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Third Session

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The Honourable Kenneth R. Kowalski, Speaker

Legislative Assembly of Alberta

The 27th Legislature

Third Session

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Wildrose Alliance: 4

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Legislative Assembly of Alberta

7:30 p.m.

Tuesday, November 16, 2010

[Mr. Mitzel in the chair]

The Acting Speaker: Please be seated.

Government Bills and Orders Second Reading

Bill 20 Class Proceedings Amendment Act, 2010

[Adjourned debate November 3: Mr. Renner]

The Acting Speaker: Any members wish to speak? The hon. Member for Calgary-*Buffalo*.

Mr. Hehr: Well, thank you very much, Mr. Speaker. I will be going here. I'm just winding up. There we go. Now, this brings my memory back right to where I left off on this. I thank the hon. House for waiting through my disorganization, and I'll try not to let it happen the rest of the way through although I cannot make such promises that it won't.

I would like to speak in favour of this bill.

The Acting Speaker: Hon. member, you have already spoken.

Mr. Hehr: That is why. A light goes off. Thank you very much. Perfect.

The Acting Speaker: Any other members wish to speak?

Seeing none, I'll ask the hon. Member for Grande Prairie-*Wapiti* to close debate.

[Motion carried; Bill 20 read a second time]

Bill 21 Wills and Succession Act

[Adjourned debate November 3: Ms Pastoor]

The Acting Speaker: The hon. Member for Lethbridge-*East*.

Ms Pastoor: Yes. Thank you, Mr. Speaker. The proposed Wills and Succession Act really is to update the law. This side of the House, at least this little section of this side of the House, is in support of this bill. It currently stands to reflect changing social values in Alberta as well as evolving estate planning practices.

Certainly, as an RN working in geriatrics I could see the importance of actually having a will very, very early, having it updated as you go along. In fact, the personal directives, which should be a part of when you write your will with your lawyer, actually probably should be signed at the age of 18. There are reasons for that. Say a young man or a young woman is in a car accident, and they're 18 and a half. They are now adults, and there is no one to make decisions on their behalf or to look after them if they're in a serious car accident and seriously injured. So it's very important that at the age of 18 one not only has a will but, more importantly, that personal directive so it's very clear who is to make decisions on their behalf.

I think the other thing that it sort of clarifies is that if two or more people die at approximately the same time in the same accident, their property would be distributed as if each party died before the other. But now it'll be that in cases where property is jointly owned, it

would be deemed to be split amongst the owners equally. This is consistent with public opinion on the matter as established by the ministry through a public consultation and harmonizes the principles regarding testimonial dispositions with those contained in the Insurance Act. When these accidents happen, certainly, there are lawyers involved, there are insurance companies involved, and in the case of deaths there are all families involved, usually from both sides. It's very important that these are very, very clear.

This is part of a housekeeping bill, really, just to make these things brought up to the 21st century in the number of things that can actually happen and also the different ways that we recognize families and who would be entitled to the disposition of properties and monies.

Mr. Speaker, with that, I will sit down and say that we are in favour.

The Acting Speaker: Standing Order 29(2)(a) is available if anyone wishes to comment or question.

Seeing none, any other members wish to speak?

Mr. Zwozdesky: I would move that we adjourn debate on this bill at this time.

[Motion to adjourn debate carried]

Bill 22 Family Law Statutes Amendment Act, 2010

[Adjourned debate November 3: Ms Blakeman]

The Acting Speaker: The hon. Member for Calgary-*McCall*.

Mr. Kang: Thank you, Mr. Speaker. It's a great honour and pleasure to rise to speak to Bill 22. The highlights of the bill are that it will reflect several changes to Alberta family law policies, specifically in the following areas: parentage and guardianship of children, maintenance enforcement program, and interjurisdictional support orders.

Mr. Speaker, the current law states that parentage of a child is shared between two legal parents, which would be in most cases the biological father and the mother. At the moment there is somewhat limited recognition of exceptions for individuals to be recognized as legal parents in situations where the parties are a same-sex couple or where nonbiological parents have relied upon assisted human reproduction.

In order to address the growing reliance on AHR, Mr. Speaker, and recognize the children who are a product of this birthing method, the ministry has proposed through this bill the following policy in order to provide greater clarity regarding the issues of parentage. Where AHR is used and there is a proper combination of biology and consent, couples using AHR can become the legal parents without any added need to begin adoption proceedings as long as one partner or spouse can show a biological connection to the child and the other individual consents to being a parent.

As noted previously, this policy change will result in a paradigm shift from the arbitrary exercise of parental guardianship, particularly where the child resides, in favour of focusing completely on the willingness of a parent to be a guardian. The ministry has made certain exceptions for situations where a sexual assault has occurred or that individual has no interest in being a guardian.

It further goes on and talks about the maintenance enforcement program, Mr. Speaker, which is responsible for the collection of court-ordered payments from debtors after an order has been made. In an effort to further the goals of increasing the regularity of

maintenance payments and making systems more efficient while keeping the level of service to Albertans consistent, the ministry has introduced several changes through this bill.

In addition, there have been amendments to the current model to increase procedural fairness to all parties. These changes include some of the following: charging penalties to maintenance recipients that owe money to MEP as a result of fees, overpayments; penalties would be collected far more frequently; and debtors will now be required to keep employment information current. Now a debtor will be required to have sought a negotiation of payment arrangement by the maintenance enforcement program before an application to suspend an enforcement action can be brought before the courts. The release of information governed by this act would now be more closely aligned with the provisions of the Freedom of Information and Protection of Privacy Act.

This will be providing powers to search for parties to applications as well as prospective applications and revising the way in which the applicable law is established by Alberta courts in order to simplify the process for the courts and the parties involved.

The revisions to guardianship will certainly have positive effects for Alberta, Mr. Speaker, and reflect the changing values of the time as well as the role that technology has played in influencing the law as it relates to parenthood and guardianship. The changes that the minister has made will improve the administration of the maintenance enforcement program and provide enhanced procedural fairness for creditors essentially by levelling the playing field in relation to the way that the maintenance enforcement program deals with debtors. The outcome here will likely be greater client satisfaction, and, hey, if anyone could use that, it would be the maintenance enforcement program.

For those reasons, Mr. Speaker, I will be supporting the bill. Thank you.

7:40

The Acting Speaker: Standing Order 29(2)(a) is available if anyone wishes to comment.

Any others?

Mr. Zwozdesky: Mr. Speaker, I would move that we adjourn debate.

[Motion to adjourn debate carried]

Bill 27 Police Amendment Act, 2010

[Adjourned debate November 4: Mr. Oberle]

The Acting Speaker: Any other members wish to speak? The hon. Member for Lethbridge-East.

Ms Pastoor: Okay. Thank you, Mr. Speaker. I probably had a problem with this right from the very beginning because despite the fact that we have an increase in population, I'm not convinced that we actually need 87 ridings in this province.

An Hon. Member: Police Amendment Act, Bill 27.

Ms Pastoor: Oh, I am sorry. I believe that my hon. colleague is up on this one. Sorry.

Mr. Hehr: Thank you very much, Mr. Speaker. If I could go?

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

Mr. Hehr: Thank you very much, Mr. Speaker. My apologies for the difficulties here tonight.

I am pleased to rise and discuss for my first time Bill 27, the Police Amendment Act, 2010. I must say that I have some concerns about this bill. I believe that the Police Amendment Act could be better, and I believe that it may in fact be limiting what we have in some rights of individual citizens to go forward and have their situation investigated by a proper review agency in regard to police misconduct or an incident that involves a police officer or the justice system.

If we look at the Police Act, we're primarily looking at an act that has been in force since 1973. The police complaint and discipline process has remained largely unchanged since the 1973 Police Act. As noted by the minister, the amendments are a result of several consultations with stakeholders over the past 10 years and, most recently, consultations for the law enforcement framework. The law enforcement framework was designed to reflect and respond to, apparently, the current realities of policing and to position Alberta's law enforcement as a modern, flexible, and professional system that can continue to meet the policing and public security needs of the public.

Now, I would also like to advise that although that is the stated goal of this bill and it attempts to streamline and modernize the police complaint process, much of what is being done in this act appears to actually be, at least at first blush, limiting some of the abilities of an individual to appeal their outcome or to get a reasonable hearing in front of a board or to investigate some complaints, which is essentially why this board has been set up. We had a frank discussion yesterday about sheriffs, and we're having a discussion now about police officers in order for police officers to be seen as legitimate to be enforcing the rule of law and to be really strong guardians of not only our personal safety and our personal property but also strong guardians of our democracy and our justice system. With that power and privilege comes a role by the state to oversee their responsibilities, to appoint boards and citizens to look after complaints that stem from police issues that occur in Alberta.

Although I've only been an MLA for roughly three years, coming from a downtown riding oftentimes I hear stories, rightly or wrongly, about some incidents that occur in the community. I'm not saying they're correct or not, but at least we need to have an avenue where these complaints are heard, where they're heard by people who are seen to be open and accountable and who are listening to what, in fact, a person's complaint is against the police officer or police organization or whatever you may have. Whatever an individual's complaint is, we have to give them the opportunity to speak and to be heard and for them to legitimize what the policing role is in the community, which is our protection. It's also protection of, like I alluded to earlier, our entire system of rule of law, of no one being above the law and the government not seen to be using too much of its power to buffalo someone into doing things or being railroaded into situations that they have not been in.

I think I've outlined in a rambling sort of fashion how these commissions and complaints processes are supposed to go. This bill, in my view, is contrary to the public interest as it will water down the public complaints process to a point where ordinary citizens are offered no recourse should they fall victim to some form of police misconduct. This bill is an attempt to serve what police officers believe are the best interests of police officers. In my view, it goes some of the way to taking away somewhat. Maybe we can go to the other things where some legitimate concerns are not being heard.

If we can talk about it here, if we look at section 19.2:

19.2(1) Prior to scheduling an appeal for a hearing, the Board shall, within 30 days of receipt of written notice of the appeal,

review the written notice of appeal and the record of the hearing and may

- (a) dismiss the matter if in the opinion of the Board the appeal is frivolous, vexatious or made in bad faith, or
 - (b) notwithstanding section 20(2)(b), make a decision in respect of the appeal based on the review of the record and consideration of the factors set out in the regulations respecting appeals, without conducting a hearing.
- (2) Where the Board is unable to dismiss or conclude an appeal in accordance with subsection (1), the Board may schedule a hearing of the appeal.
- (3) The Board may give directions to the affected parties in respect of a review or a hearing and may extend or modify its directions on reasonable request by a party.

Stakeholders have voiced concern regarding the proposed powers conferred on the LERB to dismiss an appeal outright. Groups maintain that the Law Enforcement Review Board should require the parties to make submissions on whether there should be an appeal. This should be on the record before the relative appeals of the merit are considered and any decision to dismiss the issues. I think this would be a valid way to decide whether an appeal would go forward. It would allow for justice not only to be done but to be seen to be done, and it would allow for opportunity for a victim to express their opinion or their concerns as to why they should have an appeal. I think this is an important step. Should a person get a decision that they disagree with and they are not afforded this appeal, their confidence in the system may be shaken, and I think that in situations where police are involved, we should as a government, as a state extend that opportunity even in what are at first blush possibly some very sublime or even ridiculous circumstances.

7:50

It's one of the situations where we must go further and at least allow for people to discuss issues, to hear why they think they weren't given the opportunity the first time to get their, I guess, facts on the record and to at least give them that opportunity. I realize it will often be a bureaucratic nightmare and possibly make some people do some extra work on some stuff that has little opportunity to succeed. Nevertheless, having that opportunity, in my view, would allow the situation to go forward and allow our citizens to have more confidence in the system.

We also look at section 20 and its amendments. I'll just go through them here in subsection (1) by adding the following after clause (e):

- (e.1) if a complainant fails to . . . answer questions or to produce an item as required under clause (c) or (d), is unable or refuses to participate or to follow processes or conducts himself or herself in an inappropriate manner, the Board may dismiss the matter;
- (e.2) if a witness fails to attend or to answer questions, is unable or refuses to participate or to follow processes or conducts himself or herself in an inappropriate manner, the Board may dismiss the witness and continue with the matter.

The proposed changes of section 20 are difficult for me to fully comprehend. In situations where the complainant or witness is unable to respond, their inability should not be used as a pretext to dismiss what might in fact be a valid claim. I don't believe that an individual's inability has much relevance at this stage. Even where a complainant or witness falls into one of the behavioural classes provided above, it should simply be assessed against that witness's credibility rather than used as a means to expedite the disposal of the appeal.

This type of power is not available in criminal matters, civil trials, administrative tribunals, or almost any other professional discipline system. In almost any other adjudicated setting if a complainant or witness is guilty of behaving in the ways listed in (e.1) or (e.2), the

hearing would simply proceed to its conclusion and be based on the available evidence.

If there is no available evidence to back up their claim, well, it'll be dismissed and you go from there, whether they have the ability to appear or not or whether their behaviour dictates that they shouldn't be there. But if the evidence still suggests that something was wrong – and I realize that there are situations where by reason of their inability to show up, the case will be dismissed because the other evidence won't be substantial enough. But there may be cases, in fact, where this is. Simply by having that put in there, I think that is taking too much away from the process and disrespecting the process for what it is. Allowing for people at the LERB to do their job and review situations at face value, in my view, would be a wiser course of action.

If we look at section 9:

9 Section 28.1 is amended

- (a) in subsection (2) by striking out “or” at the end of clause (c), adding “or” at the end of clause (d) and adding the following after clause (d):
 - (e) a former police officer if the position of Public Complaint Director is not in the same municipality where the former police officer was employed.
- (b) by adding the following after subsection (2):

(2.1) The Public Complaint Director shall not be a currently serving police officer.
- (c) in subsection (3)
 - (i) by repealing clause (b) and substituting the following:
 - (b) act as a liaison between the commission, policing committee, the chief of police, the officer in charge of a police service and the complainant as applicable,
 - (ii) in clause (c) by striking out “public complaints” and substituting “complaints”;
 - (iii) by adding the following after clause (c):
 - (d) review the investigation conducted in respect of a complaint during the course of the investigation and at the conclusion of the investigation.

People I have talked to associated with the Police Commission are afraid that this above amendment will allow the public complaint director to possibly second-guess an investigator during the course of an ongoing investigation. The proposed change could result in the public complaint director overseeing and unnecessarily scrutinizing the investigator and the investigator's actions. [Mr. Hehr's speaking time expired]

The Acting Speaker: Standing Order 29(2)(a) is available for anyone who wishes to comment or question. The hon. Member for Edmonton-Highlands-Norwood.

Mr. Mason: Yes, please. I'd like to ask the hon. member if he would like to conclude his remarks.

Mr. Hehr: Well, certainly. I thank the hon. member. This is one of those bills that I think we'll be bringing forward some amendments on that may help clarify what was no doubt a bit of a scattergun approach to what my comments are.

Finally, I believe the commission has expressed a concern that the complaint director could attempt to insert himself or herself into the investigative process. We know from the simple fact of police independence that we want those police officers to have their independence to complete a review of a situation, to go about their actions in a reasonable fashion, where they can report to their supervisors and to the powers that be on what the situation is.

We know that as public officials we are not supposed to interfere

in a complaints process, and in my view it wouldn't be appropriate to interject a public complaint director into a situation like this. We hold the value of our police officers' investigation officer discretion as even a cornerstone of policing, and by allowing this, the public complaints director could be seen to be actively engaged in the process. In our view, that doesn't appear to be correct. Possibly that's not the case, and maybe that is going to be clarified later on, but that's at least my reading.

This amendment may breed some hostility between the service and the oversight body and create an adversarial relationship. I think at all times we have to respect police independence while at the same time walk a fine line between allowing people to have their say when it comes to making a complaint to the appropriate bodies. Investigators must be trusted to do their own investigations, or else they should not be in the role, and the public complaints director should not be thrusting themselves into a situation.

We look at some of the issues that are involved in section 43 and some of the things that have been changed in the act. Several stakeholders have complained that this is a new narrowing of the class of eligible complainant and that it runs counter to the public interest. Advocacy groups feel that these changes are aimed at eliminating complaints by groups or organizations that represent and protect our civil liberties, the CTLA and other organizations and concerned citizens. The CTLA feel that they are the main target of the proposed measures. In my view, that could be the case.

8:00

If such a restricted definition of who falls into the prescribed class of a complainant was in place previously, there would be, for example, situations that would not have been brought forward in the past. I think that would limit what type of complaints could go to the LERB and would limit the ability of people to obtain what in their view was a full and fair hearing of their complaint to a board.

Like I said at the start, we should err on the side of caution when we limit individuals' ability to make a complaint or we limit who can make a complaint to a board that serves the public interest. This act essentially disenfranchises.

The Acting Speaker: Hon. members, before continuing, may we revert briefly to Introduction of Guests.

[Unanimous consent granted]

Introduction of Guests

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

Ms Pastoor: Thank you, Mr. Speaker. I'd like to introduce to you and through you a large contingent of the Friends of Medicare who have taken time out of their evening because they feel very strongly that there should be a vocal opposition to Bill 17, and they're here to offer their support. I would like to ask them to stand and ask the House to give them the traditional welcome.

Government Bills and Orders Second Reading

Bill 27

Police Amendment Act, 2010

(continued)

The Acting Speaker: The hon. Member for Edmonton-Highlands-Norwood.

Mr. Mason: Thanks very much, Mr. Speaker. It's a pleasure for me to rise and make a few comments with respect to Bill 27, Police

Amendment Act, 2010. This is another in a series of very, very bad bills that are coming out of the government in this fall session. A lot of the bill has to do with the hearings into the conduct of police. We've had some discussions with some of the legal community in our province, and I'd like to make note of some of their comments with respect to this. It is, I think, a real cause of concern.

Section 20 of the bill, for example, stipulates a wide range of circumstances whereby a complaint could be dismissed. An action can be dismissed if the complainant fails to attend, fails to answer questions, fails to produce an item as required, is unable to participate, refuses to participate, fails to follow processes, or fails to conduct himself or herself in an appropriate manner. Mr. Speaker, this gives an enormous range for a complaint to be dismissed on very spurious grounds. It gives enormous latitude to people who can characterize behaviour of the complainant in such a way as to lead to the dismissal of their complaint.

For example, Mr. Speaker, someone who is agitated bringing a complaint against the police may behave in an unruly manner, but an unruly complainant may nevertheless have a highly valid point that they wish to bring forward. They may have an extremely legitimate grievance, yet their complaint can be dismissed under this legislation. To dismiss a justified grievance simply because a complainant somehow offends a government tribunal or falls into error adhering to process is antagonistic to the notion that the conduct underlying the complaint ought to be determined on the basis of all available evidence. It is, in fact, Mr. Speaker, the duty of these tribunals to look at the behaviour of the police, not of the complainant. So this is a very bad piece of legislation just for that reason alone.

Section 42 unreasonably restricts the class of complainant. A complaint may now be brought only by a person who was the subject of the conduct complained of, an agent of a person who was the subject of the conduct complained of, a person who was present at the time of the incident and witnessed the conduct complained of, or a person who was in a personal relationship with the subject of the conduct complained of and suffered loss, damage, distress, danger, or inconvenience as a result of the conduct. This class limitation unduly restricts other persons or organizations acting in the public interest from launching a justified grievance.

For example, Mr. Speaker, the government employs Crown prosecutors to act in the public interest. What if a Crown prosecutor became aware of information justifying a hearing into police misconduct? By the operation of section 42.1(1), absent of authority to act as an agent, Crowns are incapable of filing a grievance because they do not fit into the class of persons entitled to make a complaint under this act if this is passed.

Similar logic might apply to any other groups acting in the public interest. These groups could include police and other law enforcement officials, civil liberties organizations, a city alderman or a mayor, even the Attorney General of Alberta, the Solicitor General of Alberta, or the Prime Minister of Canada. None of them would be entitled to bring forward a complaint under this section if this bill is passed. So the Criminal Trial Lawyers Association says that there is no basis for this amendment other than to disenfranchise those who are powerless to complain or afraid or who otherwise will not complain.

Section 43 stipulates that if a complainant "refuses or fails to participate in an investigation, the commission may dismiss the complaint." Although, you know, it's possible that dismissal due to nonparticipation can happen, the amendment is nevertheless impractical. It just goes too far, Mr. Speaker. There might be any number of reasons that are justified which would explain a complainant's nonparticipation in the complaint process.

Mr. Speaker, the act goes on to address the question of discoverability. There is a one-year limitation to complain of police abuse. That's half the period for almost any other litigant who has a civil grievance. There are many good reasons to extend the limitation for launching a citizen's complaint against police from one year to two years. You know, for example, anyone participating in criminal justice understands that straightforward criminal cases routinely take more than a year to complete.

With this in mind it's also important to recognize that the party complaining of police misconduct may also be an accused in criminal proceedings involving the very same police officers he or she complains about. So I think it's worth noting that an accused may have a large number of legitimate reasons to refrain from lodging his or her complaint until the completion of the criminal proceedings. For example, the complainant may have been instructed by his counsel to exercise his or her right to remain silent. Obviously, bringing forward a complaint with the time frame that they've put in place makes that very, very difficult.

8:10

I want to talk about section 45. Section 45(4) provides that the chief of police may dispose of a complaint if he or she is of the opinion that the grievance is not "serious." Now, I remember a case here, in this city, where the son of the police chief was accused and, I think, later admitted to taserings repeatedly a man who was passed out, and it took a really long time to get any sort of justice at all in that case. Of course, you know, if the chief of police has the broad power to dispose of a complaint because they are of the opinion that the grievance is not serious, it gives enormous latitude and something which we ought not to invest in the chief of police or any police officer whose own members may be subject to a complaint.

Aside from the fact that it appears the Alberta government is prepared to legislate this approach, the practical reality is that there exists a reasonable apprehension of bias in circumstances where the subjects of complaints are essentially authorized to dismiss complaints about themselves. What a citizen or an independent tribunal might view as serious might be markedly different from what the police chief views as serious. I really wonder whether any aggrieved party could ever feel that they received a fair hearing when their complaint was dismissed by the leader of the very group of which they complained. That would be, Mr. Speaker, like trying to bring a civil suit against the government for some omission on their part or some civil wrongdoing on their part and having the Premier decide that it's not serious. Well, how many cases would actually get to trial in that case? I would say very, very few.

So I really wonder what the motive is on the part of this government for bringing forward these amendments. I think that it is inconsistent in our free and democratic society to enact laws shielding law enforcement from accountability, but that, Mr. Speaker, is exactly what Bill 27, the Police Amendment Act, 2010, accomplishes. This is a shield for the police to protect them from being brought under scrutiny for any potential wrongdoing that might exist.

This bill is a bad bill. This is one of a series of very bad pieces of legislation that this government is bringing forward in this session, and I urge all hon. members to defeat this bill.

Thank you.

The Acting Speaker: Standing Order 29(2)(a) is available for any questions or comments. The hon. Member for Calgary-McCall on 29(2)(a).

Mr. Kang: Yes, sir. Under section 45, where it goes on to say, "by

adding the following after subsection (4): (4.1) Where the chief of police disposes of a matter under subsection (4), the decision of the chief of police shall be final," what are your views on giving police chiefs that much power?

Mr. Mason: The question, Mr. Speaker, for some that might not have heard it, is: what is my opinion of section 45, that says that the chief's decision to reject complaints as not serious is final? Of course, it makes it a travesty. If anyone wants to bring a complaint against the Edmonton Police Service, for example, and the chief of police decides to use his authority to declare it not serious, it's over and done with. You know, it's a joke.

Thank you.

The Acting Speaker: Any other members wish to speak?

The hon. Deputy Government House Leader.

Mr. Zwozdesky: Thank you, Mr. Speaker. I would move that we adjourn debate on Bill 27.

[Motion to adjourn debate carried]

Bill 28

Electoral Divisions Act

[Adjourned debate November 4: Mrs. Redford]

The Acting Speaker: The hon. Member for Calgary-McCall.

Mr. Kang: Thank you, Mr. Speaker. The object of the bill is the end product of the June 2010 report of the independent Electoral Boundaries Commission, which was appointed under the auspices of the Electoral Boundaries Commission Act. This was based on the submissions, available census data, and other factors affecting effective representation. The majority of the commission decided to maintain the allocation of the divisions proposed in its interim report, allowing for the following increases: Calgary by two additional divisions, Acadia and Hawkwood; Edmonton by one; and the rest of Alberta by one.

Mr. Speaker, in addition, several of the proposed electoral divisions from the final report of the Electoral Boundaries Commission have been amended since the resolution was debated, and it goes on further. We on this side of the House have advocated repeatedly for some time that Albertans are adequately represented by 83 electoral divisions and the addition of another four would simply be an increased financial burden for Albertans. Secondly, as noted by several members of the Assembly, the move to recognize a living public figure who is regarded as both a controversial and divisive figure could pose considerable difficulties.

This is going to increase the burden on taxpayers, Mr. Speaker, by creating four more seats for the Legislature. Albertans don't need four more electoral divisions at this time because times are tough and it's going to put more of a burden.

For those reasons I don't think I will be supporting this bill. Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Edmonton-Highlands-Norwood.

Mr. Mason: Thanks very much, Mr. Speaker. I am pleased to speak to Bill 28, the Electoral Divisions Act. I'm going to hold my nose and vote for this bill. There's a number of problems with it, not the least of which was the blatant gerrymandering that took place in the development of the second report, the final report of the Electoral Boundaries Commission.

We had some problems with the original report by the Electoral Boundaries Commission – we appeared and made presentations to them – but there was some rationality to it, Mr. Speaker. Then, of course, the Progressive Conservative presentation to the commission, when they had their hearings on their preliminary report, demanded a number of changes.

I'll just use one example. I'll use the example of Edmonton-Glenora and Edmonton-Calder. There was a rational decision that met all of the criteria to simply draw the boundary along the Yellowhead, which is a natural dividing boundary between Edmonton-Calder in the north and Edmonton-Glenora in the south. But, of course, when this came forward, the members of the commission, who are Conservatives and Liberals, found that this was not in their interests. If you look at the boundaries now, Mr. Speaker, you'll find that it looks like a big bowl of spaghetti: the lines are all squiggly, and it intrudes into one community, and a neighbourhood is attached here, and so on. That's a clear indication that there's gerrymandering going on.

I think that we need to address the whole question of how these boundaries are drawn and the political, in fact partisan, nature of the Electoral Boundaries Commission. What we have now is that the governing party appoints two people; the government appoints a third, the chair; and the Official Opposition, allegedly in consultation with other opposition parties, appoints two more. So what you effectively have is three Progressive Conservatives and two Liberals on the commission drawing electoral boundaries which affect all political parties.

8:20

Now, I want to talk a little bit about the whole question of the opposition members on the commission. The act clearly intends the Official Opposition to operate in consultation with the other opposition parties in making the two selections that they're entitled to make on the Electoral Boundaries Commission. But the Liberal Party in this case apparently viewed this as a mere formality, requesting our submissions, to which we went to a great deal of time and effort to find people that would be acceptable not only to New Democrats but to Liberals as well, but it was ultimately – I shouldn't say ultimately ignored; it was completely ignored. The people that the Liberal leader wanted to put on the commission were put forward, and our submissions were ignored. I don't know if the Wildrose was asked for consultation or not.

This is our experience, and it's not the first time. What we have is a partisan group that makes deals to set electoral boundaries. I don't think that this is the way we should be determining our electoral boundaries in this province.

We've made some progress, Mr. Speaker, with respect to the appointment of deputy returning officers. Up until this upcoming election the Progressive Conservative Party selected the deputy returning officers throughout the province. Whether it was an opposition riding or a government riding, it didn't matter. That's where the names came from. One of the things that the previous Chief Electoral Officer recommended was that we do away with that system and that the Chief Electoral Officer, who is an officer of the Legislature, should hire the people who are the deputy returning officers in each constituency. That's been done, so that's progress. But we can make more progress by eliminating the partisan basis for selecting the Electoral Boundaries Commission, and it would go a long way to ensuring that the kind of gerrymandering that we've seen does not occur again.

Mr. Speaker, notwithstanding what I've said, we're prepared to live with this. We know the futility of trying to make amendments in the face of politically determined boundaries. By and large, I

think it's something that we're going to have to live with, frankly.

I want to bring up one other question, and that's the question of the renaming of Calgary-North Hill to Calgary-Klein. Now, Mr. Speaker, there is a tradition in naming some ridings for outstanding leaders of different political parties: we have Edmonton-Manning; we have Calgary-Lougheed, although I think that's named for the family rather than for the former Premier; and we have Edmonton-Decore. So you have someone who led the Social Credit Party, the Progressive Conservatives, and the Liberal Party.

We put forward a proposition that Dunvegan-Central Peace should be renamed for Grant Notley, which was the riding that he represented, and should be called Central Peace-Notley. We went through all of the processes. There were, in fact, a number of submissions from groups within the community, within the constituency itself, that this should be done. This was rejected without comment by the Electoral Boundaries Commission.

I'm not aware that any submission was made to change the name of Calgary-North Hill to Calgary-Klein. But at the last minute the hon. Member for Calgary-North Hill jumps up, evidently with the full support of caucus already determined, and says: you know, we're going to rename this Calgary-Klein.

Well, Mr. Speaker, there's an imbalance or an injustice, an inequity in terms of that decision and the lack of process that was followed relative to the process that was followed properly by us and by other people who supported the renaming of Dunvegan-Central Peace to Central Peace-Notley. I think Grant Notley was an outstanding leader of our party, an outstanding parliamentarian, and well respected throughout the province for his work.

I think that the lack of balance, fairness, equity, and the partisanship that's been shown by the Progressive Conservative caucus in this matter is deplorable. We certainly don't support the renaming of Calgary-North Hill after Ralph Klein, who remains – and I'm being charitable and polite, Mr. Speaker – a very controversial figure in our province, not a unifying force, I would say.

That concludes my comments with respect to this bill. Thank you.

The Acting Speaker: Standing Order 29(2)(a) is available.

Any other members wish to speak? The hon. Member for Lethbridge-East.

Ms Pastoor: Thank you, Mr. Speaker. Yes, I will speak to Bill 28, as I sort of got started a few minutes ago. We are against this for a number of reasons. I think that it's already been mentioned that we don't believe that we need four. But I think my problem is that when the commission was appointed, the commission was told to make 87. The commission should have been mandated to look into seeing if we need 87 and what that would be based on. They shouldn't have been told to make 87. It's certainly an expense to the taxpayers of Alberta that I think at this point in time is certainly unwarranted.

One of the other things that was mentioned already that I'd like to speak to is the appointment of returning officers and election clerks. I think that we know that last time around was probably not as undemocratic and as fair as it probably could have been. I'd like to share what we used to do in the old days, and I think this could be done again. All of the parties submitted names to the electoral officer, who would then share them with the returning officers. If someone was a returning officer or a deputy returning officer, then their staff would be somebody from the opposite party, so a member from every party. They were all mixed up, and people worked as a group instead of working as only one party represented. I believe that it really helped keep – when people walked through that door, they left any sort of partisan hat at the door and actually ran good

elections, asked questions, and worked together as a team to provide a really good election experience. They did not try to play politics, sometimes making it very difficult. I think we do know that there were certainly some problems in the last election.

Just one other comment. My hon. colleague from Edmonton-Highlands-Norwood spoke about perhaps it being a little skewed by the Liberals on that commission. Well, I for one have had my boundaries changed. I have probably picked up maybe two polls from my hon. colleague from Lethbridge-West, who proceeded to tell me with great pleasure that every one of those polls, of course, he had won. So I don't think that the Liberals on that boundary commission helped me at all. However, I did point out to my hon. colleague that probably they had gone PC because I wasn't running in those polls. I didn't think that it was a surprise that the polls that they had chosen to add to my constituency had all been won by the PCs. However, we shall see what happens the next time around.

I think maybe those are my comments, Mr. Speaker. The one that I feel the most strongly about is that every party should be represented in terms of the jobs that are given out during an election period.

Thank you.

The Acting Speaker: Standing Order 29(2)(a) is available.

Mr. Snelgrove: Would the hon. member just give us one instance in the last election or any election before where a returning officer has shown a bias to one or another? It's okay for the Member for Edmonton-Highlands-Norwood to slander all of the returning officers in Alberta, but you have normally shown a little more class. Would you give us one example of where it's happened?

8:30

Ms Pastoor: It wasn't within the returning office. It was when people were coming to the polls. I wish I had it at my fingertips, but you know what? I am going to share that with my hon. colleague across the aisle. In fact, I think there was actually a lawsuit that had gone to court, so I will share that.

I do know that some of the people that were hired – how can I say this? – were probably past their best-by date and sometimes weren't always exactly cognizant of what was going on and weren't quick enough. People were sent away to different polls because they had come to the wrong place. They weren't receiving the kind of help that they should have gotten to ensure that they actually voted. Some of it was, I think, training and the fact that these people are there to help people vote, not discourage them or say: go somewhere else. There are any number of little things that happened, and I certainly will share the instance.

Thank you.

The Acting Speaker: Any other members under 29(2)(a)?

Any other members wish to speak? The hon. Member for Calgary-Glenmore on the bill.

Mr. Hinman: Thank you, Mr. Speaker. I would like to stand and address, I guess, a few concerns that I have with the Electoral Divisions Act but knowing full well that it will be passing, and I accept that. This is a democracy, and that's the way it works.

One of the biggest concerns that I have, as the hon. Member for Lethbridge-East mentioned, was the directive given to the task force in dividing up the Electoral Divisions Act. You know, we're going into the 21st century, and the question is: do we need so many people elected? Was 83 sufficient? Did we need to go to 87? To what lengths and where do we go, and at what cost to the people?

Are we not able with 83 people to represent all of Albertans in this province? Being a representative from Calgary-Glenmore, we now have 25 representatives coming from the awesome city of Calgary to sit in this House and to bring the concerns from Calgary here, but I have to say that at the municipal level, where they have a lot of details that actually go on in the local community, they don't have 25 members to represent them.

It just seems like we've lost sight of this democratic representation here, and it seems like it's more about the numbers or, as the Member for Edmonton-Highlands-Norwood said, that gerrymandering is going on to say, "Well, how do we retain another seat so that we can have that vote and ensure that we have the power and the decision-making?" like it's some critical event that they don't have quite enough in the House. We all acknowledge very well the strength of the provincial PCs here in this House in being represented. Do we need to continue to elect more members?

I think that what we should be looking at is: what are ways that we can improve the democratic representation here in the province? We had a great opportunity here in having to respond to the 10-year mandate and ensure that the electoral divisions are set up right. I think that we need to be a little more innovative. There have been lots of discussions. There's even been a commission in B.C. that went out to look at: how are we going to change representation to ensure that people are engaged?

But this bill, you know, has come forward. We've divided up the different areas, and it really is disappointing when you look at some of the divisions in the different ridings. Geographically and communitywise you look at it, and you have to ask: why would you divide this community? Why would you take this one that's over the Yellowhead or across Macleod Trail or Glenmore Trail or some other one and drop it into the neighbouring one and take one piece out of an obvious block in the city and move it over across something like Macleod Trail, which is a major division in Calgary with, again, very different concerns?

I would hope that going forward, and, again, a very slim hope, we would do a better job in looking at the geographical representation, in looking at the number of people that actually need to be sitting in this House as elected representatives, and seeing, you know: can we streamline government in a way that's beneficial to the citizens? There are so many interesting concepts that we could and should look at. I'll just mention a few that will be put down, and maybe over the next 10 years, before the next one, some people will think of that.

One of the interesting concepts that I feel that we could move forward with because of electronics and the way that we can calculate and vote and everything else is to actually try to engage people on why they should actually come out and vote. Is there really a difference? Lots of people say, "Well, it really doesn't matter, you know; they're going to win" or "This person is going to win, and it doesn't affect us."

What would it do if we were to perhaps change the thought? Let's just say that in the city of Calgary we were to cut the number of ridings in half and meld half of them together so that we only had 12 or 13 ridings, but in each riding when they were elected, you'd record the actual number of votes. If there were 11,000 or 15,000 or 25,000 votes, that's what that individual would actually come and vote with here in the House, and each representative would be kind of like a shareholder. The number of people that voted for them in that riding would be what they would actually represent.

I realize that it's a little bit out there for some people who would think: well, how would that possibly work? It would actually work, I think, quite efficiently when you came in here. The hon. Member for Fort McMurray-Wood Buffalo and the hon. Member for Airdrie-

Chestermere are two that have huge representations in their ridings, yet they were, I guess, divided because they needed more representation from those areas. If, in fact, we were to change that and calculate the vote on the number of people that voted in those other areas, that would engage people, one, to say: well, I want my representative to have full voting authority, so I'm going to go out and engage and vote for them. But, two, we could really reduce the number tremendously because we would have a fair and weighted ballot according to the people that came, whether it's from Calgary or from rural Alberta.

It's engaging because when you look at the different areas, there are some areas that have very high turnout. Even though a member might represent a smaller area or perhaps a vast area, there might be 10,000 people that come out, out of a total of 15,000 in some of our more remote areas, so they have good representation. Then we have some other densely populated areas where there might be 40,000 or 50,000, yet only 10,000 people come out. This would be a way to actually engage Albertans to say: no, my vote does make a difference because when it comes into the House, it's going to be weighted. Right now, you know, like I say, it's one MLA, one vote, and we can tabulate those very quickly. I think we could tabulate just as quickly if people were to push the electronic button, and that number would be in there right off the bat, and it would go.

I really hope that the next time around, when the electoral boundaries act is being relooked at, we'll be a little more innovative and not say: oh, we need four more MLAs here in the province. Eighty-three was more than enough. I think we could have cut them down on this one tremendously, and I hope that next time the government will look at that. I'm quite confident that by the next time there is a revision, a new government will look at it, and we'll have a little more fair representation and more geographically directed. That will be to the benefit of all Albertans.

Thank you, Mr. Speaker.

The Acting Speaker: Standing Order 29(2)(a) is available.

Any other members wish to speak?

The hon. Deputy Government House Leader.

Mr. Zwozdesky: Thank you, Mr. Speaker. I would move that we now adjourn debate on Bill 28, the Electoral Divisions Act.

[Motion to adjourn debate carried]

Bill 17 Alberta Health Act

[Adjourned debate November 16: Mr. Doerksen]

The Acting Speaker: Any other members wish to speak? The hon. Member for Calgary-McCall.

Mr. Kang: Thank you, Mr. Speaker. It's my pleasure to rise to speak on Bill 17, the Alberta Health Act. As you know, health care has been the number one concern for Albertans not only now, but I think it goes back to the 1990s, since the cutbacks started. It relates to the wait times in the emergency rooms, a shortage of long-term care beds, a shortage of staff.

8:40

We didn't get to this situation of the backed up ER rooms at the hospitals and the red alerts with EMS in one night. It took a long time, I believe since the '90s cutbacks. It has been building, say, for 15 or 16 years. Health care lost 10,000 health care professionals in

the 1994-95 cutbacks, I believe, and those health professionals either moved to the U.S. or moved to other jurisdictions, and we haven't been able to catch up. There were lots of beds cut. Lots of programs were cut. [A fire alarm sounded]

The Acting Speaker: It sounds like a fire alarm. We will recess until this is straightened out.

[The Assembly adjourned from 8:41 p.m. to 8:46 p.m.]

The Acting Speaker: Hon. members, we'll call the Assembly back to order. That was the fire alarm. As a couple have mentioned, this is the first time he's heard the fire alarm since he's been here. It was in the sound room in the basement – that's the subbasement – and it's a false alarm.

The Assembly is back to order. The hon. Member for Calgary-McCall.

Government Bills and Orders Second Reading

Bill 17 Alberta Health Act (continued)

Mr. Kang: Thank you, Mr. Speaker. Most of those employees – I was talking about 10,000 of them – moved to the U.S., or they moved to other provinces. For example, there are 200,000 people in Calgary alone that don't have a family doctor. That is according to government figures. So there we go.

It is a shortage of staff, not only the doctors: nurses, support staff, housekeeping staff. When I was in the hospital this summer, the biggest complaint they had was the shortage of staff. I applaud the front-line workers for doing their best to keep their patients in as much comfort as they can. Under the circumstances they are really stretched. Time and again – time and again – they said: I'm working overtime today. They were really stretched to the limit.

Mr. Speaker, as we keep hearing, you know, the health care expense is the biggest expense, but over the last 20 years per capita health care spending has not gone up when we take into consideration population growth and inflation. I've been living here since 1970, and our health care was working just fine up until maybe the '80s or early '90s. It all started to go downhill with the '90s cutbacks, when our population continued to grow, but we lost four hospitals in Calgary and all the support staff, like I mentioned before. How could you expect the system to keep up when, on one hand, we lost about 10,000 health care workers – now we're able to catch up on that – and we lost about, I believe, 1,500 beds alone back then?

Now, we look at urgency level wait times. For level 1 the target is two weeks, and the actual is two weeks. For level 2 the target is six weeks, and the wait time is 21 weeks. When we go on further, for knee replacements the target is 26 weeks, and the actual wait time is 49 weeks. Mr. Speaker, that's 23 weeks more than the target.

8:50

Mr. Speaker, things are not getting better. Things are getting worse every day, but here every day we hear from the minister of health, you know, that it will be done by the end of the year, done in three months. Ever since I've been here, like two years, we've been hearing that we will be meeting our targets in a short period of time, but it's not happening.

It's good to have five years of predictable funding, but even with

the five years of predictable funding the patient is getting sicker and sicker and sicker. Red alerts and yellow alerts are becoming common, and the whole system is backed up. People are lying and bleeding in the hallways, Mr. Speaker. I was at the Peter Lougheed emergency department, and this girl was walking up and down the hallway bleeding. I don't know what her problem was, but I think she had a miscarriage or something, it looked like.

The shortage of acute-care beds and the shortage of staff are the biggest concerns in health care today. Patients are being put in storage rooms, in the hallways, and they're waiting in the emergency rooms for sometimes 40 hours to be changed to a room.

When I was in the hospital when I had bypass surgery, I was moved four times, and I ended up in the TV room. Finally, I got a private room, and that took about a week. We were put in a big room. There was no privacy for the patients, and this reminded me of the situation back home, Mr. Speaker. We are still lucky to have health care as we know it today, and if we don't do something about it, I think we are in for a big, big surprise.

Coming back to the Alberta Health Act, Mr. Speaker, the principles of the AHA are that health care is a co-operative between individuals, government, and the health care providers in recognition of social determinants of health; that all ministries and service providers have a role in healthy Albertans; that Alberta is committed to the principles of the Canada Health Act; that Albertans have access to safe, quality health care; that the health care system is built on long-term planning; and the transparency of the system and the decisions made.

The goal is that all the pre-existing health legislation will be examined and amended to bring it into alignment with the principles that are established in the Alberta Health Act. Originally it was expected that five main pieces of health care legislation – the Alberta Health Care Insurance Act, the Hospitals Act, the Alberta Health Care Protection Act, the Nursing Homes Act, and the Health Insurance Premiums Act – would be consolidated into the Alberta Health Act, but this was not pursued as one of the recommendations from the report Putting People First. It was stated that in consultations Albertans were opposed to proceeding with consolidation of these five acts into the Alberta Health Act without further consultation with Albertans.

Then it goes on to say that the Alberta Health Act will allow the minister to collect information from Alberta Health Services, hospitals, clinics, health providers, professional colleges regarding their compliance with the health charter and other health care system information. The reason for this power is so that the minister can report this information back to the public. This is an improvement, Mr. Speaker. However, there is also the ability for the minister to disregard this provision for public input if the regulation is urgently needed, if the proposed regulation clarifies the intent or the operation of the AHA, or if the regulation is of a minor or technical nature. Why have this provision included in the framework legislation that all other health legislation will be viewed through if there's such a large loophole through which the government can avoid public input?

In fact, the Alberta Health Act will entrench some of the progressive principles in the preamble of the AHA such as social determinants of health – social, economic, living conditions, physical and mental environment, employment, gender, and culture – and the need for a healthy policy.

The AHA also says that the minister of health will establish a health charter that will provide direction to Alberta Health Services, Alberta Health Services Board, operators, health care providers, professional colleges, and Albertans on what every organization and

individual can expect from the system or what the system expects them to do. One problem with this is that the Alberta Health Act does not provide any timelines on when the health charter will be created, nor does it provide any specifics regarding the public consultations that there will be for the health charter.

Then it goes on further. The AHA will also provide the minister with the power to clarify the roles and responsibilities of different organizations involved in the delivery of health care in Alberta. This will include Alberta Health Services, Alberta Health and Wellness, the Health Quality Council of Alberta, and the health professional colleges. This is all in line with already existing legislation that defines the roles and the responsibilities of authorities, but there are also stipulations that the minister can clarify the roles and responsibilities of the bodies mentioned above.

Mr. Speaker, the AHA also stipulates that when regulations are being drafted, there must be public input by posting the regulations online, that the public can submit comments, and that the comments are reported to Executive Council. There are also sections that allow the minister to almost completely ignore the section that demands public input into the regulations if the regulations must be made urgently.

Much of the detail in this act is left to regulation, Mr. Speaker. This poses a large problem in that if this is supposed to be the framework through which all other health legislation will be viewed, it follows that in any other health legislation to come, a large part of the details will be left to regulation.

Section 8 of the AHA outlines the minister's ability to order public bodies to provide him with information regarding the health status of Albertans, health service outcomes, and health system performance. There is also the ability to expand the scope of this information through regulation.

What is left out of this section is, then, how the minister will communicate this information with the public when the section explicitly states that the minister is allowed to collect this information "to report to the public on the status of the health system." How is this collection of information any different than what is already provided in the ministry's annual report, Alberta Health Service's annual report, Alberta Health Service's performance report, and the publications by the Health Quality Council?

Another issue with section 14 is with regard to how the minister will report on recommendations regarding proposed regulations to the Executive Council. All reports to Executive Council are subject to censure under FOIP. There's no way to know exactly what the minister's recommendations to Executive Council were until the regulation is declared.

Then in both the Minister's Advisory Committee on Health report and the report from the Member for Edmonton-Rutherford there is mention of creating an independent, evidence-based steering committee to support decision-making; however, there is no mention of creation of this entity in the Alberta Health Act.

While the preamble of the Alberta Health Act contains many principles that the Alberta Liberal caucus agrees with, the rest of the act doesn't contain nearly enough detail for us to support it completely. There is no specific health charter that is outlined in the legislation, so the main question surrounding the issue is what type of public debate the health care charter will receive if it's not specifically outlined in the Alberta Health Act. There is no mention of timelines for the creation of the charter, and there is no indication of how the public consultation on the charter will proceed before the charter is put into force. The draft health charter is given in the report Putting People First, but as it is not contained in the actual legislation, it cannot be debated.

Thank you.

9:00

The Acting Speaker: Standing Order 29(2)(a) is available.

Seeing no one, anyone else wish to speak? The hon. Member for Calgary-Glenmore on the bill.

Mr. Hinman: Yes. Thank you, Mr. Speaker. Albert Einstein gave a definition some time ago that the definition of insanity is to do the same thing over and over again and expect different results. This government is doing just that with this bill. They pretend to consult with patients and doctors and nurses. They promise meaningful changes, and like a bad soufflé it falls flat. Bill 17, the Alberta Health Act, has lofty ambitions like a patients' charter and a patient advocate, but once again this government is going the wrong way because it has no direction. This government promotes one bad policy after another, lurches from one crisis to another crisis, and is constantly having to clean up its own mistakes. As we have seen with the way the government has handled the energy sector, they mean well, but they keep getting it wrong. With this government every time they take a step forward, they inevitably take two steps back.

Mr. Mason: They don't mean well.

Mr. Hinman: You have a valid point there.

Albertans expected real change, real results that could be seen with their own eyes. After years of consulting the people, or after a year, I guess, and after being told Albertans are finally getting their own act, all they have to show for it is an imaginary patients' charter and an invisible friend to enforce it. The charter in question won't even have legal force. The people are not only disappointed; they are frustrated. This feels like a bait and switch. All this government has to show for its work is a preamble, a statement of principles that Albertans already agree with. There was no reason for the Member for Edmonton-Rutherford to travel the province at considerable taxpayer expense to draft a laundry list of motherhood and apple pie. Now, because of this government's incompetence, they feel they need to pass a bill to look busy rather than being busy. While emergency rooms overflow, cancer patients wait longer than they should, and seniors wait in hospital beds, this government dithers.

The biggest problem in our health care system is centralization. It does not work. A collectivized solution is just a bigger problem waiting to happen. It doesn't work in agriculture, and it doesn't work in health care. There is no shortage of funding and resources in our health system. Alberta has one of the highest levels of per capita spending in the country. Canada has one of the highest levels in the world. The problem is management.

Mr. Speaker, our health system is clogged with bureaucracy, and we need a bypass now. What does work is local control and autonomy. Empowering front-line staff like doctors and nurses rather than rewarding faraway bureaucrats will help alleviate the stress in our health system. Like school trustees, local decision-making has been removed, and as a result quality is suffering.

Successful European health systems are highly decentralized. In Switzerland health care is managed at the local canton level. There are 26 jurisdictions across that small nation, with a population only twice the size of Alberta, providing responsive care as they see fit. Alberta used to have a similar model, and this government has unwisely created a tragically sluggish monopoly. The track record of centralization in this province is littered with failure: cataract surgeries, emergency dispatch, and a disaster known as Alberta Health Services.

No matter what the issue this government acts the same, and the

results are just as predictable. A better performing system was dismantled and consolidated, putting hope for cost-cutting ahead of quality. The best way to keep costs down in general and in health care is to allow competition. The fastest way to find inefficiencies and room for improvement is through competition. For too long the health care system has been sheltered, needlessly putting patients' lives at risk. This government has stamped out any competition. We've seen this with the Health Resource Centre. The HRC provided hip and knee replacement faster, cheaper, and better than any other clinic in the province of Alberta. The proof was provided by the government itself. How did this government react? It shut down HRC. What we need is a government that protects patients, not bureaucratic turf.

When you bring in competition, you bring in something everyone wants. That's choice. In most parts of life if you don't like what you are being offered or how you're treated, you find something better. Choice is something our health care system does not have. You can choose a different family doctor in theory, but in reality there is a shortage, and you have to take what you can get or hold onto what you have.

I believe our health system should be publicly funded, publicly administered, and competitively delivered. This government acts as if wait times and staff shortages are a mysteriously unsolvable problem. They are not. Many European countries like Switzerland and France have found solutions that keep coverage universal and at the same time keep costs and wait times down. The system runs smoothly so that you can see a specialist without a referral in a timely manner. Imagine that: seeing a specialist without a referral in a timely manner.

Anyone should be able to go to any provider with their Alberta health card and receive treatment, whether that provider is a public hospital, a private clinic, or a nonprofit like Covenant Health or the Shriners. They will all receive the same fee from the government. The most efficient, innovative, and productive clinics will treat the most patients, and those with the best results will continue to attract more patients.

The old saying goes that an ounce of prevention is worth a pound of cure. I think it's really important that we shift focus to preventative care. As we stand, we have a system that treats sickness instead of promoting wellness. We keep treating instead of curing. We address symptoms instead of causes. Far too often we are spending precious health care dollars on preventable illnesses caused by drugs, smoking, or plain old lack of exercise. Chronic conditions like diabetes are the most expensive to treat, more than cancer or any other life-threatening illness. If people have a strong relationship with a family doctor, they can work together as partners to improve the patient's health and reduce the burden on the system. Right now our system is too short term, where people end up at a walk-in clinic or an emergency room, clogging our hospitals and not getting the proper care they need.

I urge this government to demonstrate real leadership by being humble enough to admit its mistakes, which does seem unlikely, and to realize its limitations by being strong enough to say that, no, it does not need to do things just because staff inside the Premier's office say that this is what we need to do.

Mr. Speaker, while I applaud the principles of Bill 17, I struggle to find how it helps the people of Calgary-Glenmore or any other jurisdiction in this province to create a more sustainable system. All I see in this government's report is lip service to sustainability. The government is spending over 40 per cent on health care. In other Canadian provinces it's now over 50 per cent. This government was warned eight years ago by Don Mazankowski. Real priorities are being brushed to the side because of this government's political priorities.

Albertans are creative, successful, and entrepreneurial. I'm sure there is plenty of opportunity to be more efficient in health care delivery. The problem is that Alberta Health Services is a black hole of information. We haven't had wait time information, or it was withheld for 18 months. If Alberta Health Services were more transparent and released detailed information rather than PR brochures, we'd have a much more efficient system than we do now.

We need a more innovative and efficient system. A key to that is the electronic health records. This government is woefully behind the times in this regard. In nations like Australia and Holland nearly a hundred per cent of the doctors use electronic records. In Canada the average is 37 per cent. EHRs give the right person the right information at the right time so a patient's health comes first. If we had a stronger information system in place, we'd know how much each procedure costs, we'd know the cost benefit of treatments, and we could develop a more efficient and effective health care system.

If we are going to have a sustainable system, we need the staff to run that system. We need sufficient doctors and nurses. We need them doing the jobs that they're trained to do. We have doctors not being able to work because of lack of nurses. Often those nurses are doing manual data entry as well as the doctor. We have nurses changing sheets. We need the right staff doing the right job that they were trained to do.

9:10

If we're going to have a fully staffed system, we need fully staffed medical and nursing schools. We need educational stability. This past year medical school spots were cut, and at the same time we were having a family doctor shortage. It just doesn't make any sense. In the nursing field, Alberta Health Services put a freeze on hiring and laid off nearly 500 nurses. Our system needs stability if we're going to have sustainability.

If we're going to look at sustainability, we must take into account our senior population. Those who have worked so hard in life need the proper care and support as they age. The government's record on senior care is a disaster, the reform of the drug plan was a failure, and the lack of proper beds is appalling. Seniors want to live at home whenever possible. Alberta has the second-lowest level of home care spending in Canada. Too often seniors end up in a hospital bed while they wait for a bed in assisted or long-term care. When seniors can't get the right beds and end up in a hospital, it creates problems in our emergency rooms. Seniors want to be near their loved ones and, when possible, close to home.

Mr. Speaker, it's disappointing that we have come to this, where we need to pass a bill to state the obvious. One has to scratch one's head and ask: what are we really doing here? To think that this government feels that Bill 17 is a priority in health care is just wrong. Of course, we think health care is important and that patients should be respected. It's obvious that the government should seek public input on a regular basis. That's the bedrock of democracy. We already know and understand those things. These things are common-sense things.

What this bill seems to be is much ado about nothing. One might say that thou dost protest too much for an innocent person: way too many statements about how well everything is going to be with this new act. These are all promises and declarations that one would never think about saying or stating, other than the fact that there are so many problems with no cures in sight, so we must state that we're going to have one.

If we were truly to run health care properly, it would be a major step to bring back the Alberta advantage. There should be an economic and social advantage to be here in Alberta. Do not get me

wrong. We are very blessed and fortunate here in Alberta. The problem is that like many family businesses that were focused on service with a great reputation that is lost by the third and fourth generation, they lose the family business because they do not understand the values and principles of those who founded it and worked hard to build up a successful business. We are falling far short of our potential and the excellence that we shall have here in Alberta. We can do better, but this bill will not turn around the continuing decline of our health care here in Alberta. The front-line workers are amazing and do a wonderful job given the workplace atmosphere they must work in. They deserve better, and our patients deserve better. This bill falls far short of any improvement here in the province.

Thank you.

The Acting Speaker: Standing Order 29(2)(a) is available. The hon. Member for Edmonton-Highlands-Norwood.

Mr. Mason: Thank you very much, Mr. Speaker. Well, I just have a few comments with respect to the speech of the hon. Member for Calgary-Glenmore. It has the refreshing aspect of honestly stating the intention to bring about competition through private enterprise into our health system. I think this is a severely mistaken point of view, but it's refreshing to see a party that's at least willing to admit what their underlying objectives and strategies are for the health system, unlike the party opposite, who hide what they're doing at election time, and after the election they make a renewed attempt to try and bring about the kind of system that the hon. member here is talking about.

I've seen it at least twice, Mr. Speaker. In the 2004 election I challenged Ralph Klein in the debate and said, "You've got a secret plan to privatize health care," something he hotly denied in the election and in that debate, but it was only a matter of a couple of months later that he unveiled the third way, which, of course, was a plan for a privatized second tier of health care. It was two-tier health care using private delivery as a key ingredient. In the last election, of course, the Progressive Conservative Party said almost nothing about health care. When asked, the Premier said: well, you know, the third way is DOA, dead on arrival. There was nothing on their website or in their policy statement which would have given us any indication of what was to come with the appointment of Ron Liepert as health minister, and we've seen the results of all of that.

The Acting Speaker: Well, hon. member, you know that you can't use names.

Mr. Mason: Oh. Did I use somebody's name?

The Acting Speaker: Yes, you did.

Mr. Mason: I apologize, Mr. Speaker. It was completely inappropriate. It was the previous health minister. I take your admonishment, and I apologize to you and to the House.

The Acting Speaker: Thank you.

Mr. Mason: So we've seen how the government tries to operate along the same policy lines as put forward by the hon. member from the Wildrose Alliance but to do so with stealth. They back off because the people of Alberta stand up against it. They don't want private health care, including rural Conservative voters, and that's something that I think the Wildrose Alliance is going to find out to its disadvantage in the next election.

The Acting Speaker: Standing Order 29(2)(a). The hon. Member for Calgary-Glenmore.

Mr. Hinman: Just to respond to that because, you know, there are always those who jump to conclusions, that don't want to look into the details. The Wildrose Alliance is very much for staying within the Canada Health Act. There's a big difference. I mean, I would suggest that for most all members who go to their family doctor, that's a private clinic that's publicly administered and publicly funded, and that's very much what we're focused on. We do agree with you that Albertans want a publicly administered and publicly funded health care system. It's very different.

Albertans do not care if they go to the HRC and can be treated six months earlier than waiting to go to another facility. The problem is that . . .

The Acting Speaker: Hon. member, the debate is through the chair.

Mr. Hinman: Sure. I'm just referring his answer through the chair so that he can get that.

The Acting Speaker: Through the chair. Yes.

Mr. Hinman: So it's a misguided idea to think that privatization is some evil thought that's going to take over health care. What we want is the administrators to have the choice and to look at various ways of appealing and putting out requests for proposals. If they would do that in an open and honest sense so that we know what is being proposed, then the competition can come in, and we can even allow areas such as Calgary to compete with some areas that Edmonton might be given.

I remember that during the by-election one of the hot issues was that the superboard said that, you know, for prostate cancer, which I'm proud to be wearing the tie and the pin for today, they were going to remove the green light laser technology from the Rockyview. They said: "We don't need one down in Calgary. We've got two in Edmonton, one in Grande Prairie, one in Medicine Hat, and that's enough for the province." So we weren't even going to be allowed to compete and say that we've got this here, and the money would follow only where they decided to give this facility money; it might be for hips or something else.

So when we talk about competition, we mean that even in one jurisdiction – whether it's Grande Prairie, whether it's Red Deer, or it might be Calgary – that wants to move into a new area, that funding would follow that procedure and not be trapped in one centralized area, saying that everybody in the province must come to Calgary or to Edmonton to receive that because the superboard says that that's the only area that's going to provide that service.

The Acting Speaker: Any other members wish to speak? The hon. Member for Calgary-Buffalo.

Mr. Hehr: Well, thank you, Mr. Speaker. It is indeed a privilege to discuss Bill 17 here tonight in this honourable House. I was present in this honourable Legislature when I heard the preamble and first reading of this bill. I listened with hope. I guess, you know, that like many citizens in this province and like, hopefully, many members of this House we are rightfully concerned about our health care system and the state that it is currently at in this province. So I listened with a great deal of interest when the bill was introduced.

You know, one of the funniest guys I know is my cousin David Vanrobacys from Lethbridge. The hon. Member for Lethbridge-East knows him. He and I were discussing this, and he said: you know,

that Bill 17 is a whole lot of feathers and not a lot of chicken, don't you think? Mr. Speaker, I bring that up because I think it is really a good analogy by an extremely funny man, my cousin. It is. This bill is a whole lot of feathers, but at the end of the day you don't get much of a meal out of it. There's not much chicken left.

9:20

When I was listening to this wonderful stuff, this new health care act, what it was going to prescribe, all I heard was that we're going to have a health care charter that might be put into play sometime in the future and in regulations. Then I heard that we'd have a health care advocate, who might be able to make recommendations and who might be able to tell you that your concerns won't be as evident next time or point you in a direction where maybe you can get some answers, because, hopefully, this person will deflect you away from the real problem or from directing a call to the minister or someone else. It is just, it seems to me, an act that is trying to act like it is doing something when it is in fact doing nothing.

I think if you look at health and – I listened intently, too, that day to the hon. Member for Edmonton-Riverview, who is our health critic, and I believe he did a very good job of looking at what in fact some of the problems are. If this government is serious about looking at what the problem with health care is, it would have to look into the situation and make a diagnosis. That diagnosis would have to go back. We'd have to go back in Alberta's history and look at what has happened to a health care system which, in my view – I was born in 1969 in the Holy Cross hospital, and some of the research that I've done and our caucus has done leads us to the view that Alberta had one of the best health care systems bar none in Canada, if not the world, up until the time I was 15, up until approximately 1985-86. It might even have extended all the way into the early '90s, when it was still a pretty good day for Alberta citizens in terms of health care.

At that time what did we see our government do? We saw our government go off for political reasons on a tangent of sorts that began by tinkering with a system that was arguably the best in the world. It made fundamental decisions on political idealism that really had no rational basis as to what, in fact, an adequate health care system looks like or what a productive health care system looks like. What did you see at that time? You saw, one, where about 15 years ago, in 1994-1995, 10,000 health professionals in this province either lost their jobs or were declassified into some other structure, and you had university spaces that were simply nonexistent for nurses and doctors to go to school. So is it any wonder that in Calgary now statistics are that 200,000 people don't have a family doctor? Okay? We did those things, and I think those decisions have a direct correlation to what we see now. But I guess as many people accuse us: that was then, this is now, and we have to deal with it now.

You know, those are some of the decisions that find us where we are today, and I don't think to have then gone from that decision – and look at some of the decisions we've made since then. I believe it was in the late '90s that we went from some number of health regions down to nine regions. Sure. A decision was made. It was made probably for political expediency like many of the decisions this government makes. It looks like it's doing something when it may not actually be prescribing a diagnosis to what the problem is.

We see, again, what the hon. Member for Edmonton-Highlands-Norwood brought up in I believe it was Bill 11, which tried to bring in the third way, which again was based on nothing but ideology in the early part of this decade, which saw this government spend time and money and invest dollars into monkeying around with a system, continuing to tinker with a system that was starting to falter from some of the earlier decisions, that were made in the '90s, a system

that was beginning to show cracks there but still was puttering along from some of the good work done probably by the Lougheed government to put in place a very good, strong public health care system. But they kept on tinkering. So now where does that leave us? Where are we now?

An Hon. Member: Right here.

Mr. Hehr: Oh, I know we're right here. Yes. That is the one thing I do know. That is the one thing I do know. But thank you for reminding me. Don't ever say that I don't pay attention to what you guys say. Okay? I do know where we are.

We have many of those symptoms, that have really come up over the last 15 years. I'm glossing over some things. Don't let me rush myself. I got sidetracked there for a second. We have access problems today. We have closures of hospitals. You know, I don't like to belabour this, but they blew up a hospital in Calgary, the Calgary General, which serviced people. It was not in Calgary-Buffalo but one block away. They sold a hospital, the Holy Cross, which I think is actually in the new Calgary-Buffalo electoral district. They sold that. Those facilities could have in some fashion maybe handled some of the emergency lines, some of the pressures that are building today. But those facilities were shut down and sold and their staff let go, and it left a problem.

There's also the fact – and this was brought up by the Member for Edmonton-Riverview – that over the last 16 years we've had 13 or 14 deputy ministers in charge of our health care system. He paints a very clear picture. If you consider that, we've had 13 or 14 people in charge of a \$10 billion a year corporation that have been changed every couple of years: "Let's just move this out. We have a new minister coming in. Let's bring along his buddy." Or maybe he knows someone in Calgary who types his letters the way he likes them. I'm making light of the fact; nevertheless, word on the street is – and primarily I trust my friend from Edmonton-Riverview – that many of these deputy ministers had never been doctors, had never worked in a health facility, had never run a corporation of that size.

Let's fast-forward things to the Alberta health superbord. Where did Mr. Duckett work prior to this? Had he ever run a health system? I don't know that. Nevertheless, we've appointed some people to a superbord. Have they ever really worked in hospitals? Yeah, they were good businesspeople, things like that, but in a hospital system you need expertise.

We say that our hospital system should be run like a business. We look at, say, Nexen, for example, in Calgary or – what's it called? – Canada oil sands development, something to that effect. God forbid I'd say Petro-Canada. My goodness. Government intervention at its worst. Nevertheless, I would assume they've had a person who's worked in that organization for years, has risen to the top, an engineer or MBA or something, that would have some knowledge of how an oil business runs. I think it would be wise to have a deputy minister who has that, who has worked in a hospital. This seems to make common sense. These are things that have been absent from our health care decision-making, and I really hope that going forward they're not. That may make things better.

9:30

I did listen, and I was actually very consumed by this. There was one positive thing that came out of this: looking at the social determinants of health. Now, there's the thing, a recognition, of all things, that poverty and disease and health are interlinked, that people who maybe don't get access to certain things or have a bad diet or maybe are malnourished or are exposed to certain things may

not be as healthy and may cause more concern for the health care system. That would be really a remarkable thing, for this government to look at the social determinants and how maybe they can make things better for some elements of this society who are not getting by quite as well as the others, as the hon. Member for Edmonton-Riverview also said. I'm essentially ripping off his speech, but those who were here don't mind that. There you go.

He looked at things like a school lunch program for kids going to school hungry. Are these kids going to grow up to be healthy and productive? You know, probably not. Those are things governments do to try and play in those fields that maybe make things better. Are we going to bring back a system that really recognizes that governments have a role to play somewhat in those things? I think that at one time a Progressive Conservative government maybe with a different philosophy, one that may come back at some point in time – who knows? – the Lougheed government, believed they had to play in those fields. They were part of that progressive element of government that actually makes lives better. That element has actually left, left for quite some time, and it doesn't appear headed back for town any time soon.

Nevertheless, those are things, at least from the limited wording in there, that to me had a positive light: government looking at the social determinants of health. If they really want to get active and busy on that, there are many ways to do things for the citizenry that I believe would augment things.

On that note, you know, I guess to sort of sign off again using the words of my cousin, this bill really has a lot of feathers, not a whole lot of chicken. I think, to be honest, that this government should be a little bit embarrassed about it. I think there is more to be done in the health care system than what has been done in this act. I think it's merely window dressing, which makes you look like you're doing something when you're not. Everyone knows that a health care system is there to make you feel better when you're sick or when you need it.

The Acting Speaker: Standing Order 29(2)(a) is available.

Mr. Hinman: The Member for Calgary-Buffalo started off with an eloquent delivery of his remembrance of history, but he is somewhat younger. It's interesting. He, you know, referred to the years '87-88 to '92, and to me the lesson that I learned watching the government and our health care system at that time was the fact that we had a growing debt. It escalated to \$25 billion, and it was just unsustainable. By allowing that debt to escalate to such an area, the government felt that the only area where it could make cutbacks was in health care, and it made the very poor decision of saying: well, you know, we don't want to be picking and choosing, so what we're going to do is go 5 per cent across the board.

Anybody who has ever managed a business and looked at those types of things: when you've got tough times, you look at those things that are critical and those things that aren't. You would never in a business take the idea of 5 per cent across the board. You'd look at: actually, we need to increase 10 or 15 per cent here and make maybe a 30 or 50 per cent cut here or eliminate some other programs.

What would be the member's comment regarding that we were hitting a debt wall? We've got a government that has spending out of control again, and if we don't control that spending, then you start pointing the fingers at important things like health care and saying: well, we don't have any choice. I was just wondering if your view on that was a little different from your view on history, realizing that we were in a real dilemma there with a \$25 billion accumulated debt, that was continuing to escalate. That had a major effect on our health care because of irresponsible spending.

Mr. Hehr: Well, first off, I'm not going to agree with everything you said there. Nevertheless, here is my view of society as a whole. When we look at our society, at least as it exists right now, as a society we say that we can't afford health care, yet my parents, who are retired teachers, can take a couple of vacations a year. We have people living in extraordinary opulence here in this province, many of them doing wonderful things, which is fair. I like that. I like that about our society. But if we as a people, as a province can't get our heads around the fact that we can afford a health care system that treats everyone in our public to the best health care system in Canada if not in the world and that we as a citizenry can afford it, then I think we're in trouble.

I realize the government has – I would be naive to believe that it is easy being in their shoes. If they one time all of a sudden said, "Guys, we have got to go to the polls, and we've got to charge 5 per cent more taxes to run a proper health care system," I would probably support them on that. The thing is that we have many members of our society who say: oh, my goodness, governments have a money tree in the backyard. Okay? I think the hon. President of the Treasury Board accuses me of believing that there is a money tree in the backyard sometimes. I may be one of these people who hasn't stood in their shoes.

I believe, probably without looking at blaming here and just answering the question – really, I'm rationally taking the politics out of it – our society has to get its head around the fact that we are wealthy enough to afford the best health care in this world and that it's going to take us contributing to it at some point in time to see that happen. We can't simply rely on the vagaries of the oil and gas system and hope that enough royalties come in one quarter and that if they're not in another, well, we're going to cut things indiscriminately from what they are. Simply put, our society has got to get their head around the fact that it's going to take contributions to pay for it.

Thank you very much for the question.

The Acting Speaker: There's still time left for questions under 29(2)(a).

Any other members wish to speak to the bill? Hon. member, you have spoken to the bill.

Mr. Mason: I have?

The Acting Speaker: Yes.

Anyone else wish to speak to the bill? The hon. Member for Lethbridge-East.

Ms Pastoor: Yes. Thank you, Mr. Speaker. I think that a lot has been said, so looking at the hour, I won't repeat many of the things, but I guess I'll get on my horse that I always get on and talk about staffing. Clearly, it's one of the main things happening that is creating, in my mind, some of the huge problems that we have in health care.

We talk about needing beds. Yes, but some of the things that happened when senior care was deregulated was that they went overboard on the other side for housing, and they didn't create the staffing that should go with it. Par for the course, I think, was to try to get rid of long-term care. Of course, as time goes on and certainly as it's being proven, we do need long-term care. Had they looked at the Nursing Homes Act, in fact, many of those people that were in acute-care beds could have been moved to long-term care had the nursing scope of practice been allowed to go to the very highest level. I know that when I was in the industry, there were many things that we couldn't do that any ordinary nurse would do. Those people could have come in.

9:40

I think the other thing that I'm probably annoyed about is that they took hospitals and they blew them up. They got rid of acute-care beds. All of a sudden there is a problem. Whoa. Wait a minute. Who should we blame? Certainly not the guys that made the decision to blow up the hospitals. Who should we blame? Let's blame the seniors. They're the bed blockers in our acute-care beds. I really resent the fact that seniors who needed care, who probably deserved to be in long-term care – granted, we did not have designated assisted living, et cetera, at the time, and home care was certainly almost nil in terms of keeping people in their homes. But I really resented that somebody needed to pay the price for the mistakes that were made. Unfortunately, it was the seniors.

Mr. Speaker, I believe that this particular bill, although there has been some good work done on it, is a vision. But, you know, it's a vision without action and certainly without timelines. We need health care, and Albertans want a health care that they can trust now. We can't wait any longer. We have to move.

We tentatively oppose it for several reasons. The preamble of the Alberta Health Act contains many principles that the Liberal caucus agrees with, and the rest of the act does not contain nearly enough detail for us to support it completely. When I say detail, I want time frames, and I want actions. When is it going to happen? I think one of the things we have to look at is that although we talk about beds, we absolutely have to have the trained staff that will go with that particular level of care needed in that bed.

There is no specific health charter that is outlined in the legislation, so the main question surrounding this issue is what type of public debate the health charter will receive if it's not specifically outlined in the Alberta Health Act. We have a couple of things going here that don't appear to be meshing. There is no mention of timelines, as I've said, for the creation of the charter, and there's no indication of how public consultation will proceed before the charter is put in force. A draft health charter is given in Fred Horne's Putting People First report, but as it is not contained in the actual legislation, it can't be debated.

The office of the health advocate will be created to ensure that the health charter is enforced, but it's difficult to support the creation of an office to enforce a charter which, in fact, in itself is undefined and has no legal force. The advocate should be independent of the government so that they can more effectively lobby the government on behalf of the Albertans that they are representing. That's what Albertans want. They want to know, when they go to somebody, that they're not going to be intimidated and that it really will be somebody who is looking after their interests, not the government's interests.

The whole section on the roles and responsibilities for organizations, that are already covered under pre-existing legislation, is completely redundant. This is a sign that Alberta Health Services has turned into an organization which the government is seemingly having more and more difficulty controlling or at least working in tight partnership with.

The last issue with this bill is the exception that the minister can make to having public input on proposed regulations. Regulations, as we all know, are often done in the backrooms and certainly don't come through this House. This is very, very wrong. This is a health act that will affect every single Albertan from birth until death. They must be able to have input into this. We must have input into any regulation and any charter that would come forward that will affect us.

Certainly, every single portion of our life is affected in some way by health. If the government truly wanted transparency in the way

that the health care system is governed, then they would not have had the possible loophole to public input. If a regulation is created without public input, then the minister must post a notice of this decision. But in the end what good is posting the exception after the decision is made and the public input was not solicited nor considered? I think that's one of the most important things, that we do have the public, and when I say the public, I want to see more – and it has been mentioned previously – actual front-line workers being part of the decisions and part of the input. The front-line workers, as far as I'm concerned, have been ignored to this point. They are the ones that are on the ground, they're on the front lines, and they really understand what is needed. More often than not it isn't a big study. It isn't money being spent. More often than not it is tweaks in the system that only front-line workers can actually recognize and be able to bring forward.

Mr. Speaker, having said that, I would like to give notice of an amendment, and I present this amendment on behalf of my colleague the Member for Edmonton-Centre.

The Acting Speaker: Okay. Hon. member, we'll pause and have it delivered, and then you can speak to it.

Ms Pastoor: Thank you.

The Acting Speaker: The hon. member.

Ms Pastoor: Thank you, Mr. Speaker. I will be very brief because I believe that we've had a fairly good discussion, and I think there have been many points of view brought forward on this. I have to read the motion. It is to move that the motion for second reading of Bill 17, Alberta Health Act, be amended by deleting all of the words after "that" and substituting the following: "Bill 17, Alberta Health Act, be not now read a second time but that it be read a second time this day six months hence."

I will be brief. As I've mentioned, I think that there has been a good discussion up to this point. I feel very strongly that we need a timeline. We need action, which, I believe, should be staffing to go with all of these extra beds that they're saying that they're creating. We certainly need more transparency. We need Albertans to be able to trust what's going on, but they have to know what's going on before it goes on. I believe that a lot of these discussions that will go on in regulation truly should come back into the House and be put in. I think that there are overlaps between this. I'm not sure that it's totally understood how this would fit in under the Canada Health Act, and for that reason I'm bringing forward this motion.

I think one other thing is that Albertans want good health care that they trust now, not two years from now, not after charters are made, et cetera, et cetera. They need it now, and they want it now.

9:50

The Acting Speaker: The hon. Member for Edmonton-Highlands-Norwood on the amendment.

Mr. Mason: On the amendment, Mr. Speaker. Absolutely. I want to indicate to the House that I support this amendment. I think it's an excellent amendment, and I don't think we should read Bill 17 at this time but six months hence, when it's unlikely that the House may actually be meeting, in which case the bill is dead. That would be the best outcome, as far as I'm concerned, to kill Bill 17 altogether, and this amendment would have the advantage of doing that, in my opinion.

Now, Mr. Speaker, when I did speak to Bill 17 earlier, I talked about it really as a question of misplaced priorities. There are so

many difficulties with our health system at the present time that I'm amazed the government would think that this particular bill would be a priority.

The bill is very clear as to what it sets out. It sets out a charter, a patients' charter, which, in our view, is not the best policy. It's going to be set later by regulation, so we don't even know what the charter is although the government has given us some indication of what they might put in it. It won't be enforceable by law. Nobody will be able to go to the courts to require the health system – Alberta Health Services or the ministry or the government – to act in a way that's consistent with the health charter.

Then it sets up a health advocate, and the health advocate, if he receives a complaint that the health charter has been breached, may choose to conduct an investigation. If he or she does conduct an investigation, then they can give a report to the minister, and the minister at his or her discretion may or may not decide to act on the report.

That's really all this act says. We've looked at it carefully because I know there have been a number of concerns raised that this, in fact, gives a great deal more latitude to the minister and to the government to change a whole bunch of things about the health system; specifically, health authorities and professional organizations within the health system. We don't believe that this is extending the power far beyond what currently exists in existing legislation.

But what this represents is misplaced priorities on the part of government. Let's take a look at the emergency room crisis. Just two or three weeks ago, when the ER doctors released the letter describing the crisis that exists in our emergency rooms, the minister was quick to announce that he was going to enforce new standards in our emergency rooms. These are national standards, and they had quietly been sitting on Dr. Duckett's compensation evaluation on the website for over a year, but the minister announced them as if they were his initiative and that they were new and that he was taking tough action.

Well, just today, in response to a question from a government member, the minister admitted that he has watered down these objectives very, very substantially, massively. Only 45 per cent, in one case, of patients are expected to get care in the time frame that exists for the national standards, instead of 90 per cent of them, 45 per cent of them, and that's the scope of it.

Well, this was a change that was quietly announced on the Alberta Health Services website just a few days ago, apparently without the minister's knowledge, but he has now endorsed this, so his tough talk that we're going to have national standards for emergency room wait times has just evaporated, you know, like a spilled drop of water in a hot desert. It's just gone.

Mr. Zwozdesky: Mr. Speaker, a point of order.

The Acting Speaker: A point of order has been called.

Point of Order
Factual Accuracy

Mr. Boutilier: Under what citation?

Mr. Zwozdesky: Under 23(h), (i), (j). Take your pick. The allegations that this member is making against me as the minister of health are completely off-line, off-base. They're not true, and I think we should clarify that and bring him to order on it.

The fact is that I have not admitted to any watering down of any performance measures. What I did today was clarify that a reporter

in the media had made a wrongful comparison of mixing together different statistics, Mr. Speaker, and took some licence by misapplying some of those numbers to all emergency sites across the province versus some that were attributed to only the 15 busiest sites across the province. As a result of that, he created some unfortunate confusion, and I was simply trying to clarify that.

At the same time I also clarified, Mr. Speaker, that on Alberta Health Services' website it clearly states that the performance measures are being worked on jointly by Health and Wellness and by Alberta Health Services and that they will be released soon in their proper full form. So I would ask the hon. member to please correct himself and not mislead the House any further in that regard.

The Acting Speaker: The hon. member.

Mr. Mason: Thank you very much, Mr. Speaker. Well, I would hold that the Minister of Health and Wellness does not have a valid point of order. It is clear that in this House he announced, following the release of the doctor's letter indicating the severe crisis in our health care system, that the health system and he as minister would be enforcing emergency room wait time standards that were established as the national standards. Today, in response to a question from one of the government members, he announced that he was working on new standards with Alberta Health, which was just repeated today. The figures that he used were very much lower than previously said. I would submit that the minister does not have a point of order, but he has unfortunately contradicted himself with respect to what the emergency room wait time standards will be.

If I could continue with my comments, I want to just indicate . . .

The Acting Speaker: Hon. member, I've listened to this. I've listened to the points made by the minister, and I've listened to the comments that you've made here as well. I also was here in the House today listening to the question and the answer as it was brought forward, and I think that perhaps there's been just a little bit of levity given by you, hon. member, when you were talking about watering down. I think that the term "watering down" was used incorrectly. If you would put a different point in, we can carry on.

Mr. Mason: Thank you for that, Mr. Speaker. I withdraw the use of the term "watered down," but it does seem apparent to me that there has been a dilution of the changes that exist that were previously announced.

Debate Continued

Mr. Mason: I want to just indicate that notwithstanding this severe crisis in our emergency rooms, there exists a health centre in my constituency, the east Edmonton health centre. When it was opened, it was opened without two critical components. The first component is a family medicine centre where six doctors were going to be employed in order to provide services to a very underserved area. The second component that has remained vacant is an urgent care centre which was designed to divert many cases from entering the emergency room at the Royal Alexandra hospital, one of the busiest in the province. That could be reopened for a very small amount of money and would divert I think the number is 34,000 cases from the Royal Alex ER on an annual basis. These are cases that don't need to go to emergency, Mr. Speaker. What I see is the government not addressing these issues.

10:00

Mental health beds are another huge example. The Premier today in question period, when he was asked about this by my colleague the hon. Member for Edmonton-Strathcona, said: well, we've got all

of these community-based mental health programs. But, Mr. Speaker, they're not beds. They're not staffed beds. So if people with mental health issues are in acute-care beds and preventing them from being used by people who have cleared emergency, putting them in a community health program is no good because they need a bed. The Premier has double-talk going on. Instead of saying, "Yes, we need more mental health beds," he talks about community-based programs.

Similarly, when we talk about the whole question of long-term care beds, again the Premier dissembles, and he talks about continuing care. Well, continuing care may be a range of care, but long-term care is a medical bed. It has nursing care, it has drugs that are paid for, it has a higher level of care, and people are medically assessed as requiring that. Now, that's not the same as a seniors' apartment or a lodge at all. You can't take people who are in an acute-care bed because they're chronically sick and put them in a seniors' lodge. There's no nursing care, they don't get their drugs covered, and so on. The disingenuousness of the government around the whole question of emergency room care is the real reason why we need to view this particular act as an enormous diversion and, frankly, a complete waste of time. Mr. Speaker, what they're setting out is nothing that is going to solve the problems.

In my experience, when I talk to people around the province and in my own constituency, what they want is not a patients' advocate and a patients' bill of rights. They want somebody to fix the emergency room problem. When they have parents that are ailing, they want to know that they're going to get good care and that it's going to be affordable and that it's not going to bankrupt the family to make sure that they're well taken of. If they've got someone in their family with mental illness, they want to know that there's a bed for them and people that are going to care for them. Those are the kinds of things that people want. They want family doctors, Mr. Speaker. They want the government to stop lurching from problem to problem without ever finding a solution.

We've seen the government, for example, say for a number of years that we have a severe shortage of nurses, and then all of a sudden last year a whole graduating class of nurses couldn't find jobs in Alberta because they put a freeze on it, and in fact they were eliminating nursing positions. Now, again, we have a nursing crisis, and we need to find more nurses. Is it any wonder, Mr. Speaker, that we can't staff these beds? This government is so inconsistent in terms of how it attempts to address the problems in our health care system that no solution is ever reached.

Mr. Speaker, I could go on at some length about the whole question of long-term care and the private delivery that this government keeps attempting to access as a solution to long-term care, glossing over that the long-term care private providers have told the government that in order for them to be able to invest in long-term care and in seniors' housing, they're going to have to double the charges that are currently in existence. Of course, this is just going to drive more and more families towards bankruptcy, whether they have to pay inordinate amounts of money or they have to give up a job to themselves care for a loved one who requires constant care.

I think that the motion that's been put forward by the hon. Member for Lethbridge-East is an excellent one. I think we should approve it so that we can get rid of this atrocious piece of legislation, just one in a series of some of the worst legislation I have yet to see in the 10 years that I've been in this House, Mr. Speaker. The legislation that has come forward in this session I think is dreadful and truly indicates to me what I hope is the last gasp of this tired, old Progressive Conservative government.

Thank you.

The Acting Speaker: Standing Order 29(2)(a) is available. You want to speak under 29(2)(a)?

Mr. Boutilier: That is correct, Mr. Speaker. My question through the chair to the hon. member is on the issue of long-term care, something that is close to all of our hearts. You know, when you made reference earlier – and I look here in *Beauchesne*, and nowhere in here are the words “watered down” unparliamentary – it clearly captures watered down when you talked about long-term care. Through the chair to the hon. member I would have to say: do you not believe that it is truly a watered down system in terms of what is being amended, in terms of what Bill 17 is all about?

The Acting Speaker: Hon. member, I spoke earlier about him not using the words “watered down.” You can check *Beauchesne* or wherever you want. I made a ruling that asked him to use some other words, and you are now using the same words. I’d ask you to do the same as well.

Mr. Boutilier: Mr. Speaker, I look here in *Beauchesne*. Nowhere are the words “watered down” in here under parliamentary language. Nowhere have I made reference to the issue of speaker.

The Acting Speaker: Hon. member, it was in the term and it was in the context that it was used. I made a ruling on this, and I would hope that you would respect that.

Mr. Boutilier: Mr. Speaker, I certainly respect your decision. However, the context of what I am saying here regarding this amendment, which I am speaking to, is the issue of long-term care.

Through the chair, Mr. Speaker, my question to the hon. member on long-term care. Clearly, long-term care and what has been committed to versus what has been delivered relative to this bill and the amendment which is coming forward right now: do you not feel that, no reference to any individual in here, that actual policy is watered down?

Mr. Mason: Well, I wouldn’t use the term “watered down,” Mr. Speaker, but I would say it’s terrible. I would say that, you know, it’s very, very hard to follow this government’s strategy. Let’s not forget that last November we released an internal document of senior bureaucrats from a number of departments that showed that they were working to a plan to reduce the number of long-term care beds in this province by up to half, a plan that had never been shared with the public or this Assembly by this government. So I would say that that’s not watered down. That’s not even diluted. I mean, that is a strategy on the part of the government that is deceiving the public, that is not telling them what they’re really doing and leading them to believe that there’s going to be an expansion in care for seniors.

Of course, they use a confusing array of language like continuing care and so on. They don’t really define what it is. We redefined it and redefined it for them. Long-term care is in the health care system. People are covered under medicare except for their housing payment. They get nursing care, they get drugs, and they get the treatment of someone who is chronically ill. They are nursing home beds or auxiliary hospital beds. And there is no reason that you can’t design those beds so that you don’t have to separate couples, which is the other red herring that the Premier throws out every time to try and confuse things and make it sound like they’re the humane ones and we’re the ones that want to break up couples that have been together for 50 years, and that’s just nonsense.

Thank you very much, hon. member, for the question. I don’t think that the appropriate word is “dilute.” I think the appropriate words are “incompetent” and “less than honest.”

The Acting Speaker: Standing Order 29(2)(a) is still available. The hon. Member for Lethbridge-East.

Ms Pastoor: Yes. I just wanted to ask the member. He had referred to mental health, and I just would like his comments on the importance of having a counsellor always available in emergency so that at least people with mental health that come in are immediately seen. Even if they have to wait for a while, at least they’ve been contacted by somebody with the proper training to be able to help someone with mental health.

10:10

Mr. Mason: Well, thanks very much. I think that the background for what the hon. member is saying is the recent revelations that there have been mental health patients in emergency rooms that have committed suicide in Alberta hospitals in the last number of months and the fact that they’re not able to get the beds. You know, let’s not forget that the government recently closed a number of mental health beds in Edmonton hospitals.

I agree that this is an urgent priority that needs to be addressed. The staff in those emergency rooms are professional, they’re excellent, they’re good humoured, but they are also at risk because we don’t have the proper staffing and facilities and beds in our emergency rooms. Mental health is one of the biggest reasons why we have the emergency room crisis because there are not active beds, and you need to put someone in a bed to take them out of an acute-care bed to free it up.

Thank you.

The Acting Speaker: Any other members wish to speak to the amendment? The hon. Member for Fort McMurray-Wood Buffalo.

Mr. Boutilier: Thank you, Mr. Speaker. I want to speak to the amendment, that “Bill 17, Alberta Health Act, be not now read a second time but that it be read a second time this day six months hence.” I wish I could actually in this amendment talk about maybe not six months from now but perhaps 12 years from now or something even further because it is full of irony. Clearly, the irony and also the rhetoric that goes with Bill 17 – at one point the *Edmonton Journal* called it historic. Nothing could be further from what is accurate. It is historic. It is historic with rhetoric, rhetoric that is, I believe, meaningless to the people of Alberta. The people of Alberta deserve much, much better.

The hon. Member for Edmonton-Highlands earlier talked about long-term care. I can only say – and I’m embarrassed to say – that the city that I proudly call home in Fort McMurray-Wood Buffalo, with over a hundred thousand people, to this day does not have a long-term care centre. We have emergencies where the emergency room is clogged. We have over 55 seniors in acute-care beds that are costing at this point a thousand dollars a day.

In actual fact, the commitment that this very government made over two years ago, that they failed to live up to at the time – I would not toe the party line when it came to the fact that I was representing the voices of Fort McMurray on health care and specifically to honour a commitment of an election promise. Even though the economy had turned down, the fact was that there were over 50, almost 60 seniors that were still in acute-care beds. Acute-care beds, if you can believe that.

The then minister of health talked about: we want to keep seniors in their homes. Well, there is not one person, not one member in here who does not want to keep seniors in their homes. Their families and their loved ones have cared so deeply for their seniors.

For me to go and tell a lady 102 years old that, by the way, the minister of health thinks that you should stay in your home for another four years while we break a promise that we made to you is absolutely bordering on ludicrous, for anyone to even consider going back to their constituency to say that. To the senior that is 99 years old who has been in an acute-care bed for over three years and still is there today while other seniors – and I applaud the other seniors in constituencies that have long-term care facilities that can enjoy a quality of life in their last years of life. Unfortunately, don't come to northeastern Alberta because there is no long-term care centre.

Ultimately, I believe the amendment that you bring forward is an honourable one, but I just wish that it was not for six months. I actually wish that perhaps we'll consider at one point an amendment to the amendment of making it more than 12 years.

I really appreciate the hon. Member for Calgary-North Hill, who makes reference to the fact – and I can see him nodding his head in agreement with me – that he does support seniors, and he supports that, yes, you can care for your loved one, and you can. But to go and tell a 104-year-old lady that, in fact, the minister of health says that you're going to have to wait another four years for committed long-term care – a broken promise. I can't think of anything that is more diluted in terms of the importance.

An Hon. Member: Distasteful.

Mr. Boutilier: Distasteful I think is a very good word.

I can only say that I can proudly look myself in the mirror. I can look myself in the mirror and know that I have been a good voice and a strong voice for the seniors in my community. I think every MLA that looks themselves in the mirror when it comes to this act, Bill 17, the Alberta Health Act, shall never forget the fact that this is not historic. This is historic in rhetoric and does not in any way, shape, or form – my advice is that perhaps they should listen to their emergency doctor, who actually has experience in dealing with emergency room things, so that long-term care beds are not clogged. Because of the fact of what's taking place up here, it also then impacts other stages of our health care system.

Bill 17, the Alberta Health Act, does not address either the long-term care issue or the ER issue, and that really is an important component that's been identified by health care professionals. I also think of the health care professionals that had the courage, that came to the Wildrose and came to other opposition parties to talk about what is fundamentally wrong with this bill. The actual – the actual – distastefulness in terms of what is being purported as historic is nothing more than historic in rhetoric.

Mr. Mason: Histrionic.

Mr. Boutilier: "Histrionic" is a very good word, but I would prefer to keep to my own words at this point. I appreciate the comment by the Member for Edmonton-Highlands-Norwood.

I do believe that as we go forward, let us do what's best for Albertans. Let us do what's best for people going to emergency rooms. Let us do what's best for seniors that have been in acute-care beds now for over three years, still waiting for a commitment that this government broke over two and a half years ago. I can look myself proudly in the mirror each and every day knowing that I've been that voice and that I asked the government to honour a commitment that they failed to do. When I see Bill 17 and I see the amendment that is put forward tonight, I can only wish and hope that it wouldn't be for six months.

Let's deal with something that is real. Let's deal with something

that is not historic in rhetoric. The comments that we saw here earlier today in question period from the minister of health – clearly, question period is about getting questions. I had, actually, citizens ask me: why is it that the minister of health never answers your questions? I said: that's something you can only pose to him.

But I do know that the former minister of health indicated at one point that we want to keep seniors in their homes for a longer period of time. I wasn't willing, nor do I believe any single MLA in this Assembly would be willing, to go back after the government made a commitment during the election time and tell a 104-year-old lady: oh, by the way, the minister of health thinks you have to wait four more years before you get your centre. A community of a hundred thousand with no long-term care centre: how can anyone look themselves in the mirror? I know I proudly can, knowing that I've represented and continue to hold the government's toes to the fire to honour that very commitment. I will be the first to say thank you if, in fact, that ever comes to be. The senior, who has been an advocate for over 30 years, a lady from Fort McMurray, in fact met face to face with the Premier of this province and indicated: honour your commitment, your commitment that you made.

I believe that with this amendment today, as much as it says "six months hence," I really wish that it would be a longer period of time. It says that "Bill 17, the Alberta Health Act, be not now read a second time but that it be read a second time this day six months [from now]." I will support the amendment, but I do believe that it could even go further.

To the hon. members that have any other advice on the issue of seniors, I welcome it because I can look myself proudly in a mirror and say: honour your commitment to the seniors, who are truly the architects of this very province that we enjoy and that our children enjoy and that our grandchildren enjoy. Consequently, I do believe that today this amendment is a good start to postponing the rhetoric that we have seen, the historic rhetoric that we have seen, and I do believe that as we go forward, seniors and the people of Alberta deserve something better.

The Acting Speaker: Standing Order 29(2)(a) is available.

Seeing none, any other members wish to speak? The hon. Member for Calgary-Glenmore.

10:20

Mr. Hinman: Thank you, Mr. Speaker. I'd like to stand and speak in support of this amendment to Bill 17, the Alberta Health Act, which reads that it "be not now read a second time but that it be read a second time this day six months hence." The reason why I feel this is an excellent amendment is because this bill really is, as the Member for Calgary-Buffalo said, all feathers and no chicken. If, in fact, we were serious about the problems that we're faced with in the health care industry, we would actually be doing it. This is no different than a magic act where you have this side movement to take you off the real issue and say: "Well, let's talk about the advocacy now. Let's talk about, you know, the charter." What we need to talk about is the emergency room crisis. We need to talk about the bed shortages. We need to talk about the centralization of the superboard and not having actual administrators that are running our hospitals in an efficient and effective way. Instead, there's a total disconnect from the services that are being provided and no one in a position of authority to make decisions.

I've spoken with emergency room doctors. I've spoken with front-line nurses and even some facility housekeepers. There really is a problem. In our hospitals we have beds that are closed at the current time, and they're not being opened even though there are people down below in the emergency room that need to be moved up there. We're not getting the answers we need, Mr. Speaker.

Even today I asked the minister to do an audit and to report back to this House on how many actual empty beds we have in our current operating facilities that are closed that could be opened if we just had a functioning system that responded to the emergency situations, and he wouldn't even answer the questions, Mr. Speaker. Because of the fact that we're not even responding to the current ones, why would we pass a bill like Bill 17, which doesn't address any problems?

I want to read to you, Mr. Speaker, the table of contents of Bill 17, and I think that by reading that, it would help one understand and realize that this is just a smokescreen and that there's nothing of any quality in here that's going to change the health care system. We shouldn't allow this smokescreen to be brought forward so that we can say: "Oh, we're working on the charter. Talk to the health care advocate. He will return his comments to the minister, which may or may not be accepted."

Here's the table of contents to Bill 17, 2010, the Alberta Health Act. Section 1 is the definitions, which we always have. Section 2 is the health charter, which is a lot of wonderful words that shouldn't have to be in there if we even were to address the problems. Section 3, the appointment of the health advocate. Section 4, complaints. Section 5, findings following a review. Section 6, the annual report, that's supposed to come back to the minister from the health advocate. Section 7, roles and responsibilities. Oh, gosh. You know, we've been running the system forever, but we need to start defining some roles and responsibilities. Yes, we do, but what we need is a chief administrator's roles and responsibilities to run a hospital efficiently. Section 9, directions by the minister. Section 10, proceedings not subject to review. Section 11, liabilities. Section 12, Lieutenant Governor in Council regulations. Section 13, ministerial regulations. Section 14, public input. Section 15, coming into force. And then we go into a wonderful dialogue of preamble.

Mr. Speaker, when you look at the contents of this bill and what's actually in here, there is nothing that addresses the actual problems. What it says is that we're going to look at the problems. We're going to have a declaration that people can make to the health advocate to say: "Oh, we're going to address this. We're going to do this." When these crises are here, the minister talks in terms of years instead of actual. We need to do this in weeks or days or perhaps even minutes in emergency, where a system is set up that actually can respond. Bill 17 isn't going to help any of those things. All it is is another layer of bureaucracy to say: read this charter if there's a problem with what you've received in health care. Then we'll go through a whole new area of process rather than fixing anything. There's nothing worse than just having a process.

You know, one of the things that's often said is that there's nothing worse than no legislation, but there is something worse than no legislation, and that's bad legislation. That's what Bill 17 is. It's bad legislation. It doesn't address the health care act. I would urge all members in here to take another read of Bill 17 and ask the question: is there any reason why we should pass this? What would really happen if we allowed this to be debated six months from now? We would realize that this isn't going to do any good, that it's of no value. So why would you pass the bill in six months? This is a knee-jerk reaction to a major crisis that's happening in our health care system and trying to create that magical image going over here so they can continue with their show over here of poor performance and say: well, let's just focus on the health act, the advocacy act, the new charter, and see if that's going to solve all of our problems in the future. Mr. Speaker, it is not.

The hon. Member for Lethbridge-East has brought forward on

behalf of her colleague a very important amendment at this time. Let's not have any distraction to the real problem. Let's not have legislation that's passed here in the next week or two that is going to do nothing for the patients and those people who are needing health care services in the next six months. There's just zero help in here. For that, Mr. Speaker, I would ask that other members would look at that, review it, breeze through it quickly, and realize that there is no reason to pass this bill. We should be readdressing it in six months because at that point we'll realize there's no need to readdress it.

I'm very much in favour of this. I would ask all members to consider it and to have some deep thought on what is the real purpose of Bill 17. Is it a smokescreen? Is it poor legislation? Is it distracted legislation? We're talking about distracted driving and trying to solve that, again with another poor bill. This is distracted health care.

We need to focus on the problems. We need to have some solutions to the problems. There is absolutely nothing in here that's going to change the way our emergency rooms are being run or operated. There's nothing in here that's going to change the administration in our hospitals and put the power and the authority back to a local administrator, that can make actual changes when the crises arise, that has the authority to open up closed beds that already exist. We don't need to build new ones. Let's use them.

Most importantly, I would urge the health minister to do an audit and come back to this House. That would be something that we could see in the health care act. What are the numbers of beds that are closed down? That would be something that's productive that we could talk about.

In closing, I'll urge everyone to please support this amendment, and let's read this bill in six months' time. Thank you, Mr. Speaker.

The Acting Speaker: Standing Order 29(2)(a) is available.

Anyone wish to speak to the amendment?

[Motion on amendment to second reading of Bill 17 lost]

[Motion carried; Bill 17 read a second time]

10:30 Government Bills and Orders Committee of the Whole

[Mr. Mitzel in the chair]

The Deputy Chair: I'd like to call the committee to order.

Bill 16 Traffic Safety (Distracted Driving) Amendment Act, 2010

The Deputy Chair: Are there any comments, questions, or amendments to be offered with respect to this bill? The hon. Member for Calgary-McCall.

Mr. Kang: Thank you, Mr. Chair. First of all, I want to congratulate the hon. Member for Calgary-Hays for his hard work on this distracted driving bill. I think we can deliver the support of this side of the House to improve the safety of Albertans on all roads.

I'm a little disappointed in the member for not supporting my amendment mandating the minister to provide statistics associated with injuries from hands-free devices. This was a very small amendment but would provide a clear picture of the necessity of future reforms.

In 2005 there was a motion proposed by the Member for Calgary-Varsity, I believe, to prohibit the use of hand-held devices while driving; however, that bill was defeated by the members opposite. Since then the times have changed, and many more hand-held devices are now used today, which pose a significant danger to Albertans.

This new bill is much stronger than the one which he initially proposed and addresses many of the new challenges which have emerged since that time. These include texting, computer screens, personal hygiene products, reading and writing, and grooming. At the same time it allows for sensible exemptions such as the use of electronic devices by emergency personnel. However, hands-free exemptions may pose significant risks to the public, and anything that diverts the attention of the driver away from actually operating the vehicle is very dangerous, Mr. Chair.

While it seems that most Albertans have heeded the warnings, it still seems that there are a considerable number of Albertans who have not heeded the warnings. This new law, Mr. Chair, does not unjustly infringe on the freedoms of Albertans, as some members have suggested. This law is a necessary law to protect the safety of Albertans on the road. To Albertans who feel the need to text, to use an electronic device while driving, please be clear: just pull over, or it can wait. My hope is that once Bill 16 is law, it will have a positive effect on the lives of Albertans.

Mr. Chair, there are concerns that the bill doesn't go far enough. I have concerns with hands-free devices as well, but I believe it would be very difficult to enforce hands-free devices. No other jurisdiction has a ban on hands-free devices. Alberta could be the leader in banning the hands-free devices as well, but it would be difficult to enforce.

Using hands-free devices may give a false sense of security. It is not the device that is the distraction; it is the conversation that is the distraction. Most of the new vehicles are coming out with Bluetooth built in, and all of the new gadgets in vehicles make it virtually impossible for police to enforce this ban without co-operation from the other orders of government.

When we look at history, the Member for Edmonton-Gold Bar brought forward a motion in the year 2000, I believe, to ban cellphone use in cars, and many people thought he was nuts at the time. I also believe the member opposite from Lacombe-Ponoka in 2002 and the hon. Member for Calgary-Varsity brought this motion, too, in 2005 to make amendments to the Traffic Safety Act to prohibit the use of hand-held cellphones. Everyone thought these gentlemen were crazy, but they were ahead of the times. Here we are five years later debating and likely about to pass a bill not only to prohibit hand-held cellphones but to ban other driving distractions as well.

Mr. Chair, laws do save lives. For example, MADD estimated that in 2007 there were 12,039 people who died due to impaired driving, and 73,000 were injured. We know for a fact that without drinking and driving prohibitions, this number would have been far higher. It took decades for people to realize that seat belts save lives, but still people think that they only have to use the seat belts in the front seat, not in the back seat.

In British Columbia since the distracted driving legislation came into law, since February there have been 20,000 fines issued by the police. Mr. Chair, driving is a privilege, and drivers should not abuse that privilege. It should be taken away if somebody is driving in a manner which is unsafe and could result in an accident resulting in death or serious injury. Injury, death, fender-bender accidents: they cost money to our health care. They cost money to our society. They cost money to our economy.

Mr. Chair, this is a good bill, but it doesn't go all the way. As I said, we should have found a way to ban the hands-free as well. Had my amendment been accepted, we could have come back to revisit this legislation three years down the road. It's unfortunate that the amendment was not accepted, but I will still support this bill since this is a step in the right direction and we have been fighting for distracted driving legislation for years. While it is good to see that a multitude of distractions are covered by the legislation, it is unfortunate that the penalties don't even come close to B.C.'s or Ontario's. We will likely seek to strengthen the legislative penalties maybe in the future. So I will be supporting the bill, but I've still got my reservations about the bill.

Thank you very much.

The Deputy Chair: Any other members wish to speak? The hon. Member for Calgary-Glenmore.

Mr. Hinman: Yes, Mr. Chair. Again, we're in the same dilemma with Bill 16. There's no question that we have, you know, as was stated earlier this day, I think, 300 and some-odd accidents every year on the road here in Alberta. AMA has been tracking these for a long time. With Bill 16 the attempt here is to increase the safety on our roads. I think that everybody will agree and has read the reports that 80 per cent of all accidents are from people that are being distracted. They might be under the influence as well, but they lose their concentration on the road, and we have an accident.

The problem that we're faced with in Bill 16 is: what do we do to actually solve the problem of human nature? You know what? The little flags, the different billboards, the people that are walking along the street, the nice little dog that they're walking with, whatever it is: there are just thousands and thousands of distractions out there that are going to continue.

At this point what we're looking at is the frustration of drivers. I've been guilty myself when I'm behind somebody and they've slowed down, not keeping up to the posted speed, whether that be 60 or 80 or 100. It's frustrating when every lane is filled with traffic and somebody slows down in the one lane and we can't keep up. The immediate reaction in today's world is: ah, that person has got to be on their phone. Granted, some are, but it surprises me as I drive by how many aren't. They could be talking to their other passenger. They could be talking to their children. Some seem like they're just singing along with the song they have going out of their speaker system and enjoying life and not paying attention to what's going on around them.

With Bill 16 what we have is a list of a few items that say what you cannot do. You cannot be "reading or viewing printed material." You cannot be "writing, printing or sketching." You cannot be "engaging in personal grooming or hygiene." Does that mean that if one needs to blow one's nose, that's hygiene, and we shouldn't be doing that? If someone has a Kleenex or a handkerchief while they're driving down the road and the policeman is driving by, they're going to get pulled over and ticketed because they're blowing their nose?

10:40

Mr. Kang: What if the policeman is blowing his nose, too?

Mr. Hinman: Yes. Well, that's interesting. There are many dilemmas out there.

"Any other activity that may be prescribed in the regulations." Again, that's very concerning to me, just any other activity that may be described in regulations. If you read the preamble to that:

“including but not limited to.” What I’m reading here is section 115.4(1)(a), (b), (c), and (d). We’ve got this list of things that we’re not supposed to do. Supposedly, the root of all of our accidents is this list of four things that are in there. It just isn’t the case.

As I said earlier about another bill – and I really was preparing that for this bill – the only thing that is more discouraging than no legislation is poor legislation. We look at a lot of the problems that we have and the infrastructure that we haven’t been building over the last 10 years and prioritizing our money right. I’m not saying that we haven’t spent billions and billions of dollars; it’s whether we’ve spent billions and billions of dollars on the proper priorities. This government continues to point fingers and say: “Oh, we’re going to cut a billion here, a billion there. We’re going to extend it out.” But what they still fail to seem to understand is the importance of budgeting and using priorities. They talk about lists, but they never put them out. Yet they’ve put out a list here on a few items that shall not be done, and if so, they’re going to be ticketed. I just can’t help but wonder if this isn’t again another smokescreen to try and say, “Oh, look at what we’re doing for the safety of Albertans” when in fact they’re not really addressing the safety of Albertans. This is a concern.

One of the techniques that’s used when bad legislation has been put forward is that too often we never remove it, and we just say: well, we’re not going to enforce it. I think that one of the key things that we can and should do is to put sunset clauses in legislation when we don’t know how this is really going to turn out.

When you look at the process that we’re going through with this bill, I’m disappointed that the government didn’t bring forward more reports or reasons why they’re passing this. It seems to me that the biggest reason is that they want to increase their revenue from traffic tickets but not from poor drivers, just from drivers that are holding a cellphone.

Mr. Campbell: That’s nonsense.

Mr. Hinman: I would absolutely have to say that I would disagree with the Member for West Yellowhead that that’s nonsense. This bill is nonsensical in the fact that it doesn’t make sense that you give someone a ticket because of what they’re holding. We should be giving someone a ticket, Mr. Chair, because they’re driving poorly. This bill doesn’t address that.

There’s been lots of discussion in the committee that looked at this bill saying that the reason why we’re bringing this bill in is because the police said that the test for dangerous driving or not paying attention is too high and the penalty is too high, where a young lady was fined, I think, last month \$2,000 for texting while she was driving. So we do have legislation in place that doesn’t allow that.

If we were to change this legislation to where a policeman who is driving behind a vehicle and sees that they’re driving poorly was to pull over and give them a ticket, that would be a reason for giving a ticket. But it is misguided to see the poor driving, to speed up beside them and look at that and then say: “Oh, they have a cellphone. Oh, they have a hairbrush. Oh, they have a map in their hand. Now it’s okay to give them a ticket.”

What do we want to do in the future? Pass legislation that we can read someone’s thoughts and say that we’re going to ticket you for your thoughts because we don’t agree with them? That isn’t the way common law was set up. Common law was set up for when you do something wrong, when you impose a loss or something to another person, whether it’s their property, whether it’s a hate crime. You’ve done something wrong. Then the law kicks in, and we try to have the justice system do that. But this law is a feel-good law. It’s not going to accomplish what we want. There are actually a few

states that have passed cellphone bans and texting bans only to find out that accident rates have continued to rise in those jurisdictions.

So this government again is failing to pass proper legislation that is actually about the actions of someone doing something that is causing possible harm or driving dangerously. I don’t think that this bill should pass in this state, so I would like to put forward an amendment at this time, if I could, to this bill.

The Deputy Chair: Hon. member, we’ll have the amendment passed out, and then you can speak to it. This will be amendment A4.

Hon. member, you can proceed.

Mr. Hinman: Thank you, Mr. Chair. So to read this amendment, I move that Bill 16, Traffic Safety (Distracted Driving) Amendment Act, 2010, be amended in section 2 by adding the following after the proposed section 115.5:

115.6 Sections 115.1 to 115.5 expire 4 years after the date on which the Traffic Safety (Distracted Driving) Amendment Act, 2010, comes into force.

Now, the reason that legislation has sunset clauses is because many times we pass things that we’re not completely sure are going to actually do the job that we’re hoping that it’s going to do. I would argue, Mr. Chair, that after we’ve gathered some information, we’re going to realize that the accidents have not gone down here in the province, that we won’t have 300 accidents a year; it will probably be 350 or 400. We’ll see it going up. As we analyze the real problem and look at that, we’ll realize that human nature is predictable; it’s powerful. People do not pay attention when they’re driving. It’s just human nature. The fact is that our roads aren’t constructed properly or we don’t have enough lanes, and people are frustrated, so the accidents will continue.

This is a bill that, again, is going to be a cash cow for the government because, I believe, many citizens are going to carry on with their habits of speaking. I, myself, have a hands-free device; I use it. It goes back to the other question that many hon. members have brought up. Is my driving any better hands free versus holding the cellphone in my hand? What we’re going to have to do is either have an amendment and ban hands free, or we’re going to realize that accidents are continuing, human nature is continuing, and we haven’t been able to accomplish what we want. Perhaps the minister will make legislation saying that anybody who takes their eyes off the road is subject to a ticket because they’re being distracted by something in their peripheral vision. All of these things are human nature. They’re a constant problem.

10:50

As I said, I just don’t feel that this bill, the way it’s currently written, is going to serve the purpose that we’re hoping it will. It’s going to be a cash cow. It’s going to cost a lot of people a lot of money because of their habits, yet it’s not going to address what we really need to address in here: the reckless, poor driving of people that are being distracted, whether it’s texting, talking on the phone, playing with a new gizmo that they just bought at the hardware, or whatever it is. Like I say, if we really want to address this, what we want is legislation that says that when a police officer is following a vehicle and realizes that they’re driving erratically and poorly, they have the authority to pull that person over and give them a ticket.

Again, one of the forces that I really admire in the province is a small force – I think it’s a hundred years old now – the Taber police force. There the chief of police had a lot of vision, understood the importance of good policing in a community. They put video cameras, back in 2000-2001, in all of their police vehicles. So if, in

fact, they were actually following another vehicle, it's recorded and shows it, you know: this is the poor driving that they're doing.

If we take it one step more, which really is what we prefer in the court of law, some actual evidence and not just one man's word over another person's word, saying: oh, they had a cellphone in their hand. That to me would be good legislation. But what we have here is feel-good legislation, to be able to say, "Oh, look; we've done something," when, in fact, we haven't. It would be my hope that four years from now, when we analyze this bill, we'll realize . . . [interjection] Four years. Do you have a problem with that? [interjection] You're probably right. I've gone too long on this, but some people would ask, and maybe I'll be lucky enough that someone has the foresight to make an amendment with a shorter time period.

This amendment at this time is to expire in four years' time, when we've collected more data and know what the causes are and not attribute something to: well, it's got to be the cellphone that's in someone's hand that's causing all the accidents. The accident rates really haven't gone up astronomically like cellphone use has. It's amazing how many people – I think the hon. Member for Lethbridge-East said that it was 1 in 3 or 2 in 3, when they were driving by, that had a cellphone in their hand. If, in fact, that was the real problem, I think we would have seen a jump in accidents from 300 a year to 600 a year or something like that, and that that's the real problem. We're not addressing it.

I prefer to see legislation that is there for when someone actually does something wrong, not because someone is holding something. We're pointing at the wrong area. So I'd hope everyone would look at this, evaluate it, and realize that – you know what? – let's look at this bill again in four years and see if it's actually serving the purpose. But my fear is that even at that, the government is going to say: "Well, we're generating millions of dollars. It's wonderful for our revenue. We want to keep it in place because of the cash cow that it is."

With that, I'll sit down and see if anyone has any questions or comments on the amendment. Thank you, Mr. Chair.

The Deputy Chair: Does anyone else wish to speak to the amendment? The hon. Member for Fort McMurray-Wood Buffalo.

Mr. Boutilier: Thank you very much, Mr. Chair. In terms of the amendment being put forward, I have to truly question the issue of four years because four years seems to me to be somewhat of an extended period of time to be able to make a determination of whether, in fact, Bill 16, the Traffic Safety (Distracted Driving) Amendment Act, 2010, is working or not. I think the intent of what you're doing is reasonable, but I actually believe that the four-year period of time and the extended period to make that determination could be done in a shorter period of time.

With that, Mr. Chair, I would like to move an amendment that I have here.

The Deputy Chair: Okay. We'll pause while subamendment A2 is passed out.

Mr. Boutilier: Thank you.

The Deputy Chair: Hon. members, this is subamendment A2 to amendment A4, moved on behalf of the hon. Member for Airdrie-Chestermere.

Mr. Boutilier: Thank you, Mr. Chair. Can I continue on at this point regarding the amendment?

The Deputy Chair: Yes.

Mr. Boutilier: Thank you. In the amendment that has been circulated, I move that amendment A4 to Bill 16, Traffic Safety (Distracted Driving) Amendment Act, 2010, that has been brought by the hon. Member for Calgary-Glenmore, be amended by striking out "4 years" and substituting "2 years." Actually, Mr. Chair, I say that because I do believe that the Minister of Transportation and his officials clearly do not require four years to make a determination if, in fact, the prescribed bill is and has become effective in its intent and its spirit in protecting Albertans. Consequently, therefore . . . [interjection] I might say I appreciate the nice comments by the hon. Member for Calgary-Nose Hill when he makes reference to my amendment. I see that he probably agrees with it. I'll obviously look for his voice or his vote when he stands for this amendment.

We don't need four years. I'm quite certain the Minister of Transportation would be able to make a determination in two years. Two years allows a sufficient amount of time to determine, in fact, the strengths and the weaknesses that would be intended regarding the spirit of this bill.

I made reference to the fact that my wife hit me in the ear when I actually was being distracted backing out of my driveway. I couldn't hear for a day or two, but I deserved to get hit in the ear by my wife because I had my three-year-old son . . . [interjection] I see the hon. Member for Livingstone-Macleod – clearly, I can see he's shaking his head – got hit in the same ear by his wife, I think is what he is intimating. I can only say that we quickly learn, and we do not in fact make the same mistake twice.

I think the intent of this and the spirit of this bill is to ensure that doesn't happen, but we don't need four years to determine this. I believe the hon. Member for Calgary-Glenmore, who made the original amendment, which is a noble one, can join me in agreement with other members of the House to say that two years should be a sufficient amount of time to determine if, in fact, this is working or if it is not. We proceed accordingly in protecting Albertans, in protecting our children and our grandchildren and all Albertans who travel Alberta highways.

Therefore, Mr. Chair, I believe that this amendment is a reasonable one, moving from amendment A2 to subamendment A4. I believe that I'm willing to give distracted driving a chance, but I don't need four years to give it a chance. I believe Albertans are very thorough. I think Albertans are quick-minded when it comes to determining if, in fact, a law can work or not work; therefore, I put forward the subamendment of two years, replacing the four years that was originally submitted by the hon. Member for Calgary-Glenmore.

With that, Mr. Speaker, I will welcome debate on this important subamendment and certainly welcome the comments from the hon. Member for Calgary-Nose Hill. Thank you.

11:00

The Deputy Chair: Any other members who wish to speak to subamendment SA2? The hon. Member for Calgary-Glenmore on the subamendment.

Mr. Hinman: Thank you, Mr. Chair. I'm more than willing to accept this amendment to my amendment. I had those who argued that four years was too long.

Mr. Boutilier: What? We're agreeing?

Mr. Hinman: Yes, we're going to agree on that, hon. Member for

Fort McMurray-Wood Buffalo. We do not need to take four years to look at this bill and see whether it's being effective or whether it's just impacting the dollars of the people of Alberta and revenue for this government, that it will spend irresponsibly and on poor priorities in all likelihood.

I would encourage all members to stand up and speak on this. Hon. Member for Calgary-Nose Hill, who's jiggling in his seat, you need to put in a little more effort. You can stand up and speak on this and share your thoughts on why you believe that two years is enough time or whether you think that the sunset clause is inappropriate.

The bottom line, Mr. Chair, is that as the hon. Member for Edmonton-Highlands-Norwood said earlier tonight about a previous bill, this is indicative of this government desiring to pass a stream of poor bills that are not going to serve the best interests of Albertans. I've said it so many times. I'll say it one last time. On this amendment, though, what we want is to reduce accidents and increase safety on our roads, and the way we do that is by actually giving tickets to people who are driving poorly. Whether or not they have two hands on the steering wheel or some other area is not the determination of whether or not one is driving safely.

I think that if we look at history, class 1 drivers have quite a good driving record. Most of them are driving big vehicles with gear-shifts, and on top of that they're busy talking on their CB radios. Those came in, I believe, in the '60s and '70s. They've been using them forever. We didn't see a major problem with traffic accidents and didn't ban those devices. They're useful.

The point of all of this is that if we actually analyze this bill over the next two years to see whether or not it's effective, we'll be able to make a determination on whether or not we need to leave this bill on the books. More importantly, if in fact we're kind of lackadaisical about it and don't want to do anything, which is often the case with a lot of poor bills – they just kind of go by the wayside – this one will have a sunset clause, and it'll be removed from the books, and the people of Alberta will be free to be responsible in their driving, which is the proper situation. When one has a driver's licence, it's not a right. It's a privilege. It's a benefit. It's determined by good driving.

What we want is a sunset clause, two years where we can analyze and look at the data and see: is there an increase in accidents? Is there a problem? I would hope that all members would be willing to support this amendment to put a sunset clause in place. It doesn't do anything to change anything else in the bill other than the fact that we will review it in two years and replace it or let it die in two years because it really isn't what Albertans want or it's not serving or increasing any safety on the road.

With that, I hope to hear some other discussion on this amendment, that this will pass, that we can have a sunset clause in here. Perhaps we need to be implementing sunset clauses in a lot more of the legislation that we're passing.

The Deputy Chair: On subamendment SA2 to amendment A4, the hon. Member for Calgary-Nose Hill.

Dr. Brown: Thank you, Mr. Chairman. I think there must be some lack of communication between the deputy leader of the Wildrose and his House leader. If he thought that there was going to be a need for a two-year sunset clause instead of a four-year sunset clause, why didn't they get their heads together and do it in the first place?

As far as his comments that we need to accumulate data in order to see whether this thing is working, he well knows that these acts could be amended at any time. We always have fall or spring

sessions. We can amend the legislation at any time. We don't have to wait one year or two years or four years. [interjections]

The Deputy Chair: The hon. Member for Calgary-Nose Hill has the floor.

Dr. Brown: Therefore, I'm against the amendment.

The Deputy Chair: Any other members wish to speak to subamendment SA2?

If not, I'll call the question.

[Motion on subamendment SA2 lost]

The Deputy Chair: We're back to amendment A4. Any other comments on amendment A4? The hon. Member for Calgary-Glenmore.

Mr. Hinman: I would like to address the comments by the Member for Calgary-Nose Hill saying that we have to get together. I think what he should really do is look at the bills that this government brings forward and realize that the government can bring forward a bill at any time. Opposition parties do not have that discretion.

The Deputy Chair: You're speaking to amendment A4.

Mr. Hinman: He made reference to four years and two years, so I'm discussing the change, why it's there. The fact is that opposition is not allowed to, but by putting in a sunset clause, it forces the government to. That's why the four years in a sunset clause is important to have in the bill. This government doesn't seem to realize the problems that it causes by passing a bad law that sits on the books for years. A bad law is the gun registry. Had it had a sunset clause, chances are it would never have been renewed. There are many other bills like that, that are bad, that should have an actual sunset clause so we don't need to address it.

You're missing the point when you say, "Oh, we don't need that; the government can address it." The government can, but chances are it won't. There's going to be lots of debate. By placing sunset clauses in, it is critical to the law that it has to be readdressed to be reinstated in four years. That's why this is important.

If we want to go through a long list of poor regulations and legislation, we could maybe do that another evening. I get the feeling that the House is wanting to move on. Well, then, maybe they shouldn't bring forward so many bills that aren't going to serve the interests of Albertans so that we don't have to try and filibuster. Maybe the hon. member hasn't heard about that, but we're very limited now on the discussion that we can have to stop bad bills from passing. In older days in the parliamentary process they would filibuster and could carry it out. The intent of this is to carry out the discussion until the government comes to its senses and realizes that – you know what? – this bill isn't in the proper sense.

Four years is a very good determinant time for the government to have to review and pass new legislation, and the purpose of this amendment is to have a review time that has to be put in place instead of letting it stay on the books going forward, like the gun registry has for years and years now. We need a four-year sunset clause. That's what amendment A4 is about.

I'd urge the government members to change their nays the first time, not the second time, so that we could pass this. The legislation will pass in its entirety, the way the government has presented it, refusing all amendments by the hon. members in the opposition.

You'll just have to be accountable in four years. So please vote in favour of this amendment.

The Deputy Chair: The hon. Member for Fort McMurray-Wood Buffalo.

Mr. Boutilier: Thank you, Mr. Speaker. Clearly, the hon. Member for Calgary-Glenmore has hit the head, hit the nail right on the head when it comes to the issue. [interjections] He hit the head right on the head. Believe me, there are a few heads over there that have to be hit. There is no doubt in my mind about that.

Clearly, Mr. Speaker, the difference between being in the government – I think the hon. Member for Calgary-Nose Hill has forgotten that democracy . . . [interjection] Nose-Hill or North Hill? It's Nose Hill. [interjection]

He knows quite correctly that every four years is a period of time that really becomes a clogging of bureaucracy. A sunset clause is able to eliminate bills that are not serving the purpose of Alberta. I think the intent and the spirit of this bill, actually, by the Minister of Transportation are noble in terms of protecting our children and protecting Albertans on highways. That is good, and as a member of the opposition I salute the Transportation minister for that. However, that being said, the idea of protecting Albertans, be it in two years or in the amendment that I'm speaking about, Mr. Speaker, four years – clearly, it is my observation that in any business an operational review is that they review the normal operating procedures. They look at the strengths. They look at the weaknesses. They look at what is good and what is bad. They listen to customers. This amendment that is put forward, that four-year period, is a period of time that, in fact, does achieve that objective, and that is very important.

11:10

For those who do not have business skill and do not have the operational review tactics of being able to look at the strength, the weakness, the cost-benefit analysis – we should be asking that each and every day in this Assembly on behalf of Albertans in terms of any proposed bill that comes forward. That is exactly what this amendment is attempting to achieve: operate similar to a business, do an operational review, take a look at what is working well and what is not working well. But that sunset clause provides an opportunity for a business to look internally. Perhaps this government needs to do exactly that even more when it comes to looking internally at what is taking place after 40 years.

Clearly, I believe that this amendment that is put forward is a good one. I believe it is intended in the spirit of what the Minister of Transportation has put forward in terms of, "I'm willing to give this bill a chance, but am I willing to allow it to continue to build up in bureaucracy and red tape for four years?" I don't believe that Albertans should allow the inmates to run the asylum. I think this amendment will be a counterbalance to that impact to ensure that the spirit of what the Minister of Transportation is doing is upheld, and

ultimately Albertans will be better served by supporting this amendment.

I'm sure tonight, Mr. Speaker, that the majority of members will support this amendment.

The Deputy Chair: Any other members wish to speak?

[Motion on amendment A4 lost]

The Deputy Chair: We are back to Bill 16 as amended. Anyone wish to speak to this?

Hon. Members: Question.

[The clauses of Bill 16 as amended agreed to]

[Title and preamble agreed to]

The Deputy Chair: Shall the bill be reported? Are you agreed?

Hon. Members: Agreed.

The Deputy Chair: Opposed? That is carried.

The hon. Deputy Government House Leader.

Mr. Zwozdesky: Thank you, Mr. Chairman. I would move that the committee now rise and report Bill 16, the Traffic Safety (Distracted Driving) Amendment Act, 2010.

[Motion carried]

[Mr. Mitzel in the chair]

Dr. Brown: Mr. Speaker, the Committee of the Whole has had under consideration a certain bill. The committee reports the following bill with some amendments: Bill 16. I wish to table copies of all amendments considered by the Committee of the Whole on this date for the official records of the Assembly.

The Acting Speaker: Does the Assembly concur in the report?

Hon. Members: Agreed.

The Acting Speaker: Opposed? So ordered.

The hon. Deputy Government House Leader.

Mr. Zwozdesky: Thank you, Mr. Speaker. In view of the hour, being 11:15 on this Tuesday night, I would move that the House now stand adjourned until 1:30 tomorrow afternoon.

[Motion carried; the Assembly adjourned at 11:15 p.m. to Wednesday at 1:30 p.m.]

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