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The Honourable Kenneth R. Kowalski, Speaker

Legislative Assembly of Alberta

The 27th Legislature

First Session

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[Errata, if any, appear inside back cover]

Legislative Assembly of Alberta

7:30 p.m.

Monday, October 27, 2008

[The Deputy Speaker in the chair]

The Deputy Speaker: Please be seated.

Motions Other than Government Motions

The Deputy Speaker: The hon. Member for Calgary-Bow.

Health Care Statements

510. Ms DeLong moved:

Be it resolved that the Legislative Assembly urge the government to provide Alberta health care statements to all Albertans in order to ensure that every individual in the province is aware of his or her use of the health care system.

Ms DeLong: Thank you very much, Mr. Speaker. I am pleased to begin debate on Motion 510. The purpose of Motion 510 is to urge this government to provide Alberta health care statements to all Albertans through secure online access. I believe that providing statements would contribute to this government's goal to ensure that health care delivery is patient oriented, accountable, and equitable for all Albertans.

Mr. Speaker, I would first like to discuss the present state of health care delivery in Alberta and how providing health care statements to all Albertans could contribute in a positive fashion. This government is doing its part to ensure that health care delivery in Alberta is of the highest quality in Canada. In fact, as hon. members from both sides of the House know, spending on health care services will increase by \$1.3 billion to \$13.4 billion for fiscal 2008-09, or almost one-third of all government spending. That's a 10.6 per cent increase from last year and is \$36.7 million per day. That also represents the highest per capita spending on health care delivery across all provinces at \$3,695 for every man, woman, and child in Alberta. In comparison, the province of Quebec only spends \$2,853 per capita for Quebecers. The national average rests at only \$3,165.

Mr. Speaker, on March 3 this government was elected to provide change that works for all Albertans. Under the innovative and competent administration of my hon. colleague for Calgary-West Alberta Health and Wellness has undertaken the reforms that will ensure the long-term sustainability and accessibility of our health care system. Alberta's nine regional health boards were consolidated in one Alberta Health Services Board. This will ensure administrative co-ordination and efficiency as this government proceeds in developing a truly modern health care system.

Mr. Speaker, Albertans have always prided themselves as innovators. In this respect Alberta is leading the way across Canada with the development of the Netcare electronic health record. In 2005 the previous government dedicated itself to providing every Albertan with an electronic health record. Today this government is making significant progress to achieving this goal, with more than 14,000 physicians, pharmacists, and other health service providers registered with Netcare.

Traditionally a patient's pharmacist, physician, and other health care providers would collect and record all medical information in paper files. Mr. Speaker, this method was and remains inefficient for numerous reasons. First and perhaps most problematic, a patient's data is held in numerous locations. Netcare improves efficiency and ease of access by providing a single location for a

patient's health information. This data includes personal demographic information on uniquely identified patients, their prescribed drugs, laboratory test results, known allergies and intolerances, and immunizations. In addition, Netcare provides patients with critical feedback, ensuring safe and more informed decision-making such as drug-to-drug and drug-to-allergy interaction alerts, a database of all prescribed drugs, and their common dosages.

Mr. Speaker, it's this context of providing electronic health information to all Albertans that is the spirit of Motion 510. Alberta health care statements, or statements of benefits paid, were mailed to all Albertans but discontinued in 1988 due to cost – the cost would be around \$1.5 million a year – and privacy concerns. Today they're available at no cost to any Albertan, who may request one through Alberta Health and Wellness. The statement of benefits paid is a list of practitioner services and amounts paid to them by the Alberta health care insurance plan, such as the visits to your pharmacist.

Mr. Speaker, I believe that providing these statements through secure online access – not e-mails; secure online access – will make a positive contribution to this government's efforts to ensure that our health care system remains sustainable and accountable. As the cost of health care continues to rise, these statements will ensure that Albertans remain mindful of these costs and the great privilege it is to have access to the highest quality health care in Canada.

Today Albertans are able to access a variety of essential services electronically, such as online banking, and it's critical that these statements be provided with the highest degree of online security, similar to the level of the Netcare electronic health records, which is actually at a higher level than is your access into your online banking. Mr. Speaker, Albertans could use these statements as a self-auditing tool to ensure that the Alberta health care insurance plan is not subjected to overbilling or other abuses. While the Department of Health and Wellness has implemented auditing measures since the discontinuation of hard-copy statements in 1988, this would be a much more effective tool for not merely randomly selected but all Albertans to audit their own health care statements.

I believe that as this government proceeds with electronic health records, it is important that we seize the opportunity to introduce health care statements through the electronic health care records' secure online access. It would be a useful tool in our government's endeavour to ensure that our health care system remains sustainable, accountable, and transparent. Online availability will be a low-cost alternative to distributing hard-copy statements through the mail and also pose minimal environmental costs.

Mr. Speaker, I encourage all members in this Assembly to urge the government to consider reintroducing health care statements through secure online access. Albertans have a right and responsibility to know the true cost of providing health care in this province. The government and all Albertans must work in a constructive manner to ensure that we continue to enjoy the highest quality health care in Canada.

Thank you very much.

The Deputy Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much. With regard to this billing I have concerns. The money that is being spent on the electronic billing I believe should go towards creating an electronic health card that actually records the information that is on the electronic health records. I believe that this type of secure identification, which has the information necessary to be downloaded at any place in Alberta and also would serve nationally and potentially internationally if the card had the appropriate access, would go a long way in terms of

providing portable, universal health care wherever it was that we were to travel to.

I am concerned about the billing. It makes an assumption that Albertans aren't responsible. It makes an assumption that the only way we can make them responsible is if we send out a bill. Now, the idea of sending it out electronically would cover, I would suggest, maybe two-thirds, even three-quarters of Albertans, but for those that it doesn't cover, then there is a concern that we are discriminating against people based on poverty. I've revealed this statistic numerous times in this House, but there are 64,000 children living below the poverty line. If they're in that circumstance in abundant Alberta, the chances of their parents having a computer, computer literacy, or access to a computer are in question. That's a large concern of mine.

I believe that people are innately responsible and that they'll do whatever it takes to try and access the information that's provided. Whenever an initiative that has been brought forward by Mazankowski in terms of individual responsibility comes up, I also think of other parts of the Mazankowski report, such as the delisting of services and the idea that through no fault of their own, through their genetic inheritance individuals are going to have large bills.

7:40

We have individuals whose health care needs – for example, insulin pumps – currently aren't covered under legislation. I have brought up over the years my concern about gastroparesis not being covered and recognized as an illness within the province of Alberta, although I will say that we now have a doctor who is connected with the University of Calgary and with the Calgary health region through the Foothills hospital, Dr. Chris Andrews, who does have training in gastroparesis. He went down to Minnesota and received that training. We have individual circumstances. I don't want to reveal the young gentleman's name, but a First Nations youth was requiring approximately \$13,000 worth of drugs just on a monthly basis so he could continue, well, to exist as opposed to live. There are a number of cancer treatment drugs that currently aren't being covered.

What's going to happen is that the people who are most in need of the coverage are going to be extremely well aware of the cost of their medication, yet there's nothing they personally could do based on their genetic inheritance, you know, other than maybe to a degree they could control it in terms of their diet, to a small circumstance. To a small circumstance they might be able to control it if they have the capability to a small degree to exercise. But if it's something that's been handed down from generation to generation based on unacceptable genetic background, there's nothing they can do about it. My concern is that this is the potential.

Excuse me for being suspicious, but with Bill 11 and the number of attempts to privatize, this notion of billing might be that that initial ticket in the name of responsibility is the next step if you can afford extra health care through private means like the Copeman clinic that's recently opened up in Calgary at 4,000 bucks a shot for your initial consultation and then I believe it's \$3,000 a year from then on. Will those private services be a part of the billing information, or will Copeman simply create his own billing and that will be on top, or will he recommend particular services that individuals should have at the public expense and then transfer that billing to the public health care system?

These are troubling times in the sense that while an election, basically, in the States is being fought over access to universal health care, the Republicans are suggesting that it's going to bankrupt the country if universal health care is provided. That's one of their main attacks on Senator Obama. Yet universal health care is something that we've held dear and treasured despite advice from Aon and

despite advice from other private insurance companies that would like to have a piece of our health and make health a commodity as opposed to a universal right, which is currently the Canadian way. Thanks to Tommy Douglas for introducing that idea. He was a far-reaching thinker and was voted the top Canadian. Regardless of whether he was CCF or NDP, eventually where the CCF party grew, he was a man of foresight. The idea that billing, which seems a fairly innocuous requirement, will lead to something else, when do we decide, again going back to Mazankowski, what services are standard and what services are considered extras?

When we get into that special billing requirement and we talk about personalizing health care, well, if personalizing is just simply sending a bill as opposed to dealing with the individual needs through a universal system, then there is a concern about the direction this bill is heading. It probably comes as no surprise – and it's based on the last four years – that members of the opposition are extremely sensitive to any thought of putting an extra charge onto a person's health requirements. Yes, we believe in preventative. Yes, we believe in proactive. We believe in healthy lifestyles, but for those individuals who because of poor nutrition through no fault of their own but as a result of poverty or lack of education because they for whatever reason struggled and didn't make it through the system, as currently is the case for a third of high school students, or whether it's due to their literacy ability to survive – Alberta cannot become strictly for the rich and famous. We have to look after our most vulnerable.

Also, bragging about how much Alberta spends in terms of its health care delivery: this is a case where size doesn't matter. It's what you do with it. In terms of our access, when individuals have access to the system, they have wonderful treatment. In mid-May my father went through a double bypass surgery and then by August brought back to Alberta the gold medal . . . [Mr. Chase's speaking time expired] I'll look forward to committee.

The Deputy Speaker: The hon. Member for Calgary-Egmont.

Mr. Denis: Thank you very much, Mr. Speaker, for the opportunity to rise today and speak to Motion 510, urging the government to provide Alberta health care statements to every individual in the province, as proposed by the hon. Member for Calgary-Bow. In Alberta we value health care as an important core service and hold it in high regard. Because of this, health care spending in Alberta, as the Member for Calgary-Varsity pointed out, is the highest per capita in all of Canada. In fact, the average per capita spending in Alberta is \$3,695 per year, 17 per cent higher than the Canadian average. Health care spending in our province is increasing at approximately 10 per cent per year. This amount is significantly higher than both Alberta's rate of inflation at 4 per cent and rate of population growth of 1.8 per cent.

Many people have asked if this is sustainable. When taken together, the yearly increase in health care spending is disproportionate to the growth pressures in this province, Mr. Speaker. In the private sector, of course, there's a natural check and balance on efficiency. Businesses that are unable to provide cost-effective services are eventually driven out of the marketplace. But for government-funded programs such as health care, we do not have the luxury of this natural check and balance. Therefore, it is particularly important that we have a variety of checks and balances, such as audit options, available to ensure that we are getting the best bang for our buck.

7:50

In keeping with our government's objectives of transparency and openness, with so much of Alberta's spending committed to this

particular core service, Mr. Speaker, the citizens of Alberta have the right to know where their tax money is going to be put. Providing health care statements to all citizens would enable Albertans to see the true cost of the services they access and the breakdown of where their tax dollars are going.

I know that until 1988, as the Member for Calgary-Bow pointed out, statements of benefits paid were mailed annually to all Albertans. This practice was stopped due in large part to the cost of mailing. The cost back then was a million dollars per year, and due to a variety of factors roughly about 2 and a half million dollars would be expended today annually if we had the same program. However, in today's age of technology it is not necessary to spend that much money to make these statements available to everyone. It has been suggested that Alberta Health and Wellness can set up a secure website to provide statements to these individuals. This will keep the cost down, and if citizens were provided with these statements, they might make different choices about what services they wished to receive and find more cost-effective ways to receive their health care, which would cut costs tremendously over time.

I might also add that the opposition talks one day about how we want to keep the cost down, yet today the Leader of the Opposition was talking again about how we're spending too much money. I don't really get where the equity is there.

Mr. Speaker, I know that these statements of benefits paid are available to individuals upon request. However, there's a significant limit to their availability. Albertans can view their statements of benefits paid for the current year free of charge, but the statements are up to seven years old, and the cost is \$63 including tax. If people become more interested in ordering their statements of benefits paid, it could become more costly to provide these statements on a demand basis than it would be to systematically issue the statements electronically.

Mr. Speaker, not only are there cost barriers to individuals receiving their own statements; there are also other practical barriers that we should consider as an Assembly. For example, few people know that this service is available. Most people become aware of this service due to some unfortunate incident that necessitates acquiring their statement of benefits paid. There are usually emergency circumstances, and going through the process of ordering these statements can be a time lag that Albertans simply cannot afford.

In addition, Mr. Speaker, the majority of requests for statements of benefits paid are required for third-party use. These include groups such as insurance companies, medical examiners, Workers' Compensation Board, and, yes, members of the legal profession. Once a consent form is completed, the third party is required to pay the \$63 fee, as I mentioned, to obtain the statement regardless of the time period. We all know that the fee will be passed on to the consumer in the form of higher premiums for insurance or higher taxes for the medical examiners' costs. Motion 510 would allow individuals the option of supplying third parties with their personal record at their own convenience without having to go through the arduous and often expensive process of ordering them.

Mr. Speaker, one key issue we need to keep in mind when providing the statement of benefits paid in an electronic form is both privacy and confidentiality. Adequate adherence to privacy laws to protect doctor-patient confidentiality must be ensured at all times. Indeed, it is a cornerstone of our medical system. That being said, I see no reason that providing these statements through a secure website should infringe on privacy. For example, we need look no further than to the growth of Internet banking, which I logged into a few minutes ago. If millions of people are willing to trust their life savings on a bank's secure website, it stands to reason that similar

confidence could be placed on secure websites to access the statements of benefits paid.

The bottom line, Mr. Speaker: Albertans deserve to know where their tax money is going, and given the size of the Department of Health and Wellness's budget I believe that these statements are of great interest to Albertans and, therefore, should be provided to every individual. As such, I urge all members here to support Motion 510 so long as it is implemented in such a way that privacy is respected and it is cost effective.

Thank you, Mr. Speaker.

The Deputy Speaker: The hon. leader of the third party.

Mr. Mason: Thanks very much, Mr. Speaker. I'm pleased to rise on Motion 510. I read the motion with interest because I think that in principle it's, in fact, a very good idea.

Mention has been made of Tommy Douglas, who brought in the first comprehensive system of public health care. Just for the record, he was originally a CCF and then later became an NDP Premier of Saskatchewan and the leader of the federal NDP. He certainly advocated letting people know the full cost of providing health care. In fact, it was the inability of people to privately afford the cost of health care that led him to the creation of the first public health care system in the province of Saskatchewan. This later spread across the country and became a national program. He certainly believed that health care was expensive and that people needed to know what the costs were, but he felt that the costs needed to be borne socially rather than individually. I think that he would look favourably on this approach. I've certainly been generally in support of this approach.

The problem with it, Mr. Speaker, is that family units are the basis of the provision of health care. Members of an individual family comprise – I don't know if my terminology is correct, but essentially the billing unit is the individual family. On your card you will see the number for the parents and the children in a given family, and the billing information is collected in that way. I recollect many years ago seeing an accounting of the health care costs incurred by my family, which was provided, I believe, at that time on an annual basis. My recollection is that this was once done in the province of Alberta. The question really is: why was it discontinued?

I think the real issue has to do with privacy and the privacy of individual members within a family. Some members of a family – and I'm thinking particularly of children – might require some medical attention which they wish to keep private, and this would be impossible, at least in the way it was reported in the past. I don't know. I was interested to know if the Minister of Health and Wellness was maybe going to address some of those aspects in his comments. I'd be interested in hearing what they were.

With respect to the growth in health care costs I believe that that's a real issue that needs to be addressed. A number of years ago the now Minister of Finance and Enterprise was the Minister of Health and Wellness, and she convened during the third-way discussions a conference in the city of Calgary where international experts on health care systems from around the world were gathered to present their views. I attended that, and I thought it was very interesting and very valuable. It was pretty clear, though, towards the end of the conference – a consensus emerged among all of the experts from around the world – that the degree to which you have private delivery in your health care system was a good measure of how expensive it was. So the more private delivery you had built into your health care system, the more expensive the overall cost was.

They compared different jurisdictions around the world. Of course, all of these different systems are complex and quite different,

but it was quite clear from the presentations that those who depended more on public delivery had lower per capita costs than those that used more private delivery. Of course, the extreme example is the United States, where there's a very high percentage of private delivery, and the per capita health costs in that country are twice what they are here. In fact, you have somewhere close to 40 million individuals in that country who don't have health care coverage. My mother-in-law lives in Minnesota, and she has private health care, so I know a little bit about that system. She has reasonably good coverage, but her bill just for the insurance is several hundred dollars a month, and that's quite typical. That's for people that do have the coverage.

Mr. Speaker, I just wanted to indicate that health care costs are a concern. They are growing fast, and I support efforts to try and control that, but if we are attempting to control it by increasing private delivery of health care, it's like throwing gasoline on a fire. It's not going to make the situation better. I prefer the approach that we've put forward, for example, with respect to prescription drugs. If we did bulk purchasing for the health care system as a whole in this province, we would be able to save over a hundred million dollars a year in health care costs. I'd better make sure I've got that number right. I'll check that number, Mr. Speaker. I don't want to be called by the minister.

Mr. Liepert: Phone New Zealand.

8:00

Mr. Mason: It is based on a New Zealand model, and we've advocated that.

Those savings could be turned into increased coverage for seniors. Right now seniors have to pay \$25 a prescription. It's capped, but many seniors, of course, have multiple prescriptions, sometimes 10, 12, or more, so those numbers really do add up. If we were able to realize those savings and put it towards capping costs for seniors, we would be able to provide an unlimited number of prescriptions for just one payment of \$25 a month. That's just one example of the things that can be done to reduce health care costs.

I was interested in the comment of one of the hon. members who talked about, you know, wanting to cut costs and at the same time calling for increases in everything. I think that we have seen some of that. That was Calgary-Egmont. We've seen some of that. I was a little surprised as well to hear the hon. Leader of the Official Opposition calling for significant reductions in government spending because it's been my observation that he and his colleagues have called for increases in almost every area. I just want to be clear about where we stand on that because we've called for significant increases in spending in a number of areas as well, most recently in the area of children's services – and there are other areas as well – but we are always prepared to say how we are going to pay for it, by eliminating corporate tax cuts and by increasing royalties. We believe in balanced budgets, and we believe in paying for the things that we advocate, and I think that that's an important thing to say.

Mr. Speaker, if I can just conclude. I just want to indicate that I think this is a good idea, but I am very concerned about the practicalities. This system did exist in this province, and I think that for good reasons it was discontinued. Unless there is some way that privacy of individuals within a family can be protected, I would not be prepared at this time to support this motion.

Thank you very much, Mr. Speaker.

The Deputy Speaker: The hon. Minister of Health and Wellness.

Mr. Liepert: Well, thank you, Mr. Speaker. I'd like to make a few comments relative to the motion by the Member for Calgary-Bow.

I know that the motion was put forward with all good intentions, and it was probably put forward very much because it's the kind of comment that is made to me personally, maybe as much as any other comment that's made to me personally, with suggestions on what to do with the health care system. The comment is: why don't you revert to sending out those bills again? It's not because they want to look at their own bill, but somehow I think people think that if somebody else looks at his or her bill, they won't use the health care system quite so much. I don't happen to subscribe to that. I believe that if someone is abusing the health care system, they are surely not going to quit abusing it because they happen to see that they're abusing it on a particular bill.

I guess the bigger issue, Mr. Speaker, is that, you know, we have made some great strides in this province with our electronic health record, but at the end of the day, compared to some other industries, we are still, I would say, way behind the times when it comes to technology. I mean, can you imagine going to a bank anywhere in the world and not being able to access your bank account? Can you imagine an airline operating today without a computerized system? Could you imagine FedEx not being able to identify at any given time where one of their 2 million packages might be around the world?

At the end of the day we still have 50 per cent of our medical practitioners who are not involved in the electronic health record. They still work off good old paper. It's such a complex system, Mr. Speaker, that unless we have pretty much 100 per cent buy-in by all of those various professions involved in billing and being paid by the health care system, it is actually almost an impossibility to print a bill or have a bill online, a statement online as suggested by the member.

One of the things that I think I am certainly supportive of is some early work that is being done on what's called a patient health portal. There will be more to say about this later this year, but the work really is around online access so that patients will eventually be able to access all of their own personal health information online. It will not only include your own personal information, but it will include such things as how to manage chronic disease, tips on nutritional guidelines, all of those kinds of initiatives.

I believe that it is a better use of taxpayer dollars to try and build a system that serves the patient for the patient's betterment of their health needs rather than spending a lot of time trying to design a statement that I'm not sure at the end of the day would gain very much other than the fact that somebody could look at a statement and probably spend a lot of time phoning Alberta health care complaining that they actually didn't use those services when, in fact, they probably did because it was a referral from a specialist or whatever the situation may be.

What we are proposing under the patient health portal are such things as – I guess that ultimately when it's up and running, you would have access to all of your prescriptions. You would have such things as vaccination records, X-ray results, lab test results, all those kinds of things. Ultimately we could see a patient portal allowing you to maybe book an appointment online, which would obviously cut down on wait times and the times to get into the system, all part of an access strategy. I believe it would also help improve care. You can use your patient portal to help manage. If you happen to have diabetes, you could interact on how to manage that. I think that ultimately if we had a patient portal, there would be the ability to reduce any errors in the system.

I guess, just in conclusion, Mr. Speaker, that a couple of comments were made tonight. I know the hon. Member for Edmonton-Highlands-Norwood mentioned privacy concerns. I think, clearly, that is one of the issues that would have to be dealt with. I do think,

however, that overall I would like to see our efforts put towards an initiative such as the patient health portal, which ultimately will benefit the patient far more than having a statement online. I'm not sure who would be the ultimate benefactor of that.

Thank you very much, Mr. Speaker.

The Deputy Speaker: The hon. Member for Calgary-Buffalo.

Mr. Hehr: Well, thank you very much, Mr. Speaker, and thanks to the other members for making their comments here tonight as I've garnered quite a bit from each of them. Hearing different perspectives and different ways of thinking and different reasons for differing views here in Alberta is always a good thing.

I, too, read today's motion with great interest. I do believe it is important for Albertans to know that our health care system is not free but that, in fact, we pay for it, as the member from the third party said, in a social context. In fact, we all realize that at the end of the day at some point in our lives we all get sick and we all get tired and we all need a nurse or a doctor or a health care facility. I think that that recognition has come from a time in Alberta, a time in Canada prior to – we've had some discussion on Tommy Douglas bringing forward his plan on health care. I don't think those times were very good for families or individuals, in particular individuals who were unfortunate enough to suffer dramatic impacts, I guess, to their health, whether that be something at the beginning of their life, the middle of their life, or the end stage of life.

8:10

That's where our idea of a socialized medical care system or public health care system actually emerged. I've heard some members call it now, in order to avoid calling it that, just providing good government, that good governments provide public health care, and I'm fair with that comment. Good government does provide health care in this manner because it's the most morally correct way to administer a health care system. Health care that isn't good enough for everybody isn't good enough for anybody. But that's just sort of a philosophical viewpoint that at this time we here in Alberta for the most part share despite the fact that there have been some hiccups in the road, Bill 11, that was tried a few years ago.

We've got some things happening here. Down in my riding the Copeman clinic is where, as the hon. Member for Calgary-Varsity indicated, you can pay \$4,000 and get what probably can only be considered superior medical care to the average rank and file Albertan, who either doesn't have the \$4,000 or the ability to pay or doesn't happen to get down to the Copeman clinic fast enough. In my estimation, it is most unfortunate that we as a society and possibly as a Legislature have allowed that to happen. For us just to say that it's outside of our control is, I believe, a weakness.

Again returning to some of the merits of the motion, I really do think that Albertans need to know the cost of the system, and many, in fact, maybe do. They know intuitively that a doctor goes to school for a long time to be able to administer their health, or they go to the emergency clinic, the Calgary Foothills emergency clinic, and they see all those staff and ambulances and what have you, and they know it costs money. As we see in every election, the number one issue, for anyone who reads polls, is health care, and through and through whatever the zeitgeist of the time is, certainly health care is the number one thing. People expect health care to be delivered in a reasonable fashion and, I would suggest, in the fashion they've become accustomed to over the last 40 years.

I guess there are some things here that I am somewhat worried about in a bill like this. They, again, may be more worrying about a bogeyman that, hopefully, doesn't exist, but I think I've made

some comments that indicate that I have a right to be worried. Sometimes sending out a bill in this manner sort of gets people used to the fact that maybe a bill is going to be coming someday, or maybe some people say: "Jeepers creepers. Look how much health care really costs. Do you think that guy, so-and-so down the street, actually deserves this?" I think it's fraught with some difficulties of that nature and could actually lead to a less collective way of doing this, an individualistic way.

Those are sort of my comments. Actually, I just had an opportunity to remember the comment by the Member for Edmonton-Highlands-Norwood, or leader of the third party. Yes, we as opposition members have it in our power to suck and blow sometimes, but then that's an admission that I gladly make. Nevertheless, we've had it in our purview for a long time, and if you looked at our policy in the last election, we were going to save a significant amount of our resources going forward. So to say that that isn't consistent, I believe, is not true and something I believe we would stand by.

Nevertheless, though, you guys are the government of the day, and you have to balance these options. I realize it's not an easy task. However, let's face it; you're spending a lot of money, anyway.

I have no more comments here. Thank you.

The Deputy Speaker: The hon. Member for Battle River-Wainwright.

Mr. Griffiths: Thank you, Mr. Speaker. It's a pleasure to rise today to speak to Motion 510. You know, it seems very often that we wind up talking so much about health care in this Assembly. Invariably, no matter what we do when we start talking about health care, we always get down to the costs of health care and how much that is. I know that in the discussions, at least in the six and a half years that I've been an MLA in this House, we always talked about how health care premiums were a way for Albertans to know some of the cost of health care, but I agree with a lot of people who talk about how that really didn't demonstrate to them what the real costs of health care were. If they paid about a thousand dollars a year for health care, knowing that the cost was three or four times higher than that depending on the family and the amount they used health care, I don't think they got a real reflection of the cost of health care.

Now, I do have to say I disagree this time with the Member for Calgary-Varsity. He had mentioned that a motion like this is perhaps an indication that we don't consider Albertans as being responsible for their use of health care. I agree that Albertans are generally responsible, but I don't think it's about whether or not they're being responsible in this case. I think it's about whether or not they have the awareness and understanding of how much health care costs them so that they can be responsible.

It would be equivalent to not putting up signs that there is a school zone but then handing out tickets when people go through too fast, when there is no indication about how fast they can go. If Albertans aren't given some tool or some resource to make them aware of exactly how much they are costing the health care system or, more appropriately, what services are being provided to them by the health care system, it's very difficult for them to make conscientious choices – like when their son or daughter has a sniffle, if they should run to the doctor to get them checked, or if they have a pain in their back, if they really need to use the health care system – unless they really realize how much those services cost.

I mean, very few people understand how much it costs to go see a doctor or how much it costs for an MRI or how much it costs for most any medical service. We still think all the time about how it's free. So it's not that Albertans aren't responsible; it's that they don't

have the awareness. Whether or not they're being responsible, simply having an awareness of the cost could enhance that to some extent.

Now, Mr. Speaker, there are some challenges in coming up with something like this, for instance the cost. When we're talking about health care going from \$10 billion to \$12 billion to now being fully a third of the entire spending of the provincial government, you always have to consider how much this cost is going to be. I like to think that going online would be a fantastic tool for Albertans to go and check resources, but believe it or not, most people don't go and check the Internet for anything. They'll go look up stuff that's interesting, but they won't look at their bill to see their costs or their cellphone usage or any other bill unless they get it in the mail and they open it up and it's right there in front of them. So I would argue that perhaps sending them an actual, physical paper copy of what the costs are might be more effective in helping to enhance their sense of responsibility and awareness of what the health care system costs. Still, some resource available, whether it's online or a paper copy, would be better.

8:20

Mr. Speaker, every time we talk about health care – I have heard this over seven years – somebody always makes the argument that if we just spend this money, it will save us a bunch in the long run. Sometimes I don't think we can afford to save any more money because we constantly spend more money to save a little bit. So I have a real concern. I'd like to know more details about how much this would remove from the health care system or cost the Alberta taxpayer before we went ahead with it.

There are other challenges around privacy issues, which I won't duplicate. Many people have discussed that.

There's also the issue of collection of data. Mr. Speaker, this is not just about adhering to FOIP and making sure that we protect people's privacy but about whether or not the tools are actually available to collect all of the data and to determine the actual costs of all the procedures. In fact, I have been reading quite a bit about health care lately, and I'm aware that the province has population-based funding for its health regions and for its hospitals, and then there is some policy-based funding that attaches to that. We don't in this province adhere to activity-based funding. Unless there is some formula for or some policy on activity-based funding, where you know what each procedure costs and what each test costs, it's very difficult to do a full assessment and come up with the data to know how much each individual taxpayer costs the health care system. I don't even know whether we have the tools available yet to collect that.

I know we've discussed it over and over, and I know the department continues to work towards drilling down to find some calculable, rational cost for each procedure, but until we get to that point, it may be very difficult to move toward this sort of system where we send out bills to people, or at least receipts, to show them what they cost the health care system.

Regardless, I do think the initiative has an incredible amount of merit. Although there are challenges, I'm going to support this motion and hope that it encourages the government to continue to find some way to get information out to every single Alberta taxpayer so that they're aware of just how much money is spent on their behalf and what services are provided so that we can help manage expectations in the health care system.

Thank you, Mr. Speaker.

The Deputy Speaker: The hon. Member for Lethbridge-East.

Ms Pastoor: Yes. Thank you, Mr. Speaker. Today is a big day. I've just taken my pen and circled the date on my calendar because this is the day that I agreed with the Minister of Health and Wellness.

An Hon. Member: Can we quote you on that?

Ms Pastoor: Absolutely.

An Hon. Member: It's in *Hansard*.

Ms Pastoor: That's fine.

I certainly agree with him when he says that although the idea is probably good and the concept is that people would know how much they spend, I think it would be so, so very expensive to set up, and my biggest problem, of course, would be the sense of privacy.

As far as knowing how much an MRI costs, if I need an MRI, I need an MRI. I'm hurting. There's something wrong with me. I need to be fixed up. I can't really say: "Oh, my gosh. That's going to cost the system a thousand dollars or whatever it is. I won't have my MRI today." No. I need it. I need it now. So I'm not sure that that would be very much of an incentive.

I still believe part of our problem is that we really need 24-hour stand-alone clinics right beside an emergency so that true emergencies go through; otherwise, they're triaged, and they can go to a 24-hour clinic. There are tremendous amounts of money spent in emergency that truly are not emergency situations.

One of the other concerns I would have is something in here about variable premiums. To me that really sounds a lot like insurance. I would have a problem with an insurance company having my family health records and the history of my family. For one thing, they could then deny coverage based on, perhaps, a record of your health. Either that, or they would up the premiums that you probably wouldn't be able to afford. That's one thing that scares me about insurance companies having my medical records. The other thing is that if insurance companies have them, then employers may have them, and employers could well use it against you. If it was between you and another person and you had a history in your family of – I don't know – say breast cancer and you're 32, they might look at you quite differently in terms of hiring you for a job.

The other thing, quickly, is that it means that health care professionals would now have to keep track of exactly what medical supplies are used when a patient is under care in a hospital. Well, I know that in America they don't just count Kleenex as a box; they actually count the sheets. Truly, as a health care professional in our system as it stands today, I simply, simply do not have time to count Kleenex sheets.

With that, Mr. Speaker, thank you.

The Deputy Speaker: I hesitate to interrupt the member, but according to Standing Order 8(4), which provides for up to five minutes for the sponsor of a motion other than a government motion to close debate, I would like to invite the hon. Member for Calgary-Bow to close debate on Motion 510.

Ms DeLong: Thank you very much, Mr. Speaker. I would like to thank all my colleagues who participated in debate on this motion and would like to conclude with a few more remarks and observations.

Mr. Speaker, ensuring the sustainability of our health care system is one of the greatest challenges facing not merely this government but governments across Canada. As my hon. colleagues and I have discussed tonight, the government is certainly providing adequate funding to meet the challenges we face as a province with a growing

population; namely, more doctors, more beds, and more facilities. However, proper funding must be accompanied by proper governance and solutions that work effectively. I strongly believe that a key part of the solution to ensuring that health care remains sustainable for future generations is a well-educated and informed population.

The government is working hard to make this a reality with the Netcare electronic health record initiative. Mr. Speaker, this is an initiative Albertans can be proud of, and it's an excellent example of putting technology to positive use. It's been so successful that every other province is now following our lead. These electronic records will help to reduce patient waiting times, improve care, and reduce errors.

It is clear that there is no one easy solution to bringing health care costs under control. It will take hard work and effort from government and Albertans alike. Online health care statements combined with electronic health records can provide a cost-effective and convenient means for Albertans to make healthier, more informed choices in regard to their health care while remaining aware of the rising costs of health care delivery.

From my experience in the information technology industry I know that designing a statement capability into the electronic health care record now, at an early stage, is a very small cost, in the hundreds of thousands rather than in the millions. I believe that preparing these online statements would be less, in order of magnitude, than if they went through the mail.

My colleagues have raised concerns regarding online security and protecting the confidentiality of Albertans. I can assure my hon. colleagues that I am in full agreement as such statements must be provided with the highest level of security such as is already being provided through the Netcare electronic health record. I also believe that providing these statements will illustrate the strengths of health care delivery in this province and make government more accountable to Albertans through greater transparency.

Mr. Speaker, I would again like to thank my hon. colleagues for debating this motion in the Assembly as we look for modern solutions to our health care system. Thank you very much.

[Motion Other than Government Motion 510 carried]

Government Bills and Orders Second Reading

Bill 24 Adult Guardianship and Trusteeship Act

The Deputy Speaker: The hon. Minister of Seniors and Community Supports.

Mrs. Jablonski: Thank you, Mr. Speaker. I'm pleased to rise today and move second reading of Bill 24, the Adult Guardianship and Trusteeship Act.

First off, I would like to thank the hon. Member for Calgary-Shaw, the Minister of Tourism, Parks and Recreation. The hon. member chaired the legislative review of the Dependent Adults Act and the Personal Directives Act. This legislative review led to amendments in the Personal Directives Act, which were proclaimed in June this year, and to the development of Bill 24, a new act to replace the Dependent Adults Act. I would also like to thank the Ministry of Justice and Attorney General, particularly the Public Trustee, who has been a partner on this review since 2005. Finally, I would like to recognize the other members of the policy field committee and specifically note the contributions of the hon. Member for Lethbridge-East and the hon. Member for Edmonton-Strathcona.

8:30

It is my pleasure to now take this important legislation through second reading and the remainder of the legislative process. I understand that my colleagues the hon. Member for Edmonton-Rutherford, chair of the Standing Committee on Health, and the hon. Member for Wetaskiwin-Camrose, a member of the committee, will also be rising to share their comments on this bill.

The final report and recommendations of the legislative review of the Dependent Adults Act and the Personal Directives Act were completed in January '07. Fourteen of the 16 recommendations were accepted and formed the basis of this act. Before addressing some of the highlights of the new proposed legislation, I would like to say that our work to this point is based on solid input from our partners and on valuable feedback involving many stakeholders.

During the review process, to ensure that we were heading in the right direction, government held extensive consultations with the public. We listened closely to what Albertans had to say about their experiences with the legislation. Through questionnaires, public meetings, and stakeholder sessions government consulted with over 4,300 Albertans. These individuals included doctors, lawyers, advocacy groups, health providers, private guardians, and long-term care providers as well as members of the general public. Extensive research, including approaches in other jurisdictions, was also conducted.

In considering the new bill, a foundation and guiding principles were established. They included the presumption of capacity, the fact that the ability to communicate is not a determination of capacity, a focus on autonomy of the individual with a less intrusive and less restrictive approach, guidance to court-appointed substitutes to assist in decision-making that focuses on the best interests, and taking into account how the adult would have made the decision if capable.

The Adult Guardianship and Trusteeship Act will replace the 30-year-old Dependent Adults Act, which has allowed for the appointment of a guardian and a trustee since 1978, but the needs of Albertans have changed significantly since 1978. Today the need is for far more flexible legislation that provides for the least intrusive measures, legislation that reflects a continuum of decision-making authority which is consistent with the mental capacity of the dependent adult. Clearly, the process of assessing mental capacity is paramount.

Improvements are introduced in Bill 24 to the capacity assessment process. Bill 24 includes a revised assessment process, one which is standardized and focuses on cognitive and functional abilities. The new process reflects current-day understanding of the complexity and variability of mental capacity. Importantly, it is more respectful of specific individual needs and abilities. Accordingly, the new legislation reflects a continuum of supported and substitute decision-making authority for adult Albertans.

The first option on the continuum of authority is for capable Albertans. They will have the option of writing supportive decision-making authorization to allow a trusted individual, such as a family member or a friend, to assist in decision-making.

The next option on the continuum of authority would apply to Albertans who have significantly impaired capacity but are still able to make decisions with appropriate guidance and support. For these individuals the courts can appoint a co decision-maker.

The next option on the continuum is a guardian. This is for individuals who are deemed to be incapable of making personal decisions. Also, the court can appoint a trustee for adult Albertans who are incapable of managing their financial affairs.

I've asked my colleague the hon. Member for Wetaskiwin-Camrose to speak to the legal aspects of assigning these levels of authority, and he will present these.

Bill 24 is intended to be more flexible legislation that reflects our aging population and changing needs. The new Adult Guardianship and Trusteeship Act maintains the dignity and autonomy of Albertans and allows represented adults to remain as independent as possible for as long as possible. The legislation addresses the need for protective safeguards for some of Alberta's most vulnerable citizens.

I urge all members to support Bill 24, the Adult Guardianship and Trusteeship Act. Thank you very much.

The Deputy Speaker: The hon. Member for Lethbridge-East.

Ms Pastoor: Thank you, Mr. Speaker. I'm glad that I can actually follow the minister because I'm not going to have to say too much. I think she has very, very clearly laid out not only what's going to go forward with this bill but also the problems that have grown over the last 30 years and the changing in our population and why this bill is so necessary.

It certainly, in my mind, is going to go a long way towards alleviating some of the problems that I saw when I was a health professional in long-term care and in some of the work that I did in the geriatric side of things. One of the things that is most unfortunate is that we actually have to – and I'm sorry that we have to legislate it, but this will go a long way towards it – protect some elderly people from their own families. This is where it gets very, very difficult.

One of the other things that goes hand in hand with this Bill 24 that is very important is the Personal Directives Act. I personally believe that it should be signed at the age of 18 because many young people do have car accidents and have not named someone who should look after them or make those decisions for them. Usually, of course, it would fall on the parents, providing there wasn't a girlfriend or a boyfriend or whatever. But it's very important to first have the personal directive. Then it can go to the person that is best suited and not only best suited but also one that has been vetted in terms of: are they really willing to accept the responsibility?

I think it's wonderful sometimes for people to say, "Oh, yes, I can look after my mother" without really, really understanding some of the heavy pulling that's going to happen because they're going to have to make decisions about where they should live and what kind of care they can get. This is a highly emotionally charged decision. If one person who they trust and who legally has been given that direction and that power to make those decisions has been named by that person, it really makes it easier for everyone all the way around.

The other professions that it makes it easy for, of course, are anybody in the health care field. I'm going to mainly address this towards seniors. Sometimes a senior can be doing very well in any kind of a level of care – either long-term, DAL, assisted living, enhanced lodges, whatever – but they can easily throw a stroke, and then their care in that second has changed to the next level. That person that has been designated in agreement with the person, preferably before in case they are not mentally capable anymore, can make those decisions, and they have discussed it with the person.

I really believe that this bill is going to add a lot of humanity to the decisions that are very, very, very difficult for family members to make. Also, sometimes it's just friends that are named because maybe a couple has only had one child, and heaven knows where that child is, so the friend has said yes, they would do it. As I've said, it really does, I believe, make this whole process more human and easier for people to work with. The other thing is that it really legitimizes and gives the person that has accepted that responsibility the power that legalizing it gives them.

8:40

I am more than delighted to support this bill. As the deputy chair I certainly was aware of all of the conversations that went on. I think that the recommendations that have been accepted are very good and have been included. I think that, again, I'll just thank the minister for bringing this forward. I know how much work she has done on this over the last year or so, good work. I would also like to thank her for her preamble because it saved me a lot of words.

Thank you.

The Deputy Speaker: The hon. Member for Calgary-Buffalo.

Mr. Hehr: Well, thank you very much, Mr. Speaker. It gives me great pleasure to rise and discuss this bill, especially after the hon. Member for Lethbridge-East. In particular, I appreciate her comments surrounding the fact that this will have additional protection for our seniors who are coming under some of those stage of life implications that happen to us when we get older. This will add a certain layer of protection and some more assistance because that is one of the difficult things when you look at our society, that there has been an increase in elder abuse. Whether that is because families are continuing to be stretched or, I guess, more of an emphasis is going on the family to take care of our elderly population than it had been in the past: who knows?

It's at least nice to see that this bill attempts to address some of those insidious elements that are beginning to creep up for whatever reason, and maybe that reason could be the fact that we're not supporting our elders who need care or need help and assistance in what could be the best way possible. Nevertheless, on the bill itself, it appears that it is attempting to do the right things, given people involved in the decision-making and people who have looked for people to help them with their decision-making, in particular when things have gotten more difficult for an adult or a senior at whatever stage of life. It's good to see.

I also appreciated the comments that the minister worked very hard on this bill. It's nice to see that people were involved in the decision-making process who had an understanding of what was happening out in the community and moved to act to ensure that it's going to happen, hopefully, less in the future.

Those are my comments. I thank you for being able to speak to the bill.

The Deputy Speaker: Standing Order 29(2)(a) allows for five minutes of comments or questions. No?

Would anybody else like to speak on the bill? The hon. leader of the third party.

Mr. Mason: Thanks very much, Mr. Speaker. I will speak very briefly. This bill seems to be an improvement on the Dependent Adults Act. That is mainly because it's more respectful of people's capabilities, their varying capabilities, to make decisions. It assumes people are capable unless it's proven otherwise.

I think we are generally supportive, but I know that my colleague from Edmonton-Strathcona has provided a minority report. The concern is that there is no recourse if a complaints officer chooses not to refer a complaint to an investigator, and that's serious because it gives the complaints officer a lot of power to quash complaints based on subjective and somewhat murky criteria. Given the amount of power guardians have over dependents' adult lives, we think it's extremely important that complaints from those adults are given a fair hearing. Thus, a review process of complaints that are not investigated must be in place and must be effective. We believe that trying to streamline the processes cannot overshadow the protection of people's rights.

A lot of good things in this bill, Mr. Speaker, but I think that remains a very serious concern on our part. As I said, the hon. Member for Edmonton-Strathcona has provided a minority report to the committee report with respect to that issue.

Thanks, Mr. Speaker.

The Deputy Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you. I, too, appreciate the composition and creation of Bill 24, the Adult Guardianship and Trusteeship Act. It not only deals with the quality of life, but it deals with dying with dignity. It should be people's goal to have a personal directive or a living will so that while they're healthy their intent is clearly indicated. In some circumstances, however, that's not possible. Therefore, what I'm asking for is the acknowledgement of special circumstances. This personal directive, or living will, is a new concept for a lot of seniors. Chances are by the time they realize its importance, particularly if they don't have sons and daughters to assist them, then it may be somewhat too late.

I want to briefly recount the case of a senior who was in a care centre, and he was suffering from dementia. His wife was basically his only advocate. He suffered tremendously from being in a bed that was almost a foot and a half too short, and the accommodations that were made to provide an extension for that bed caused his leg to twist. He was also frequently covered with bedsores.

His wife, who cared deeply for him, visited him on a daily basis. She was an LPN who had previously been a nurse at this particular facility. Now, she made it very clear to the individuals providing the care that under no circumstance was he to have the initials DNR attached to his chart, which stands for do not resuscitate. But twice when he was taken to the hospital, individuals were proceeding as though that do not resuscitate order was part of his, basically, prescription or the care that he was to be provided when, which went expressly against the wish of this woman.

8:50

This is why, I would suggest, the value of life is in the eye of the beholder. When I visited this gentleman with his wife, as I did on three different occasions, I saw that for all intents and purposes from my outward observations he appeared to be in practically a vegetative state. While I could not necessarily discern or anyone who wasn't directly related to him may not have seen his value as an individual based on the state of his dementia and his incapacity to move, his wife felt that there was a value. She felt that, even if it was just whispering to him or talking to him or rubbing his hand, there was value to his continuing to live. She continued to advocate on his behalf.

Well, unfortunately, she succumbed to cancer before he succumbed, so when she left, there was no one to keep that DNR off his list. Maybe that would have been his intention, but based on the state of dementia he wasn't able to advocate for himself. We have to balance the amount of care we give and the extent to which we keep people alive and the value.

When people are comatose, for example, we don't know whether they're going to recover, but there seem to be all kinds of indications from those people who have recovered, even after a 20-year period, that there was brain activity going on at the time. While there wasn't any clear indication of a response, based on the evidence after they finally came out of the coma, they were in fact aware of what was going on about them in the room. The idea that we would pull a plug early because the person hadn't created a personal directive or a living will is rather a troublesome circumstance in terms of having that control over life and death when the situation isn't absolutely clear.

The controversial case of the woman in the United States whose family members wished to keep alive and her husband, who was basically her legal guardian, decided that she had undergone such brain damage as a result of successive strokes that it was cruel to prolong: that created a tremendous amount of controversy. Because he did have the guardianship, in fact, he did make the ultimate decision, and basically she was unplugged.

Where there is another grey area is the case of individuals caring for adult children with disabilities. I recently met with a number of individuals who were connected with seniors' advocates and also with the same ministry dealing with persons with developmental disabilities. There was an extremely sad case that individuals may remember in British Columbia with older parents. I believe their son was about 55, 57. Their health was poor. They didn't believe that their son would get the care that he required if they were no longer there to provide it. So, basically, they turned on the gas in their camper, and they took their lives along with that of their son. That is very sad. Hopefully, Bill 24 addresses that kind of circumstance.

In terms of dying with dignity, I lost my mom this past January. She had indicated to my dad what her will was, and her will was not to artificially have her life extended should she ever reach that circumstance. While the quality of her life wasn't great, she was mentally lucid. She was confined to a wheelchair. As frequently as my brother, my sister, and myself could, we would go to visit her and keep the last bit of contact that we could. My dad tried to keep her in the house as long as he possibly could, but it became impossible. It became impossible for even myself and my dad sometimes to move her because she had gained that degree of weight and immobility.

When she did have the stroke, it came as a surprise to us. Because of the fact that she had been so immobile and the fact that she had to be lifted into bed on a crane-type apparatus, when she did suffer the stroke it came out of the blue. Because my mother was very strong constitutionally, she didn't die immediately. The stroke did not kill her. She, in fact, lived for almost four more days.

My dad was suffering pangs of guilt. Was she getting some kind of nourishment? Should she potentially be fed with a tube? Was there any point to sustaining her life? Was there any quality left? My concern was with the gurgling and the difficulty that she was having breathing. The people at Cedars Villa did everything they could, and I very much appreciated Drs. Gladman, both senior and junior, coming directly to Cedars and providing their advice as to what they should do. We knew that mother wasn't going to recover, but the fact that she was having trouble breathing caused me great concern. So I was pleased that they upped the oxygen, and they provided the morphine as was required to keep her from suffering. We made the decision not to have her moved to take up a bed in a hospital circumstance because there was no particular care that they could provide for her there that couldn't be done at Cedars Villa.

A number of members in this House are of similar age to myself. They may have already gone through this process with their parents or an older aunt, uncle. It is an extremely critical time in your life, and you want the best for the individual involved. Of course, I wanted the best for my mom. I hope that Bill 24 addresses those highly personal concerns. My advice to everyone, as the hon. Member for Lethbridge-East said, is: create your personal directives, create your living will so that you get to choose how you leave this earth.

Thank you.

If I may, Mr. Speaker, adjourn debate on Bill 24.

[Motion to adjourn debate carried]

Bill 18
Film and Video Classification Act

The Deputy Speaker: The hon. Member for Livingstone-Macleod.

Mr. Berger: Thank you, Mr. Speaker. It is my pleasure to rise and move on behalf of hon. Minister Blackett second reading of Bill 18, the Film and Video Classification Act.

Mr. Speaker, we all know that one of the best ways to protect oneself is through education. Through education we can make informed decisions and choices. Alberta's film and video legislation aims to protect Albertans by providing information and warnings on publicly shown films in our province. Film classification officers classify and rate content and provide this information to Albertans so that they can make informed decisions as to the movies they choose to view and allow their children to see. If film distributors decide not to submit a film for classification, Albertans are less able to make informed choices.

9:00

Any individual or corporation deemed to be in contravention of Bill 18 risks paying a fine. Another example of someone contravening the act would be if someone sells or rents video pornography to a minor. Mr. Speaker, these offenders also risk paying a fine. The maximum fines imposed under the Amusements Act were not much of a deterrent. Currently individuals and corporations who choose not to comply with the act are required to pay a maximum fine of \$200, which is largely not enforced. Under Bill 18 the maximum fine for individuals would be \$10,000, and the maximum fine for a corporation would be \$100,000. The fines proposed in Bill 18 are a balance between those applied in other provinces. Bill 18 sets out penalties as well as a clear definition that local law enforcement is responsible for responding to complaints. If passed, the new Film and Video Classification Act will continue to educate fans of film and video.

I appreciate the opportunity to add my thoughts to the debate on Bill 18, and I would now move that the debate be adjourned. Thank you, Mr. Speaker.

[Motion to adjourn debate carried]

Bill 23
Weed Control Act

The Deputy Speaker: The hon. Member for Lacombe-Ponoka.

Mr. Prins: Thank you, Mr. Speaker. On behalf of the hon. Member for Cypress-Medicine Hat I am pleased to rise today and move second reading of Bill 23.

I serve as the chair of the Standing Committee on Resources and Environment. Bill 23 was referred to the Standing Committee on Resources and Environment June 2 of this year. Over the course of the summer since June 2 the committee met several times to review Bill 23. We received public submissions and carefully considered the input of stakeholders. The report of the committee was tabled last week with a complete list of the presenters and stakeholders.

Several stakeholders requested the opportunity to make a presentation to the committee, and this opportunity was provided. The committee heard directly from these stakeholders who were seeking to participate in the process. I was actually impressed by the level of knowledge of the stakeholders regarding Bill 23. Stakeholders provided the committee with good and valuable suggestions for possible improvements to the bill. I sincerely appreciate the efforts of all committee members and stakeholders to improve Bill 23.

In summary, the Weed Control Act provides authority to deal with weed species, both native and introduced weeds, that impact agricultural production. The amendments reflect proposals from many stakeholders such as agricultural fieldmen, who are municipal employees and serve as inspectors under the act. The bill provides an effective means to control the growing and spreading of weeds harmful to our environment, to agricultural crops, and also to our urban surroundings.

The inspectors will be authorized to enter on land for the purposes of monitoring compliance with the act, and inspectors may only exercise powers and duties of an inspection as limited by the context of the act. Inspection authorities that exist today are being continued. For example, the existing list of buildings such as the seed-cleaning plant or grain elevators or auction markets, that are subject to inspection at any point, will continue to be subject to these inspections. These plants are commercial enterprises, and inspections without notice are still considered necessary for these enterprises.

The bill continues the right of appeal to an appeal panel and to the minister. The bill does not take a radical new approach to weed control. Rather, the bill helps to align the legislation with the long-standing policy of the application of the act. Amendments will ensure the cohesiveness of the legislation through the updating, reorganizing, and clarifying of provisions.

Regarding the updating of the bill, the amended bill adjusts the timing and service of notice to individuals to reflect mailing and posting on-site methods. The use of mail for the service of notice provides inspectors with the authority to immediately post notice on any conspicuous place on the land or property or private dwelling place. This will improve the inspectors' ability to fulfill their responsibilities.

Regarding the reorganization within the bill, provisions of the act that are better situated in the regulations will be moved accordingly. Provisions for municipal bylaws, appeals, or operational matters that are better suited are situated in the regulations as well.

The ability to elevate a weed's status by bylaw will be provided for in the regulations, a more appropriate place for this type of provision. If a plant and not necessarily a weed is a problem in a particular municipality, the municipality will continue to have the ability to elevate that plant's status to a prohibited noxious weed.

In Bill 23 clarification is provided detailing the legal obligations, notice provisions, inspection powers, appeal mechanisms, and enforcement provisions. The operation of the act is strengthened through this provision.

In conclusion, the bill modernizes the existing Weed Control Act. I look forward to the debate on Bill 23 and call on all members to support this bill in second reading and beyond.

Mr. Speaker, I would like to adjourn debate on Bill 23 as well. Thank you very much.

[Motion to adjourn debate carried]

Bill 33
Agriculture Financial Services
Amendment Act, 2008

[Adjourned debate October 21: Mr. MacDonald]

The Deputy Speaker: The hon. Member for Calgary-Buffalo.

Mr. Hehr: Well, thank you very much, Mr. Speaker. I will be speaking on the amendments in Bill 33, the Agriculture Financial Services Amendment Act, 2008. If we look at this bill, it will give the Agriculture Financial Services Corporation the ability to offer

livestock insurance programs. The amendments will also allow for the Agriculture Financial Services Corporation to have the maximum loan or guarantee amounts modified through the agricultural financial services regulation. If we sort of look at that in total, I think it, at least for the first part, is a pretty good change to allow the department to offer a difference in agricultural product insurance, the change in section (2), which changes the wording. Notably, “insurable agricultural product” is used instead of “insurable crop.”

This makes the definition more broad and able to include livestock insurance in addition to crop insurance, which obviously adds a little more flexibility and allows, I guess, the business owner to make a decision to be able to acquire this type of insurance through this program, which is no doubt a benefit. There is some concern, I guess, with the movement of the maximum amount of the loan from \$2 million to \$5 million, which is apparently going to come forward in the regulation.

Those are my comments on the bill. There are just some general questions we had. What will the structure of the livestock insurance programs be, and how does this relate to the Alberta livestock and meat strategy if at all? Those are sort of my comments, and we’ll go from there.

Thank you very much.

The Deputy Speaker: Standing Order 29(2)(a) allows for five minutes of comments or questions. Anyone?

Any other hon. member who wishes to speak on the bill? The hon. Member for Lethbridge-East.

9:10

Ms Pastoor: Yes. Thank you, Mr. Speaker. I rise today to speak to Bill 33, the Agriculture Financial Services Amendment Act, 2008. Its amendments will allow for the maximum loan or guarantee amounts to be modified through Agriculture Financial Services. I think we know that our livestock industry, our beef industry in particular, is certainly having problems at the moment, and knowing that there is some kind of an insurance that is offered to them through private organizations, that at least is offered to them, does give them, I suppose, a small bit of security.

There are certainly many conversations going on out there about the fact that these animals are now going to have to be tracked from when they are born and be able to be tracked through the system. Some countries, of course, won’t accept them unless they’re under 30 months, and this is certainly providing a bit of a problem for our beef industries. Certainly, I think it’s R-CALF in the States that’s doing all it can to keep our good Alberta beef out of Montana.

Some of the questions that aren’t really quite clear in here are: what will the structure of the livestock insurance programs be, and how does it relate to the Alberta livestock and meat strategy if at all? Now, the livestock and meat strategy is still, from my understanding, certainly in the discussion stages, and part of that has got to do with how Alberta beef can be marketed. There are various niche markets that I know they’re trying to get into, but to get into niche markets, there has to be some money put up front to be able to have the animals that would meet that particular criteria and that particular standard.

Section 6 would remove the loan maximums, but would there be any guidelines for loan maximums in the regulations? Mr. Griffiths said in the House that it would be increased to \$5 million in the regulations. Again, often my problem with this government is not the what but the how. I think that to be able to increase this to \$5 million in regulations, we would never know, necessarily, in this House if these have been raised as well.

I think my other question would be: how carefully are these insurance payouts, et cetera, going to be monitored?

I think those are my concerns at this point in time, Mr. Speaker. Certainly, we would support this, and coming from southern Alberta, of course, where we’ve got so many feedlots and where the beef industry is such a large portion of our agricultural economy, I think that this is a good bill.

I think that the minister of sustainable resources said something this afternoon in the House that I thought was fairly profound in that he said that there really is room for animals and wild animals as well, including the bears.

The Deputy Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much. Sometimes the rural members of the government caucus have to laugh – and I understand it – when some of us city slickers don’t quite understand the need for certain programs. The other night the Minister of Municipal Affairs was sort of teasing me about land hold, and he said: do you know what land hold means? I didn’t know what it meant in his terms, in terms of how much crop could be produced on a particular piece of land, so I appreciated his explanation. When I was talking about land hold, I was talking about how land will hold its value despite what happens to the infrastructure created on it.

With regard to the necessity for animal insurance, even though I’ve had limited experience, I draw a lot from my uncle David Chase’s experience in Vermilion and the devastating circumstance when his entire herd that he’d built up over a generation and then passed on to my cousin Michael had to be slaughtered. So I fully understand the need for insurance. It makes absolute sense.

Where I have a concern is a similar place to where the hon. Member for Lethbridge-East had a concern, and that’s the upping from initially it was \$2 million – it’s \$5 million, and we don’t have a sense of where it stops. I find it somewhat amusing that this province that is so opposed to any kind of public insurance program for drivers seems to have no difficulty with what I interpret to be – and feel free to correct me as you so often do – the idea that we’ve got a government-supported public insurance for animals. It seems to be a little bit contradictory. In one sense it appears that we’re back to being in the business of being in business. However, because it’s a public insurance program, I understand the need to support farmers and ranchers, obviously.

A concern I have is: under what circumstance would an individual be able to claim the insurance for lost animals? It makes complete sense to me what the Minister of Sustainable Resource Development talked about in terms of a predator kill and providing a rancher with some support. But my experience – and this is one area where I actually have some experience. I spent three seasons in the south-east Kananaskis, and I did get to see grizzlies in their natural habitat. I did come across a circumstance where an animal had died, but it wasn’t the grizzly that killed it. The grizzly took advantage of the fact that somebody had very thoughtfully laid out a smorgasbord for him. That caused a great deal of consternation because in a couple of days the TransRockies road race was going to come through that Cataract Creek bed, and obviously it couldn’t happen with a young grizzly claiming this dead cow. Eventually it was resolved by a conservation officer winching the carcass through the rancher’s stock trailer, and it was moved off. The race was able to continue because the young grizzly had moved off.

I think that it’s extremely important for the sake of preserving our grizzlies, which I hope will eventually be considered an endangered species. Also, I’m extremely pleased that the government has backed off on its program to sterilize the wolf population or to shoot them from the air. Wolves and bears are part of a natural cycle, and unfortunately man has interrupted that cycle, so we have to have

some kind of a balance re-established. I was pleased to note that the Minister of Sustainable Resource Development indicated that before insurance was provided, there would be a determination: was it, in fact, a predatory kill, or was it just sort of a crime of opportunity? Was the animal ill and so on?

An Hon. Member: Was it insured?

Mr. Chase: Well, based on what the Minister of Sustainable Resource Development suggested, the insurance applies.

I'm pleased because ranchers in general respect the wilderness and the predatory animals, and they have a right to protect their herds. Knowing that there's an insurance policy is the equivalent of having an insurance policy on some wolves and some bears because they're not necessarily going to be shot under false circumstances. So I appreciate that.

9:20

This is a good bill. It is intended to provide the backup protection that is absolutely necessary. Hopefully, other bills will have tracking mechanisms so that they can follow the animal and its age. In terms of exporting the animal, that information now is absolutely necessary, and I would think it must be a part of the so-called insurance policy that would be taken out on the various animals.

I support this bill, and I call the question, if I may, unless the mover of the bill would like to conclude.

The Deputy Speaker: Since we don't have any other member joining the debate, the chair will call the question on the second reading of Bill 33.

[Motion carried; Bill 33 read a second time]

Government Bills and Orders Third Reading

Bill 28 Jury Amendment Act, 2008

The Deputy Speaker: The hon. Minister of Justice and Attorney General.

Ms Redford: Thank you, Mr. Speaker. I was very encouraged by the debate and the support that Bill 28, the Jury Amendment Act, 2008, received from the House. This act will clarify who can and cannot serve on juries and improve the efficiency of the jury selection process. I am confident that this legislation will meet the needs of the justice system and the needs of Albertans.

Mr. Speaker, it is my pleasure to move third reading of Bill 28, the Jury Amendment Act, 2008.

Thank you.

The Deputy Speaker: The hon. Member for Calgary-Buffalo.

Mr. Hehr: Well, thank you very much, Mr. Speaker. It's a pleasure to rise and speak in favour of Bill 28, the Jury Amendment Act, 2008. As I have had the opportunity to speak to this bill a couple of times before, I won't go into great detail, but we should always remember when making changes to a bill that is very important to us as a society and, in fact, people in general – well, that would be society, people in general, wouldn't it? I believe so, eh? Nonetheless, it gets late.

Here we go. The point I was trying to make, Mr. Speaker, is that when we do make changes to something as important as the

principle of a jury, to be allowed to be tried by one's peers, it's very important that we do so carefully and considerately and look at this from all angles, which I'm certain the hon. Minister of Justice has done. I agree in principle that this bill balances both who can sit on a jury and has made, then, also some changes as to who is going to be hearing your case. It's who's going to be sitting on that jury. I think it strikes a balance between individuals that we want sitting on juries, the people who are looking at our justice system, and how it operates. It also has an ability for individuals, you know, who have already served their time, who are eligible to receive a pardon, should they wish to take it on their own behalf, to get themselves a pardon and get themselves eligible to serve on a jury should they desire some time in the future.

In essence, I'd just like to comment that it's my belief that this will allow for better jury selection. It also offers some similar educational benefits to those serving in the administration of justice. It really is a good bill, and I'm happy to be speaking in favour of it here tonight.

Thank you very much, Mr. Speaker.

The Deputy Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you. As my esteemed colleague who has risen in the ranks of the legal profession and has a very good understanding of Bill 28, the Jury Amendment Act, which very clearly spells out who is eligible for jury duty – it's a clarifying act. It makes absolute sense to spell out what the limitations are for a person to be able to participate in jury duty. It makes absolute sense to exclude people who have been convicted of a particular offence.

Therefore, I would call the question.

The Deputy Speaker: Well, since no other member wishes to speak on this, I will now call on the Minister of Justice and Attorney General to close the debate.

Ms Redford: Thank you, Mr. Speaker. I think that this has been an important discussion for us to have in this House because it takes us back to the fundamentals of what our justice system is about. It reminds us all that it is important for us to be judged by our peers but that the definition of who our peers will be is something that we need to consider carefully.

I appreciate the comments in the House tonight and have no further comments. Thank you, Mr. Speaker.

[Motion carried; Bill 28 read a third time]

Government Bills and Orders Second Reading (continued)

Bill 36 Land Titles Amendment Act, 2008

[Adjourned debate October 20: Dr. Brown]

The Deputy Speaker: The hon. Member for Calgary-Buffalo.

Mr. Hehr: Thank you very much, Mr. Speaker. I will rise and speak in favour of this bill, Bill 36, the Land Titles Amendment Act. If we look at the changes that this bill creates, it creates a database that is publicly accessible. It will allow for more transparency in the system and allow for the public to access more information on the property that they are dealing with. It also clarifies that the assurance protection for a purchaser or mortgagee commences when an

instrument is registered. This clarification adds a certainty to when compensation under the Alberta land assurance fund can be applied for by a nonfraudulent purchaser.

If you look at these changes, they fit very comfortably with the Torrens system, our system of land development that we have adopted over a long period of time here in Alberta. I know that many people here are already familiar with it. It basically means the mirror principle. When we use the Torrens system, the mirror principle is where if you look at what is evident on a registration system or what information is contained there, it allows for a purchaser to see all that has been dealt with on a property at face value. It can look at that piece of land on the registration system and see all its flaws and, I guess, any legal claims that are against it, any rights-of-way or any systems like that, so a purchaser understands what he is getting involved with and he knows.

9:30

Then the second arm of this is the curtain principle. It means that, I guess, all things are sort of visible to be seen. There's nothing hidden behind the curtain. It's not a parlour trick that they're playing on you here. It's simply a way for people to see what is in fact dealing with the property.

The third thing is the insurance principle. It means that if our Torrens system is not correct as to what is listed in our registration system, we in fact will allow individuals to access a fund that has been set up and established for people to make use of and to basically get their money back. This system is very important to Alberta and, in fact, many a landholding system as it allows for the marketplace to run, I guess, as efficiently as it can. Let's not say too efficiently because we on this side of the House don't always believe that the market is never broken. You know, we see some instances of that down south right now, Mr. Speaker, where, I believe, the last 28 years of deregulation under market principles may in fact have come to an end, where we've seen a nationalization of American banks and, really, where people are looking at it and saying: well, the need to sort of supervise the capitalists or to have some rules and regulations in place exists.

You saw what Mr. Greenspan said the other day. He said: I thought these guys would have some understanding that they wouldn't want to bring the system entirely crashing down. But we know from this – and at least his sort of speech was: well, I guess they can't be trusted; I guess there have to be some rules and regulations in place, where people have to know that fundamentally it's not a rigged game or a parlour trick, which is just where we pass bad things off to the next consumer or the next investor down the line.

I really think that that is what we're trying to have here a little bit in this amendment. What we have is legislation which overlooks the marketplace, that regulates what, in fact, we're going to allow people to do to each other, and some of it is not very nice. For instance, the old saying – well, you know, I'm not going to quite go there. My mind amuses itself sometimes, but sometimes that should not be amusement for *Hansard*, so I will quench my desire to share some stories of my youth, you know, around the supper table.

Nevertheless, I believe what I've said here is perfectly correct, that an entirely unregulated system has been found to be fraught with difficulties. This amendment here is sort of a recognition that we have to play some role in a marketplace. A marketplace needs some rules and some regulation principles to allow the free market to operate because without those rules, things go very off the track.

Those are my comments here. I've been happy to rise and to speak to this here this evening. They're good amendments, and I will be supporting them. Thank you very much.

The Deputy Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much. What Bill 36, Land Titles Amendment Act, does is basically three things. It makes it convenient for a would-be purchaser or seller of a piece of land because of the searchable database. It provides a degree of protection in two forms. One is through the registration of the land title and also the coverage for individuals who suffer a nonfraudulent circumstance in terms of purchasing, so there's protection built into it. What it also does is allow an individual, particularly a senior, a snowbird, to head down to Arizona or Palm Springs and not worry that their house has been sold while they've been away, so it provides a greater degree of oversight in the circumstance.

As my esteemed colleague from Calgary-Buffalo pointed out, it is based on the Torrens system, which I must admit I didn't know anything about prior to preparing for this bill, the three parts. Without getting into great detail, the mirror principle is not absolute. There can be certain public rights or burdens that affect the title, such as a right to expropriation or zoning restrictions, that may not be shown on the title. For example, who would have known even before last summer the west route of the LRT? Unfortunately, the city is put in a position of having to expropriate land. I suppose, if you go far enough back, who knew that they were going to widen 16th Avenue? There are little exclusionary principles here.

Also, as the Member for Calgary-Buffalo pointed out, the curtain principle means that the current certificate of title contains all the information about a title, and it is not necessary for an interested person, such as a potential purchaser, to worry about any past dealings with the property. Now, those past dealings might be the poor individuals that suffered from the government-approved pine shakes of approximately – I think it goes back almost 10 years when the government approved a number of start-up companies that sold pine shakes, and then it found that they did not have the durability of the cedar shakes. In fact, B.C. dumped a number of their inferior shakes that didn't pass inspection on Alberta. Unfortunately, a number of people in Calgary-Foothills in the Edgemont area suffered the result of these inferior shakes. I'm assuming that under the curtain principle there would be protection and there would have to be disclosure of the type of materials that were used and past examples of flooding and basement damage, sewer backups, these kind of things, so that people are protected.

Of course, the third part is the insurance principle so that the accuracy of the title to the land is guaranteed.

Also, there is the assurance principle. The land titles assurance fund, the LTAF, was created under the Land Titles Act to compensate people for certain financial loss due to real estate fraud, omissions, and errors. Whether it was nonfraudulent or it was a matter of fraud, there is protection for the purchaser.

At this point, Mr. Speaker, with the House's permission I would recommend adjournment on Bill 36, the Land Titles Amendment Act, 2008.

[Motion to adjourn debate carried]

Bill 39

Court Statutes Amendment Act, 2008

[Adjourned debate October 22: Mr. Denis]

The Deputy Speaker: The hon. Member for Calgary-Egmont.

Mr. Denis: Thank you very much, Mr. Speaker. I have to say that this is the first time that I'm speaking in this Assembly where I don't have any notes. As such, I won't be getting any commentary from the Member for Lethbridge-East. Is that correct? Thank you.

The Court Statutes Amendment Act, 2008, being read again. My earlier comments stand. This statute will clarify the terms and rules for provincial court. Having practised law for the last eight and a half years prior to being elected on March 3, I can tell you that I've been to the provincial court a few times. Quite often parties attend there without the assistance of a lawyer as it can be cost prohibitive. As such, this will clarify the terms for the rules of this provincial court and also will indicate as to when a guardian ad litem, which is a litigation guardian of a minor, can be appointed. This piece of legislation also deals with the amount of monies that can be placed in trust and clarifies that this amount shall not be subject to interest, which is contrary to what is the case in the Court of Queen's Bench. Of course, the Court of Queen's Bench deals with much larger sums of money.

Mr. Speaker, those are my submissions. I ask all members to support this bill.

9:40

The Deputy Speaker: The hon. Member for Calgary-Buffalo.

Mr. Hehr: Well, thank you very much, Mr. Speaker. I, too, rise in support of this Court Statutes Amendment Act, 2008. As my friend from Calgary-Egmont pointed out, this will do a service for individuals who are attending provincial court to hopefully get them through and manage the system of being involved in litigation at our provincial courts and sometimes the pitfalls and pratfalls that may lie before them. My friend from Calgary-Egmont is correct that many people use the provincial court who are not lawyers, who are merely trying to seek justice for themselves or who, as my friend from the third party said, are being found either innocent or guilty under our criminal justice system.

Needless to say, this bill also expands the ability of our courts to hear an adjudicator dispose of claims where there's a clear case of either unjust enrichments or the pleadings are vexatious. You know, if you look at that and in particular some of the pleadings that come to provincial court, there are often some wild allegations that people have put down, even more so probably than what happens at Queen's Bench. So this gives our provincial court magistrates a certain amount of leeway in understanding what those situations are and, in fact, dealing with them in a more defined fashion as under these amendments. I think that's one of the positive features of the act.

Other than that, just a sort of continuing note that access to justice even at provincial court, access to justice in general, for many Albertans is something that is not easily available. You know, I don't have any solid answers as to what exactly to do about it but to continue working in that direction. That's one of the things we should continue to strive for.

That's all I have to say. Thank you very much for giving me the opportunity to speak to this this evening.

The Deputy Speaker: The hon. Member for Lethbridge-East.

Ms Pastoor: Thank you, Mr. Speaker. I, too, would rise just very briefly. I'm certainly not a lawyer, and having listened to the two lawyers ahead of me, at times I thought they were speaking Greek. I've never even been in a courtroom, so I'm not really sure if I would have a lawyer with me or not if I went, because sometimes lawyers are expensive.

It basically is really just a housekeeping function to modernize the Alberta legislation and bring it up to a more usable fashion. Certainly, the terms are more modernized, if I'm understanding this correctly.

Certainly, my side of the table is to support this, so I'm rising as well to give my support to this bill.

The Deputy Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you. While I'm very proud of my son-in-law Vivek Warrior, who is an excellent lawyer and will soon be a partner with the wonderful firm of Bennett Jones, I will also flag the fact that my wonderful brother Greg is a partner with Miles Davison. I have the ability within the family, should I find myself in trouble, to seek their kin support.

Questions I would like to ask – and hopefully they will come out in second or in Committee of the Whole – would be where these changes issue from. What are we trying to cure or accomplish? Were the suggestions made by the law reform commission, academics, members of the judiciary, or all of the above? Why are these measures and/or changes necessary, and what benefit will they provide? I'm again counting on the wisdom of my young colleague, who probably could answer those questions if I were to ask him on the way back over to the Annex tonight.

My understanding of the bill is that it's basically a legal oversight bill. If something goes wrong, for example, with the masters in chambers rulings, then there's a backup so that the Attorney General becomes liable to incur losses, including solicitor and client costs for errors or omissions made by a master. Basically, it's a legal oversight, but it's also, in a fashion, a legal insurance so that a person can do their professional best, and if a mistake occurs, there is compensation for the individual who was the unfortunate recipient of a bad judgment.

It appears that it's trying to cover all the bases, and for that I appreciate the intent. I'm hoping that in the Committee of the Whole portion of this bill the questions I asked will be answered. With that, I would call for adjournment.

[Motion to adjourn debate carried]

The Deputy Speaker: The Government House Leader.

Mr. Hancock: Thank you, Mr. Speaker. I would move that we adjourn until 1:30 p.m. tomorrow.

[Motion carried; at 9:48 p.m. the Assembly adjourned to Tuesday at 1:30 p.m.]

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