill will provide local governments in Alberta, whether they be rural or urban municipali-

ties, with access to a more stable and predictable source of funding. This will give our municipalities an enhanced ability to meet their priorities.

I have today, Mr. Speaker, a complete set of copies, which I'll table, of my dissecting the actual speech put forward by the minister when he spoke on the 11th and the 12th about this one. It's pertaining to items like what the Minister of Municipal Affairs said and what our Official Opposition's response was to it point by point. These I believe will be tabled tomorrow at the AUMA meeting in Lethbridge, and one will be tabled in Calgary on Thursday.

Mr. Speaker, one thing, one of the few items the minister did say that I totally did agree with in his statements was that our communities are the backbone of Alberta's society. We live and work and raise our families in our communities. The quality of our life within our communities is dependent on the availability of local infrastructure. Maintaining our infrastructure is critical to Alberta's future competitiveness, providing the means of adding value to the products and services we produce and sell both here and in Canada and abroad. Infrastructure planning should and must be the core business function of the provincial government, in close collaboration with the municipalities.

The province likes to take the credit for the \$4 billion surplus at the provincial level, but why do they refuse to take responsibility for the infrastructure deficit they created over the last seven years at the local level? Between 1992 and 1998 general and specific purpose grants from the Alberta government to the municipalities declined by \$48 million, the second highest level of decline of any province in this country. Our municipalities have been subjected to a financial squeeze by the provincial government. Not only were provincial grants to municipalities reduced; the province also took access to a portion of the local property tax base. Meanwhile, provincial education property tax burdens – we all know about that. We also know about the committee. We all know about the tinkering.

At this time, Mr. Speaker, I will sit and let somebody else stand and speak on this one.

THE SPEAKER: The hon. Member for Drayton Valley-Calmar.

MR. THURBER: Thank you, Mr. Speaker. I'm pleased today to have the opportunity to add to this debate on Bill 207. I agree with the previous speakers from this side of the floor, and I'm somewhat confused as to the advantages that this bill would supposedly bring to Albertans.

I had the honour to serve as the Minister of Municipal Affairs from 1995 to 1997. During that time I worked very closely with all of Alberta's municipalities, particularly in relation to determining their needs and the kinds of funding pressures they were experiencing. And they were; it was a difficult time for all levels of government. All levels of government were facing budget pressures, and difficult decisions had to be made on what programs and services were of greater priority. We met many, many times with the associations and with individual municipalities, and thanks to them, in part, we were able to come through this as well as we have.

Municipal governments faced the same decisions that we as a provincial government faced, that being: do we raise taxes, bring government spending under control and in some cases reduce government spending, or do we do both? As is so well known and documented – it is no secret – this government of Alberta, on the direction of the people of Alberta I might add, brought government spending under control through sound, reasonable, and responsible economic management, and I think we should give credit where credit is due. These measures worked, and the prosperity we are all enjoying today is a direct result of this effort that was put forward by

not only municipalities but by this government and the people of Alberta.

Hindsight is always 20-20, as the cliché goes. It is always easier to criticize than to do, and at its heart this is what this bill is all about. Bill 207 seems to propose an arbitrary and artificial process that is only likely to cause confusion and difficulties between the province and the municipalities. There is no recognizable benefit from this bill.

This bill would require the Provincial Treasurer to prepare a public report each year that sets out in detail the effect that sharing an assumed percentage of provincial income tax revenue with municipalities would have on provincial finances. The assumed percentage is to be determined by the Legislative Assembly on a motion moved by the Provincial Treasurer. If the Legislative Assembly does not approve the motion, then the Provincial Treasurer must set the assumed percentage himself and then make it public. In this case the rate chosen by the Treasurer must then be debated and voted on by the Legislature within 15 days of being established. If the Legislature is not in session, then it must be debated within 30 days of the commencement of the next sitting of the House.

There's no guidance in this bill regarding what factors are to be taken into account when determining this percentage either from the perspective of the province or of the municipalities. There's no mention of tying the funding given to municipalities to performance measures, objectives, or goals. Albertans want to see targeted funding and accountability, and this government has supported such measures through our budgets and business plans.

There's also no mention of the effect that contributing a percentage of provincial income taxes, whatever that percentage might be, would have on the existing funding in the municipalities. Would the system envisioned by the sponsor of this bill replace existing municipal funding? I don't know; it doesn't say. If so, causing municipalities to rely on fluctuating provincial income tax revenue will destabilize their funding and make budgeting very difficult both in the short and the long terms. Or does the bill propose that in addition to the provincial funding and revenue generated by the municipalities themselves through their property taxes and services, the province further grant them a percentage of provincial income taxes? It doesn't say. If we were to dramatically increase the amount of funding going to municipalities, this would be done at the expense of other priorities such as health care and education.

Bill 207, in my view, would entangle municipal and provincial tax policies in an undesirable way. Calculating a transfer amount to municipalities as a percentage of provincial income tax revenue would tie municipal revenue to provincial tax policy decisions. This would leave municipalities with less independence than they currently possess. They've asked for independence, they've asked for powers, and we've been giving them that over the years. It would just mess up everything. They wouldn't have a chance to know what they were getting. It would also leave them more vulnerable, since reductions in provincial income tax revenue would translate into a reduction in the revenue which would be transferred to the municipalities.

We have three-year business plans now that generate a foreseeable future for them to determine the amount of money that's coming to them. For the same reason that we as a province argue to delink our income tax regime from that of the federal government, so also should municipalities not have their revenue tied to the province's tax policies, over which they have no control. The government is already addressing pressures on municipalities by increased funding and providing onetime grants, when we have the money, to address infrastructure problems associated with strong economic growth in our province.

Currently we have a stable and predictable funding arrangement in place with municipalities. The sources of funding are certain, coming from the various grant programs. As I mentioned before, the department's three-year business plans have contributed to this stability, enabling municipalities to forecast their budgets predictably over the next two to three years.

In 2000-2001 the province will fund approximately \$815 million directly to municipalities. Of this, \$110 million will come from Municipal Affairs and \$705 million will come from the Department of Infrastructure. In addition, a new system of transportation grants will be phased in over the next year to help address pressures in Calgary and Edmonton.

This current system is far superior to the method proposed by Bill 207, which would essentially require the Treasurer to pull a number out of thin air to determine the level of funding that municipalities should receive. This bill serves no purpose other than to create municipal/provincial conflict with respect to funding. It is possible that the percentage voted upon by the Assembly would be criticized by municipalities, regardless of how high it is, as being insufficient. Since the bill provides no mechanism for consulting municipalities in determining the percentage that would be proposed before the Assembly, conflict would very definitely arise here as well. Finally, as somebody has pointed out a little earlier here, Bill 207 really wanted to be a money bill, which of course private members' bills cannot be, and that's one thing we do agree on.

There are many problems and disadvantages with the proposal contained within Bill 207 and no advantages that I can see. Mr. Speaker, I would urge all members to vote against this bill because it's a know-nothing bill.

3:10

THE SPEAKER: The hon. Member for Edmonton-Calder.

MR. WHITE: Thank you, Mr. Speaker. First of all, I'd like to go over a little history of municipal finance in this province and understand a little bit about what a municipality does and the breadth of a municipality's interest, and then I'll perhaps debunk some of the statements by Drayton Valley-Calmar.

Having had some experience in that arena, in municipal finance, I can tell you that the breadth of decisions that one makes is relatively narrow and that the expenditures are very, very predictable in a municipality. The level of taxation does not vary a lot on the income side, so the income side and the expense side are relatively stable, as you'd find in a large corporation that doesn't have a great deal of income that is related to income of its citizenry or income of the tax base.

Saying that, when this province downloaded a great deal of the services – i.e., police, transportation, social services, and general municipal grants – onto the municipalities, they were hard pressed to make up the difference. In fact, they cut and cut and cut, and today I believe there's probably in the order of perhaps 20 percent fewer employees in that level of government than there were in, say, about '89 to 90. They have jumped to the pump, as it were, and rose to the challenge. Yes, their taxation rates had to increase, and they apologize for that profusely at every opportunity to their electorate and in fact are held accountable for those increases.

The difficulty they find themselves in is from the expansion of the areas of responsibility without the commensurate expansion of taxation. We all agree in this House that there is but one taxpayer. It's the same one, whether it pays provincial tax in the way of income tax or federal tax or excise tax or gas tax or municipal property tax. The difficulty the municipalities find themselves in is that they are taxing on behalf of the province for education and on

behalf of themselves in the way of their municipal allocation, and the municipal allocation is based on the value of property. It's not based on services to property. Otherwise, things like recreation, social services, and the like would not attract tax. Those would be expenditures of the general revenue. Those would be expenditures that should fall from the generation of wealth in a province, not from the expenditure of wealth; i.e., on personal property.

I'm sure every member in this House would agree that it's wise to encourage our residents to expend some time, effort, and money on the development of their personal properties and therefore their quality of life and enjoyment of life, but this taxation system in the province of Alberta is a detriment to that end. It does nothing to further that end at all. This piece of legislation goes somewhat in that direction. It says to municipalities, "Here is an opportunity, albeit we'll have to cut back some granting and some solid granting," that is supposedly ongoing, although it never is. "We'll cut back on that and give you some percentage points on a per capita basis for your residents," knowing full well in doing so that that rate will rise and fall and vary with the economy.

Now, I believe, as most others believe, that the elasticity in a municipal tax budget is rather limited, as I said earlier, but it does have some elasticity, and that is demonstrated very well by virtually every municipality. They do manage. On a day-to-day basis they are much more reactive than a provincial government. A provincial government by its very nature must take care of all of the parts of a province. A municipality is much more locally based. It can act and react much more quickly.

Aside from that fact, when you have municipal governments in the order of, say, 300 municipalities that have some magnitude, that can act and react to these expenditures and have a staff to assist them to that end, and one provincial government, if there's a large influx of income over one year to the next or, on the contrary – we don't like to think of it – perhaps a drop in income, then the elasticity in the entire province and therefore the utility of the expense in those areas and the product it will turn out is so, so much better in aggregate. It's this member's view that in allowing municipalities that leeway and in fostering that growth so that they are continually thinking of the economic good of the province, because it has a direct relationship to that which they call income in their budgets, it would be, I would think, of benefit to all concerned.

Now, this perhaps is not the be-all and end-all of provincial/municipal taxation sharing, but it goes some way to doing a very, very important thing also. It does speak to respect for that level of government. We heard the member opposite awhile back say – I think I can quote him fairly closely – that this bill would make the municipalities less independent. Now, this member has a great deal of difficulty understanding that logic, because the current system is a system of grants which can be modified, added to, taken away from at the whim of a minister, and in fact history has shown that it changes ever so rapidly with the mood change of a province or an election or a new minister. It changes not on a daily basis but certainly changes on a year-to-year basis, and municipalities hang on tenterhooks every year to find out what the minister is going to grant them or not. It's not quite always a crapshoot, but it is certainly not as predictable as one might like.

To have a percentage of an income tax that's generated in the province of Alberta, which is a well-known, published number, to know that that comes out on a quarterly basis perhaps, and to then say that that is less predictable and makes the municipalities less independent is absolute balderdash. It could be said worse too. Any member of any council will understand that fully and completely.

The member opposite also said that he found a great deal of difficulty deciding on how the percentage would be arrived at. Well,

that's a matter of negotiation between the municipalities, of course, and it has to work over time. It has to be structured, and it would have to be dealt with by the AAMDC and the AUMA, of course, and have their input. It may start out as a relatively small figure, until such time as the municipalities felt comfortable with the method of finance, and then move into a final level of perhaps as high as 11 percent, with the commensurate reduction in the grants as they sit today. The funds would then be relatively stable and predictable over the course of time and do that which is so important to a municipality, which is to actually respect their opinions and their positions.

3:20

Now, I haven't touched on a very, very touchy subject with the municipalities that they would dearly love to do away with, and that's the collection of the property tax along with the municipal tax. That of course is a bit of a sore point with all of the municipalities because while receiving no funds or recognition for collection of those funds, they continually receive at tax time, when municipal taxes are due, all that negative feedback from their electorate, which is of course understandable.

There are a number of reports, the most recent of which was really quite an enlightening report from November of '98, not that terribly long ago, Mr. Speaker. It was titled Joint Calgary-Edmonton Case for Provincial Investment in the Two Cities. It's quite emphatic about the cities being the generators of more growth, and quite frankly I can't see how any arguments can be made that in fact they're not. Yes, the gross domestic product is aided and abetted by traditional industries: the oil and gas industry of course; the timber industry; the coal industry, which is in a low ebb right at the moment, but it shall return; and of course the solid agricultural base we have. But that is not the area of growth that is going to sustain the growth at a level in this province such that our children and grandchildren are able to have stable and solid employment. It's actually in the cities.

These cities in their municipal management are exceedingly sophisticated, and I'm not talking just about Edmonton and Calgary. I'm talking about Lethbridge, Medicine Hat, Red Deer, Fort McMurray, Grande Prairie. These people that manage these municipalities, from the administrators to the politicians, are exceedingly good at managing their funds. I recognize, as I said earlier, that there's limited scope for variance from one year to the next because their capital expenditures are laid out in lockstep. As well, the maintenance programs are fairly well laid out too.

[The Deputy Speaker in the chair]

So the range of expenditure is rather limited, and they can spend a great deal of time working very hard at deciding where the next major capital expenditure is going to foster growth in their area, to be a facilitator for those entrepreneurs that wish to take advantage of some special conditions or an initiative designed to enhance value or to allow the entrepreneurs of the local area to be able to grow in and foster their community. Well, this particular piece of legislation aids in that area. This rises and falls with the economic generation in any given area. Yes, it falls perhaps a year, perhaps 18 months after the fact of this increase, but it does nonetheless, such that that element of the budget of a municipality can rise and fall and vary with the economic activity. They can predict it, they understand it, and they can manage it exceedingly well. This piece of legislation says respect, respect, respect and that we understand how you can manage better than we the province.

There are a number of other areas that need to be covered in this

debate. Some of them are quite easily understood in putting this piece of legislation forward. When one reviews the amount of money that in fact is generated by the residential property tax in the province of Alberta, the education portion is that sore point, of course, and we remember the \$650 million that was generated in and around the '95-96 budget area. It will be going up to some \$775 million in the year 2002. That's an increase of some 19 percent over that six- or seven-year period.

On the face of it, it would not sound to be a great deal, but recognize that that is coming out of the hide, if you will, of that beleaguered taxpayer every time that homeowner puts an addition in the way of a porch on the back or rebuilds a carport. Anytime they get a building permit to with their own hands build something, the value of their property goes up, which makes them very pleased and makes them much more proud citizens of course, but it's double-jeopardy. Now they pay more tax upon that property and in an area that has nothing, absolutely nothing, to do with the services that that property attracts; i.e., education, recreation, social services.

I suppose one could say that land use management would be related. Emergency services certainly would be. Infrastructure elements such as the roadworks, the underground sewers, all of that lot would be related. A property owner can understand that, can understand how an addition to their property could in fact trigger more tax—that's not so difficult to understand—but in an area where tax would be likely to be attracted, not in some totally, completely unrelated area.

There was a time not long ago that the province actually forgave the educational portion of the tax to senior citizens on the basis that they were no longer using the service. Well, that was some recognition that these services were paid from the property tax when in fact they were not in any way related. This government dropped that provision in the early '90s. Quite frankly, I think it did nothing but terrible things to the senior population. It moved a lot of them out their homes because one of their fixed costs was of course tax, and it added burden onto another area of provincial expenditure now, which is long-term care and the like. That's the extent of changes in taxation policy. This government does not pay a great deal of attention or at least does not appear to pay a great deal of attention when these bold strokes do occur, incidentally with very, very little debate in the Legislature.

There are of course a number of studies, and I think that by my count the AUMA has fostered in my time, from about '83 to today, in the order of seven studies that would say: look, provincial government; share a little of the economic largesse with us, and we will be respectful of that and will do the best we can to expend funds as they should be expended. I believe that at virtually every AUMA annual meeting the resolutions come forward, and there are at least three and sometimes as many as 17 elements of taxation that deal with provincial/municipal taxation and the sharing of what is sometimes gas tax, sometimes income, sometimes any number of things.

With that, Mr. Speaker, I see that you've indicated that the time has expired for this portion. I shall take my seat. Thank you, sir.

SOME HON. MEMBERS: Question.

THE DEPUTY SPEAKER: Are you ready for the question?

MR. WHITE: No, sir. I believed that you were indicating that the time ran out. At least the table officers indicated that the time was expired.

THE DEPUTY SPEAKER: Thank you. The chair was asleep.

We have to interrupt your speaking because the time consideration

for this item of business has expired. It was just that the cries of "question" triggered the wrong response.

3:30

head: Motions Other than Government Motions

Long-term and Home Care

507. Ms Leibovici moved:

Be it resolved that the Legislative Assembly urge the government to further increase the number of beds and improve standards for long-term care facilities and home care services with regard to staffing ratios and levels of service to adequate levels and ensure that regional health authority boundaries do not become barriers to placement.

[Debate adjourned April 11: Mrs. Soetaert speaking]

THE DEPUTY SPEAKER: The hon. Member for Spruce Grove-Sturgeon-St. Albert.

MRS. SOETAERT: Thank you very much, Mr. Speaker. I believe I have a few minutes left on this very important motion, just three short minutes on this very important motion. It is a motion expressing concerns and the need to act upon the lack of long-term care beds for people who need long-term care placement and on the issue of accessibility across boundaries in regional health authorities. I know that members have said, "Oh, we addressed this in the Broda report," but that's just not so. There are still issues of not being able to access a long-term care bed in a regional health authority that you do not live in. The reality of our world is that people like to be near family in their last stages of life, so if they're sent far away – yes, they need care, but they also need family near – that makes it very, very difficult, I would say, for everyone involved.

This motion virtually states that the number of beds is inadequate. We know that. I'm tired of reports that say that we have to address it and then we don't. I would urge all members to support this motion. It is calling for some action.

Home care services. Wouldn't we be smart, you know, if instead of investing in all kinds of private opportunities, we would properly manage home care and promote that? We would save money and be far more efficient and serve our constituents' needs far more than they are now. Certainly we have wonderful people working in those areas. All we need to do is ask them for input, and they could tell us. They could tell us how to make it better.

It also expressed concern about "staffing ratios and levels of service to adequate levels." Often we're concerned about de-skilling, and we certainly have to be cautious of that in these situations so that these people are well cared for.

Of course, the one that always concerns me the most – and people here have heard it often – is the ability to access care in a different health authority. If we're doing this with physiotherapy and we're doing this with long-term care, how soon will it be before we're doing it with acute care? I think we should all be concerned, especially those of us who don't live in the big centres of Edmonton, Calgary, and Red Deer. Those of us who have constituents who are just outside a boundary had better be concerned about that. I know they've heard the same heartaches and have had the same calls about families unable to access long-term care beds close to them.

Mr. Speaker, with that, I urge all members to support the motion.

THE DEPUTY SPEAKER: Apparently the 55 minutes allowed for a private member's motion have elapsed. That's what the timing was, not that the hon. member had but three minutes to speak. While that was true, it was that the whole debate, the 55 minutes, was finished.

[The voice vote indicated that the motion lost]

[Several members rose calling for a division. The division bell was rung at 3:35 p.m.]

[Ten minutes having elapsed, the Assembly divided]

[The Speaker in the chair]

For the motion:

Blakeman	Massey	Sloan
Dickson	Olsen	Soetaert
Gibbons	Paul	White
Leibovici	Sapers	

Against the motion:

Broda	Hlady	Severtson
Burgener	Jacques	Shariff
Calahasen	Johnson	Smith
Cao	Klapstein	Stelmach
Coutts	Kryczka	Stevens
Ducharme	Laing	Strang
Fischer	Magnus	Tannas
Forsyth	Mar	Thurber
Friedel	Marz	Trynchy
Graham	McClellan	West
Haley	McFarland	Woloshyn
Hancock	Melchin	Yankowsky
Herard	Nelson	Zwozdesky
Hierath	Paszkowski	

Totals:	For - 11	Against - 41
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[Motion Other than Government Motion 507 lost]

Cell Phone Use while Driving

508. Mr. Trynchy moved:

Be it resolved that the Legislative Assembly urge the government to examine the results of the study undertaken by the provincial auto insurance Crown corporation of Quebec, Societe d'Assurance Automobile du Quebec, SAAQ, on the dangers of handheld cellular telephone use by drivers of motor vehicles and then consult with Albertans on whether and what restrictions should be imposed on the use of handheld cell phones by operators of motor vehicles while driving.

THE SPEAKER: The hon. Member for Whitecourt-St. Anne.

MR. TRYNCHY: Thank you, Mr. Speaker. I'm pleased to rise and introduce Motion 508 this afternoon. As a cell phone user myself, I must say that I find them to be a very useful tool in allowing me to stay in contact with my job here as MLA, with the business world, with family, and with other people.

[The Deputy Speaker in the chair]

The proliferation of the cell phone since its introduction in 1983 and its usefulness have caused me and many Albertans to see this device as essential in our everyday lives. The cellular phone allows a new freedom to Albertans, the ability to be mobile and still able to reach and be reached by family and work. This ability to communicate underlies this communication revolution that our global society is currently engaged in. This device has proven to me and many

Albertans its usefulness. It allows Albertans to be more efficient and productive with their time and dramatically cuts down on emergency response time to accidents. But we have heard some concerns. In 1996 the cellular phone had penetrated 20.8 percent of households in the province of Alberta and 26 percent of households in Canada by 1998.

3:50

Mr. Speaker, in my travels through my constituency and the province I have heard a great deal of concern regarding the safe use of handheld cellular phones by drivers. The use of such a device could be a threat to traffic safety and may be causing accidents on Alberta highways. The reason I brought this forward is that when I received my cellular phone, I looked at the instructions in the pamphlet, and something struck me as quite important. I want to read into the record just part of what was in there. It said:

Check the laws and regulations on the use of wireless telephones in the areas where you drive. Always obey them. Observe the following guidelines when using your phone while driving.

- Give full attention to driving – driving safely is your first responsibility.
- Use hands-free phone operation, if available.
- Pull off the road and park before making or answering a call if driving.

That is quite a message from those people who provide the cell phones.

Many of my colleagues have expressed the same concerns, and also we've heard it from the police sector. That's why I'm introducing this motion. It is a responsibility of this Assembly to address issues that concern Albertans and to protect the motoring public. The purpose of this motion is not to ban cellular phone use. It's not worded that way, and it's certainly not my intention. It's my intention to ensure that constituents and Albertans have a say in what, if any, restrictions should be initiated on drivers using handheld cell phones while driving and to base those decisions on accurate and viable scientific results, results that only a comprehensive study of the risks and dangers of handheld cellular phones used by drivers can establish.

Mr. Speaker, currently all Canadian jurisdictions by virtue of their membership in the Canadian Council of Motor Transport Administrators are awaiting the results of the Quebec study referred to in this motion before considering the restriction of use of handheld cell phones. Lawmakers in many countries and provinces are waiting for full direct evidence that indicates that the use of cellular telephones in cars contributes to roadway collisions. Despite the lack of conclusive evidence, laws against using handheld cellular phones while driving have been put in place in Brazil, Israel, Japan, China, Switzerland, the United Kingdom, and two Australian states and have been debated in many jurisdictions. Even in New York City a limitation of cell phone use applies to city taxicab drivers.

Advocates can cite both simulations and real driving experiments showing that a telephone conversation involving mental tasks slowed reaction times by half a second or more. Placing a call was found to be more distracting than turning on the car radio or engaging in a conversation, and it makes steering more imprecise in city traffic, especially by users of handheld phones.

Mr. Speaker, there is no doubt that handheld cellular telephones cause a distraction to drivers. Although there is no direct evidence to prove that distractions cause vehicle accidents, it is important to note that 99 percent of total accidents involve driver error and distraction that can cause a driver to err.

Overall, the number of reportable collisions in Alberta has been increasing in recent years. Reportable collisions for a thousand drivers exceed the old Alberta transportation and utilities target rate

by 2.5 percent, for a total of 44.7 collisions per 1,000 drivers in 1997. Moreover, Alberta has the highest rate of injuries, 84 per 10,000 motorists, and the second highest rate of fatalities, 1.6 per 10,000 motorists in Canada. In 1998 the overall number of collisions increased by 6.8 percent to 98,601, while injury collisions increased by 4.3 percent to 24,935. Fatal crashes increased by . . .

THE DEPUTY SPEAKER: Order. Hon. members are reminded that this is Assembly and not committee.

Hon. Member for Whitecourt-St. Anne, sorry to have interrupted you because two members forgot where they were.

MR. TRYNCHY: Thank you. As I mentioned, the overall number of collisions increased by 6.8 percent to 98,601, while injury collisions increased by 4.3 percent to 24,935, and fatal crashes increased by one death to 429. Over the last five years the number of collisions were the lowest in 1994 and the highest in 1998. Mr. Speaker, it's yet to be ruled that cellular phones used by drivers account for at least some of the increase in collisions.

The Department of Infrastructure recently conducted a survey called Rules of the Road. In that study respondents were asked if they felt regulations should be put in place to address distractions that take a driver's full attention away from the care and control of a vehicle. Mr. Speaker, more than 70 percent of the respondents and stakeholders agreed that restrictions should be in place. Of the general public 73.1 percent felt some restrictions should be in place.

The most highly publicized study on this issue between cell phone use and accidents was printed in 1997 in *The New England Journal of Medicine*. The study was conducted in Toronto and polled 699 drivers who owned cell phones and were involved in motor vehicle accidents. The researchers then compared accident reports against phone company records to determine whether the driver was actually on the phone at the time of an accident. The authors concluded that the use of a handheld cellular phone while driving actually quadrupled the risk of collision.

Quantifying the risk of using a cell phone while driving was the subject of an exhaustive 1998 report from the National Highway Traffic Safety Administration in the United States. The study, an investigation of the safety implications of wireless communications in vehicles, drew on industry surveys, state highway agencies, its own fatal analysis reporting system, and other evidence. The study concluded that the use of cell phones while driving does increase the dangers of a crash. While stopping short of indicating a natural increased risk level, because that data to quantify the risk does not yet exist, the study nevertheless made some interesting discoveries.

Mr. Speaker, they found that it was not just the actual handling of the phone that was dangerous but the mere act of having the conversation that increased the risk of an accident. The study also indicated that the overwhelming majority of handheld cell phone users were in the striking vehicle. Finally, the most prevalent factor in crashes attributable to cellular phone use was driver inattention. Although these studies indicate safety concerns of cell phone use by drivers, none have claimed to be comprehensive enough to justify legislation on the matter. Mr. Speaker, Motion 508 is a proactive measure that may decrease the 17,345 casualty collisions on Alberta roads, many of which are caused by driver distraction or inattention.

The idea of banning the use of cellular phones while driving is getting a lot of attention. Bills have been introduced in Arizona, Colorado, Florida, New York, and throughout the States, but so far none have been passed into law. Currently the only jurisdiction in North America to pass an ordinance is a small town of 11,000 people, Brooklyn, Ohio. Except for emergencies Brooklyn forbids drivers from using handheld cell phones while the car is in motion.

It does not forbid the use of handheld phones or talking on these phones while the car is parked. Mr. Speaker, this ordinance took effect in March of 1999, and by the end of August of 1999, a short time later, 150 warnings had been issued. It is interesting to note that this municipality was also the first North American jurisdiction to institute mandatory seat belt legislation back in 1966.

4:00

Mr. Speaker, I encourage debate on this motion because Albertans have asked for it, but I also want to ensure that Albertans are consulted before any legislation is put in place and that there is conclusive evidence of the dangers of handheld cellular phones while driving. Let's review the study. Let's find out what the results are and find a way to educate the motoring public for the safety of our Alberta highways.

Thank you.

THE DEPUTY SPEAKER: Hon. members, may we have unanimous consent to briefly revert to Introduction of Guests?

[Unanimous consent granted]

head: Introduction of Guests

(*reversion*)

THE DEPUTY SPEAKER: The hon. Associate Minister of Aboriginal Affairs.

MS CALAHASEN: Thank you, Mr. Speaker. I'm really honoured today to introduce to you and to Members of the Legislative Assembly a very bright young woman who is the provincial vice-president of the Metis Nation of Alberta, the first woman ever elected as the provincial vice-president. She's doing some really absolutely wonderful things with the MNA, and I know that she's very proud of what she's been able to accomplish to date and continues to do so. She's standing in the members' gallery. Her name is Ms Brenda Bylan-Calliou, and she hails originally from Buffalo Lake but now lives in Edmonton. I'd ask that the Assembly give her a warm welcome, please.

head: Motions Other than Government Motions

(*continued*)

THE DEPUTY SPEAKER: The hon. Member for Spruce Grove-Sturgeon-St. Albert.

MRS. SOETAERT: Thank you very much, Mr. Speaker. I looked at this motion and thought: I know I'm the transportation critic and I know that it's dangerous to be driving while you're on the phone, yet so many of us in here do it. It's kind of hard to really speak on one side about safety and no cell phones and on the other side be doing it. So here I am, doing both.

Of course, if we're going to look at a study – and as I understand it, it's part of a consultation process right now within the department under the regulations of the Traffic Safety Act. Now, I could be wrong on that, and maybe the minister will clarify that later. Who knows? My understanding of that is that Albertans are being consulted right now in our own province. However, I see no harm in looking at a study that's been undertaken in Quebec. If they've done a lot of research on it and it can give us some information, of course we should accept that.

The reality is that it is dangerous to drive while on the phone. Some people shift gears while they're doing that too. They're shifting and clutching the phone – and if this was a visual, I think

people in TV land would appreciate it – putting on lipstick and shaving at the same time, I heard the Minister of Transportation say at a conference. I hope he wasn't referring to women on that. [interjection] "Putting on mascara too," says the minister across the way.

Seriously, I do believe I read somewhere that Alberta has one of the highest use of cell phones in the country. Anything to do with cell phones is certainly going to affect a great many people. I have to say that I do worry when I see somebody making a lefthand turn while they're talking on the phone during rush hour, probably telling somebody to pick up milk and bread on their way home. That's worrisome. That's very dangerous.

On the other hand, I know that in instances of calling 911 or calling the police on dangerous drivers and drunken drivers, then the reality of using a telephone in your car is essential. Plus there are many of us who spend many, many hours in our vehicle and sometimes that's the only way to contact our offices and make business connections, et cetera. Maybe that's not an excuse, but I'm wondering in this report if hand held is different from hands free, if the results on the safety of hand held is different from hands free. Some say there is no difference. I would like to think there is. I'm going to be interested to see the results of that.

I know most of us probably have hands-free phones in our cars, and now there's about a \$40 attachment that you can just wear as ear phones and connect to your cell phone to be used in the car. I'm sure as we drive along and people look at the neighbouring car and see you talking to yourself, they may wonder who you are talking to, or maybe you're just singing along with something. I think we do have to address the issue of safely driving in this province in many aspects.

We have one of the highest accident rates in the country, as well. Cell phones are most likely attached to that. There are laws in different parts of the world about using handheld phones while driving. It's interesting though. There are studies on fatigue while driving, and I've got to say that sometimes driving home late from the Legislature – I'm probably one of the few people who drives a bit of a distance home every night. There are probably a couple of others in the Assembly that can commute, but they don't live within the city. Actually, I will phone someone at home who I know will be awake just to touch base and kind of wake up again. Now, that's not safe driving, but it's the reality of cell phones in some ways being an assistance.

So I of course support this motion. We do already have the capability within the law, if we are driving dangerously, for policemen to enforce dangerous driving. I believe that's under the highway Traffic Safety Act as well.

I look forward to the results of this. I realize that before any legislation on cell phones takes place, it's going to be a while and we're going to have the people in Alberta aware of the dangers of it. With the reality of a \$30 piece of equipment that you can plug into a cell phone, maybe that's the answer. I don't know. Many people who do not have cell phones have phoned me and complained about, you know, the dangers. Being on the phone and driving is very serious. I don't allow my children – isn't that funny? – to use their dad's cell phone while they're driving. They can take it with them, but they'd better not use it while they're driving. Once again, it's hard to preach if you don't practise. However, mine is hands free, but it still is not without a concern for safety, and I think people recognize that.

I think this will be an interesting study to look at. I look forward also to the consultation progress and process of our own government and what they're doing in the Department of Infrastructure. I don't know the answer to the whole cell phone issue. I wish I did. I think

the reality of our world is that we do have cell phones available to us in most parts of this province, though I have to say that some areas need more towers, because the reception isn't good all over the province.

The reality of the advantages of being able to use a cell phone - and I often think: you know, we have home care workers in isolated parts of this province. It's a safety feature for them. It's the availability to phone the office and say: "I'm going into this home. I know that some things have not always been safe there, and I want you to know I'm going in. I will be checking in with you in another 20 minutes or half an hour. If I don't, would you please send someone?" It's a safety feature for many health care workers. We should be looking at better reception all over this province, because there are parts of the province where the reception isn't that good.

I think there is a balance to be found here. Maybe the balance is in that they are a hands-free phone when you are speaking in the car. I don't know if that's the answer. The reality is that we're in that age when phones are available everywhere and people have them in their vehicle. They should pull over when it's a dangerous situation or they shouldn't be using it or they should have at least hands free.

4:10

I've been all over the map here, but I want to say that I have concerns about people using handheld phones in the car while they are driving. I do think we have to address that. I've seen instances where really it's a good thing somebody is defensive driving because other people using those phones are not. So I understand the concern.

I look forward to the report. I also know the reality of our world is that we do have phones in the car, so maybe we will need some guidelines and restrictions within that. I look forward to the government examining the results of the study. How could I not support that? It'll be interesting when we see if we are going to have legislation or regulation regarding that.

Thank you very much, Mr. Speaker.

THE DEPUTY SPEAKER: The hon. Member for Calgary-Fort.

MR. CAO: Thank you, Mr. Speaker. It is my pleasure to speak in favour of Motion 508, proposed by the hon. Member for Whitecourt-St. Anne. It is a motion urging the government

to examine the results of the study undertaken by the . . . Societe d'Assurance Automobile du Quebec . . . on the dangers of handheld cellular telephone use by drivers of motor vehicles and then consult with Albertans on whether and what restrictions should be imposed.

Mr. Speaker, the cellular phone has become part of the everyday life of many Albertans. Mobile phones are an enormous asset to people in all sorts of ways. They help us at work, they help us stay in touch with our families, and they are of great benefit in emergency situations. In fact, since the proliferation of cellular phones the response time for emergency vehicles has been significantly reduced, no doubt saving lives. Over 7 million cellular phone calls a day are placed in Canada.

While cellular phones are a great asset to many Albertans, they may not be an asset to a driver seeking to properly control a vehicle. Mr. Speaker, we all know that the use of cellular phones by drivers of automobiles is becoming a concern for many Albertans. As the use of cellular phones grows, so does the potential danger on Alberta highways. I must say that I drive quite frequently in this province, and the evidence of my own eyes identifies the need to address this issue.

We have all seen that guy in the car swerving through the traffic with a phone glued to his ear. The driver endangers himself and the lives of other drivers and pedestrians on the road because his phone

call is so important. That image is a frightening one, indeed, and the main reason why this motion has been brought before this House.

Cellular phone use by drivers has been banned in many jurisdictions throughout the world. From Victoria, Australia, to Brooklyn, Ohio, legislatures and local governments have decided that driving and talking on the phone shouldn't be done at the same time. New York City taxi drivers can't use phones and drive, and in England, Singapore, and Brazil drivers must use hands-free devices while talking on the phone.

The question is, Mr. Speaker: does outlawing cellular phones while driving make sense? It seems like a no-brainer here. Surely the cellular phones could be banned if they are the cause of many fatal accidents in Alberta. But are they? We cannot reach a conclusive answer to this until we have more evidence to support this claim.

Mr. Speaker, the reason this motion is worded as it is is to bring much needed information into the debate on the safety of cellular phones and to initiate consultation with people affected by any law that would be put forward. Albertans have to have their say. Furthermore, any decision to ban the use of cellular telephones by drivers in the province of Alberta should be based on scientific evidence. That evidence will be available with the conclusion of the Quebec study.

All Canadian jurisdictions, by virtue of their membership in the Canadian Council of Motor Transport Administrators, are obligated to the council. This is to ensure some level of uniformity in driving regulations across all provinces in Canada. In addressing the issues of cellular phones, the council decided that the evidence that was available on the issue did not apply well to Canada and left some gaps and questions unanswered. That is the reason the provincial auto insurance Crown corporation of Quebec was commissioned to conduct a study. It was Quebec's turn to conduct a study, and all Canadian jurisdictions are awaiting the results before considering restricting the use of cellular phones.

Mr. Speaker, in order to facilitate discussion on the issue, the Department of Infrastructure recently conducted a survey called Rules of the Road, a consultation that asks some serious questions about traffic safety issues. In that study respondents were asked if they felt that regulations should be put in place

to address distractions that take a driver's full attention away from the care and control of an automobile (e.g. reading, eating, family pets, cellular telephones.)

More than 70 percent of respondents and stakeholders agreed that restrictions should be put in place. Of the general public 73 percent felt some restriction should be put in place.

These figures are important in this debate because before we discuss banning phone use, we must address other distractions that drivers face. There are clearly many activities that drivers participate in behind the wheel that could cause distraction. We must assess the relative level of distraction. If we ban the use of cellular phones, should we also ban the whole list of other actions? Would it be necessary to ban drivers from tuning the radio, drinking coffee, eating a sandwich, or conversing with passengers in the car?

Mr. Speaker, that is why, first of all, we need to establish what sort of danger a cellular phone represents relative to other distractions that drivers face, a distinction the Quebec study should provide. Studies and polls have been conducted in other jurisdictions, but they have been vulnerable to scientific criticism. Although these studies have been highly questioned, I would like to discuss the results, because they provide evidence as to why more study is needed on the issues.

The most publicized study appeared in *The New England Journal of Medicine* in 1997. It indicated that drivers whose attention is

distracted while talking on a cellular phone are four times more prone to having an accident. The University of Toronto study discovered that younger drivers are more prone to problems than older drivers. The study also concluded that talking on the cellular phone while driving was at least as dangerous as driving while at the threshold of legal intoxication.

This study was highly criticized within the medical and statistical communities. The final figure was seen to be overexaggerated because the sample group only included vehicles that had cellular telephones and did not include nonusers of cellular phones. The study also faulted cellular phone use if the phones had been used up to 10 minutes before an accident occurred. Even the author of the study admitted that the media was making erroneous claims from the results. They also indicated that the study only examined the association of accidents and cellular phone use and did not examine the cause and effect relationship. Therefore it cannot indicate if drivers using cellular phones were at fault in a collision.

4:20

Mr. Speaker, multitasking has become a familiar buzzword in the last few years. When we work on our computers, we can accomplish one task while the computer does many tasks. In the workplace people who can manage multiple tasks without confusion are often the most efficient employees or businesspeople. However, the act of driving is a task that should require the full attention of the driver. With modern technology people have been trying to find ways to make that time behind the wheel more productive and entertaining. It seems that this modern and technically advanced society does not see driving as a task requiring concentration but as an inconvenient time spent getting from A to B, time that could be made more productive.

Indeed, for some people a car is a perfect place to apply lipstick, to do crosswords, to guzzle coffee while keeping one eye on the road and one hand on the wheel. These days it is also a good spot to plug in the laptop, the fax machine, the cellular telephone. If the market demands it, the producer will build it. Many cars nowadays come with not only one power outlet but three so that we can plug in all our gadgets and gizmos. In fact, in Japan, where traffic jams are a national pastime, a world-renowned car manufacturer offers a new option, an in-car karoake machine. We can do some singing. Mr. Speaker, multitasking can make commuting more effective or fun, but it also makes driving more dangerous.

In a district of Japan a law prohibiting the use of cellular phones while driving a car has local police claiming a 75 percent reduction in the number of traffic accidents. In the month of November of 1999 62 accidents were caused by drivers using mobile phones, compared to 223 the previous November. Researchers in Japan found that overall the use of mobile phones while driving was responsible for 27 percent of all car accidents last year in Japan, resulting in 33 deaths and 3,473 injuries. [interjection] But in Japan they drive on the left-hand side.

In Taiwan a survey found that 7 percent of respondents openly admitted to having been involved in car accidents because they were talking on a mobile phone while driving. Researchers in the U.K. and Switzerland also found that drivers were distracted and reacted poorly to emergencies and drove slower when talking on mobile phones. Admittedly, driving the streets of Tokyo and the U.K. would be a far cry from driving on an open part of our highway 2. That is why it is important to have a Canadian study on the table before the discussion of regulation begins. These figures and studies cannot be discounted, though they certainly point to the existence of an astonishing problem that we must address.

Mr. Speaker, I believe that any law that comes about due to this

motion would largely be a preventive measure. After all, we have seen the effect of seat belt legislation. Sure, it was controversial at the time, but I doubt that now many of us would question the impact of driver safety with safety belts. Lives were saved, and that occurred simply because wearing seat belts became part of the law of the land. Albertans are law-abiding people, and when the measure became law, that had a significant effect.

When Brooklyn, Ohio, was the first jurisdiction in North America to pass a seat belt law, many people laughed at them. Today seat belts have proven to be lifesavers and are the law of our land too. Today Brooklyn is the first municipality in North America to fine people who drive and use their cellular phones at the same time.

Mr. Speaker, our government is not in the business of restricting personal freedom. However, sometimes government officials must act responsibly and with courage in the wake of opposition and intervene for the greater good. If it becomes a specific offence to use a handheld mobile telephone while driving, I believe few people will wish to be seen as pariahs on the road, prepared to use a mobile phone while everyone else is obeying the law.

Already a vast majority of people are well aware of the common sense of not using a mobile phone while driving one-handed on Alberta's busy roads. Sadly, there are deaths which are directly connected to the use of mobile phones while driving. Experts are quite sure that this has been a significant contributory cause of many other deaths and accidents that have resulted in injuries.

We have heard from our constituents that cellular phones are a danger on our road, and now there is a motion before the House that allows us the opportunity to look into the matter. I'm sure that we all recognize that too, although we have fewer causes for anxiety. All of us experience tension when driving a car in today's road conditions. We are all concerned when people take liberty with our road space or endanger us in any way. We all know the importance of trying to keep calm while driving. What greater affront is there to one's sense of safety on the road than to see people making mistakes on the road because they are using a handheld mobile phone while driving?

Mr. Speaker, around the world many jurisdictions have voted to simply ban handheld cellular phones, but similar legislation in the U.S.A. has been voted down. I feel that given the scientific evidence available, a move to ban cellular phone use behind the wheel would be premature in the province of Alberta. A cellular phone in your automobile can be an effective and productive tool and an invaluable link to the outside world. It is also an important safety aid to drivers. We must stress to Albertans that they need to be used safely.

Mr. Speaker, the conclusion in the Toronto study gives us more questions than answers.

Also at issue is the level of congestion on Alberta highways as opposed to other jurisdictions. Banning the cellular phone in Tokyo makes more sense, given the level of congestion on the streets and freeways. Driving leisurely down an open stretch of an Alberta highway and using a handheld cellular phone is surely less of a threat than driving down Deerfoot Trail in rush hour and talking on the phone at the same time. Different jurisdictions require different laws. What is good in the U.K. or in New York, for that matter, may not have the same implication here.

Throughout the process we set out in this motion a conclusive snapshot of what issues should come about. The Quebec study should clarify some of the questions that previous studies have brought about and have been ineffective in answering. Mr. Speaker, from this study we should be able to tell without a shadow of a doubt what sort of risk is involved.

THE DEPUTY SPEAKER: I hesitate to interrupt the hon. Member

for Calgary-Fort, but the time limit for consideration of this item of business has concluded.

4:30

head: Private Bills

head: Second Reading

Bill Pr. 1
Benevolent and Protective Order of Elks
of the Province of Alberta Repeal Act

THE DEPUTY SPEAKER: The hon. Member for Livingstone-Macleod.

MR. COUTTS: Thank you, Mr. Speaker. I move second reading of Bill Pr. 1, Benevolent and Protective Order of Elks of the Province of Alberta Repeal Act.

[Motion carried; Bill Pr. 1 read a second time]

Bill Pr. 2
William Roper Hull Child and Family
Services Amendment Act, 2000

MR. STEVENS: Mr. Speaker, it's with pleasure that I move second reading of Bill Pr. 2, William Roper Hull Child and Family Services Amendment Act, 2000.

I'd like to make a couple of brief comments about what this is about. It changes the name of the act to Hull child and family services act. The corporation which is established by the act has a corresponding name change to Hull child and family services. The objects of that corporation are expanded so that it promotes the emotional and psychological well-being of not only children and their families but also adults through the provision of educational, preventative, and treatment services. There are some corresponding amendments with respect to the powers of the corporation reflecting the expansion of the scope to adults.

Thank you.

[Motion carried; Bill Pr. 2 read a second time]

Bill Pr. 4
Calgary Municipal Heritage Properties
Authority Amendment Act, 2000

THE DEPUTY SPEAKER: The hon. Member for Calgary-Bow.

MRS. LAING: Thank you, Mr. Speaker. I'm pleased to move second reading of Bill Pr. 4, the Calgary Municipal Heritage Properties Authority Amendment Act, 2000.

Mr. Speaker, this bill creates a new entity by the merger of two existing historical committees which act on behalf of the citizens of the city of Calgary in the preservation of historic sites. The Calgary Municipal Heritage Properties Authority and the Calgary Heritage Advisory Board will be joined under the new title of the Calgary heritage authority.

I would urge all members to vote for Bill Pr. 4. Thank you.

[Motion carried; Bill Pr. 4 read a second time]

Bill Pr. 5
Calgary Foundation Act

THE DEPUTY SPEAKER: The hon. Member for Calgary-Currie.

MRS. BURGNER: Thank you, Mr. Speaker. I am pleased to move second reading of Bill Pr. 5, the Calgary Foundation Act.

Mr. Speaker, this bill responds to the growing aspects of the Calgary Foundation and the role it has had in our community. I am pleased to be its sponsor.

[Motion carried; Bill Pr. 5 read a second time]

head: Government Bills and Orders
head: Committee of the Whole

[Mr. Tannas in the chair]

Bill 11
Health Care Protection Act

THE CHAIRMAN: This afternoon the committee has under consideration amendment A1, section A and the subamendment to that amendment.

The hon. Member for Spruce Grove-Sturgeon-St. Albert.

MRS. SOETAERT: Well, thank you very much, Mr. Chairman. This is the first opportunity I've had to speak to this subamendment. I think what this subamendment is about is not allowing overnight stays, which is one of the largest concerns I have had with people calling and contacting my office, because virtually once you allow overnight stays, you are allowing private hospitals. The people of Alberta are smart. They've connected those two. No matter what you call it, it's a private hospital, and they don't want that.

Interestingly enough, Mr. Chairman, I was at a DARE grad at Muriel Martin school in my riding last Thursday, and the constable and the class told me that I would be welcome to use their eight ways of saying no to Bill 11. It was quite well received by all the people in the gymnasium, and I said that I would share with the Assembly the eight ways to say no to Bill 11, indeed supporting this subamendment that we have put in.

One of the ways is to just say: no, thanks. I think several people have said, "No, thanks" to Bill 11, thousands and thousands of people. So here we are putting in subamendments to try to make it palatable, but it certainly isn't.

The second way was giving a reason or an excuse. Well, I think the reason is that we know public health care serves us better. It's more efficient. It's cost-efficient. Going private will not reduce waiting lists, and I think we have to question who benefits, because it certainly looks like private health care providers are the only ones that will benefit by this and certainly not the general public.

The third way of saying no was repeated refusal or keep saying no, like a broken record. No. Just keep saying no to Bill 11. Certainly people have said no to Bill 11 a thousand times over, so just maybe the government will catch this.

The fourth way was walking away. You know what? That would give the government an opportunity to say no to this bill. They could walk away from it. They could table it if they don't like this subamendment. If they don't like the pressure they're getting from the outside, they should listen and walk away from this bill. Leave it on the Order Paper or dump it or kill the bill, as the chants are now out and about in Alberta.

The fifth way is changing the subject. Well, certainly we could change the subject and say: put that money that you're putting into private health care into public health care; open the beds that are available in public hospitals all over rather than supporting private industry that will allow overnight stays. So our subamendment would stop the overnight stays.

Avoiding the situation. Well, I don't know how we would avoid discussing Bill 11 unless, of course, it was dropped from the Order Paper, and that would be a good suggestion on my behalf. You

know, the longer we spend on these amendments, the more time it gives the people of Alberta to have a real look at this and say: no, we don't want it.

Another way of saying no to Bill 11 is the cold shoulder. Now, I'm wondering how many MLAs have received the cold shoulder from constituents on Bill 11. If they're getting the cold shoulder, maybe they just haven't picked up that that is another way of saying no to Bill 11.

The very last and most powerful way of saying no – and any of you who have been to DARE grads I know have heard this – is strength in numbers, and I think that's been indicated across this province time and time again, a huge rally in Calgary, a huge rally in Edmonton. I know that the Member for Lethbridge-East had three town hall meetings, virtually hundreds of people showing up, expressing concerns about Bill 11 and wanting more information. They're opposed to it. They are saying no.

Petitions. With all the combined petitions in this Assembly I bet it's close to 90,000 people who have said no. They don't want this bill.

4:40

I think it was part of Alberta's history last night that the Legislature was stormed by people who said no to this bill. In fact, I read in a book about the history of natural gas in Alberta that the only time the Legislature was stormed – people were in the Legislature and on the stairs. It was farmers in the late '30s, possibly. It would be interesting to see when that has happened before, maybe only once in the history of Alberta. I have to have the time to do a little homework on that, but that would be most interesting and most telling about the number of people saying no to this bill.

This strength in numbers is, I think, a very powerful, powerful way of saying no. I think everybody should pay attention to how many people are saying no to Bill 11. Certainly DARE graduates and their parents across this province are saying no. "Use our eight ways of saying no in the Legislature, please, Colleen. Go tell them no from us." I have done that. I will send this out to Muriel Martin school and thank them for their help and their participation in democracy and on the issues of Bill 11.

Specifically to this subamendment, Mr. Chairman. People have said: why do they want overnight stays? There are private clinics right now that do some surgeries, which, by the way, have not been proven to be more efficient. Instead of promoting that, I would think government members would be questioning it and certainly wondering what's going on and where our tax dollars are going.

It's interesting people will say fiscal Conservative with pride, but I would question that pride. The fiscal Conservatives I have seen have run a horrendous debt for this province, cut and slash programs without a plan, and now we're putting in a Bill that will give money to private industry rather than back in the pockets of the very taxpayers. Fiscal Conservative are certainly not words of pride that I can see anybody being proud of.

These overnight stays are where dangerous situations can occur. I think the Member for Edmonton-Manning today expressed that in his question very well. When you don't have the medical backup for an operation that requires an overnight stay, I think in this province we're going to start seeing headlines that say: tragedy occurs at a clinic because of lack of medical backup. In fact, I think we read about that the other day in the paper. I don't mean to exploit anyone who's going through a tragedy. It's a very difficult time for their family, but the reality is that we have to be aware that we are putting citizens at risk if we are going to allow surgeries that are that complicated that they require an overnight stay, yet the medical backup is not there at that facility.

All kinds of things can go wrong in surgery. People can have an allergic reaction to the medications or to the anesthetics. Often people don't realize how very serious – you go in thinking it's a simple operation, and it is not. I think I gave the example in here the other day of tonsils. People think that's a quick and easy surgery. But, actually, it has quite a high risk factor. You know, that was one of the concerns expressed to me. If we end up putting all the tonsillectomies in private clinics, then what about those cases where it is not just a simple tonsillectomy? What about the difficult ones where there are complications or the patient is an older patient, not just a child? Those clinics won't have the backup for that kind of operation. Will these still be available in the public sector? You've got to start wondering, as we totally go to private industry, what it is going to do to our public sector.

I am very concerned. I am hoping that members of this Assembly will support this subamendment. Maybe, in fact, it would change the bill so much to their liking. Certainly I know that this is one of the most contentious things in this bill. I know it from calls to my constituency office. I know it from doctors who've talked to me about the realities of the abilities of these clinics to take overnight patients and what that means. So I'm hoping that everyone here will support this subamendment.

MR. DICKSON: I'm persuaded.

MRS. SOETAERT: I've persuaded the Member for Calgary-*Buffalo* – and that makes me happy, because he's a very intelligent man – and there are more. There are more and more MLAs, I think, across the way who are going to be convinced. Certainly their constituents are calling them, because they're calling me. They are calling me concerned about this bill and saying, "What can you do to not put it through?" They've asked me twice to challenge the Member for *Lac La Biche-St. Paul*. They say: "Come on. Make him speak about it in public if he's so determined." He said: no; I won't debate you in public. Well, I challenge him again. He learned how to say no but, of course, to the wrong things.

I had calls from *Stony Plain* as well concerning this bill and the realities of overnight stays being one of the major concerns they have. That's why this subamendment might actually help some of the Conservative MLAs. Maybe they'd say, "I support it", and they're not going to have overnight stays anymore. Maybe that would help them, because certainly they must be getting that kind of call.

We're way over 800 contacts to our office right now: e-mails, letters, faxes. My constituency office can't even answer them in a timely manner, which I like to do, but we can't. There's only one person working in my office, and believe me, she's a gift to me and my family for the workload she carries. People are aware of that. I've put it in the columns in the local paper about the reality of the phone calls. Of those over 800 – I think we were at 820-some today – 58 have been in support of the bill and the rest are opposed. One of their main concerns is: once you stay overnight, that's a private hospital, and here we are losing something very, very dear to us in this province.

You know, one thing someone told me: "Do you know what? This government is trying to push its values on me". They resent that. That's the opposite way of the way it should be acting. A government should be reflecting the values of the community of people they represent. The values of the people in this province are to totally protect public health care and to not put tax dollars into private operators' pockets. Absolutely. They've said that time and time again. They said it about *Bovar* and *MagCan* and *NovAtel* and *Gainers* and *West Edmonton Mall*, and here we are. We'll have

scandal after scandal in a few years about private operators that have got all kinds of taxpayers' dollars in their pockets.

I see my rural counterparts out there, Lac La Biche-St. Paul and Redwater and Whitecourt-St. Anne, just chuckling a bit. At a mutually agreed upon time I'll gladly come out to your constituencies and debate this. If you think your constituents are this supportive of it, I can take the heat out there. But I'll bet you that you couldn't get 20 people to come and support you on this out there.

So on the subamendment, Mr. Chairman.

THE CHAIRMAN: It's not necessary for other members to enter into the debate. You know that the tradition of the Assembly and of the committee is that we only have one person speaking at a time. So hon. members who wish to enter into it may do so in their turn, but right now it's Spruce Grove-Sturgeon-St. Albert.

MRS. SOETAERT: Thank you very much, Mr. Chairman. I think I've pretty well expressed some of my concerns about this subamendment. I realize other people want to speak to it.

But just to recap. It's funny. The wise words out of the mouths of our children gave me eight ways to say no to Bill 11. Say no, thanks; give a reason or excuse; repeated refusal, keep saying no; walk away; change the subject; avoid the situation; cold shoulder; and strength in numbers. Good advice from wise, wise students across this province. They have said no to Bill 11. A gymnasium full of parents supported that statement when these young students and their constable gave me permission to use eight ways to say no to Bill 11.

This subamendment is a start in making this bill a bit more palatable, but to be honest, the best thing we could do to this bill is give it a decent burial.

Thank you very much, Mr. Chairman.

4:50

THE CHAIRMAN: The hon. Member for Edmonton-Manning.

MR. GIBBONS: Thank you, Mr. Chairman. I'm standing this afternoon to speak to the subamendment to government amendment A1. I find it interesting that we're not hearing anything new on this particular item from the government. As I spoke in moving to disagree with Bill 11, I stated that it's too vague and that it lacks hard facts. Now that we read amendment A1, we still lack the commitment to stop surgical suites. This is one of the most contentious items of this whole item.

Our subamendment to this, by adding "insured," seems to add some squeamishness to this government on this particular item. Albertans are still trying to comprehend this bill. It is not what the bill says; it's what it doesn't say. By that one slip of the word right there, by not adding "insured," it is doing nothing to make them feel any better.

You know, if we want a true amendment put forward, we have to commit to certain items, and I really believe that the surgical facilities referred to in this bill are in reality private hospitals. The bill claims to ban private hospitals, but on closer examination it fails in this promise. For example, the bill could not stop a person from providing hospital services as long as the facility were not a full-service hospital. If emergency services were not provided, for example, the institution would no longer fall within the definition of a private hospital.

Mr. Chairman, in my questions today I pointed out – and I pointed this out in the last few days, and I pointed this out before the dentist part of this came in – the tragic happening in this province last month. It happened in March.

I want to point out one of the principles in the case of hospitals. If there is a case for opening up hospital sectors to for-profit, overnight-stay facilities, then it must rest on the argument that such facilities can provide care more efficiently than is possible in a public hospital.

We did hear yesterday from the hon. Minister of Learning that by putting this subamendment forward, we're actually picking on rural Alberta. Well, I find that is very false. The fact is that what's happened over the last six years has been a restriction, something that should have been brought out, and we tried to bring out a number of cases of what was happening to rural Albertans when they did come in.

We see a hotel being built over by the University hospital right now. In conversations with different people that are involved in it, I said: "Oh, boy. Are there that many foreign students coming into this great province we have and going to the University of Alberta?" The answer back to me was: no; it's all the patients coming in from northern Alberta that have to be put up overnight. Well, there's something wrong with a system when that is occurring. They should not be coming in, bumped out of the system, and having to put out their own dollars to keep themselves going. They're the ones that waited on the list for a matter of months to get there. Those stories keep adding up. I don't believe there's anything in this bill or in this amendment that is going to give any safeguard to rural Alberta, and that is something that rural Alberta MLAs should be very concerned about.

The word "insured" there is something that we feel is going to bring out what was missing in it.

We also bring out the fact of a 12-hour stay. Well, we look at day surgeries that were disseminated throughout this province over the past few years and the lack of planning and the experiment: first taking major day surgeries out of major hospitals in our own cities, putting them out to what they call the community hospitals, very good hospitals but community hospitals; totally dismantling teams and sending them every which way to work. Blame it on the unions. Blame it on whatever you want. I sit in the middle and say that, you know, unions have their place, that unions have their reason for being. If we're doing everything on union breaking, there's something totally wrong.

Talking about justifications offered to Albertans for the proposal – that is, meeting the unmet needs of expanding service capacity to deal with shortages, waiting lists for care – this argument seems to be seriously incomplete. Alberta cuts to hospital spending since 1992 to 1995 were dramatic. The 1999 levels were still in the figures of 15 percent below 1992.

You know, these figures combined with the lack of dealing with the federal level, that they pull out of any necessary plans to go anywhere, all add up to the fact that we are in serious shape. Mr. Romanow, the Premier of Saskatchewan, I believe has got a good case that he's brought out in the last few days; that is: when are we going to as a complete country sit down and make sure, as we go into this new millennium, that our cost factor and everything else that actually happens in health isn't going to force bills like this coming forward? If it is the political game played, that seems to be playing out, that it's this government against Albertans in general and this government and the federal government, I don't like the game. The game isn't for the people that I represent.

Nothing in this bill ensures that the contracting out of services to private facilities will open up more beds within the public system, and this is where we really have missed it. We have those facilities. We have places we can open up. Let's enshrine that into our system without bringing amendments to a bill that actually came out before.

Hospital beds, operating theatres, and other services are already

available, Mr. Chairman, to open up within the public hospitals but remain closed because of the shortage in funding of professional staff. It is fundamentally incorrect to think that the solution to the problem of scarce resources within the public system is to split the resources between two systems. Why isn't it better to take the same amount of money that this government would hand over to the private hospitals and give it to the public system, which has the capabilities to meet the needs?

If we look at what we have just in our own city of Edmonton, we have wards. My mother was in the St. Albert hospital last month. Walking out of the ward that she was in, looking down another ward, all I could say: there's another dead ward in our system that could be opened up, could be part of the system.

You know, we have the capabilities. Where's the evidence that the same amount of money to private hospitals is going to cost less in the long run or provide better incomes?

Going back to the insured surgical services, why are we promoting something that we do not – this is why I'm trying to translate the amount of dead wards we have in this province. We have the argument, the items we read, of Didsbury maybe selling off the centre core to HRG and actually having different wings going off. This is a program that actually is in place throughout the country. There are places like this in actuality, out of Quebec City, and I do believe that it probably is a system to work at. The fact is that when people in Didsbury have to start wondering where they're going to go from there – if you're worrying about rural Alberta, maybe some of the helicopter pads, like the one that's been announced in the last while at the Misericordia, could be set up so we can move our physicians out to our public hospitals in rural Alberta, when we can set up enough cases for them. I think that if the system is costing what it is today, what is it if we can't transport some of our surgical people to those and make sure that we have a team?

5:00

The government has no data to show that this will add any benefit to the health care system. Perhaps the data is available, but the government does not want to show us any information because maybe it doesn't play into this overall scheme, like the government-sponsored study that the Official Opposition tabled and have had questions on over the last while, Mr. Chairman.

You know, we read that this government admits the fact that this legislation is based on a philosophical basis. If they have data, then show us, the severely normal Albertans. I really call myself a severely normal Albertan, and I am having trouble understanding where this amendment is going. I look at our subamendment. I believe that by adding the word "insured," it is clarifying it a lot closer, tightening it up. The 12-hour stay: well, we had day surgeries. We should keep the day surgeries open. We should reopen them. We should go back and look at the teams that made up those.

It all reflects what has actually happened in our province over the last few years. Under the leadership of the Premier in 1992-93 the political spin of this province was no different, no different at all from other countries like Australia, New Zealand, and England, where cash-strapped governments were looking for ways to react to overspending. You know, when you look back on it – and we've seen charts in this province – it wasn't a case of it climbing exceedingly. It needed a plan. You had The Rainbow Report, that had to come out. It was worked on by this particular government. The fact is that someone had the brilliant idea to decimate our health care because health care was at the root of government overspending. I really believe it was a total falsehood, but it was the political spin of the day. The political spin of the day was tax cuts. In listening to

what the minister said on Bill 207, it wasn't tax cuts on his part but listening to other parts.

Going back to the subamendment. You know, with the spin that dismantling the health care system would save the government money, the slow creep of privatization began, especially in Calgary. With the control of our health care, everyone would be happy. The government would save money. The small percentage of friends of this government, private operators, would make money, and the patients would be served.

Mr. Chairman, one little phrase like adding "insured surgical services" – this is the point that is very, very important. I'm not as hung up as maybe some are on the 12-hour, 72-hour, or whatever, but the 12 hours is just totally back to a day-surgery system, which I think should be opened up.

We're looking at the value of physicians in this province. Ninety-nine percent of physicians in this province really want to go about doing their work. They really want to go about going to work every day and making sure that they have enough theatre time that they can do their job. If the word is right without insulting – because I do have a lot of respect for doctors – they're eccentric. They want to go to work, and they want to get better. They want to improve their technique of operating, like the cataract operations today where you can have the foldable lens.

I'm glad that this province finally realized that the time saved with the foldable lens was very important. With the foldable lens today, some physicians that are doing it don't even do stitches. They just have a tiny, little slit. They slip it in and move on to the next case. One of the members was saying yesterday that years ago people would have to stay in for a week and be ice packed and everything. I totally agree. We have gone miles, but this bill in its entirety is not going there. What we need is government on both levels that really, really wants to drive to make our health system endure the costs of technology, endure the pharmaceutical costs.

Actually everything has happened to them over the years: a void of planning. With everything that actually has happened over the last 10 years, we have slipped behind in this particular case, but we could be the leaders in this world again by sitting down, working on the public system as it is today, thinking about what type of enhanced services we have to have, what type of insured surgical systems that are in place within the system, and working on that. Quit tinkering. Tinkering is as bad as saying you're experimenting, when we're talking about billions of taxpayers' dollars being spent per year. I really believe that we've gone beyond where we should.

I hope that we can convince this government that adding insured services to their amendment A1 is a very important one, and at this time I will sit down, Mr. Chairman, and let somebody else stand.

THE CHAIRMAN: The hon. Member for Calgary-Buffalo.

MR. DICKSON: Thank you very much, Mr. Chairman. I don't know whether I'm going to have time to say everything I wanted to in the remaining time, and I know there will probably be some other colleagues that may want to say a few words before we get to 5:30, but let me try in the allotted time to make a couple of observations.

The first thing is that I've received a copy of a Bill 11 debate summary prepared by Alberta Health and Wellness, and this is on the subamendment because we've got a section here. It's produced April 17, 2000, day 8. It says ominously "total time elapsed: approx. 29 hours." It reminds me of the debt-o-meter that Laurence Decore had developed in 1993, Mr. Chairman, that clock that talked about the provincial debt that was running out of control. Anyway, I digress.

The Bill 11 debate summary I'm looking at has been prepared by

Alberta Health and Wellness. Now, I take it that the purpose of this is to give some accurate information to the people of this province in terms of what's going on in the House around the most important bill that we've seen in decades. So one would assume that the Minister of Health and Wellness would be chiefly concerned with accuracy and precision in terms of dutifully reporting what in fact is going on. You know what we find in here? We have this note about the subamendment. "The Liberals proposed a subamendment that significantly changes the original."

Then they go to a quote from our colleague from Edmonton-Meadowlark in explaining one of the major modifications, and in four lines they take a quote. Now, what's interesting here is that I've got the *Hansard* from last night, or I guess these are the Blues. This is sort of the Blues-plus, because it's organized and formatted in a way we typically see it when we get it tomorrow. My colleague spoke to the amendment for, it looks like, 15 minutes, in two columns, to make it very clear what this subamendment was all about. What has been taken is two sentences and not the whole two sentences but phrasing from them, and this is what somebody who had not been in the House last night would take from it.

In other words, "no physician shall provide a surgical service" in Alberta in an approved surgical facility "that requires a stay by the patient of under 12 hours."

Now, that's nonsensical. That's not what amendment A1, section A says at all, Mr. Chairman. In fact, if you were to go on and read the text of the subamendment and read the explanation by my colleague from Edmonton-Meadowlark, you would know that this skews completely the thrust of the subamendment.

So I think that the Minister of Health and Wellness does an enormous disservice to all of us in this Assembly and certainly shows a complete lack of respect for Albertans and a lack of appreciation of his key leadership role by putting out a summary that so distorts the purpose of the subamendment.

5:10

You know what's interesting is that they don't put in the text of the subamendment. As my friend here from Calgary-Glenmore with his many years of legal experience would tell you, leave out the editorial comment, put in the precise text, and everybody then can form their own opinions. But that's not what happened here. The Minister of Health and Wellness has taken a quote out of context on the subamendment. In fact, we're talking about how the subamendment has been viewed by the Minister of Health and Wellness, and the statement of it in here is just wholly misleading and wholly inaccurate. I'm not accusing the Minister of Health and Wellness of misleading the House, but I'm certainly accusing his department of misleading Albertans and misleading this House. I hope that's going to be changed.

As we go on to read this, we have a comment from the minister, one of my favourite ministers in the House, International and Intergovernmental Relations, a woman with a great deal of wisdom in this House, not just because she recognizes my old hometown of dear old Drumheller but because she's a pretty sharp minister. There aren't very many things you get past this minister. When she speaks in this House, many of us listen . . .

THE CHAIRMAN: On the subamendment.

MR. DICKSON: On the subamendment, because what I'm reflecting, Mr. Chairman, is the comment that this minister made the other night. She said:

This [subamendment] talks about stifling the ability of the College of Physicians and Surgeons to determine the appropriate setting for services to be delivered in this province.

Now, the subamendment does nothing of the kind. It's her interpretation that this would stifle the ability of the college council.

This raises a real conundrum, Mr. Chairman. I had the privilege of being the opposition health critic between about January of 1998 and about February of 1999, and that was the time when we dealt with Bill 37, version 1, and Bill 37, version 2, and what we found is how scary it was to go to a meeting of the College of Physicians and Surgeons, that governing council. Let me tell you how, in some respects, inaccessible it was to go.

Before I go there, I just want to say that I have enormous respect for the men and women who serve on the college council, and I think of people like Dr. Betty Flagler, from Calgary, in her term as president of the college council and what wonderful, wonderful leadership she provided. But I think that here, in talking about the comments on the subamendment, Mr. Chairman, the College of Physicians and Surgeons is not an ideal forum to reflect public concern, to reflect broader constitutional issues.

I went to some of those college council meetings. First, the meeting would be scheduled for two days, and I would plan on coming to Edmonton for a Thursday morning. Then, on an hour's notice, I'd get: no, this item on the agenda has been moved to Friday. Then I'd get there and find that there were only maybe 10 or 15 seats for members of the public to go and sit in, and you'd discover there's no opportunity to speak. I went one time with Harold Swanson, who's a former president of the College of Physicians and Surgeons. They may have heard I was coming and didn't want to give me the floor, but you would think they would've given a former president of that college council the opportunity to speak. He didn't have that opportunity to do it. [interjection]

Now, my friend from Calgary-Egmont wants to get into the debate, and if he signals when he's ready, I'll sit down so that he can speak, but I want to finish my train of thought first. [interjection] Colleague from Calgary-Glenmore, I have a lot of trouble staying on task, so I'm afraid if I surrender the floor to you now, I may lose the train of this thought, and I'm working so darn hard to stay on task and on relevance.

What I'm saying, Mr. Chairman, is simply this. The College of Physicians and Surgeons is a respected, competent organization, and we should be proud of the work they have done. We should be proud of the work the council has done, but it is no appropriate vehicle to be deciding issues of public policy. They certainly bring to bear an expertise in the area of the practice of medicine, but what we have been doing with them and what this government was attempting to do with the college in the spring and fall of 1998 was effectively abdicate to that college council a policy-making role that people on the college council told me personally they felt uncomfortable with.

Well, what we're talking about is the very essence, because if you look at the second part of the subamendment, that deals with the Medical Profession Act and the bylaws under that. That's a key part of the amendment. It's a key part of the subamendment, and that's what I'm addressing right now. I think what I'm saying is that the concern around the college and the way they operate is not in any sense an ideal forum for public policy to be developed in.

I'll bet people in Peace River right now are saying: "We've got a darned effective MLA. We know what he does, because he comes into a public forum and speaks occasionally in this place, and there's *Hansard*, that records his voice." There's no public record of the college council. It's difficult to get access to one of their meetings. There's no equivalent to *Hansard*. You don't get advance notice typically of what they're dealing with and when they're dealing with it. My experience in 1998 left me with a sense that no matter how important the role of the college council is, it is a far, far less

satisfactory forum for discussing important public policy questions than this place is, Mr. Chairman.

That's one of the reasons I'm supporting the amendment, because that tries to address some of those concerns. [interjection]

Now, the second point on the subamendment is that we had the Minister of Learning . . . [interjection] I'm sorry. I've got the Minister of Government Services excited thinking I'm supporting the amendment. I want to make it clear that I'm speaking to the subamendment, and I'm sorry if I've misled any members in the Assembly. I support the subamendment. I was about to be drummed out of the caucus. In fact, the papers for expulsion were being drafted as I spoke.

Chairman's Ruling Decorum

THE CHAIRMAN: Hon. members, these side comments and conversations are all very interesting, I'm sure, to the individuals involved and directly engaged in them, but it's not part of the decorum of the Assembly nor of the committee. So I wonder if we could address ourselves to the issues that are in front of us and not engage members of either the other side or of your own side in these kinds of side conversations, hon. member.

MR. DICKSON: Mr. Chairman, thank you for your guidance. My colleague for Edmonton-Meadowlark, who succeeded me as health critic, is much more competent than I ever was, and I need all the instruction and advice I can get from her as I try and soldier through.

Debate Continued

MR. DICKSON: On subamendment SA1, we had the Minister of Learning, who again reaffirmed his credentials as a physician licensed to practise in this province, speak, and the theme was picked up on by our friend for Calgary-Cross, who we know has been trained and practised as a registered nurse. They both talked about some of the value of overnight stays and their concern about people being discharged too early from a clinic.

You know, when I listened to the Member for Calgary-Cross – remember that she highlighted some of the things on that list of things that could be done in day surgical services – I cringed. You may have cringed and winced, whatever, too. I'm always bothered by the notion that general anesthetic can be administered in a day clinic. Maybe the solution to some of those things is not then allowing more day clinics to keep people on an overnight basis. Maybe the solution is to ensure that we are more selective in looking at the list. Maybe some of those things should properly be done in a hospital that's got the backup to be able to deal with the complications.

5:20

I mean, I think the concern I heard from the Member for Calgary-Cross was that people shouldn't be discharged, that in some cases people need to be kept overnight. I respect her training and her experience, but there are two solutions, members, to that. One is to then allow more of these clinics to have beds and allow people to stay on an overnight basis. The other one is maybe to say: we should be more selective and more discerning, more discriminating in deciding on what procedures can be done outside hospitals that have that sort of backup and support.

I'm reminded by the Member for Calgary-Fish Creek that time is marching on, and we want to hear from the Member for Calgary-Egmont yet, so let me quickly move to the other part that I hadn't touched yet in dealing with the subamendment. It's this. I had asked a question the other day that has not yet been answered.

Mr. Chairman, I'm getting tired of speaking to subamendment SA1. I expect there are members in this Assembly that are getting tired listening to debate about subamendment SA1. Maybe we should be starting to think about moving on, but before we can move on, we have legitimate questions that have not yet been answered.

In *Hansard* the other day I had identified some issues around which bylaws under the Medical Profession Act were in question in terms of the subamendment and the amendment. Here we go. Those questions were asked, and this is for the reference of the Member for Calgary-Fish Creek and any other members that may be getting ready to speak. They maybe can answer this. If our friends from Calgary-Egmont or Calgary-Fish Creek could answer this question: when we talk about bylaws under the Medical Profession Act, are those bylaws under section 31(e)? Are they under section 32? Are they under section 74? Are they under section 97? Those are all bylaw-making powers in the Medical Profession Act, and nobody's answered that question yet. Has anybody heard an answer, Mr. Chairman to that question? [interjections]

Now, Mr. Chairman, I heard someone say that it doesn't matter. [interjections] Does not matter.

Chairman's Ruling Decorum

THE CHAIRMAN: The hon. member should address himself to the amendment. If you're trying to engage others, as I suggested that you not do, and then trying to catch whatever is said and by so doing invite them to say it louder or whatever, this is really not what this debate is supposed to be about. So, hon. member, if you could engage yourself in the subamendment to the amendment, that would be helpful.

MR. DICKSON: Mr. Chairman, thank you for the direction. I have to confess that every now and again in sort of a Walter Mitty-esque frame of mind I dream of actually engaging people in real debate, not 15-minute, 20-minute set speeches. I'm sorry. Every now and again I just think that there's maybe a chance that we could have a more meaningful exchange in this place than we do.

Anyway, we're enforcing the rules here, and I'm not doing a good enough job of following them, so I'm going to try harder.

Debate Continued

MR. DICKSON: In any event, I do think that it would be very easy. Maybe the sort of shadow health minister, our friend from Calgary-Glenmore, who probably knows more about this bill than any other person in the Assembly, can tell me which bylaws in the Medical Profession Act are the ones that are an issue with the subamendment and amendment A1 itself. Those are answers that I think we're entitled to know. We want to know, and I think we have to have some response to that.

People may say: why do we talk about the medical profession? Well, we have two choices here. We have two options. We either completely subdelegate it to the College of Physicians and Surgeons – and that would be the government model – or what we do, Mr. Chairman, is build in a 12-hour limit, which is what the Liberal opposition would do with this subamendment SA1. I mean, isn't that really what we're confronted with here? Isn't that really the issue here? We either, on one hand, have the college determine it on some basis that we don't really know, using criteria we don't really know, or we set out some kind of formula in the legislation.

If I get a signal from the Government House Leader, I'm happy to adjourn debate. Otherwise, we'll keep on going until 5:30. Fine. I'm encouraged. I think the direction I'm getting from the side

opposite is to keep on going. Maybe that means there's some prospect of changing some minds here in the three or four minutes that we've got left.

Is my time up, Mr. Chairman? Okay. Thank you.

MS LEIBOVICI: I had the opportunity to introduce the amendment and only got four minutes on it, so I didn't really ever have an opportunity to actually speak to my own amendment. I'm more than pleased to start it now and to finish it when I get back at 8 o'clock, and then I know I will have ample opportunity tonight to get up over and over and over again. Unfortunately, all we have are the Blues this afternoon from the *Hansards* last night. What I plan to do in my remarks on the amendment is to actually look at the indications of the Member for Calgary-Cross, I believe, the minister of intergovernmental affairs, as well as the Member for Calgary-Fish Creek. I think those were the three that had spoken. Did I miss one?

AN HON. MEMBER: Dr. Oberg.

MS LEIBOVICI: Oh, yes, and especially the Minister of Learning. I will look at what the remarks were that they made which were

pertinent to the bill, which were absolutely pertinent to the amendment. I plan to go through each and every one of those speeches to address their concerns so that they can fully understand what the amendment was that I proposed.

The amendment, as I've indicated – and it's unfortunate that the little government blurb that's put out every day seemed to take it out of context and spin it a little bit – was meant specifically to do two things. One was to ensure that both the uninsured and insured services were split apart so that there could be no profit motive. I would think that every government member would say: yes, that's exactly what we want to see in health care, that there is no profit motive and that in fact every decision that is made is based on whether it is the provision of good health care and not on the issue of whether it is the provision of cash in someone's pocket. That is exactly what has to occur.

The other one has to do with the issue of the 12-hour stays. I had indicated – and I'll repeat it – that what the clause does, and it's in *Hansard* . . . Oh, we do have the *Hansards*. When did those appear?

[The committee adjourned at 5:30 p.m.]

