



Province of Alberta

The 30th Legislature
Fourth Session

Alberta Hansard

Tuesday afternoon, December 6, 2022

Day 5

The Honourable Nathan M. Cooper, Speaker

Legislative Assembly of Alberta
The 30th Legislature
Fourth Session

Cooper, Hon. Nathan M., Olds-Didsbury-Three Hills (UC), Speaker
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Reid, Roger W., Livingstone-Macleod (UC), Deputy Chair of Committees

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Dach, Lorne, Edmonton-McClung (NDP)
Dang, Thomas, Edmonton-South (Ind)
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Loyola, Rod, Edmonton-Ellerslie (NDP)
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Yao, Tany, Fort McMurray-Wood Buffalo (UC)
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Vacant, Calgary-Elbow
Vacant, Calgary-Lougheed

Party standings:

United Conservative: 60

New Democrat: 23

Independent: 2

Vacant: 2

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Standing Committee on Alberta's Economic Future

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Standing Committee on Public Accounts

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Standing Committee on Resource Stewardship

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Sigurdson, R.J.
Singh
Turton

Legislative Assembly of Alberta

1:30 p.m.

Tuesday, December 6, 2022

[The Speaker in the chair]

Prayers

The Speaker: Lord, the God of righteousness and truth, grant to our King, to his government, to Members of the Legislative Assembly, and to all in positions of responsibility the guidance of Your spirit. May they never lead the province wrongly through love of power, desire to please, or unworthy ideas but, laying aside all private interest and prejudice, keep in mind their responsibility to seek to improve the condition of all.

Please be seated.

Introduction of Guests

The Speaker: The hon. Member for Highwood has an introduction on the Speaker's behalf. The hon. member.

Mr. Sigurdson: Thank you, Mr. Speaker. To you and through you it is my honour today to announce two special guests. Today we have joining us Jayme Erickson, an Airdrie medic with Airdrie EMS. As well, we have Richie Reed, a medic with HALO here in the province.

Thank you, Mr. Speaker.

The Speaker: The hon. the Minister of Technology and Innovation.

Mr. Glubish: Thank you, Mr. Speaker. I rise to introduce to you and through you to the Assembly six outstanding members of the Strathcona professional firefighters' association. I along with my colleagues and all Albertans am truly grateful for the dedication and service of our first responders. I want to thank Elliot Davis, Eric Lowe, Tyler Brady, Ryan Woodland, and Robert Russell for their service and for all that they have taught me these last three years. I invite them to rise and receive the warm welcome of the Assembly.

The Speaker: The Member for Lethbridge-West.

Ms Phillips: Well, thank you, Mr. Speaker. It is my honour to rise and introduce to you and through you three IAFF members who have joined us here today in the Chamber all the way from Lethbridge. They are Brent Nunweiler, Brendan Pyne, and Patrick Misura. I ask, to honour and recognize their tremendous contribution to the city of Lethbridge, that the House extend to these dedicated public servants a warm welcome.

The Speaker: The Minister of Education.

Member LaGrange: Thank you, Mr. Speaker. I rise to introduce to you and through you to all members of the Assembly five honourable guests from Red Deer firefighters' association local 1190. We're delighted to welcome here today Stephen Belich, Dan Henschel, Kevin Bettsworth, Lyle Wesner, and Billy Kamp. On behalf of all the Assembly we want to thank you for the tremendous work you do, and God bless you all so much.

The Speaker: The hon. Member for St. Albert.

Ms Renaud: Thank you, Mr. Speaker. It's my pleasure to introduce five amazing members of the St. Albert firefighters' integrated service with the EMS. They are Greg Harvey, Al Zimmerman, Dean Dumbeck, Sean Richards, and Noel Johnstone. Thank you very much.

The Speaker: The Minister of Energy.

Mr. Guthrie: Thank you, Mr. Speaker. I rise to introduce to you and to all members of the Assembly guests from X-energy Canada: Katherine Moshonas Cole, Rosemary Yeremian, and Monifa Miller. Please rise and get the warm welcome of the House.

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

Member Irwin: Thank you, Mr. Speaker. Please join me in welcoming Steve Westlake of the Canmore Firefighters Association, who has joined us here today. Thank you, Steve.

The Speaker: The hon. the Member for Edmonton-Mill Woods.

Ms Gray: Thank you, Mr. Speaker. I invite all members of the Legislature to join me in welcoming members of the Alberta Professional Fire Fighters & Paramedics Association executive, including President Matt Osborne and Secretary-Treasurer Jamie Blayne. They represent the APFFPA, over 75 per cent of Alberta's population through representing firefighters.

Mr. Copping: It is with pleasure that I rise to introduce to you and through you to the rest of the Assembly my guests from the Calgary Firefighters Association. Joining us today is Jean-Pierre LeBlanc, vice-president, and Codey McIntyre, acting vice-president. I want to sincerely thank them for all the work they do representing firefighters, working with their families, and saving Calgarians.

The Speaker: The hon. Member for Edmonton-Whitemud.

Ms Pancholi: Thank you, Mr. Speaker. It's an honour to introduce to you and through you to all members of the Assembly – please join me in welcoming members from the Spruce Grove firefighters local 3021 who have joined us here today: Jordan Hanratty, Joel McKay, Justin Jaeger, and Cole Hoeber.

Members' Statements

Alberta Sovereignty Act and Capital Projects

Member Loyola: Mr. Speaker, international investment is essential for creating good jobs for Albertans. Large-scale infrastructure projects in our energy sector and other emerging spaces put people to work and allow them to put food on their table, pay their bills, and put a little bit away for that well-deserved vacation. I was proud to serve in a government that delivered on getting our resources to tidewater with the expansion of the Trans Mountain pipeline, which has put nearly 30,000 people to work and will be completed next year. I'm proud to stand in this House on behalf of skilled tradespeople every day, and I was so proud to see our leader commit to fund training centres should we form the next government.

Sadly, so much of our construction industry is watching in horror right now as the Premier attempts to ram through her undemocratic, job-killing sovereignty act, a deeply flawed piece of legislation. Sometimes national economic challenges require national solutions, and I'm proud to live in a country where provinces and different levels of government can come together to develop those solutions. There would be no Trans Mountain in a world with sovereignty acts. That's tens of thousands of Alberta jobs lost. But it gets worse. There are very real and very serious concerns about what this horrible bill could mean for federal housing funding, for large-scale investments in transit projects, and more.

We know that this Premier has already mused about pulling out of the Springbank dam and abandoning Calgary's long-awaited green line. Again, more good-paying jobs lost, and those jobs are

needed now more than ever as this government's economic plan has been a disaster. Alberta has the second-lowest wage growth in all of Canada, and inflation has outpaced wage growth by four times. My constituents and so many others are working harder and harder and falling farther and farther behind.

The job-killing, wage-killing sovereignty act is the last thing we need. We need more infrastructure projects. We need more jobs, not less. Pull this legislation now, and let's build a better future for Alberta workers.

The Speaker: The hon. Member for Calgary-Hays.

Children's Pain Medication

Mr. McIver: Thank you, Mr. Speaker. Across Canada we have a shortage of children's pain medication. Supply chain issues and increased demand have put pressures on hospitals and physicians' offices as parents seek out alternative sources from their local pharmacy, whose shelves are empty. This is the scene playing out from Victoria to St. John's, and this is a major concern for Alberta parents and this government as the health and well-being of our children is so important. I myself have heard many stories from parents from Calgary-Hays, and it's a growing concern and something that must be dealt with. Our 635,000 children need relief, and they need it now.

That's why our government has taken action to support families and ease the strain on our health care system. Just this morning the Premier and Health minister announced that this Alberta government has acquired at minimum 5 million bottles of acetaminophen and ibuprofen from Atabay pharmaceuticals. As soon as it arrives, it will be sent out to pharmacies across Alberta. I want to thank the efforts of this government as well as the efforts of Alberta Health Services in identifying and connecting with the manufacturer to get this much-needed medicine so swiftly.

With 5 million doses being the minimum amount we are receiving from the manufacturer, Albertans can be assured there will be a constant supply while the issues facing the national importation process are worked out. As the Health minister said earlier this morning, as soon as Health Canada completes the expedited approval process, the first 10 shipments will be sent to Alberta. Once here it will be mere days before pharmacy shelves will be stocked with acetaminophen and ibuprofen for Alberta's children. I have been told that actions speak louder than words. Well, Mr. Speaker, with 5 million bottles worth of action, that is strong medicine for Alberta.

The Speaker: The hon. Member for Calgary-Peigan.

33rd Anniversary of l'École Polytechnique Shootings

Ms Fir: Thank you, Mr. Speaker. Thirty-three years ago, on December 6, 1989, 14 women were murdered in the école Polytechnique massacre in Montreal. Today we honour their memory. Today we remember 14 women whose lives were full of hope, love, and potential: Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault, Annie Turcotte, Barbara Klucznik-Widajewicz.

1:40

Our government is invested in a future where women, girls, and gender-diverse people live without fear of violence. This means shifting to a culture of consent, engaging men and boys, improving our response to gender-based violence, and supporting survivors. Today we take action for those who have experienced gender-based violence and take

time to remember those who we have lost to it. Today we remember the 14 women who were killed in the Polytechnique massacre simply because they were women. We are committed to acknowledgement, education, action, and support.

Thank you, Mr. Speaker.

WCB Cancer Coverage for Firefighters

Ms Renaud: This morning I and my colleagues met with representatives from the Alberta Professional Fire Fighters & Paramedics Association to learn about the issues that are facing their members as part of the fall Legislature conference. The APFFPA are fierce advocates for issues facing firefighters and paramedics across the province, and opposition caucus has actively met with them over the 30th Legislature to listen, support, and bring their issues to this Assembly.

That is why yesterday our leader committed that an NDP government will ensure that all firefighters that worked in the Fort McMurray fires be eligible for catastrophic traumatic exposure presumptive WCB coverage, and these members would not have to meet the latency periods of up to 15 years of exposure for cancers. Unfortunately, when asked if the UCP minister of jobs would support this, his reply was that government had already done this. What a slap in the face to the firefighters who gathered from across the province, who are with us today in the gallery, and who've reached out to members of all parties to highlight their issues, members like the St. Albert firefighters, who are deeply concerned about a number of issues facing integrated services like St. Albert's that have been made so much worse by decisions that are negatively impacting their ability to serve the city.

Alberta's professional firefighters and paramedics have many issues that they need us to know about and act on: issues related to system improvement that will lessen their difficulty recruiting, issues about safe staffing levels, more regional autonomy, and so much more. What I've learned from the extraordinary St. Albert firefighters, all 126 of them, is that governments will continue to get it wrong until they directly consult with them.

Mr. Speaker, the APFFPA has already lost members who fought in the Fort McMurray fire. Other young members are fighting cancer and WCB and wondering what will happen to their families when they're gone in a few years. I hope the UCP will listen and join the NDP in ending the uncertainty for hundreds of Alberta firefighters that worked so tirelessly to save Fort McMurray.

Thank you.

Montana Erickson

Mr. Sigurdson: Mr. Speaker, I stand before you and the Assembly today with a heavy heart. At any given time a paramedic working in their community can be faced with a situation that many of us cannot ever imagine. On November 15 Jayme Erickson arrived at the scene of a crash on an icy stretch of Alberta highway. She didn't know it at the time, but she was responding to an accident involving her own 15-year-old daughter. It is every parent's worst nightmare to lose their child, but I can't comprehend the intense trauma of attending to one's own child.

To honour and memorialize the beautiful life of Montana Erickson, it's important to celebrate the amazing person that she was. I want the Assembly to know how much she meant to her family and how much she meant to so many countless others. Montana had a kind and graceful spirit that left a lasting impression on everyone who had the privilege of knowing her. She was a firecracker, a dedicated friend who would always stand up for the right thing. Montana was an athlete that finished fifth at the Canadian national swimming junior

championships. She was dedicated to helping people, which is why in her final hours she donated her organs, saving the lives of so many others. Montana is a hero. She meant so much to so many, and her presence will have a lasting impression on our communities and in Alberta.

May Jayme, her husband, Sean, their friends, families, and members of the EMS community find peace through this tough time. In honour of Montana and the daily sacrifice of our medics, let this serve as a reminder of the support and healing needed for our medics across this province. I promise to hold that dear to my heart and start that healing.

Our thoughts and prayers are with you. [Standing ovation]

Gender-based Violence Prevention

Member Irwin: Today, December 6, is the National Day of Remembrance and Action on Violence against Women. I ask this Assembly to take a moment with me and remember the lives of 14 brilliant young women who in 1989 were killed at an attack at l'école Polytechnique de Montréal, an attack fuelled by antifeminist violence and misogyny. These women were killed because they were women.

In the year since we last marked this day, roughly 170 women and 2SLGBTQ-plus people have died in Canada due to gender-based violence, a number that has risen in the past three years. We know that Indigenous women, girls, and two-spirit people are 12 times more likely to face gender-based violence than non-Indigenous people. Gender-based violence must stop.

Women, girls, two-spirit, nonbinary, and transgender people should be safe in all aspects of their lives. They should be safe in their homes, in their workplaces, in their communities, on their walks, and in their schools. They have every right to be safe here, yet we cannot stand in this House and say that they are when Alberta has the second-highest number of missing and murdered Indigenous women and girls and two-spirit people in the country and 1 in 3 women in Canada will face gender-based violence in their lifetime.

This government cannot continue to mark the anniversary of l'école Polytechnique by saying "never again" without action. Words are simply not enough. The women of this province need tangible and immediate action. Their lives depend on it.

Health Spending Accounts

Mrs. Pitt: Mr. Speaker, not every Albertan interacts with the health care system in the same way. Many Albertans seek different kinds of care outside of the traditional doctor's office. Currently Albertans are paying out of pocket for services not covered by Alberta health insurance, things like the dentist, the chiropractor, counsellors, and other needed health professionals. Some Albertans desperately need these services to deal with chronic pain, additional medications, mental health, and other treatments, and our government has a solution.

Imagine for a moment a family of four with an extra \$1,200 to spend on these alternative services. Little Johnny needs braces; the family is able to use this extra \$1,200 to off-set the cost. Imagine that Johnny doesn't need the braces, but his little sister Sally requires orthotics. In any circumstance the family is able to pay for things that they need to make life more comfortable.

Recently our Premier has proposed putting a health spending account into action for all Albertans to use to pay for health expenses that are not covered by Alberta health insurance. We will invest \$300 a year into these accounts, and we will also incentivize and encourage employers to contribute to these accounts as well.

Mr. Speaker, this money would be beneficial for all Albertans. Anyone with compassion for those who are struggling financially

in this province can see how important this extra money will be, yet the leader of the NDP continues to call this idea incredibly radical and extremely damaging. I don't know about you, but those are not the terms that I would use to describe this health spending account that falls in line with the Canada Health Act. This spending account will enhance our health care system rather than damage it, like the NDP have told Albertans it will. Our government is here to stand up for Albertans, and we will continue to be creative in solutions for all Albertans.

Oral Question Period

The Speaker: The Leader of His Majesty's Loyal Opposition has the call.

Alberta Sovereignty Within a United Canada Act

Ms Notley: Mr. Speaker, it is important for all of us as elected officials to stand up for Alberta. The difference is that my party knows we can do that without upending the Constitution, eroding democracy, and hurting investor certainty, and Albertans agree. According to a recent poll by Leger more than two-thirds of Albertans disagree with the act, and that was before this Premier made such a mess of it. No amendments can save this bill, so why doesn't the Premier admit that her bill doesn't need clarification, that what it needs is to just be quashed?

The Speaker: The hon. the Premier.

Ms Smith: Thank you, Mr. Speaker. Yesterday the Leader of the Official Opposition quoted Don Braid. Well, I see your Don Braid, and I raise you a Rex Murphy. Rex Murphy disagreed with the sovereignty act and my characterization of it yesterday as well. You know why he disagreed with the sovereignty act and my characterization of it? Because he said that Alberta has not been ignored. He said, "I must go all caps and exclamation mark. You could only wish in your sweetest dreams Alberta was ignored. In your deepest prayers you could only have hoped that Alberta and its energy industry had been ignored." This is the reason we need the sovereignty act.

1:50

Ms Notley: Well, Mr. Speaker, Murphy is going to Murphy.

Meanwhile others actually agree with us. Columnist Robyn Urback wrote that it seems like this legislation was "written in crayon." Rob Breakenridge said that the confusions and reversals are hurting public confidence. Long-time Harper strategist Kory Teneycke said that this will, quote, go down as one of the most ill-conceived pieces of legislation ever written. End quote. He then went on to call it un-Conservative. To the Premier: is she really saying that she's the only one that's right and everyone else is wrong?

Ms Smith: Well, Jack Major, who's a former Canadian Supreme Court justice – I think he knows a thing or two about the Constitution. What's so terrible about the province saying that if you want to impose on us, you'd better make sure you're doing it constitutionally?

Let me just continue with what Rex Murphy had to say. He said:

Madam Premier, you could only hope that Alberta was ignored.

The truth is it had the mean attention and been the unrelenting object of every global warming obsessive in the entire world.

And, during the last seven years,

of which the leader opposite was Premier,

your national government was either gently on side with the critics, gave a nod to their furious indictments, and [almost] certainly gave . . . no defence whatsoever.

And that goes . . .

The Speaker: The Leader of the Opposition.

Ms Notley: Well, Mr. Speaker, today a Calgary city solicitor said that the best case scenario is that the bill be withdrawn, and this morning two Alberta constitutional experts, people that are still writing about constitutional law, Martin Olszynski and Nigel Bankes, wrote that separate and apart from the Premier's undemocratic power grab there are still other sections that render the bill unconstitutional. "Amendments will do nothing to address our most significant concerns." Why won't the Premier admit that her flagship bill is sinking and withdraw it today?

Ms Smith: I've quoted Jack Major, a former Canadian Supreme Court justice. I've quoted Geoffrey Sigalet, University of B.C. centre for constitutional law. Jesse Hartery, constitutional lawyer:

The federal government has its own executive branch to implement and enforce its laws. The provinces are free to assist in that implementation if they wish. But if they have different enforcement priorities, they have . . .

Listen to this word.

. . . the sovereign right to decline enforcement of federal laws and require the federal government to do so itself, with its own funds.

We know that this is a constitutional act, and we look forward to testing that.

The Speaker: The hon. the Leader of the Opposition.

Respiratory Illness in Children

Ms Notley: Mr. Speaker, a few weeks ago our party asked the Premier to address the shortage of over-the-counter children's medication, and we are very pleased to see progress announced today. However, this does not address the recent surge in pediatric respiratory illnesses in our ERs. In other provinces the chief medical officers of health are educating the public about what they can do to protect their children and stop the spread. Yet here? Crickets. To the Premier: is this total absence of public health leadership happening at her direction, and if so, why?

Ms Smith: Mr. Speaker, the chief medical officer of health routinely offers press releases and routinely gives direction to those who seek his advice. That's the role of the chief medical officer of health. It is the role of our Health minister and the role of Alberta Health Services to make sure that if children get sick, they have not only the medication that the parents need to be able to treat them, and that was what the children's acetaminophen announcement was about today. We've been working on this for weeks, and the fact of the matter is that Alberta Health Services did a terrific job of seeking out and finding supplies so that we can help.

Ms Notley: Mr. Speaker, right now Alberta children are being hit with the public health triple whammy of COVID, influenza, and RSV. Recent reports show that Alberta has the highest rate of influenza in Canada and one of the lowest rates of immunization amongst children. Now, the Premier fired the former CMOH, and now we have a volunteer in charge of public health. To make matters worse, though, will the Premier confirm today that both deputy CMOHs have now resigned as well under her leadership?

Ms Smith: Dr. Mark Joffe has the respect of our Health minister and myself. He is not filling the role as a volunteer. He is filling the role as our chief medical officer of health . . . [interjections]

The Speaker: The Premier has the call.

Ms Smith: . . . and he is giving advice to those who are seeking it. The most important thing we can do right now is make sure that when a child gets sick, they have the medication that they need. That was the reason why we put all of our effort into securing a supply of 5 million bottles of acetaminophen and ibuprofen. It's going to make sure that families are protected.

Ms Notley: Well, Mr. Speaker, what I asked the Premier was whether or not our volunteer CMOH is getting the support of the two deputy chief medical officers of health that we understand have resigned. She hasn't given us an answer. Meanwhile nobody is speaking up to give appropriate information to our families. Will the Premier, as a result, stand and encourage – not mandate but encourage – vaccines as an important tool in preventing the public health crisis currently overtaking our ERs and threatening the safety of children, and if not, why not?

Ms Smith: The Leader of the Opposition knows that RSV is the most common childhood illness and that there is not vaccine for it. I think we all wish that there was a silver bullet, and I think that what we actually need to have is to ensure that people have the medication they need. I spoke with a pharmacist today, and the number one most important thing when somebody gets ill is that if they have a high fever, they need that fever to break. If they don't have the fever . . . [interjections]

The Speaker: Okay. The hon. the Premier has the call. It would be helpful if the Assembly could hear her.

Ms Smith: The most important thing is getting the medication to the families because this is what is going on. When you have a high fever, if you can't get the medication, then parents are going the only place they know, which is the emergency room. We're addressing that. [interjections]

The Speaker: Order. Order. Order. I just caution members, whether they're making on the record or off the record comments that may be unparliamentary, that if the Speaker can hear them, they certainly would be that.

The hon Member for Calgary-Bhullar-McCall.

Alberta Sovereignty Within a United Canada Act (continued)

Mr. Sabir: For days now the Premier and the Minister of Justice have tried to convince Albertans that Bill 1 was not the undemocratic power grab that constitutional experts, lawyers, journalists, business leaders, and Albertans knew that it was. That's ignoring the fact that the sovereignty act will give this cabinet the power to unilaterally modify, suspend, and rewrite laws. That was the power that the Premier and the Justice minister wanted. Can the Premier explain why she wanted these almost dictatorial powers and who advised her that this was the way to go?

Ms Smith: Mr. Speaker, the purpose of the act has always been very clear. Rex Murphy understands it. He says:

Your sovereignty act is a good thing. Why would I say so?

It is very simple, though perhaps not obvious [to everyone].

The act is not a constitutional challenge. It is not a matter of jurisdictional measures. Those are its surface points.

What it really carries is a demand for respect and fairness.

Albertans have been disrespected and they feel it on a personal level.

The impulse behind the act is an overdue call that Alberta receive the respect that is . . . its due. That the federal Liberals wake up to the fact that Canada is a Confederation, and that . . .

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

Mr. Sabir: The Justice minister told the media yesterday that he provides legal opinion to the cabinet and described his role as being counsel to the Executive Council. This bill was a poorly drafted attempt at giving extreme power to the cabinet at the expense of the democratic rights of Albertans, and Albertans deserve to know how such a disaster was created. Will the Premier today authorize the Justice minister to speak to the public about the legal opinion he provided about this disastrous, undemocratic piece of legislation she tried to force onto Albertans?

Ms Smith: Mr. Speaker, I've been very open about the legal advice that we have received. All the legal advice that we have received has been how we craft this legislation so that it respects the rights of our Aboriginal citizens, so that it respects the Charter, and so that it enforces the fact that we are going to defend our constitutional rights under sections 92 through 95 of the act. All of our legal advice has been crafted in order to make sure it falls within those parameters. We made a couple of amendments based on the advice we got back from our caucus, and we're going to go forward with the amended bill. [interjections]

The Speaker: Order. Order.

2:00

Mr. Sabir: The Justice minister and the Premier spent their days following the tabling of this act insulting business leaders and Albertans who warned about the consequences it would have on our economy and democracy. We deserve to hear from the legal advice provided to cabinet and know why the minister signed off on this terrible piece of legislation. Will the Premier sanction the release of the legal opinion the Justice minister provided to cabinet on Bill 1? If she won't, can she explain how she expects anyone to trust her or her government on pretty much anything?

The Speaker: The hon. the Premier.

Ms Smith: Yeah. Everything is on the table. The reason why we're putting this legislation forward is to make sure that we are enforcing our rights under the Constitution. That is the beginning and the end of it. When you look at Saskatchewan and the Saskatchewan First Act, the only difference that we did in this province is that rather than have an independent appointed tribunal as the starting point for any motion that we would put forward, we made sure that it was this Assembly. Any time we take a motion under the sovereignty act, we want to assert that MLAs begin the process because they are the duly elected members representing Albertans, and I encourage the NDP to support the bill just like their counterparts in . . .

The Speaker: The hon. Member for Lethbridge-West.

Health Care Services in Southern Alberta

Ms Phillips: Mr. Speaker, I am hearing directly from health care workers and patients in Lethbridge that the Chinook regional hospital could be on the cusp of capacity issues due to staffing shortages. This is the predictable outcome of three years of UCP war on front-line health care workers and a refusal of the UCP government to take responsibility and show leadership on our city's most important issue. People in Lethbridge do not want to hear excuses for our multiple and overlapping health care crises. Will

the Minister of Health stand today and explain the full extent of the situation in Lethbridge and provide details on what he will do to address it, not more excuses?

The Speaker: The hon. the Minister of Health has the call.

Mr. Copping: Thank you, Mr. Speaker. Thank you to the hon. member for the question. We are seeing a high volume of patients at the Chinook regional hospital both in the ICU and the emergency department. Now, as of right now, just to be clear, no in-house patients have been transferred due to capacity and no incoming patients have been diverted. That has not happened. Hospitals across the globe are dealing with challenges. We understand that depending on the volumes that are coming in, we have, as we've done pre-COVID and we're doing now, transferred patients on an as-needed basis, but that's not happening right now. We're providing the services to Lethbridge patients.

Ms Phillips: Well, then, Mr. Speaker, one of the reasons the volume might be high in the ER is because 40,000 people don't have a family doctor.

Now, a few weeks ago I raised the alarm of Lethbridge only having one full-time obstetrician and gynecologist to support pregnant women. Month after month it has been the NDP opposition raising the alarm about the challenges to health care in southern Alberta. Not a word from any UCP MLA. I guess the Deputy Premier can't be bothered to read about that either. On the ob-gyn crisis, what is the Minister of Health doing to ensure women in Lethbridge can deliver babies in our own city?

The Speaker: The hon. the Minister of Health.

Mr. Copping: Thank you, Mr. Speaker. We are working very hard on recruiting physicians across the entire province, including in Lethbridge. I'm pleased to say that 17 family medicine physicians have committed to the community of Lethbridge, 13 of which are awaiting their CPSA practice readiness. We already have a number started. We're looking forward to have the remainder start over the next number of months. This is a challenge that's not only being faced in Lethbridge but, quite frankly, across the province and around first-world nations in the world, but we are working very hard to be able to recruit and retain physicians, and we're going to continue to do so.

Ms Phillips: Now, Mr. Speaker, the UCP is far more concerned about the job-killing sovereignty act than fixing health care in Lethbridge, but let's see if we can get a local perspective here. Will the Deputy Premier from Lethbridge-East please explain about his priorities and what his plan is for – and he can take his pick of any of the multiple overlapping crises that his government has authored, whether it's capacity staffing issues, family doctors, EMS, ob-gyn shortage. What's the plan on any of these crises that the UCP has authored?

Mr. Copping: Mr. Speaker, we're very pleased about the plan that we're putting forward to address the challenges that health care is facing here in our province and, quite frankly, that provinces across the country are facing at the same time. We are investing more money than we ever had before: \$22 billion this year, an additional \$600 million next year, \$600 million the year after that. We have put in place an official administrator to help speed up the changes through AHS, and that includes working on key issues such as EMS, emergency departments, getting caught up on surgeries, and driving decision-making down. We have a plan recruiting, training, and bringing more health care workers into . . .

The Speaker: The hon. Member for Airdrie-East is next.

Children's Pain Medication

Mrs. Pitt: Thank you, Mr. Speaker. I've been speaking with many of my constituents, and the recent wave of the flu and other respiratory illnesses has been a hot topic, especially access to children's cold medication like Tylenol and Advil. Across the country, pharmacy shelves are empty, and parents don't have over-the-counter meds they need for their sick kids. Ottawa is seemingly doing very little to provide a long-term solution. Would the Minister of Health be able to tell this Assembly and concerned parents across Alberta what our government might be able to do to help?

The Speaker: The hon. the Minister of Health.

Mr. Copping: Thank you, Mr. Speaker, and thank you to the hon. member for the question. Today there is great news for parents throughout Alberta. The Premier and I were able to make an announcement that, in order to combat the shortage of children's pain medication, the government is working to acquire 5 million retail units of acetaminophen and ibuprofen. We've been working with AHS to find a manufacturer who can provide the medication, and I'm pleased to say that Atabay pharmaceuticals will be able to provide a steady supply for our province. Once Health Canada gives their final approvals, Alberta's parents will once again have access to the much-needed pain medications they need for their children.

The Speaker: The hon. Member for Airdrie-East.

Mrs. Pitt: Thank you, Mr. Speaker. Thank you, Minister. That's fantastic news for Alberta parents. Given that these parents need these medications as soon as possible so that they can alleviate the fevers and teething pain affecting thousands of Albertan kids and given that this is a province-wide issue and parents in rural and remote areas of Alberta need these medications, too, can the minister tell us what the plan is to ensure that units of children's Tylenol and Advil are distributed to pharmacies all across the province?

The Speaker: The hon. the Minister of Health.

Mr. Copping: Thank you, Mr. Speaker, and thanks again to the member for the question. We know that parents across our entire province need access to these essential pain medications, and they need it quickly. That's why AHS will be using the pharmaceutical distributor McKesson to ensure every pharmacy in Alberta gets prompt and efficient shipment as needed. Now, McKesson is the same company that already is contracted to distribute vaccines to pharmacies throughout the province, and I'm glad that Alberta families will soon have access to these needed medications to alleviate their children's pain and their worries.

The Speaker: The hon. member.

Mrs. Pitt: Thank you, Mr. Speaker. Thanks, Minister. Given that Albertans are concerned about the rising costs and the current inflation crisis and given that many of my constituents are seeing rising costs on all essentials, everything from ground beef to lettuce, and given that families are having to make difficult choices on how they spend their hard-earned money, can the minister tell Albertans what steps are being taken to ensure that prices for these medications remain affordable for Alberta families?

The Speaker: The Minister of Health.

Mr. Copping: Thanks again for the question, Mr. Speaker. We know that many Albertans are under financial strain because of the rising cost of essentials like medication and groceries due to inflation. That's why we will ensure that parents will be able to pay approximately the same retail prices as listed now, which is about \$12 per bottle on average. Many Albertans are facing significant strain on their finances, especially families with children, so I'm pleased that we can take steps to ensure that everyone can afford to buy the pain medication that their children need.

The Speaker: The hon. Member for Edmonton-City Centre is next.

Health Care System

Mr. Shepherd: Thank you, Mr. Speaker. Now, there is an EMS crisis in Alberta. In Ponoka the mayor called on this government to step up and do more following a number of recent incidents, including one where volunteer firefighters were forced to take a pedestrian hit by a car to the hospital in the back of a pickup because they could wait no longer for an ambulance. Albertans deserve to know that an ambulance is coming when they call, but for far too many since the UCP formed government, it's simply not the case. Will the Minister of Health stand today, take responsibility for the crisis we're seeing in our system, and apologize to the first responders forced to take action because of the pressures added by the UCP?

Mr. Copping: I will take this opportunity, first off, to thank all of our paramedics and our first responders for providing services to Albertans, much-needed services, during these challenging times. Mr. Speaker, as you know, call volumes have upped 30 per cent since last summer, and we have made significant investments to be able to address the challenges. As part of Budget 2022 we invested \$64 million, thus putting more ambulances on the streets in Calgary and Edmonton as well as putting ambulances in rural areas. We also put in place a 10-point plan, and I'd like to talk more about that in a moment.

Mr. Shepherd: Given that there's another crisis, Minister – yesterday this minister tabled Bill 4, claimed that it would, quote, ensure stable funding for Alberta's doctors. End quote. Given that what it actually does is undo the catastrophic decision made by the Justice minister when he was in Health to let this government unilaterally tear up their agreement with doctors, something supported by every member of this government – now, given that that decision launched their war on doctors in the midst of a pandemic, devastated primary care, made it impossible for many to see a family doctor, and so much more, rather than pat himself on the back, will this minister apologize to physicians for supporting that awful policy?

2:10

Mr. Copping: Mr. Speaker, that is simply not the case. We are seeing challenges in Alberta in regard to family physicians like challenges are being seen across the entire country. It has nothing to do with the policy; it has everything to do with the challenges of the pandemic. That said, I am very pleased and proud of the work that our government has done working with the AMA to reach this tremendous agreement, that was supported by more than 70 per cent of doctors. This agreement is focused on partnership. This agreement is focused on stability. This agreement is focused on innovation. It will help us attract and retain doctors to this province.

Mr. Shepherd: Given, Mr. Speaker, that that agreement is mostly about cleaning up the mess made by the minister to his left and given

that Albertans are coping with long wait times for ambulances and emergency rooms and for family doctors and given that this government has stated that they're supposedly focused on addressing the health care crisis but given that in order to actually address it, they need to take ownership for their failures and commit to real change, will the Health minister stand today and admit that when it comes to Alberta's EMS, hospital, and primary care system, he and his predecessor got it wrong and apologize for those that are caught in the wake of their legacy of failure?

Mr. Copping: Mr. Speaker, we are committed to change. We are committed to change, and we are putting money where our mouths are. As part of Budget 2022 we are spending \$22 billion, the most ever, and on top of that, to be able to address challenges with COVID and get caught up on surgeries, there's more money allocated this year. We are putting another \$1.2 billion into the system, and we know we need to transform the system. That is why in September we announced MAPS, modernizing Alberta's primary care system. I'm looking forward to the presentation coming forward on that so we can move on that quickly as well as work in terms of expanding capacity across our entire system.

Racism and Hate Crime Prevention

Mr. Deol: Mr. Speaker, words matter. This fall the Premier said inaccurate ones, that unvaccinated people, quote, have been the most discriminated against group that I've ever witnessed in my lifetime. End quote. The Premier has yet to apologize for what she said. Hate crimes are on the rise, and her comments negate the experience of racialized and marginalized Albertans. Will the Premier stand up and offer a formal apology for her harmful words? Will she acknowledge the very real racism, discrimination, and violence that people face in this province?

Mr. Luan: Mr. Speaker, this government stands strongly supporting all efforts against any sort of racism. We support every work from the community stakeholders for actions taken against any sort of antiracism work. I myself stood on the steps with community leaders to fight for antiracist remarks and actions in this province. We are committed to continuing that work. I'm pleased to work with others who are sharing our passion on this part.

Mr. Deol: Given that during COVID Canada saw a steep rise in anti-Asian hate, with a 700 per cent rise in some areas, and given that half of Chinese Canadians experienced some form of hate in relation to COVID-19 and given that anti-Muslim hate crimes have skyrocketed in Alberta, with Muslim hijabi women being the primary targets, can the Premier explain why she said that the unvaccinated are the most discriminated against because they couldn't go to a restaurant when many racialized Albertans have been subjected to real violence during the pandemic?

Mr. Luan: Mr. Speaker, our government took actions, and we created a first-of-its-kind action plan that shows that this government is committed to working with marginalized communities to address racism in Alberta. This antiracism action plan will help combat racism and ensure marginalized Albertans have equal access to information, resources, services, and opportunities. I myself come from an ethnocultural minority. I can tell you that it hasn't been lost that we need to have the voices of all the marginal communities to be fair and to be . . .

The Speaker: The hon. Member for Edmonton-Meadows.

Mr. Deol: Given that the answer is no and given that racialized and marginalized Albertans have spoken out against the Premier's harmful comments, expressing that they are upset over the wilful neglect of their lived experience of discrimination, and given that the Premier or any of her cabinet ministers seem unable to offer a sincere apology for the harm she has caused, can the Premier explain what her government plans to do to protect racialized and marginalized Albertans from the very real and oftentimes violent discrimination they face in this province?

The Speaker: The hon. the Minister of Culture.

Mr. Luan: Thank you, Mr. Speaker. Our government is committed to work with all that share this vision here. I invite the opposition to join us to fight for antiracism. Myself, I have grown from a community that experienced that. This issue is across all political stipes here, and we're committed to taking action there. I invite the opposition to join us to do more work in this area.

The Speaker: The hon. Member for Spruce Grove-Stony Plain.

Education Concerns

Mr. Turton: Thank you, Mr. Speaker. My riding of Spruce Grove-Stony Plain is full of young families and students who are eager to make this school year a great one, one that offers educational choices, learning opportunities, and unique experiences in top-tier facilities. To achieve these goals for students, our teachers and front-line staff must be supported in order to give our students the education and school year they deserve. To the Minister of Education: what have you done to support our teachers and front-line education workers, who have dedicated themselves to supporting our students?

The Speaker: The hon. the Minister of Education.

Member LaGrange: Thank you, Mr. Speaker, and thank you for the question. We are committed to supporting our teachers and front-line workers in the best manner possible. Budget 2022 provides an education funding increase of more than \$700 million over the next three years, including \$142 million for the '22-23 fiscal year to support and hire teachers. Eight hundred more teachers and principals have been hired this school year as well as an additional 800 educational assistants. We're continuing to support our schools and making sure they have what they need.

The Speaker: The hon. Member for Spruce Grove-Stony Plain.

Mr. Turton: Thank you, Mr. Speaker and to the minister for her answer. Given that our public schools are currently facing challenges related to this year's flu season and the cyclical wave of respiratory viruses and given that many students have had to miss classes as a result of these seasonal illnesses, to the same minister: what are you doing in terms of supporting school boards as they tackle this year's wave of viruses?

The Speaker: The hon. Minister of Education.

Member LaGrange: Thank you, Mr. Speaker. Our government is committed to supporting school boards, parents, teachers, and staff members by being responsive and providing clarity and leadership. School boards wanted clarity, and we provided much-needed clarity last week, with new regulatory changes. As the Minister of Health shared yesterday in the House, the spike that we saw is going down. We will continue to work with Health and school boards to ensure that the kids can learn safely in our schools and in our classrooms.

The Speaker: The hon. member.

Mr. Turton: Thank you, Mr. Speaker and to the minister. Given that countless schools in Alberta are in desperate need of capital improvements such as Spruce Grove composite high school and given that this school is bursting at the seams, with more students on the way, and given that renewing schools such as this one creates vibrant communities and a fantastic place for our children to learn, to the Minister of Education: what are you doing to follow through on the commitment to building and renewing our school infrastructure?

The Speaker: The hon. minister.

Member LaGrange: Thank you, Mr. Speaker. Our government is committed to building and renewing infrastructure and revitalizing communities. That's why we've committed to building 66 school projects since we got elected, at a cost of over \$2 billion. I have to add: that's more than the members opposite did. Although I cannot comment on capital projects that may be considered for Budget 2023, we are committed to continuing to build more schools in communities that need them the most, as is evident by my mandate letter. We are supporting enrolment growth in growing communities, preserving and modernizing existing facilities, and revitalizing communities right across this province.

The Speaker: The hon. Member for Edmonton-South is next.

Children's Health Care

Mr. Dang: Thank you, Mr. Speaker. Children in Alberta are in crisis. Parents in Edmonton-South are losing sleep after finding nothing but empty shelves when they go looking for medication. Family doctors are moving away from Alberta, and any who are left aren't accepting new patients. ER wait times are stretching longer than a business day. This government's response has been unjust and hurts our communities. My question for the Minister of Health is simple. Will he stand up today and commit to prioritizing Alberta's children and invest public dollars in reducing wait times and sourcing supplies for pediatric care?

The Speaker: The hon. the Minister of Health has the call.

Mr. Copping: Thank you, Mr. Speaker, and thank you to the hon. member for the question. I was very pleased today to announce with the Premier to address one of the issues raised by the hon. member, and that is the purchase of 5 million bottles of ibuprofen and acetaminophen, because the shelves are empty, and we know that that's a hardship not only on Alberta parents, but it's also a hardship on our children's hospitals because parents can't treat their children at home. With this announcement, we are moving forward with bringing 5 million bottles into the province once we get Health Canada approval, which I'm very hopeful we can do in the next few weeks.

2:20

The Speaker: The hon. Member for Edmonton-South.

Mr. Dang: Thank you, Mr. Speaker. Given that that's not enough because the current state of our system is so bad that hospitals have been forced to pause respite services and given that this crisis was preventable from the very beginning – children are getting sick from preventable illnesses, and we know the solutions that are needed to keep them healthy and well – will the minister take the responsibility and apologize to this House and all Albertans for failing our children and neglecting their needs in favour of his political games?

Mr. Copping: Mr. Speaker, I was very pleased to appoint Dr. Joffe as the chief medical officer of health, and I was very pleased when he put out guidance to Alberta parents. We are in flu season. There are respiratory viruses that are circulating, so Dr. Joffe put out guidance to parents, and first and foremost in that was: go get your flu shot. I'm very pleased that we are actually running a flu campaign. Perhaps the hon. Member for Edmonton-South got the text – I know I got it on my phone – to go get your flu shot. We also asked parents to make the choice to get all the shots that are available for them so they can protect themselves.

The Speaker: The hon. Member for Edmonton-South.

Mr. Dang: Thank you, Mr. Speaker. Given that at least one minister is willing to tell Albertans to get their flu shot and given that he's previously known that Alberta's pediatric care is under strain and given that doctors and medical professionals across this province have stated that this government's Band-Aid solutions are simply not enough, will the minister commit to funding an expedited completion of the Edmonton south hospital so that my constituents can finally see some current measures to assist in health care?

The Speaker: The hon. the Minister of Health.

Mr. Copping: Thank you, Mr. Speaker. We are taking action to be able to support our hospital system and to support strictly our system targeted at children. We've made a number of changes to be able to get staff where they're needed, and what we're doing is that we're expanding capacity, capacity across the entire spectrum, not only in hospital beds but also in the emergency departments. We have put in place, for example, in the Alberta Children's hospital a fast-track system so we can actually treat people immediately and allow them to go home, and as I already said, we're bringing in Tylenol.

The Speaker: The hon. Member for Edmonton-Glenora.

Education Concerns

(continued)

Ms Hoffman: Thank you, Mr. Speaker. The recent ATA pulse survey shows the devastating impact of the current UCP government on students, staff, and families in Alberta schools. Challenging class sizes, growing complexity of students, and a lack of resources are just some of the issues that have resulted in unacceptable levels of stress. More than 90 per cent of teachers have said that they are exhausted at the end of each day, and more than half of them plan to leave the profession within five years. Will the Minister of Education apologize for driving teachers from the profession?

Member LaGrange: Mr. Speaker, I just want to share with the whole House that 1,253 teachers took part in the survey. There are over 46,000 teachers in the ATA. As well, there are other teachers that teach outside of the ATA. That being said, it is of prime concern for me to address the issues that are happening within our school authorities. Yes, we've been working on all these issues, including class size, and I've invited the ATA president and his executive to meet with me.

Ms Hoffman: Mr. Speaker, given that the government is forcing school staff to work double duty by requiring school boards to ensure that all students have both in-person and online learning when there are large numbers of kids sick without providing any new supports – we need more staff in schools is the answer – and given that many schools have seen an average of 10 per cent

absenteeism among students and the CBE reported last week that 122 teaching jobs were unfilled, 54 support staff jobs weren't filled, will the Minister of Education finally wake up and listen to the students, staff, and families and what they've been telling her? They need help to deliver quality public education.

Member LaGrange: Mr. Speaker, if the member opposite took the time to actually listen to parents, she'd know that they want stability in their school system. If she took the time to listen to school boards, she would know that they want that clarity. In fact, what we provided was clarity to the school authority. The member opposite's old school board – she was a board chair for Edmonton public school division. The new chair, Trisha Estabrooks, said recently, and I quote: all Albertans now understand that it's not within the jurisdiction, nor should it ever have been within the jurisdiction, of individual school boards to make decisions that belong to . . .

The Speaker: The hon. Member for Edmonton-Glenora.

Ms Hoffman: Given that the ATA survey revealed that the majority of teachers are using their personal funds to purchase resources necessary to help them deliver the UCP's disastrous curriculum and given that 84 per cent of teachers report students having huge gaps in their learning and not being able to understand the UCP curriculum, will the Minister of Education admit what educators have already been telling her for more than two years, that students deserve better than her disastrous curriculum, which is hurting our international reputation and Alberta students?

Member LaGrange: Mr. Speaker, what students deserve is less fearmongering from the other side. That's what they deserve. In fact, the curriculum is being implemented and is going extremely well. In fact, I met with every single school division, and you know what they didn't raise? They didn't raise the curriculum. They didn't raise curriculum implementation. No, they didn't. In fact, they raised transportation issues, mental health and wellness issues, and capital issues, but curriculum was not on it. In fact, I can go back to the fact that we had teachers piloting the curriculum through the pandemic who saw outstanding outcomes. [interjections]

The Speaker: Order. Order. Order.

Health Care System (continued)

Ms Issik: Mr. Speaker, Albertans have been struggling to receive consistent, quality health care for far too long. I'm hearing concerns from my constituents that our health care system is unable to meet the current and growing demand. Their concerns are not unique, however. Across the province Albertans are demanding that Alberta Health take action and make the necessary changes to address the ongoing issues. Alberta Health Services is under reform and as a first step has seen appointed an official administrator, Dr. John Cowell. Can the Minister of Health please explain why replacing an 11-person board with a sole administrator was deemed the best solution for our health care crisis?

The Speaker: The hon. Minister of Health.

Mr. Copping: Thank you, Mr. Speaker, and thank you to the hon. member for her question. We know that the health system is under strain here in Alberta. This is similar across the entire country, in all provinces across the country. The part-time AHS board did great work, but we need full-time leadership to provide urgent, efficient, effective, timely, and decisive leadership to improve productivity

and health care outcomes. The appointment of Dr. John Cowell as the official administrator fills that need perfectly, and I am looking forward to seeing the changes that he'll be making over the coming weeks. [interjections]

The Speaker: Order. Order.

The hon. Member for Calgary-Glenmore has the call.

Ms Issik: Thank you, Mr. Speaker. Given that Alberta's government has acknowledged that the current system was not working and that there's an overdue need for responsible health care and has since committed to making Alberta Health its number one priority and given that Albertans can no longer continue to accept increasing wait times and are eager to start seeing prompt changes in their health care system, can the Minister of Health outline what next steps will be taken to address the issues of our health care system? [interjections]

The Speaker: Order.

The hon. Minister of Health.

Mr. Copping: Thank you, Mr. Speaker, and thanks once again to the hon. member. Dr. Cowell has hit the ground running, and we have identified four areas that need his swift attention: first, to improve EMS response times; second, to decrease emergency room wait times; third, to reduce wait times for surgery; and finally, to develop long-term reforms through consultation with front-line workers and others to drive down decision-making. We need quick action on these goals, and I'm confident that he and AHS will make the changes necessary to alleviate the strain on our health care system.

The Speaker: The hon. member.

Ms Issik: Thank you, Mr. Speaker, and thank you to the minister. Given that Alberta Health Services is actively working towards operating at its fullest potential and aims to have reforms completed as soon as possible and given that Dr. Cowell has been entrusted to work closely with health partners and drive the necessary changes promised to Alberta families and given that immediate action is vital to ensuring Alberta families have access to the first-class health care they deserve, can the minister outline how Albertans will be assured that the official administrator is successfully effecting change?

The Speaker: The hon. Minister of Health.

Mr. Copping: Thank you, Mr. Speaker, and thanks once again to the hon. member. We all know that you manage what you measure. That is why we have actually put in place a number of measurements to be able to track the progress that AHS is making. These indicators include reduced response time from an emergency call to ambulance arrival, reduced waiting times in Alberta's emergency rooms, reduced surgery wait times within clinically acceptable wait times, the number of calls appropriately stepped down from 911 to Health Link. These are just a few of the measures that we'll be using to track progress, and we are taking the steps needed to make sure that right changes are being made to strengthen our health care system.

2:30

Kananaskis Conservation Pass

Mr. Schmidt: Mr. Speaker, since June 2021 Albertans have been forced to pay to visit Kananaskis. The government's K pass program has raked in \$50 million, dollars that should never have been taken from the hard-working people of this province. Even worse, \$2 million of that went to a security firm to enforce the pass. This government cost Albertans millions and lied about where that

money went, all while this government operates on a surplus. Can the minister please explain to Albertans why they continue to pay for this pass? Can't we all just enjoy Kananaskis for free, the way Peter Lougheed intended?

The Speaker: The hon. the Minister of Forestry, Parks and Tourism.

Mr. Loewen: Thank you very much for that question, my very first of this session. I'd like to talk about our parks here. I like to promote them everywhere. As for the K pass, it's under review with a new Premier and a new crew. We want to ensure it's fair and good and accomplishing all that it should. Viewing a mountain, its peaks like a steeple, it's a fact that parks are for people.

Mr. Schmidt: Given that there once was a man from Nantucket . . .

The Speaker: No preambles.

Mr. Schmidt: Many people in Alberta want to spend their time off enjoying Alberta's mountains, but given the cost-of-living crisis, the government's absurd K pass program has made a trip to the mountains infeasible for many Albertans and given that the Premier herself has described the K pass program as ridiculous and said that she was in agreement with the NDP that this pass should not continue, can the minister tell us when Albertans will not have to pay the K pass any longer?

The Speaker: The hon. the Minister of Forestry, Parks and Tourism.

Mr. Loewen: Thanks again for the question. I'm resisting the urge to go into Dr. Seuss rhyme again.

This government is focused on the concerns of Albertans. We're concerned on affordability, health care, and dealing with an obstructionist federal government. However, we can walk and chew gum at the same time, so we are working on other issues, too, including the K pass, and making sure that our parks are serving the needs of Albertans and our visitors and, of course, increasing tourism. The K pass is one of those things we are reviewing and working on.

Thank you. [interjections]

The Speaker: Order.

Mr. Schmidt: Given that many people choose to live in Alberta because of our unique access to outdoor landscapes and given that the usage of Alberta's parks has hit record numbers during the pandemic, with provincial parks seeing around a 48 per cent increase in visitors since 2020, and given that Albertans' budgets are simply stretched too thin at the moment, why is the minister still reviewing this when he knows full well that this would help Albertans visit Kananaskis Country today? Don't wait for a review; just repeal the K pass today. Why can't he commit to that?

The Speaker: The hon. the Minister of Forestry, Parks and Tourism.

Mr. Loewen: Thanks again for the question. It's always interesting to hear the NDP talk about cost and how things are costing Albertans. Of course, the NDP brought in a carbon tax that they didn't campaign on, and that increased the cost of everything for all Albertans. Now, we know that they're supporting their comrades in Ottawa regarding the tripling of the carbon tax. Maybe it's a news flash to them, but in order to travel and enjoy the parks like Kananaskis, the people of Alberta have to pay for gas and increased carbon tax fees. If they want to do something for Albertans . . .

WCB Cancer Coverage for Firefighters

Ms Gray: Mr. Speaker, yesterday I asked the minister of jobs if he would echo the Official Opposition's pledge to support firefighters who responded to the Horse River wildfire in Fort McMurray. Nearly 2,500 structures were destroyed, and firefighters were exposed to massive amounts of toxins and carcinogens for days without the ability to decontaminate. The minister declined and instead suggested individual cases should come to him. Why won't this government do the right thing, commit to extending presumptive cancer coverage to these heroes? They should not have to reach out to the minister individually on a case-by-case basis.

Mr. Jean: Mr. Speaker, that's not what I said, but I would like to acknowledge right now that firefighters have a very demanding job. We need to have their back when it's necessary, and it's necessary now. That's why Alberta was one of the first jurisdictions in Canada to put forward presumptive coverage. Every single firefighter in Fort McMurray or otherwise in Alberta has that ability to be presumed and have presumptive coverage. But what I need to say right now is that with this experienced higher risks for firefighters – and that's on a continual basis; not just the Fort McMurray firefighters – why didn't the NDP, when they were in government, do something about it?

Ms Gray: Given a Fort McMurray firefighter with 10 years of service fought the Horse River wildfire and was subsequently diagnosed with kidney cancer, given this Fort McMurray wildfire firefighter and his family were denied coverage when he didn't meet the cancer latency period – he has since passed, and his family is still appealing four years later – given a Leduc firefighter who fought the same wildfire is currently going through the appeals process after being denied coverage for the same reason and given the minister stated these firefighters already qualify for presumptive coverage when they do not, will the minister meet with the APFFPA and other firefighters?

Mr. Jean: Mr. Speaker, we're always monitoring these complex issues. They're evidence based. If the evidence proves that this is caused as a result of their service, it's included in the list. We're constantly updating it. But would I meet with firefighters? I've been in politics for almost 20 years, and I'll meet with anybody any time, especially those people that serve Albertans.

Ms Gray: Given that yesterday the minister was unaware that Alberta is no longer the leader in the country in presumptive cancer coverage, given that Yukon, B.C., Manitoba, Ontario, and Newfoundland are now covering cancers Alberta does not, like penile, pancreatic, and thyroid, given that Alberta firefighters are being denied coverage for those cancers and given we have new research like that from the International Agency for Research on Cancer, will this minister and government commit, like the Official Opposition has, to updating presumptive cancer coverage based on the latest science?

Mr. Jean: Mr. Speaker, that party was in power just three years ago, and what did they do for the firefighters and for this? Nothing. We are working on it. It's a complex matter. It's evidence based, and we're working to balance what's in the best interest of firefighters and the best interest of Albertans because they work together.

The Speaker: The hon. Member for Taber-Warner.

Highway 3 Twinning

Mr. Hunter: Thank you, Mr. Speaker. On November 25 of this year a decades-long-awaited announcement was provided to southern Albertans. The Premier along with the transportation and Infrastructure ministers joined me in Medicine Hat to announce the twinning of not only the stretch of highway between Taber and Burdett but also the twinning of the whole of highway 3. To the Premier or the minister of transportation: why was it so important to announce this critical piece of infrastructure now?

The Speaker: The hon. the Minister of Transportation and Economic Corridors.

Mr. Dreeshen: Thank you, Mr. Speaker, and I'd like to thank the hon. member for his advocacy for twinning highway 3. I was proud to stand beside him, the Premier, and the Deputy Premier to announce that we are twinning highway 3, and that'll be a four-lane highway from Medicine Hat all the way to the B.C. border. It'll safely keep up to the economic growth in southern Alberta, especially when we're seeing huge gains in the agriculture and oil and gas industries down there. As a government we will attract investment, secure jobs, and protect communities all across this province.

Mr. Hunter: Thank you, Minister. Given many in southern Alberta have been waiting for a long time for this announcement and given that the corridor between Lethbridge and Medicine Hat has become a major agrifood processing corridor in Canada, can the minister tell us what this important twinning project will do to grow the agrifood processing corridor in this area?

The Speaker: The hon. the Minister of Transportation and Economic Corridors.

Mr. Dreeshen: Well, thank you, Mr. Speaker. Again, the hon. Member for Taber-Warner has not only advocated to twin highway 3 but has also helped to bring in investment all across southern Alberta. This government has helped to create a game changer investment to expand 200,000 more irrigated acres in southern Alberta, and that's attracted ready-to-eat potato product processors, sugar beet processors, expanded our livestock sector, so these types of investments that the government is doing really do help job creators in this province, which have strong families and strong communities all across the province.

Mr. Hunter: Mr. Speaker, given that I mentioned in my earlier question that the stretch of highway between Taber and Burdett is to be twinned and given the fact that this stretch of road will be the first of eight sections to be twinned, can the Minister of Transportation and Economic Corridors please provide this House with more information about when shovels will be in the ground on this first section?

Mr. Dreeshen: Well, Mr. Speaker, to answer the question: next spring, but not if, though, Alberta had federal NDP representatives as their provincial government. Now, the NDP want to bring in restrictive contract arrangements that will actually spark labour wars here in the province of Alberta. Look what the NDP just did in B.C. They increased the cost of provincial construction projects about 20 to 30 per cent. The NDP drastically reduced the number of bidders on these projects, cutting the number of eligible contractors, although if they are friends of the NDP with their big union bosses, they do get

to bid on the contracts, but we're never going to see that here in the province of Alberta with this government.

2:40

The Speaker: Hon. members, that concludes the time allotted for Oral Question Period. In 30 seconds or less we will return to the remainder of the daily Routine.

Notices of Motions

The Speaker: The Government House Leader.

Mr. Schow: Thank you, Mr. Speaker. I rise to give oral notice of Government Motion 14, sponsored by myself.

Be it resolved that when further consideration of Bill 1, Alberta Sovereignty Within a United Canada Act, is resumed, no more than one hour shall be allotted to any further consideration of the bill in Committee of the Whole, at which time every question necessary for the disposal of the bill at this stage shall be put forthwith.

I also rise to give oral notice of Government Motion 15, sponsored by myself.

Be it resolved that when further consideration of Bill 1, Alberta Sovereignty Within a United Canada Act, is resumed, no more than one hour shall be allotted to any further consideration of the bill in third reading, at which time every question necessary for the disposal of the bill at this stage shall be put forthwith.

Introduction of Bills

Bill 5

Justice Statutes Amendment Act, 2022 (No. 2)

Mr. Shandro: Mr. Speaker, I ask for leave for first reading of I guess it would be Bill 5, the Justice Statutes Amendment Act, 2022 (No. 2).

Thank you very much.

[Motion carried; Bill 5 read a first time]

Tabling Returns and Reports

The Speaker: The Official Opposition House Leader has a tabling.

Ms Gray: Thank you very much, Mr. Speaker. This morning the Official Opposition met with members of the APFFPA, the Alberta Professional Fire Fighters & Paramedics Association. I am tabling five copies of their three lobby papers: Addressing the Crisis in EMS and Pre-hospital Care; Government of Alberta Restriction on Alberta Pension Services; and Presumptive Cancer Coverages – Firefighter in Alberta Cancer Registry – Catastrophic Traumatic Exposures.

The Speaker: Are there other tablings? The hon. the Minister of Service Alberta and Red Tape Reduction.

Mr. Nally: Thank you, Mr. Speaker. I've got two tablings today. The first one is a white paper by the Canadian Federation of Independent Grocers showing that grocers make 2 per cent margins. I have the five requisite copies here.

The second one I have is a report by Dalhousie University showing that there are many reasons for the higher prices we're seeing on grocery store shelves, but one of them is not gouging from grocery retailers. I have the five requisite copies as well.

The Speaker: Hon. members, Ordres du jour.

Orders of the Day
Government Bills and Orders
Second Reading

Bill 3

Property Rights Statutes Amendment Act, 2022

The Speaker: The hon. the Minister of Justice has the call.

Mr. Shandro: Thank you, Mr. Speaker. I'm more prepared for this one, so thank you very much. I'm pleased to rise to move second reading of Bill 3, the Property Rights Statutes Amendment Act, 2022.

Now, Mr. Speaker, Albertans value their land. They work hard for it. They work hard to maintain it. They work hard to improve it. It's their home. It's their place of relaxation and recreation. And for some folks, like our farmers and ranchers, the land is also their livelihood. Given how hard Albertans work for their land and how important it is to them, Alberta's laws should be there to protect property rights for the owners of this land. However, under current provincial law it's possible for Albertans to have their land taken away from them through adverse possession. Now, this means that someone who has been squatting upon privately owned land can go to court and potentially claim ownership if they've been occupying the land for 10 years.

As it stands now, adverse possessors can't try to claim public land or municipal land or land in irrigation districts. This proposed legislation wants to make this the same for privately held land. Allowing squatters to take land away from hard-working Albertans, who are the rightful landowners, is unfair. It creates stress for landowners because they have to constantly police the property and to protect it from adverse possession; for example, by monitoring property lines and continually fixing fences. Someone who has inherited or paid for the land and is the registered owner shouldn't have to face a constant and nebulous threat of losing it. The Property Rights Statutes Amendment Act, 2022, proposes changes which will remove this threat and give private landowners the same protections that are currently in place for public land.

Bill 3 proposes to amend three existing pieces of legislation: first, the Law of Property Act; second, the Land Titles Act; and, third, the Limitations Act. Amendments to the Law of Property Act would abolish adverse possession. Amendments to section 69 of this act include additional core powers to resolve any disputes that could arise.

The Land Titles Act is being amended to permit a court order issued under the new section 69 of the Law of Property Act to be registered at the land titles office once the office is certain there will be no appeal of the court's decision. Amendments to the Land Titles Act will also protect titles that are already existing when these have been issued on the basis of a court order finding adverse possession.

The Limitations Act is being amended to remove limitation periods for a claim to recover possession of real property and for a claim respecting lasting improvements or encroachments under the Law of Property Act. Specifically, when a registered owner starts an action to recover possession of land, the adverse possessor will not be able to use a defence of adverse possession. Amendments would also keep in place a 10-year limitation period to recover possession of real property for an adverse possession claim that begins before adverse possession is abolished.

If these changes pass, folks will no longer be able to go to court to claim adverse possession of land that they are on, and if someone is possessing land that they are not the registered owner of, registered owners can get a court order to get the land back at any time. Now, Mr. Speaker, make no mistake: these proposed changes

are dearly sought by Albertans. This fact is based on consultations and recommendations from various interested groups. Back in 2016 the Property Rights Advocate recommended abolishing adverse possession in their annual report, and in 2020 the Alberta Law Reform Institute also recommended abolishing adverse possession here in Alberta.

A number of hon. members as well, hon. members of this Assembly, led consultations with stakeholders and the public over several months in 2021 and '22 as members of the Select Special Committee on Real Property Rights. Now, part of this committee's mandate was to consider whether the law of adverse possession should be abolished. During their consultations the committee received many heartfelt pleas and requests from Albertans, farmers, landowners to abolish it and recommended as much in their final report. I want to thank this committee for listening to Albertans and making this recommendation on their behalf. The work of the committee along with the recommendations of expert groups send a strong message that adverse possession should be abolished.

Now, before I finish, I also want to give a shout-out to Mr. Ken Allred, who is the former Member for St. Albert, a former professional land surveyor, and who has had concerns about adverse possession for over 50 years. In fact, 10 years ago, in 2012, he had a private member's bill proposing to abolish adverse possession in this province. Unfortunately, at that time, 10 years ago, that private member's bill died on the Order Paper. Now, Mr. Speaker, the question of abolishing adverse possession has been brought before this House before, and we're very happy to continue the work that was started by Mr. Ken Allred.

I'm hoping that Bill 3 will have a different output than his private member's bill and that both sides of this House will support getting rid of someone's ability to essentially steal another person's property. If passed, the Property Rights Statutes Amendment Act, 2022, will send a clear message that squatting cannot lead to ownership. It would allow Alberta's landowners to use and to enjoy their property without the ongoing burden of making sure that no one is using it and the constant worry of potentially losing their land. It will strengthen Alberta's property rights law and bring peace of mind to landowners across the province.

With that, Mr. Speaker, I'm happy to move second reading of Bill 3. Thank you.

2:50

The Speaker: Hon. members, the Minister of Justice has moved second reading of Bill 3. Are there are others wishing to join in the debate? The hon. Member for Edmonton-Whitemud.

Ms Pancholi: Thank you, Mr. Speaker. It's a pleasure to rise and speak at second reading of Bill 3, the Property Rights Statutes Amendment Act, 2022. I've taken the chance to read the bill, something which I think all members of the Assembly should do before they stand up and speak and debate on a bill, actually read the bill. Sorry. I know that shouldn't have to be said, but given what we've seen from this government caucus over the last week or so, I think it's a timely reminder that one should know the bills. When they're going to speak out and make accusations about what it means, you should first understand what it means.

I've had the opportunity to look over Bill 3, the Property Rights Statutes Amendment Act. Essentially, Mr. Speaker, I think there's pretty much consensus within the members of the – I don't want to presume for my colleagues, of course, but there does seem to be a consensus around what this bill is intended to address, which is, of course, to essentially limit or eliminate the common-law adverse possession rights.

Most people might be familiar with the idea of adverse possession, maybe not in its formal sense of the word but the idea of squatter's rights. The idea that if – we've all heard the old saying, Mr. Speaker, you know, that possession is nine-tenths of the law – you've possessed a piece of land or property for a period of time, eventually it becomes yours: that's sort of the underlying principle behind this sort of adverse possession, that if an individual has occupied an area of land for a significant period of time and has exercised use of that land, then it becomes theirs and they have a legal entitlement to that land.

Of course, there are many who would have strong objections, and we know that based on consultations that were done not only by this government through their Select Special Committee on Real Property Rights, but also there have been consultations done by numerous other bodies, including the Alberta Law Reform Institute, to really evaluate what the perception is by Albertans, particularly rural landowners, about adverse possession. Generally speaking, you know, it tends to fly in the face of what we understand is fair and right, that somebody might be able to take claim to your property simply by using it or are occupying it without your permission. That does seem to be an affront to most people's understanding of what's fair and what's right.

Now, what we do know is that the actual claim of adverse possession rights under the common law has actually been quite rare. It's not actually something that has been exercised to prove an entitlement. But, again, it goes back to this idea of principles and what is fair and what is right. So it has been, you know, sort of an issue that has not been addressed statutorily in Alberta for some time.

In fact, I note that a number of jurisdictions do already have – they've addressed through legislation, through statute rights to basically eliminate adverse possession. Unfortunately, Alberta has not followed that, and it's a little bit, you know – it seems contrary to what we kind of know about the strong sense of pride that Albertans, and particularly rural Albertans, take in their land and their property.

Of course, often on rural properties there isn't clear delineation the way we would see it in urban centres, where you have an idea of what your property line is: you've got a city, municipality comes out and assesses it, and you've got your property lines and you usually have a fence or something. Of course, in rural areas it may not be that clear, so often encroachments onto somebody else's land are not as obvious. It may be, you know, a section of a piece of land. But we do know that that concern is out there, and it is high time, I believe, that we address that through legislation.

[The Deputy Speaker in the chair]

I'm happy to see that this bill has come forward, and I know that a number of the members of our caucus as well as the government caucus sat on that select special committee on real property and heard from a number of Albertans that wanted to see adverse possession, you know, essentially limited or eliminated through legislation. I'm glad to see this come forward. One of the things that I think – of course, in second reading we're talking about things in a high level. I have read the bill, and there are a couple of questions. It seems to align with a number of the recommendations that have come forward through a number of bodies, including the Alberta Law Reform Institute.

The Alberta Law Reform Institute issued I believe it is in 2017 – they did a fulsome kind of analysis of adverse possession, and they issued a final report that sort of outlined the recommendations about the pieces of legislation that would have to be changed and amended to address these issues around adverse possession. Further

to that Alberta Law Reform Institute Report, we know that, you know, our Select Special Committee on Real Property Rights went out and consulted and basically reached similar conclusions about how legislation should be amended.

One of the things that I, you know, was looking for – and I want to give credit, actually, to an article that was written on September 10, 2019, by Stella Varvis. It's sort of a blog post put on *ABlawg.ca*, which is a law blog. Shout-out to anybody who watched *Arrested Development*. Bob Loblaw's law blog. No? Okay. Anyways, it's a law blog written by University of Calgary law professors on various issues. Stella Varvis wrote a blog post about the end of adverse possession and sort of outlined a number of things that we should look for when it actually comes time to do that.

The first issue that should be addressed is that, you know, we know that in adverse possession usually there's a 10-year limitation period. An individual has to have occupied it for at least 10 years, and that occupation must be exclusive, open, notorious, and continuous. That's the sort of standard. Stella Varvis, in her blog post, was essentially saying: okay; look, if we're going to be eliminating adverse possession through statute, we need to make sure that we aren't sort of messing with – it's probably not the term she used; it's not the term she used – any adverse possession claims that had come before this law had come into force. It's basically saying that if there have been adverse possession claims that have been made prior to any amendments being made, they should be held in force, and the same should apply for any pending claims. If there are any matters before the courts at the time that this bill would, say, perhaps be proclaimed, then we would ensure that those claims could proceed under the previous common law.

I believe that that is addressed in the bill, in Bill 3. My reading of it suggests that section 1(3) of Bill 3 does seem to address that by basically saying that, you know, when this bill would come into force and that any – I'm looking at the addition of section 74.1 to the Land Titles Act and subsection (2), which says that "any successful claim to quiet title recovered under the former provision continues," which seems to suggest that, yes, any claims that happened before the act comes into effect would be continuing. That seems to address that concern as well as that any ongoing claims would also continue. So I believe that appears to be addressed.

These are the kinds of questions I'm posing with the hope that perhaps the Minister of Justice could also comment as to whether his reading is the same, that it does address these issues. I assume he is capable of reading the bill and understanding it.

Another issue that was raised in this law blog was about whether claims to recover possession of real property can be brought in at any time. Section 69 of the – and I'm going to remind myself – Law of Property Act, yes, talks about what happens when somebody who does not legally have title to land but has been occupying and using the lands for a period of time and made improvements, significant improvements to the land. In that case it would be, for example, somebody has, through a mistake, perhaps not intending to deliberately try to possess somebody else's land, occupied on land and built something. Maybe they've built a building, a farmhouse, a house, some sort of improvement . . .

Mr. Dach: A well.

Ms Pancholi: . . . a well, dug a well. There's a good example from the Member for Edmonton-McClung.

But they've actually invested and improved on the land. What happens to that person's claim to that property? Of course, there needs to be some clarity as to how that's addressed, and one of the suggestions was, of course, that we ensure that, similarly, there is no limitation on which an individual who has actually improved the

land may be able to recover their title to that. Again, that limitation does seem to be removed in Bill 3, but I do seek clarification from the Minister of Justice to confirm that. It does seem to be – I'm looking on page 5 of the bill, I believe it is. Yes. It amends the Limitations Act section 3(2), which does seem to suggest that there is no limitation period on a claimant who has made improvements to the land. That, again, seems to be addressed by the bill.

3:00

The fourth issue is that the blog suggests that there should not actually be significant changes to the definitions in section 69 of the Law of Property Act, that essentially it doesn't change who is defined as somebody who has an interest and that there's no requirement that there be proof that the individual had a mistaken belief. Again, I believe that that is addressed in the bill, but I would seek confirmation from the Minister of Justice on that issue.

The next thing that I sort of looked at, Madam Speaker, was the recommendations that came out of the Select Special Committee on Real Property Rights, of course, that members of both government and opposition caucus were part of, because they did come forward with a number of specific recommendations around adverse possession. When looking at this final report, which was issued in June of this year, the committee advised that it recommended adopting the Law Reform Institute recommendations that I referred to earlier and indicated that, yes, they support a recommendation that the Land Titles Act be amended to abolish any future claims of adverse possession as well as that the Law of Property Act be amended to provide that an assign does not have to prove the belief of the person who made an improvement.

That, Madam Speaker, refers to the idea that when somebody has made improvements on the land and that maybe gets passed down to somebody else, a family member, because when we're talking about this kind of possession of land, we're often talking about it going back decades and generations, it's not the responsibility of an heir or an assign to follow to actually have to prove that, you know, their parent, their grandparent, their great-grandparent had a genuine belief. They don't have to prove that; it's simply assumed because that's often an impossible thing to prove. That's what the committee recommended, that it not be required to be proved, and I believe that's reflected in the bill and that the limitation periods be addressed as discussed in that law blog that was issued. That's another recommendation that came from the committee. Once again, it appears that that has been addressed.

I outline this, Madam Speaker, only to say that, you know, those are the checks and balances that we would normally go through when we're looking at these kinds of changes. We would look at what committee work has been done, what consultation has been done, what, shockingly, the experts believe on something, and in this case – right? – the experts from the Alberta Law Reform Institute have done the analysis. I believe in following expert advice and considering that seriously. Again, that should not be a controversial statement, but it seems to be more and more controversial with this government and this Premier.

You'd look at all of those pieces. You'd look, of course, at the landowners themselves and their feedback, and I believe that was very much the work of the committee, to travel around and do that kind of analysis and listen to landowners and hear what their concerns are and then to draft legislation that meets those recommendations, legislation that has thoughtfully gone through all of the proper processes: legislative review committee, cabinet committee, all of those things, the rigours and processes that we would expect from strong legislation. That's what we'd want to see. I can say that it appears that with Bill 3 that has happened. I can't say that that's happened for all the bills that have been brought

forward by this government and this Premier so far this session, but certainly in this case it does seem to reflect that.

Now, that doesn't mean that there aren't still questions for implications for, for example, the courts. If we are going to remove this common-law principle of adverse possession, are there implications for the courts, especially when removing the limitation periods for claims related to improvements that have been made on land? Has any analysis been done, you know, by the government as to whether or not there will be any implications for the court system? I think this is an important question to ask, Madam Speaker, as we know that our court systems continue to be under enormous strain with limited resources. What are the implications? Are there any? I think that's a question to ask.

The other key issue that I would raise, Madam Speaker, which – I would have to go back, and perhaps those members who were on the Select Special Committee on Real Property Rights can speak to this when they have an opportunity. I'd like to know what the feedback was from Indigenous groups such as First Nations and Métis associations about what consultation was done. You know, when we're talking about adverse possession, we're usually talking about adverse possession on private land, not Crown land. There are obviously different considerations that happen on Crown land, but I would want to be satisfied that we have consulted appropriately and that there has been an opportunity for feedback and assessment of any lands where potentially Métis and First Nations may be occupying to be sure that there are no implications here that may affect their treaty rights. Again, I will put that to members of the caucus, government and opposition, who may have sat on committee, to say what feedback they would have received, because I didn't hear any reflection of those comments from the Minister of Justice when he introduced this bill for second reading.

Madam Speaker, as I mentioned, this is really a bill that I think we can fundamentally support with some questions answered. We want to bring our legislation with respect to property rights in line with what other jurisdictions have done. We know that this is an improvement over Bill 206, which was a private member's bill that was brought forward that didn't quite think through all of these pieces regarding limitation periods, and it appears that, you know, the committee's work as well as this bill are an attempt to address some of the challenges that were brought forward in that private member's bill.

You know, we think it's deeply important that we have clarity around a lot of things related to property rights, economic investment, and making sure that we know that property owners, both landowners as well as businesses, require certainty. It's a principle that we fundamentally agree with, and particularly now, when Alberta is at position, at a time of potentially great opportunity, certainty is more important than ever. That's what we hear loud and clear from the business community, from the oil and gas sector, from those who have major projects. They want to know that there is certainty. That's why we do not support any legislation that's going to bring greater chaos and uncertainty to our economy such as Bill 1 brought forward by this government.

Our principles have been pretty clear on this, Madam Speaker. We know which way the economy needs. When we talk to all of those individuals – now, I've been doing this work; I know my colleagues have as well – across the province, they want to have some certainty with respect to their rights, and they want to have certainty with respect to investments and the growth of their oil and gas sector or agriculture or forestry. Whatever the sector, we need that kind of certainty.

So this is a bill that I believe, Madam Speaker, we will or at least I can say that I will support. I appreciate the opportunity to speak to

it today, and I look forward to the opportunity to speak to it again at further debate.

Thank you very much.

The Deputy Speaker: Are there others to join the debate on second reading of Bill 3? The hon. Member for Edmonton-Manning.

Ms Sweet: Well, thank you, Madam Speaker. A pleasure to rise and to speak to Bill 3, the Property Rights Statutes Amendment Act, 2022. As a member of the committee that did travel the province to do consultation on the potential changes that were going to be under what was Bill 206 and now have been drafted as Bill 3, we heard quite a bit of feedback in relation to a variety of different things that could be changed. I am pleased to see that Bill 3 does incorporate the recommendations that came out of the final report and that it looks like there will be a shift to address some of the concerns that were brought forward.

I think one of the things that I also appreciate about Bill 3 and something that all members of the Chamber can appreciate is that this was a bipartisan committee where we were able to travel the province together and do consultation together in a collaborative way and have something that was created that, I think, addresses the concerns that were brought forward. You know, the opposition and the government do have the ability to work together and to come up with something that addresses the concerns that Albertans have. My hope is that the government will choose to listen to the opposition on some other things and maybe withdraw their other bills.

[Mr. Orr in the chair]

But in relation to Bill 3 I have a couple of questions that I'm hoping at some point the minister will be able to address, and part of that was around the submission that the RMA submitted to the committee. I don't see it. In fairness, you know, I'm still going through the bill and trying to make sure that everything is in there.

3:10

One of the things that was brought up by the Rural Municipalities association was the concern around the financial compensation when it comes to the various districts that municipalities have to develop when it comes to land management and the concern that the compensation for landowners, if the regulation is changed around the impacts of private property rights or removing this land-use planning authority, could become problematic for municipalities. Now, I don't know if that is addressed in this piece of legislation, if that has been acknowledged, or if we are saying that the financial remedy component that exists in the bill would be primarily between two landowners side by side or something that has been structurally built. But we do know that there have been concerns in the past that were brought up in regard to a quarter section of land that's been used or had had a highway expansion zoned for it or an intersection potentially being built and then a dispute occurring between who actually owned that land, whether it was landowner A or landowner B, and who was going to be compensated for the loss of that section.

The question, I think, again, goes back to: how will this work in practicality when we're looking at municipalities trying to do appropriate planning? You know, there will be concerns around economic growth, looking at the fact that there are also the concerns around external impacts like noise and pollution, traffic around certain areas. How will that be addressed under these pieces of legislation to ensure that municipalities have the capacity to be able to grow and work with their REDAs and incorporate their expansion or their growth within their communities while also

ensuring that we are protecting landowners' rights? I do have that question.

I do also have the question in regard to the financial compensation piece, which is the section on the Law of Property Act. Section 69 is repealed. Then we have section 69(1), lasting improvements or buildings made on wrong land. I am anticipating that this is just going to be able to grant the courts the ability to move through all three of these different components, whether it be that the order would be that the improvements be removed or abandoned, that an easement be put and limited in time, or that the improver acquire the land on which the improvements are made from the registered owner of the land in the amount and what terms the court thinks.

[The Deputy Speaker in the chair]

As long as we are working in a way that there is an agreement by the courts that either the structure is removed – I think the example that my colleague mentioned was around whether or not it would be some form of a well or a fenceline. We could be looking at, again, if we're talking about expansion of roads – some of that is pretty permanent infrastructure; it's not as easily removed – ensuring that there is compensation that is appropriate.

I am curious. When the minister is able to respond at some point, I don't believe that there is any type and if it would be a regulation or not around what those compensation levels would look like. Is it going to just be an assessment of property value? Is there going to be impact? What will the scope be in the ability to ensure that that is happening and that the dispute is being able to be resolved? I know we heard some examples at committee of an ongoing dispute around a fenceline that was actually within city limits. It was between two homeowners, and there was a significant dispute between what side the fence was on and whose property it was on. This dispute has been going on for it sounds like a significant period of time. I think they were at, like, 10 years of trying to work with the city on getting the zoning re-evaluated and property lines reassessed. I couldn't even imagine the relationship between the two neighbours in relation to trying to live side by side while disputing whether or not the fence is on their property or someone else's property but that it was something that – it just continuously kept coming up and has been going on for a significant period of time, so it would be interesting to hear, you know, sort of the remedy of how this would work in a piece like that.

Now, I know we had some other submissions that also came in through CAPP more specific to the bill that we were currently consulting on, which was Bill 206, which, you know, dropped off the Order Paper and quickly became Bill 3. Well, not quickly; I think we spent quite a few months travelling the province. But there were some recommendations, I think, that came through that are not reflected in the bill, and I think there's fairness in the submission that some of the pieces that were submitted to the committee were outside the scope of what this piece of legislation really was intended to do.

But there were some comments made around the burdens of the AER and trying to ensure that there is no duplication of effort between what business and stakeholders have to go through and whether or not this piece of legislation would actually impede or impact any regulatory or policy shifts through some of that evaluation or regulation that needs to be done. So I'd be curious to hear from one of the ministers in relation to if there is any overlap or any potential conflict between what, let's say, for example, the oil and gas industry already has to go through in getting approval for, you know, being able to build a new well or looking at pipeline or any of those kinds of things, if this will create a second level that they will have to then work through in relation to what they're already doing with the AER.

I think we would see that similarly with our grazing lease holders, and of course some of the forestry industry may have some questions in relation to this and just how those land management agreements are going to be reflected. How does this bill interact with those pieces of legislation? Of course, we want to ensure that when we're looking at property rights – and this piece of legislation is addressing the concerns that were brought forward at committee, but also we want to make sure that it hasn't now created a second stream. Is there a way to ensure that policies or regulations are being streamlined between this piece of legislation and anything else that currently exists when it comes to working through those approval processes?

I would be curious to hear from the Minister of Justice if he consulted with his counterparts in the ministry of agriculture, in the Ministry of Energy as well as the ministry of – what is it now? – forestry and protected areas? [interjection] Oh, yes. Sorry.

Member Irwin: Yes. Thank you so much to the Member for Edmonton-Manning. I'm just blown away by her knowledge on this, and I know she was one of the committee members as well. You know, I just thought I'd jump up when she mentioned – she's been asking a lot of really important, critical questions of the Justice minister, so I am hopeful that we will hear from the Justice minister. We've got a lot of questions for him.

I'm also hopeful that we'll hear from the members opposite. You know, this is one of their bills, and they've said that many of them are quite passionate about this. They mentioned it in the opening remarks, that they're hearing from a lot of their constituents, so it's a little intriguing that so far it's only been NDP members speaking to this bill. I honestly want to learn more about it. I can admit that I'm no property rights expert, so I would love to hear from the UCP members about, you know, what the impetus is and what they're hearing from their constituents. Again, admittedly, I'm no expert on this. That would be my request.

3:20

Ms Sweet: Thank you, Member.

Actually, maybe just for a point of clarity, Madam Speaker, for myself, is the chair of the committee allowed to speak if you've taken on a different role?

The Deputy Speaker: Sorry. What do you mean?

Ms Sweet: Well, the member that was the chair of this committee is now, I believe, a parliamentary secretary, so are they allowed to speak to the bill? Just out of curiosity, not that I'm requesting that he does, but I can't remember what all the different rules are.

The Deputy Speaker: Yeah. Of course, he can speak as a member, just like any other member, for his allotted time frame on any number one stage of the bill or amendment.

Ms Sweet: I couldn't remember if parliamentary secretaries were allowed to speak.

The Deputy Speaker: But perhaps what you are seeking is best done in a committee stage process for more of a back and forth, and you'll get what you seek. But he can speak when he has time.

Ms Sweet: Thank you. With all the changes I wasn't quite sure who is considered a private member and who's part of executive and all the things now.

The Deputy Speaker: I'll clarify. In question period, no, that wouldn't be allowed in that relationship, but certainly in this Assembly you can do whatever you want, almost.

Ms Sweet: Oh. Well, let's see. Thank you, Madam Speaker. Well, that could be fun.

Anyway, going back again to some of the other questions that did come up, I do recognize that this is intertwined with a variety of different ministries in how this can be interpreted and how this can be impacted. You know, coming from being in government, I do know that you can create one piece of legislation, and then that will sometimes have trickle effects into other pieces of legislation, and sometimes it works and sometimes it doesn't.

Again, I am hoping that at some point we'll get some of the clarity around specifically, I think, some of the submissions that were provided to the committee. You know, we had some agricultural producers that also submitted to the committee asking for some clarity around the surface landowners regarding their rights when it comes to pore spaces and specifically the groundwater, expanding of property rights, the right to sell, protect, and the right of compensation, which I think is covered in here.

The pore space question, though, which came up from a variety of different stakeholders: pore space wasn't just from crop producers, but pore space came up from our Western Stock Growers', Grazing Leaseholders Association. Maybe I missed it, and I'm happy to get clarity again, but I don't know if this question was answered or if the government has a plan around that. Maybe it's something that's still in the works, or maybe it's not in the works. It is kind of an ongoing conversation, I think, when we start looking at carbon capture and what that means.

The Deputy Speaker: Other members to join the debate? The hon. Member for Highwood.

Mr. Sigurdson: Well, thank you, Madam Speaker. I'm actually really excited today to stand up in support of Bill 3, the Property Rights Statutes Amendment Act, 2022. As the member was stating previously, I was the chair of the Select Special Committee on Real Property Rights. We engaged this work. We submitted, of course, the report midsummer. I was extremely excited about the opportunity to be able to be the chair of this initiative, travel around the province, and engage in this very important conversation which does surround property rights, which many of us expressed as actually being one of the foundational pillars of our freedom in our country.

Throughout that process we engaged in many different ways. You know, we had some limited capacity at times during COVID, but of course we did have the opportunity to be able to travel around to locations throughout the province – north, central, south – and allow individuals to be able to approach us and bring to us the issues that mattered to them most.

What I would say is that throughout that process adverse possession came up numerous times, and what I think I found was shocking more than anything was that Alberta was an outlier in this area. Adverse possession, this archaic law better known as squatters' rights, had been abolished in many other provinces. With that, we recognized: what was the purpose of this? Why was this still a thing in a province like Alberta, that, of course, had been so extensively surveyed that there was really no reason for this kind of archaic law to exist anymore?

With the written submissions we saw many specialists that spoke to the impacts of what can happen in adverse possession. Anecdotally, even in my own constituency I heard stories of a farmer that approached me and had mentioned, you know, his experience and how he almost lost 48 acres of land where his neighbour had rebuilt a fence. It seemed insignificant at the time, but when you consider the length of this fence – it was only off roughly just over 20 feet, but when you calculate the amount of land over the length of that fence, it equated to a substantial

number of acres, which is really important for a farmer to be able to have in order to be able to sustain his farm.

You know, it was those types of stories that really brought this legislation to the top of the pile. It just was so outdated, and we kept hearing this over and over again both in the written submissions and the virtual meeting that we also had, that we hosted here in Edmonton. We had a lot of people call in and speak about adverse possession and how it needed to be removed as soon as possible. Even one individual shared stories that this isn't just a rural issue, that this practice of adverse possession has been enforced in urban situations. When I went and approached this individual, we unpacked this conversation, recognizing that he lived in an urban setting where a fence had been moved for longer than 10 years. The neighbour had claimed that land, and it actually put his own house – his own house, the house he lived in – into noncompliance, which severely would impact his evaluation of his property when he goes to sell.

When you think about these instances and you think about what the impact is on these landowners and consider that for a lot of people in Alberta, their largest investment is their home – this is where people put the bulk of their money for their entire lives. This bill, Bill 3, Property Rights Statutes Amendment Act, 2022, that does abolish adverse possession, is protecting landowners, and it's protecting one of their greatest investments. I think that what we need to focus on here right now is doing that. You have to be able to protect landowners when it comes to their property.

This is a fundamentally easy change, considering the archaic nature of this bill and the fact that multiple bills, through the private member process, have actually been introduced in this Legislature. So that gave us a foundation, I believe, as a government to be able to go back to the minister and say: "You know, there have been multiple attempts on this. This is an extremely outdated piece of legislation." It protects property owners and their largest investment in many cases, which is their property.

I think this Alberta-led conversation is extremely important. With that, members opposite also partook in this engagement throughout the province. They were there to be able to see individuals come up on a variety of different issues. I consider Bill 3, you know, an important part also of our platform commitment as a UCP government. One of the things we promised Albertans we were going to do was to look at how we were going to continue to strengthen property rights and protect them, being the fact that it is one of those fundamental pillars of our freedoms, of our democracy here in Canada. With that, of course, we heard a lot of different issues. This one just presented itself and kind of rose to the top of the pile first and foremost because of how outdated it was, because of how many individuals had approached us on the situation, on the impact it would have for the loss of value of land and actually loss of land itself.

3:30

We've said it through and through. Farmers, when it comes down to it – you think about how many miles of fence that a farmer can have. It's pretty hard for him to be checking if any of those fences have been moved, and even the ability to be able to survey that is a cost to those individuals. With adverse possession in place, I mean, the amount of time and effort a person would have to put into ensuring that he's not going to lose land if fences are moved is just outrageous. We want our farmers focused on what they should be doing, which is producing high-quality products, which is what Alberta is so well known for, and putting foods on the table for not just Albertans but Canadians and the world.

This was a learning experience for me as the Select Special Committee on Real Property Rights, and as the chair it was a huge

learning exercise. Though this bill is simple in essence, you recognize that it has three overlapping pieces of legislation that it does affect in order to have the full protection. I have reviewed the bill and spoke to the minister directly, and I do believe he's accomplished that quite well considering the overarching legislation that currently exists in the province to be able to ensure that this practice doesn't continue. I'm really happy today to see that this is a priority here in the fall.

You know, bills like this are incredibly important for the future of Alberta. Even the thought of adverse possession, though very uncommon, when you do mention it to the average individual, they're actually, I think, blown away that this is something that still can exist in today's society considering the technology that we have to be able to survey our land, to stake our land, just the thought alone that because a fence is placed in the wrong position for a period of time, somebody can just all of a sudden gain the use of that land permanently, take it away from somebody else. So I'd like to thank the Minister of Justice for putting this as a priority in Bill 3 and bringing it to this House. I think this is going to have an incredible impact for Alberta moving forward, and I'm glad to see that archaic pieces of legislation like this are removed and that this government continues with its platform to continue to protect and strengthen property rights.

Thank you very much, Madam Speaker, for my chance to be able to speak to this incredible bill.

The Deputy Speaker: Are there others to join the debate? The hon. Member for Edmonton-Decore.

Mr. Nielsen: Thank you, Madam Speaker. Happy to rise this afternoon, provide some comments this afternoon around Bill 3, the Property Rights Statutes Amendment Act, 2022. You know, I do appreciate the Member for Highwood for jumping up and providing some comments. It's nice to get that back and forth a little bit, you know, because it was supposed to be a joint effort. The whole topic of property rights has certainly – let's just call it what it is. It's dragged on for far too long, you know, past this government, past the former NDP government, past that. It's been going on for a while, so it's nice to see some results that are actually happening.

Now, of course, I would be a little bit remiss, Madam Speaker – I think that, as one of the members of that committee as well, there were some missed opportunities maybe, which presented themselves a little bit more when we had the chance to do the public engagement and the on-site engagement as well. I know that there were some suggestions around maybe some acts that should be considered that, unfortunately, I think the committee didn't when thinking about its recommendations, its deliberations, and how it could better serve Albertans.

Just one quick example of one of the acts that wasn't considered was the Water Act. I know, from a couple of the engagement sessions that I attended, water came up around the property rights, potentially. I can't remember the location – it might have been Eckville – where a gravel pit was close by a property. There were concerns, of course, quality of life around the dust and whatnot. That was certainly brought up from that individual but also potential contamination of their well. You know, had we looked at giving ourselves the ability to consider that act, we would have been able to have a lot more information to be able to come to some recommendations. Certainly, water did come up several times. Now that I think about it, when we had that recent issue with a potential I think it was a feedlot near one of our lakes, certainly having to consider the Water Act might have been helpful in some of these. Again, just a missed opportunity on our part.

Now, there was one thing I did want to point out because my friend from Edmonton-Whitemud had pointed out around potential

consultations with Indigenous, Métis. I guess I was dismayed that we weren't able to go do on-site consultations. I certainly know the pandemic played a very, very large part in making that extremely difficult. I really would have liked to have seen the opportunity to get that important input from those folks for us to consider in terms of recommendations that we gave to the government. Again, just kind of a little bit of a missed opportunity. I don't know. They always say that hindsight is 20/20. Could you have done something better in terms of trying to reach out, make those connections? You know, it's easy to shine that crystal ball and try and come up with an answer.

As the chair had mentioned, adverse possession did come up quite a bit. That was certain. It was definitely a fascinating experience for me. I'm certainly no expert when it comes to property rights. Some of the scenarios that people brought up during the consultation process and the in-person events were quite the learning experience, to say the least. I know one of the things that actually came up several times – I think it was the in-person meetings that I know I was able to attend; I couldn't get to all of them – was around damage to properties, I guess maybe more specifically fencelines with hunters entering onto properties to go hunt and, unfortunately, damaging the property and owners stuck with the bill to try to replace that. The chair had mentioned, you know, that trying to keep track of all of that fenceline is hard enough as it is, but when you do keep track of it and all of a sudden you have a big hole in your fence, that's certainly a problem. I would have liked to have maybe seen something in Bill 3 around that because that did come up several times from individuals and people that would write in to our offices because they knew all the members of the committee.

Also, I think it might have been Eckville again, too, where there was actually a little bit of a confrontation between one of the landowners and some hunters. That was certainly a little bit disturbing, to say the least. You know, it would have been nice if, again, we could have maybe had the opportunity to see something about that in Bill 3.

One of the other questions that's kind of popped up in my mind, because I know this now provides access to the justice system . . . [interjection] Actually, I see a member across looking for an intervention. I'm very excited to let you speak up. Please.

3:40

Mr. Hanson: I just wanted to comment. You said that you wanted to see something added into this bill. I think one of the things that I heard as part of that committee was the need to keep this adverse possession as a single, stand-alone bill. It's been introduced many, many times over the years in the province as part of an omnibus bill, and it has always failed. The number of times that it was put forward as a single, stand-alone bill by a private member, it ended up falling off the Order Paper. I would hate to see that happen again. I'd just like you to comment. I'm sure you heard that same thing from the previous MLAs that came and spoke to us at those meetings, that they were just concerned about: please, just make it a stand-alone and get it through.

Mr. Nielsen: Thanks, Madam Speaker. Great comment. Maybe I'll take that opportunity to make that plug, you know, for: maybe we could find some way to extend the ability for the House to consider more time for private members' business and hearing all private members' bills, not necessarily kind of pushing them to the bottom of the Order Paper.

You're right, yeah. We did hear, again, that focus on adverse possession, how many times, you know, it was tried and died on the Order Paper, which was unfortunate. Obviously, with a government bill we're able to address that a little bit more.

Again, as a government bill, you know, I've seen bills with not a lot of pages. I've seen bills with a huge amount of pages. Just, I guess, an opinion, maybe a missed opportunity, maybe not: at least we are dealing with, as the chair said, the one that did rise to the top of the list, which is the adverse possession. There are just opportunities, I think, where we could have expanded that.

The other thought I had was around people being able to access the court system in terms of trying to seek restitution. Hopefully, that never, you know, happens too often. We know it can be a little bit of a costly endeavour, going through the court systems, trying to get a decision.

I guess one of the questions I would have to the Justice minister is around, you know: should we see a rise in these cases heading to the justice system, what kind of pressures might that put on our courtrooms? We do know that they are a little bit strained at the moment, trying to get through things. Albertans are excited that they're finally going to be able to seek justice, to be able to get some compensation, and then it gets bogged down in the courts, and eventually we get to it, and there's yet more waiting. We want to try to reduce that waiting period. I'd be interested to see what the Justice minister has heard on that from our fantastic folks in His Majesty's court system and how, potentially, that caseload could be affected.

I think that covers most of the stuff I'm hoping to cover at this moment. Again . . . [interjections] Oh, I've never had so many intervention opportunities, Madam Speaker. I'm beside myself here. I think I saw two. Maybe I'll take advantage of both of them.

To my friend from Edmonton-Mill Woods.

Ms Gray: Thank you very much to my colleague from Edmonton-Decore. I appreciate what he's added to the record on this debate, particularly given his role as a member of that Select Special Committee on Real Property Rights. I appreciate that we've heard from the chair. We heard from the Member for Edmonton-Manning. Reviewing Bill 3 in conjunction with the report on the committee, it seems clear that the committee received presentations from a number of different stakeholders, both written submissions, oral presentations from stakeholders who were particularly invited to give their perspective and also oral presentations from members of the public at public meetings. Having listened to the comments, I just was curious to know more about the member's experience travelling in Alberta and hearing from members of the public on these issues and how well canvassed they were, what people came in to stress most.

Mr. Nielsen: Yeah. Thank you for that. Certainly, there were some diverse stories that were brought forward. Some had mentioned adverse possession coming up, damage to property, you know, with some hunters, certainly not all of them, but there were cases where damage was occurring. That kind of came up a little bit.

Potential gravel pit locations: like I said, I believe I heard that at the Eckville meeting. There was concern from a property owner around the location of a gravel pit. When they first bought the property, they were under the understanding that nothing like that was going to be close by, let alone I believe it was literally across the street from them.

My comments around water. They were concerned about water contamination. I know we heard some comments around – I'm trying to remember which section it was. Maybe it was Edson. I believe we heard some comments down in that area, some of the same things again, with adverse possession and whatnot coming up.

I think we had the ability to take in those comments, and had we expanded maybe the list a little bit, it would have provided the committee a bit of an ability to be able to consider more of the

comments. You know, as was discussed earlier, the attempts at trying to fix adverse possession over the course of the years failed because it was private members' business and the constraints that we have around that. It's good to see. Like I said, could we have maybe had the opportunity to add some other stuff or maybe even introduce another bill that also included some of the things that the committee heard, I think it would have been an opportunity to address the concerns of Albertans that we heard.

I'm looking forward to further debate, getting a chance maybe in Committee of the Whole. As we know, second reading is not that good for being able to jump back and forth with questions and comments. Hopefully, the minister will get a chance to also join us during Committee of the Whole, answer some of those questions, provide some of the comments, feedback, perhaps some secondary consultation.

Like I said, the committee wasn't able to consult with First Nations, Indigenous, Métis, I think, as fulsome as we could have. Perhaps the minister has had the opportunity to be able to speak with all of those communities. What kind of comments did he hear back around that? You know, are some of those addressed in Bill 3 to make sure that treaty rights aren't being either bypassed or stomped on in any way? What was the feedback, potentially, from those communities around Bill 3 and what we could have seen further had we had the opportunity to be able to hear in person from those communities?

Again, you know, with just the circumstances at the time and the situation, the committee had to ask for an extension because of the health restrictions that were in place and the concerns there. We weren't able to meet as soon as we had really hoped. That's nobody's fault. It was just the situation at the time. Hopefully, we've managed to maybe make up for some of those.

I look forward to more of the comments from members through discussion. Likely I'll jump back up as I remember things from our tour and what Albertans were looking for in terms of changes to property rights.

The Deputy Speaker: Are there others to join the debate? The hon. Deputy Government House Leader.

3:50

Mr. Hanson: Thank you very much, Madam Speaker, and thank you to the member for your comments. It was quite enjoyable to be part of that committee and get out and meet some people and get to travel the province. We do have a beautiful province, and we did manage to get all over, I think, to just about every corner of it. I thank the chair for, you know, doing a great job. I stood in for him, I think, at Edson at one point.

I'd also like to thank all the security team that came with us to all these events and the staff that made all this possible. When you talk about attendance at these things, there's a lot that goes into organizing these town halls all over the province, and you never really know who's coming. You get a few submissions from folks that are going to show up, and then, you know, there were times where 10 minutes before the meeting was supposed to start, there was the committee and security and staff, and then finally people would start trickling in. So they were quite well attended.

But I think one of the big things about it was that we did hear quite clearly that this had to be a stand-alone bill, so I hope that the opposition understands that. The people that attended the meetings and put submissions forward to the committee understand that we're not ignoring all the other things that came up there and the importance of making sure that this was a government bill, not a private member's bill. It was a stand-alone bill so that it didn't get

lost in the shuffle of a whole bunch of things. Those were the important things.

With that, you know, just some brief comments. A real property report is something where, if you bought or sold a piece of property lately, part of the process is getting a real property report. Sometimes it can be a fence that's been there for 40 years. When they do the survey, it's, like: uh-oh, this fence is out of place. Even if it's a foot or two feet, a 150-foot lot in Edmonton – some lots can be up to \$100 a square foot. Now, who owns that \$15,000 piece of land? That's not really of any value to anybody, but it is part of the real property report. Those are the things that happen quite often. That's why this is important, to get this thing straightened out.

It happens quite a bit out in the country, too, where even municipalities used to, you know, to the best of their abilities, build the roads on the grid line. Now they've found that some of them are maybe six metres onto a private person's property, in the wrong place, and now they've got to go back and purchase that land off them. So it is very important that we recognize those things and give municipalities, especially, and property owners as well some way of remedying those situations.

I just had those brief comments to make, and with that, Madam Speaker, I'd like to adjourn debate.

[Motion to adjourn debate carried]

Bill 4

Alberta Health Care Insurance Amendment Act, 2022

The Deputy Speaker: The hon. Minister of Health.

Mr. Copping: Thank you very much, Madam Speaker. I would like to move second reading of Bill 4, the Alberta Health Care Insurance Amendment Act, 2022.

Madam Speaker, I appreciate the opportunity to discuss this bill. There are approximately 11,000 physicians in Alberta, who work hard each and every day to improve the lives of Albertans. Their tireless work and selfless commitment are truly appreciated. Now, since becoming Minister of Health, a top priority for me has been to focus on a collaborative relationship with physicians, looking at partnership and innovation. I have listened to physicians. I acknowledge the challenges the health system is facing and have committed to doing something about those challenges.

I was honoured to be at the negotiating table with the Alberta Medical Association, and I'm very pleased that 70 per cent of voting physicians supported the new agreement back in September. Madam Speaker, part of the new agreement outlines the government's commitment to repeal section 40.2 of the Alberta Health Care Insurance Act. This section of the act allows the government to terminate compensation-related agreements, and the bill before us proposes repealing this section, thereby revoking the government's ability to terminate its agreement with the Alberta Medical Association. This legislation is no longer required given the terms of the new agreement with the AMA. Repealing this clause follows through on our promise to the AMA and to physicians and is a further step forward in building our relationship.

Now, the government's new agreement with the AMA will help stabilize our health care system, target the areas of concern, and support Albertans' health care needs. With its significant investments this agreement provides a path forward to address the current challenges and issues brought forward by physicians during our conversations, and I want to take a few moments to go over some of the highlights of this very important agreement.

Now, the agreement covers four fiscal years: April 1, 2022, to March 31, 2026. Alberta physicians will continue to be among the highest compensated in Canada, with an average increase of 4 per

cent over the four-year term. The new agreement puts a strong priority on primary health care, including a sliding scale of rate increases, with the highest increases for family physicians at approximately 5.2 per cent. Lump-sum increases will be given to primary care networks of \$20 million in each of 2022-23 and 2023-24, and this is to provide additional support for primary care while modernizing Alberta's primary care health system work takes place.

With additional targeted spending, including new supports for rural physician recruitment, spending on family medicine overall will increase by approximately 8 per cent over three years. About \$750 million in new funding over four years is being invested to stabilize the health care system, including \$260 million in targeted funding. This targeted funding is going towards physician recruitment and retention, incentives for a physician to work in rural and remote northern communities, physician support programs, and funding to assist physicians with rising business costs.

There will also be 1 per cent rate increases for physicians in each of the next three years and a 1 per cent recognition lump-sum payment for the exceptional contribution physicians have made during the pandemic. Now, this lump-sum payment is worth approximately \$45 million, or roughly \$4,000 per physician. It will go to the AMA by the end of the year for distribution to their members. Now, we are also working with the AMA to implement the 1 per cent rate increase for 2022-23. This increase applies to fee-for-service and alternative relationship plan rates, providing an additional \$46 million to physicians. As outlined in the new agreement, the rate increase is heavily weighted to specialties facing the greatest pressure such as family medicine. We are working with the AMA to distribute these increases across and within specialties. Again, they will be effective April 1, 2022, retroactively and are expected to be finalized and be able to be paid out by March 31, 2023.

Now, the first three years of the agreement provide rate stability, with no market corrections for above or below market rates. Year 4 will see implementation of results from a comprehensive market rate review based on comparisons with Ontario-west jurisdictions. There will also be a global rate adjustment to reflect general economic and fiscal conditions at that time. There is a potential for binding arbitration for both the market rate review and the global rate adjustment should the parties not be able to agree on what's appropriate.

Additionally, there will be gainsharing in years 3 or 4, where the AMA can receive 50 per cent of any savings achieved by keeping cost growth below population and complexity. Physicians will have a shared responsibility to review compensation rates relative to market and help bring them into alignment with peer provinces. We'll be working closely with the AMA during the review process as well as during the global rate adjustment through joint committees, and we'll be working together as partners to address other key issues related to physician compensation.

Madam Speaker, I'm proud to say that our partnership even goes beyond this new agreement. We are working collaboratively with physicians on modernizing Alberta's primary health care system initiative, also known as MAPS, where Alberta's primary health care leaders and national and global experts are being brought together to identify immediate and long-term improvements to strengthen Alberta's primary care system. MAPS is about building on the strong primary health care foundation that exists in Alberta to create a system where everyone has access to a family physician or primary health care provider no matter where they live in the province. Modernizing primary health care will also help to ease pressures on our hospitals. Working closely with the Alberta Medical Association, primary care networks, and other primary care leaders across the province, three advisory panels are

addressing major issues, identifying key areas for improvement, and recommending both new opportunities and ways to ramp up existing strengths in our primary health care system.

Madam Speaker, we are also working with physicians as we implement the AHS reform plan. This work includes improving EMS response times, decreasing ER wait times and wait times for surgeries, and developing long-term reforms through consultations with front-line workers, pushing down decision-making within AHS. Decision-making will be restored to the local level and local health professionals. Regional innovation will be incentivized to provide more medical services, and more health care professionals will be attracted to Alberta.

4:00

As we look to the future, Madam Speaker, Alberta's government is committed to working with physicians as partners in improving our health care system. Physicians have faced significant difficulties in the past few years, so today I especially want them to know that Alberta's government is deeply appreciative of their critical role. Their voices and leadership are crucial to our health care system, and we look forward to standing side by side with physicians in the weeks, months, and years ahead in order to provide the health care services that Albertans deserve and Albertans need.

With that, Madam Speaker, I move second reading of Bill 4, and I ask all members of this Chamber to support this bill. Thank you.

The Deputy Speaker: The hon. Member for Edmonton-City Centre.

Mr. Shepherd: Thank you, Madam Speaker. I appreciate the opportunity to rise and respond to the minister's moving of second reading of Bill 2 – or Bill 4. Pardon me; I can't count. Bill 4, the Alberta Health Care Insurance Amendment Act, 2022, an innocuous name for a bill that is a sign of the failure of this government, a significant failure that has done significant harm to the Alberta health care system and Albertans' ability to access care.

I join the minister in thanking the 11,000 physicians who serve Albertans. I absolutely agree that a collaborative relationship with those physicians should be a top priority. However, it was not this government's priority when they passed Bill 21 in the fall of 2020 and awarded themselves the sweeping power to tear up the master agreement between the Alberta Medical Association and the government of Alberta.

The minister has said that he is bringing forward this bill today because that legislation that they passed that fall is no longer required. Madam Speaker, I would contend that it was never required. The government did not need that nuclear option, particularly given that the master agreement that this minister just congratulated himself and his government for signing could have easily been negotiated at the table in 2020-2021. It did not require the government tearing up a master agreement and embarking on a two-year campaign of attack against physicians in the province of Alberta, one that, again, has done significant harm to our public health care system and has hurt Albertans' ability to access care.

This government chose to press forward with an aggressive plan that certainly, to all appearances, appeared to be an attempt to break the Alberta Medical Association and pit physicians against each other, a cynical ploy, Madam Speaker, part of an overall aggressive posture which this government struck at that time and continued throughout the pandemic against health care workers and particularly the individuals that those health care workers elect to negotiate on their behalf and represent their interests.

Let's talk about how this came about, Madam Speaker. Let's look at a little bit of the history. As I said, in the fall of 2020 this government passed Bill 21, awarding themselves the power to tear up the master

agreement with physicians. Shortly after that or around the same time, the then Minister of Health, now Minister of Justice, put forward 10 proposals to the Alberta Medical Association for changes that he insisted were essential to cut costs and save dollars in the health care system.

That included things like making changes to the complex care codes that allow doctors to spend more time with their patients and ending the practice of good-faith billing, which allows physicians to be able to bill for looking after a patient even if that patient does not have their Alberta health care insurance card with them or have their number. That is something that is used significantly by physicians, for example, say, at the Royal Alex hospital here in my constituency when they are dealing with individuals who are living houseless and do not have ID. They insisted they had to impose a cap on the number of services a doctor could provide a day, also known as a visit cap. They insisted that they had to end coverage for drivers' medicals for seniors.

Doctors reached out to me. They expressed a lot of concerns, particularly family doctors, Madam Speaker, about the impacts this would have on their ability to continue to provide care. Particularly, rural physicians had deep concerns with some of the other things that this government was trying to force through around charging them for facility fees and other things that would make it harder for them to be able to practise in the community and in hospital, but these were things that the government insisted were so essential that they had to pass legislation awarding themselves the power to tear up the master agreement and went ahead and did so in February of 2020.

I apologize. I've been speaking of 2020, fall of 2020, with Bill 21. It was fall of 2019. In February of 2020 they tore up the master agreement. I apologize, Madam Speaker. This was a long war, so it's easy to get confused on the dates.

They proceeded after tearing up that agreement to go on an aggressive campaign against doctors on social media, accused them of being greedy, accused them of being entitled, skated right up to the line of accusing them of engaging in fraud on their billing. There was a government website under Alberta Health making these contentions, many tweets from the then Minister of Health, who now serves as the Minister of Justice, this as we found ourselves going into a global pandemic.

As we went into the pandemic, the minister talked about how happy he was about supporting primary care and the steps he's taking. Well, you know, going into that pandemic, family doctors in Alberta were begging this government to take action on providing them with a code to be able to provide virtual care because we were locking down and individuals were not able to go and see their family doctor in person. We were at the first wave. We did not know what the parameters were. That was the situation.

So this government said, "Sure, no problem; we will give you \$20 for a visit," which is half, approximately, Madam Speaker, of what doctors normally earned in-clinic. Other provinces were stepping up and providing fully funded virtual codes. This government told doctors: you can have half of what you normally make. They let that sit for weeks at the same time as they had just signed an agreement with Telus for their Babylon phone service for people to be paid full – doctors on Babylon were paid the full amount, \$37 for a visit, while this government was grinding Alberta family doctors down at half that rate for the same provision, the actual doctors of the patients, who knew their histories, as opposed to an anonymous walk-in doctor through an app.

That is what we had from this government towards physicians in the province of Alberta. We had a minister that went to yell at a doctor in his driveway. The push-back was bad enough that when this government forced its new physician funding framework through in

April, they ended up having to walk back portions of it on April 24 because their own MLAs pushed back so hard against their minister's wrong-headed approach and because of the feedback, the blowback they were getting from their rural constituents and rural leaders.

Multiple physicians across the province were threatening to withdraw service. You know what? A number of those physicians did end up picking up and leaving, Madam Speaker. We lost a number of family doctors across the province as this government continued with its war on physicians. They threatened the funding for physicians' benefits and support programs. They seized control of them from the Alberta Medical Association and then threatened the continuance of funding. These are for things like mental health supports for physicians in the midst of a pandemic. That is the position this government took and pushed for months, all empowered by what they passed in Bill 21 in the section that they are repealing today.

As physicians began to say, "Well, forget it; I am not going to work under these conditions," the Minister of Health, now the Minister of Justice, went to the College of Physicians & Surgeons of Alberta to demand that they change their rules to make it harder for physicians to be able to leave an abusive relationship. That is the context for the bill that we are looking at today. It's not just family physicians, Madam Speaker. This government continued up until this year to put pressure on Alberta Health Services to force contract changes on hospitals that on more than one occasion, to my understanding, led to near job action that would have impacted the ability for Albertans to access surgeries and required the direct intervention of this Minister of Health to prevent.

Hospitals like the Red Deer regional hospital are still not able to regain the surgical capacity they had before the pandemic due to a shortage of anaesthesiologists. You know, in March 2021 I spoke with physicians at the Red Deer regional hospital. They told me they'd lost about six anaesthesiologists in the previous three months. I spoke with another anaesthesiologist here in Edmonton. Just this past June he noted that we currently have, in his estimation, about 350 FTE anaesthesiologists, so about 450 actual but some of those are part-time. He said that's about 15 per cent short of what we'd need to get back to pre-COVID capacity.

4:10

He noted that, in fact, we have continued to lose anaesthesiologists from Alberta to jurisdictions like B.C., Vancouver, Victoria. He said that it's about 12 anaesthesiologists in the previous year to year and a half. Other jurisdictions are actively headhunting those positions from Alberta, and they were leaving in part due to the chaos created by this government, by their decision to pass that element of Bill 21 and go on their extended war against physicians. Indeed, I've even heard reports that the Royal Alexandra hospital here in my constituency will be short about two anaesthesiologists through till next September.

The fact is, Madam Speaker, that the deal that this minister signed – now, I will give the minister credit. This minister did work hard. He had to because he inherited a mess. He inherited a flaming Dumpster left behind by the now Minister of Justice, former Minister of Health. This minister indeed had to spend those two years undoing that damage, and it was significant damage. I would say that that damage is yet to be fully repaired either in terms of the damage it has done to our health care system, Albertans' ability to access care, and indeed trust with physicians in this province.

To be clear, the minister talked about how happy he was about the level of support he got for this agreement. Let's not forget the agreement that was brought forward by the previous minister and was soundly rejected by physicians because they did not trust this government. Indeed, this minister was left with that mess to have to clean up. I will give him credit for getting to that 70 per cent support of the physicians that signed.

Certainly, I am happy for physicians that they are in a better position. That lump-sum payment for family doctors is certainly welcome, Madam Speaker, but it does not make up for this government grinding them down throughout the midst of a pandemic, refusing to provide them with the proper virtual code, which again was another step that I will say that this minister did move forward on and did put through on January 1 of this year, but again he was undoing the damage that his own government had done.

Now, we know we have tens of thousands if not hundreds of thousands of Albertans who are struggling to access a family doctor. The minister rose and spoke about bringing family doctors into Lethbridge today. That's wonderful. I look forward to seeing those doctors actually getting out and working in the community, but it would have been far better if they'd never been driven out in the first place.

The minister has talked about the work that he is doing with Alberta Health Services to recruit anaesthesiologists to the province of Alberta. I believe him. I believe they are in fact doing that work. Now, talking with a local anaesthesiologist, that work has been incredibly difficult and continues to be incredibly difficult, and it is because of the damage this minister and his government did before.

Again, I'm not discrediting the work that the minister is putting in. Absolutely, I believe he is working hard, and again, pretty much he has to. This government is simply making up the deficit, filling in the hole that they dug. That has cost Albertans.

Currently in the Bow Valley there is not a single doctor that is accepting new patients. We're still waiting for those physicians to get in and fill that significant, gaping deficit in Lethbridge. There are still clinics that have closed and have not reopened. We have significant challenges across our system.

Of course, we are seeing those impacts now as we see these surges in ERs across the province. We're continuing to see the challenge now because Albertans can't get to a family doctor, so then they turn to their local emergency room. Unfortunately, that leaves us in a position, then, where those emergency rooms are overcrowded. They're overflowing. We do not have the capacity because, of course, this government, through its policies during COVID-19, exhausted the health care workforce, not just doctors, nurses, and many others throughout the system, and we have a critical staffing shortage in pretty much every area.

Now, the minister, again, I'm sure if he were to rise now, would point out that this is the case in every jurisdiction across Canada, that there are critical staffing shortages, but that does not excuse the fact, Madam Speaker, that at every step this government made it worse.

The fact that other jurisdictions are also struggling to find doctors does not give this government a good reason to go on a war against them and take all of the steps that I have outlined today, that aggressive posturing, that attempt at what could be colloquially called union-busting although, of course, the Alberta Medical Association is not actually a union, though certainly the government tried to paint them that way. The fact is that, yes, other jurisdictions are struggling, but Alberta is the only jurisdiction where the government has consistently been at war with physicians and has consistently attacked other health care workers over the course of the pandemic and, indeed, the majority of its term.

The minister can stand now, and he can offer thanks. He can talk about how much he appreciates what physicians are doing. You know what, Madam Speaker? I don't even doubt that the minister means it. My understanding and certainly from what I've seen of this minister and what I've heard from his work in the negotiations is he is a decent man. He is personable. He is genuine. But he was part of the government that voted at every single step to take each of these steps that occurred. He continues to sit directly beside the minister who

undertook so many of these detrimental actions, and I've never heard that minister offer any apology or acknowledgement of any of the actions that I've listed today.

They are not hyperbole, Madam Speaker. They are not political drama. They are not theatre. They are fact. You can ask any physician in the province of Alberta about that. It was a wrong-headed strategy. It was a cheap tactic, one that this government could have chosen to abandon at any point during the pandemic. Instead, they chose to press on. They chose to continue to fight. They chose to continue to belittle and pressure physicians and then have to force this minister to spend nearly two years cleaning up that mess to get us back to where we are today, where we find ourselves in the midst of a health care crisis.

Madam Speaker, you know what? Some of the steps this minister has taken on primary care I don't disagree with. Sitting down at the table, having committees of actual front-line health care workers, actual family physicians to provide recommendations on making the system better: an excellent idea. It would have been an even better idea three years ago. It would have been an even better idea to have done that before they chose to tear up the agreement with physicians in order to force through changes.

You know what, Madam Speaker? Every one of those changes I noted except for one, all of those things that they declared were absolutely essential, that they had to tear up that agreement on: the new agreement with physicians walks back every single one except they're still charging seniors for drivers' medicals. They are still happy to sort of force seniors to pay for that. Aside from that, the visit cap? Gone. Virtual codes? Addressed as of January of this year. Changes to complex care codes? Well, those got killed fairly early on because their own members rebelled so hard against their health care ministry.

There was nothing gained for two years of attacks on physicians, grinding family physicians down, forcing closures, stress and anxiety on them, their staff, their families, and not only family physicians, physicians of all types and stripes, Madam Speaker. Not a single thing gained for this government. Not a dollar saved. Not a single benefit for Albertans. It didn't help them get any better care. Nothing gained.

So will I support Bill 4? Absolutely. I will support Bill 4 because this is the right thing to do. It would have been far better if the government had never done it in the first place. I will support undoing what is, frankly, an embarrassing and ghastly mistake on the behalf of this government, one that has done incredible damage to our public health care system and to the ability of Albertans to access care. It is a black spot on the history of government relations with health care workers in this province, so I will absolutely support a bill undoing it, but I will not give this government any credit for doing so. I owe that much, I think, to all of the Albertans who've been impacted and certainly to all of the many physicians I spoke with over the last three years who've suffered – and I do mean that literally – suffered under this government, under the most difficult of circumstances and people that are absolutely essential to getting us out of the hole that we are now in with our health care system.

I certainly hope that all members – and I'm sure they will – are going to support Bill 4, and I certainly hope that this marks a shift in this government's approach. I don't trust that's necessarily the case given a lot of what I've heard from this Premier about her thoughts on primary care, but we have an election next May. I'm sure this is not going to be far from the minds of an awful lot of Albertans, the legacy and behaviour of this government.

Thank you, Madam Speaker.

4:20

The Deputy Speaker: Are there others to join the debate on Bill 4 in second reading? The hon. Minister of Health cannot speak again or it will close the bill, and I'm sure that the opposition will have

something to say about that, so the hon. Member for Edmonton-Glenora has the call.

Ms Hoffman: But, Madam Speaker, if he's so inclined and I'm so inclined, there could be an opportunity for a few one-minute interjections, so I will thank the House for giving us that opportunity through standing order changes that we collectively agreed on.

I want to begin by addressing my remarks here in second reading of Bill 4, which is currently titled the Alberta Health Care Insurance Amendment Act, 2022. Certainly, we've seen some colourful titles in the past for bills, and I would say that one that might be fitting for this could be a bill to try to undo some of the harm that we just caused not too long ago to try to hope that people will forget that we really, really, really messed with health care during this term. Because we're, of course, in a period that government and political observers refer to as the red zone, sort of that period in the runway up to the election, and we've seen significant evidence over the last three and a half years that the current government, the UCP, is not trusted with public health care in the province of Alberta and for good reason, Madam Speaker.

Maybe I'll start most recently and then work backwards. Most recently, Madam Speaker, we know that the current Premier was elected by only about 1 per cent of Albertans; 99 per cent did not vote for this Premier to be in her current role. In the six years leading up to that time, the Premier had a very, very public platform both with the radio, wrote a lot online, and participated in many blogs and other podcasts and such, and was very clear in a number of things. The biggest one is that she does not support public health care, does not support medicare in its current form in the province of Alberta. She has regularly made many comments and just in the last few months, to be precise. It's not like we're talking about decades ago. Like, she was very public in having all of these musings just over the last six years.

Some of the things that she's talked about are creating a health spending account. I have to say that the concept of a health spending account, I think, most people would probably say is good, but the way that she wants to get that money she's talked about is to take it out of the AHS allocation, the money that is given to operators of hospitals and long-term care centres, things that are covered under medicare, to take the money out of those essential urgent health care systems that we have for people in times of crisis or significant need and then to create this account that, then, individual Albertans would need to use to pay for personal visits to go and see primary care physicians, which, of course, wouldn't be sufficient.

There are many years where many Albertans might not need to see a primary care physician more than once or twice in that year, and then there are other times in your life when you would need significantly more care. That's one of the reasons why we as Canadians have pooled our resources and created medicare in its current form, to ensure that – you know, it's not your fault when you have a health crisis – we've got each other's backs. We believe in the collective nature of helping your neighbours as Canadians and as Albertans and that we will make sure that we have this social safety net of public health care, medicare, to be there for Albertans in general.

The current Premier definitely has had very different remarks in that regard, including significant remarks related to personal responsibility and as they relate to – even to go as far as to criticize cancer patients for resulting it. I will paraphrase: those who end up with stage 4 cancer could have done things in stage 1, 2, or 3 to prevent that, generally, was the statement. [interjection] Pardon me?

Mr. Madu: That's a lie.

The Deputy Speaker: Hon. members, this crosstalk is probably not helpful. The only one who has the floor right now, unless an intervention is accepted, is the hon. Member for Edmonton-Glenora.

Please proceed.

Ms Hoffman: Thanks. I'd say that unparliamentary language is not super helpful either. Thank you very much, Madam Speaker.

I will continue by saying that those remarks in blaming individuals for their health consequences definitely aren't helpful when it comes to those who are dealing with a very personal hurt that they felt. Many cancer patients who are at various stages in their cancer journeys feel like they were being criticized for ending up in such a horrific state. I know that there probably isn't a member in this House who hasn't experienced cancer either personally for themselves or for somebody that they care deeply about, and I know that that's the case generally across Alberta. So it's very concerning when we see this as sort of the background narrative that's been at play in and around the current Premier.

This bill, as was stated – I appreciate that the Health minister talked a great deal about the actual amending agreement, but this bill essentially is just to strike sections that the government chose to put in unilaterally without actually engaging in any consultation or getting any support from the health care providers that we rely on to ensure that we all have one of the most prized Canadian services. When you interview people globally about the differences between Canada and the United States, one of the main things that we talk about as Canadians and that others know about us as Canadians is that we have universal public health care, a very different model than what many Conservative leaders and Conservative Health ministers in this province have tried to push through at various times.

What we had in 2020 was the current government under slightly different formation of the front bench but not significantly different, to be very frank. I think many were surprised that when the current Premier took her role, there weren't more signals of change among the folks who are making leadership decisions, in fact ministers in very key roles – Education, Health, Justice – staying in exactly the same portfolios. I think many people who voted for change, the 1 per cent who did actually vote for the Premier, were expecting far greater signals of change and reflection and that the government was going to set a different course, but, no, no, they haven't.

What we do have is a bill – and I think that most Albertans, if they heard the Legislature is debating a health bill, would think: "Oh. Thank goodness. We're going to be doing something about emerg wait times. We're going to do something about EMS. We're going to do something about women's health and the lack of reproductive support services throughout our province, including obstetrics and gynecology." I think those are the kinds of things that Albertans would be hoping that we're debating today. [interjection] I'd be happy to welcome the interjection.

Member Irwin: Thank you, Member. You know, as soon you started to say that, her comment around the fact that this government really – I think what she was trying to say before I rudely interjected was that this government had an opportunity to really put forward some substantial legislation that could address, as she noted, the crisis in obstetrics. We heard from the Member for Lethbridge-West this morning just how bad it is. I've spoken about it multiple times. My colleague from Edmonton-City Centre and I have sent out multiple letters to this Health minister urging him to take action on the crisis in particular with women's and reproductive health. So, you know, we saw this as well.

I'm getting déjà vu from, for instance, I believe it was the long-term care act, where, again, we thought: "Okay. You know what?"

This government is finally taking steps to address the crisis in long-term care.” No. If you’ll recall that bill, it was a few administrative sort of changes and very little substance. So I’m hopeful, like the member mentioned earlier, that the minister will speak up as well about some of these issues.

Ms Hoffman: Thank you, Madam Speaker. That was one of the most polite interjections. I know that the member framed it by saying it was rude, but they are the rules that we have, and I appreciate the opportunity to elaborate slightly on this.

Yesterday we had an opportunity to consider health legislation that could have probably even been considered as a replacement bill for the health bill we’re considering here today, the Alberta Health Care Insurance Amendment Act, 2022. That bill was brought forward as a private member’s bill, and it would have addressed a number of areas, including primary care, EMS, surgeries, reliable, timely access. These are the things that most Albertans are talking to us about when they say that health care is one of their number one issues, and I’m sure they’re talking to members on the other side of the House as well. We know that reliably, poll after poll after poll, when people are asked to rank the number one issue that they have, in the top three is health care. It’s usually number one or number two and it has been under the UCP leadership simultaneously as we are continuing to live through the impacts of COVID-19, now also RSV and influenza.

4:30

I was relieved today when in question period the Minister of Health did talk about the benefits of getting a flu vaccine. I’ve had mine. I imagine he’s had his, and I hope many others of this House have as well, but our numbers for immunization for influenza this year in the province of Alberta are not anywhere near where we need them to be.

Consequential to that are the impacts on our health care system and on individual families. I know I’ve been watching the reports of children in other parts of the country, even some so horrific as a child dying in British Columbia of influenza not that long ago. I think it might have even been the second child in this flu season. I don’t want us to have to deal with those types of consequences here, and I think that we could be doing far more to speak to the benefits of using evidence-based, science-driven medical decision-making, including promoting, through public awareness campaigns, the benefits of getting a flu vaccine.

I was relieved, pleasantly, on the first day of the fall sitting, or maybe it was even the throne speech day. A push notification came through to my phone, because I’ve signed up for a bunch of health notifications, to say that on behalf of the government of Alberta we’re encouraging everyone to get the flu vaccine; it’s safe; it’s scientific. I’m grateful that we’ve heard it from the Health minister. I’m grateful that I got a notification from the CPE informing me of that. I wish we would see that same kind of leadership from the chief politician currently, the Premier for the province of Alberta. I think it would go a long way to increasing awareness and reducing some of the most severe outcomes that we’re seeing as they relate to children’s health.

What we’ve seen instead is silence on these issues, and I also want to be very clear that when I was a Health minister – I know some will try to fearmonger. When I was a Health minister, we made it really clear that we weren’t going to require mandatory vaccines for children to attend school. We were going to share information, and I imagine it’s been used significantly, that when there is an outbreak at the school, the school’s list of who’s enrolled in that school gets shared with public health so public health can reach out to families and work to protect children, to either do public awareness around ways that they can protect themselves and

others in their families, pull children when it’s required to do so because they don’t have the full immunization to be able to keep themselves in a congregated site safely.

At that time it was driven by the fact that there were some measles outbreaks in some pockets within Alberta. We know that MMR vaccines and education around them in the province of Alberta has not been as effective as we would like to see in terms of the collective benefits.

I do have to say that undoing some of the harm that was done not that long ago by the same government that’s still in place: I guess that’s better than some health bills that we’ve seen them bring forward to this place before, but this simply is An Act to Undo Some of the Harm that They Just Caused Two Years Ago. That is what the title should probably be. To my whip: maybe we can work on an amendment in that regard.

It definitely isn’t something that is going to resolve the issues that we’re facing currently in primary care with EMS, with surgeries, with timely access. These are areas that the government should be focused on, that we as members of this Assembly, I would hope, are focused on. Instead, what we are doing is considering repealing some of the harm that the government just imposed.

It definitely is not a step backwards, and therefore I’m inclined to support it. If there are things that I don’t think are harmful, typically I want to be a team player and get onside and try to speak and vote in support. This certainly isn’t, you know, a flagship piece of legislation. Under a new Premier the fourth priority, you would think, would be something that would address the significant issues that Albertans are saying they’re facing. Certainly, health care is one, but again this bill does nothing to actually address the root issues. [interjection] I see another interjection from my colleague, and I welcome it.

Member Irwin: Yeah. This is exactly it. You know, again, I’m hopeful, always the optimist, that the Health minister will weigh in a bit more. I know he’s introduced the bill, but he certainly has an opportunity to intervene. Even just right now I’m seeing my inbox, the absolutely heartbreaking stories from health care workers and what they’re going through, hearing from an ER nurse who’s just talking about what absolute chaos it is in the pediatrics, in the peds, unit. I would love – and perhaps even the Premier will speak to some of the priorities. I know she talked about the importance of children’s health this morning, yet we’re not seeing it in the legislation that we’re seeing. We’re seeing a lot of, like I said, administrative pieces and... [Member Irwin’s speaking time expired] Oh.

Ms Hoffman: Thank you very much, Madam Speaker. What this morning’s announcement did highlight, though, is the fact that – and we saw that earlier in the pandemic as well – when we have one collective purchasing power, when we have one health authority that is the largest health authority of any jurisdiction anywhere in Canada, we have more significant purchasing power. I want to recognize that the Premier did acknowledge today that the AHS procurement team led the charge to make sure that we could acquire some additional capacity in terms of medications that are desperately needed right now, so hats off to that procurement team for AHS, which has been recognized as being a global leader over and over and over again. They did it earlier in the pandemic, when it came to acquiring masks and other PPE to support health care workers and other citizens. I know that we were in a position, because, again, we have that large collective purchasing power, to be able to support even other provinces. [interjection] I see a third interjection and welcome it.

Mr. Shepherd: Thank you, Madam Speaker. I'm just wondering. Of course, we know the Member for Edmonton-Glenora previously served as the Minister of Health. She was just noting the excellent work that's been done by AHS on this procurement and certainly was done in many respects during the pandemic, but we know that certainly AHS has been significantly attacked by this Premier, who has talked down about many of the folks that do the very work that allowed her to make that announcement today, much in the same way as we saw this government talk down physicians and others. I was just wondering: for this member, as she has served as Minister of Health, what is her reflection of how the behaviour of government can affect the morale and the ability of these folks to be able to do this important work on our behalf?

Ms Hoffman: Thank you very much, Madam Speaker and to my colleague the critic for Health for the Official Opposition, for the NDP caucus, and the MLA for Edmonton-City Centre. I do want to speak a little bit to the morale piece, because I know that even though the minister is still the same and the CEO is still the same, under the Premier's leadership the big, revolutionary thing right out the gate that she initiated as it relates to services of health care was to fire the chief medical officer of health and subsequently or simultaneously fire the board for AHS. It's not often that I'll stand in this place and say, "You know, those really amazing, super conservative people on that board deserve to be there," but what I am going to say is that by firing a board – I believe that when we have many minds working together, we can make better collective decisions than when we try to put one person in charge of something.

This certainly does relate to the Alberta Health Care Insurance Amendment Act, because those insured services that are operating within AHS: the vast majority of billing would be direct to Alberta Health. Those services within AHS, to say: "Okay. We're going to get rid of a board of 11 people working collectively. We're going to replace them with one person who thinks that he knows best or that the Premier thinks that that one person knows best."

We saw what happened when the most recent Premier decided to do that with Chris Champion when it came to curriculum. We have had a hugely discredited curriculum that clearly was driven ideologically, especially as it relates to the social studies area, driven by one person who thought that he knew best, that there was going to be, you know, this downloading of European and American knowledge that wasn't evidence based, that wasn't collaborative, that didn't engage with teachers. We were going to bring in an expert, somebody who thought he was an expert, that the Premier thought was expert, to make these decisions that would impact everybody, and they certainly have impacted everybody.

We're seeing that again now with health care. We've decided that instead of having a collective team of people who are even, for example, trained in public health there to give advice – and certainly we can ask many questions about the advice and if it was proper, but to instead say: we're going to bring in a volunteer. And I've worked with Dr. Joffe. I think Dr. Joffe brings a lot to the table. He's not an expert in public health. That's not his area of specialization. It would be like putting somebody in charge of cardiac care who was an oncologist and asking them to volunteer and do it off the side of their desk when they already have more than a full-time job to keep them busy. I will tell you: Dr. Joffe's current job is more than a full-time job.

4:40

There used to be three, a chief medical officer of health and two deputies, that collectively would advise on public health matters. As we understand, those positions are not filled; there is a volunteer assignment given to Dr. Joffe. I hope that the minister will make those public health officials available if there are any working in

that area. It is so important and not just because of COVID-19, not just because of RSV, not just because of influenza but because other disasters happen that require public health expertise as well, like the Fort McMurray wildfires.

Public health played a key role in ensuring the evacuation happened but also the safe return, because many of the chemicals that were used to hamper the fire, to put the fire out, could have had negative health consequences if people went back before that was remediated. Public health had to be advising the government about re-entry plans to ensure that the residents of Fort McMurray didn't get other negative health consequences, including various types of cancer.

The Deputy Speaker: Are there others to join in on the debate? The hon. Member for St. Albert.

Ms Renaud: Thank you, Madam Speaker. It's my pleasure to rise and speak to Bill 4, Alberta Health Care Insurance Amendment Act, 2022. Just, you know, thinking about going back to 2019, when we were debating this bill, this omnibus bill actually, I think it was really important at the time to think about all of the things that were thrown into this bill. There were all kinds of things that were jammed into this bill not long after the election of the UCP. They formed government.

I can remember that at the time we spent a lot of time talking about this piece of legislation, Bill 21 at the time, and trying our best to warn the government of the day what some of their decisions would do. I can remember many of my colleagues talking about the dangers that lay ahead. None of us could predict that we would have experienced the kind of pandemic that we did. We just knew that this was not how you treat a group of people, particularly physicians. This is just not how you move forward in a positive, collaborative way for such an important group of people that provide such an important service.

Now, I also want to add that this was the same piece of legislation that deindexed benefits for seniors, for low-income Albertans, and for disabled Albertans. Again, at the same time, it was jammed into this omnibus bill. We tried our best to warn of the danger that would come or the harm that would be caused. Once again, just the arrogance from the government at the time, saying: "No, no; we know best; it'll be fine. They're not going to have a problem with it. Everything is cool. It's the most generous in the country," which it is not.

You know, it's really sad that this much time has elapsed and here we are debating a piece of legislation, another – I imagine this will not be the first one that will change the disastrous work that this government has done over the last few years. [interjection] Oh, go ahead.

Member Irwin: Well, thank you to the Member for St. Albert. You know, you just started to talk a little bit about sort of our perspective, and we've talked a lot about what we've heard from our constituents when it comes to protecting public health. I know that you knock on a lot of doors in your riding. You do a lot of door-knocking in Morinville-St. Albert, and I appreciate that. I'm curious: are you hearing health care as one of the top concerns at the doors? If so, is it health care workers? Is it the general degradation of the health care system? I'll be honest: I've too knocked on many, many doors, and the issues I hear about the health care system are many, but I'm not hearing much about what Bill 4 addresses, which is a concern to me when, again, this government had an incredible opportunity to do a whole lot more.

Ms Renaud: Thank you for that. Yes, we do knock on a lot of doors, and we run into a lot of health care workers in St. Albert. You know, recently it's been fairly cold, the weather hasn't been lovely, so the

lovely constituents of St. Albert will regularly invite us in if we're really shivering quite a bit, and then we often will have time for a deeper conversation.

I would say the theme – it's primarily nurses that I've had a chance to communicate with, but I think about the one physician that I did speak to. What sticks in my mind – and this goes back, you know, a few weeks, some a few months – the biggest thing that I heard from the constituents in St. Albert was just the lack of trust. Certainly, they felt that there has been enough push-back on a few issues, whether it's from the physicians themselves, from their patients, just from Albertans in general that the UCP has backtracked a little bit on a few things throughout COVID. Now, obviously, as we get closer to an election, they're trying to clean up a few messes. [interjection] Oh, go ahead.

Ms Hoffman: Thanks very much, Madam Speaker and to the member for accepting the interjection. I know that many health care workers live in St. Albert. I've had the opportunity to visit with many of them, and many of them work in St. Albert, but also many work in Edmonton facilities or offices. Access to an actual family physician or primary care provider: we used to say – and it used to be true – that we had way more primary care physicians per capita than any other province in the country. But I fear that we've fallen significantly off that track and also in the larger urban centres. It was Edmonton and Calgary where there were the most, but now we know that regularly people contact our offices saying that they can't get a primary care provider even in Edmonton and Calgary. I'm wondering if the Member for St. Albert can maybe talk about that and what this bill could have done instead to help address some of the crisis and the priority that could be placed on ensuring that people have access to primary care.

Ms Renaud: Thank you. Just like the member just said, you know, our office gets calls, actually primarily e-mails, about this. We get e-mails talking about: I can't find a doctor. Whether it's "My doctor has retired" or "My doctor has left," people just can't find another physician. I have heard that some residents of St. Albert have had to go, sadly, because it's going to cause problems in other communities – but they have said, "I've found somebody that is accepting patients in Spruce Grove" or Sherwood Park or another smaller community where they've managed to find someone, which is terrific for them. I'm happy that they've been able to find a physician that can take them. But they're adding pressure to those communities, and I know those communities are struggling as well.

So we have to address the problem, and sadly I've heard this government say a number of times that doctors aren't leaving, it's not a problem, it's not a crisis. Well, it is. We know it is. I just had a quick look to remind myself because I wasn't sure of the numbers, but it was reported: March 24, 2022, CTV reported – and I'm sure this is coming from a report, but this is just the first news article that I found – that the number of doctors who left Alberta last year was almost equal to the number who left in the prior two years. Now, that's reporting from 2022, the two years combined, and this is according to the college. So we had 140 physicians leave in 2021. [interjection] Sure.

Mr. Copping: Madam Speaker?

The Deputy Speaker: You can make an intervention.

Mr. Copping: Okay. Thank you very much to the hon. member for allowing me to intervene. First of all, I just wanted to comment: thank you for supporting the bill, to the members of the Official Opposition. That's greatly appreciated, and hopefully we can move it forward quickly.

I did want to comment because the hon. Member for St. Albert was making a comment about the loss of doctors. Quite frankly, Madam Speaker, that isn't the case. We have more doctors than ever before in the province. There always is churn, and I appreciate that doctors leave and doctors come. But, you know, if we compare this year, September 30, to last year, we have 176 more doctors in the province. We have 11,346 doctors registered, the most ever.

Madam Speaker, I just would provide a comment. While I appreciate the Official Opposition supporting the bill and I thank them for that, I don't necessarily agree with their characterization of the statements that they're making, that strains faced by the system are due to government policy. The reality is that it's due to COVID, and we are moving forward to address it.

I'll speak more.

Ms Renaud: Well, it's very timely that I said that government continues to say, "Doctors aren't leaving; it's not a problem," and the Health minister stood up and sort of said that very same thing. When we know cities like Lethbridge – we know there's a crisis. We know that you probably hear it. It's anecdotal, for sure. We hear it from all of our constituencies, that people cannot find physicians. We know there are problems. We know that emergency departments are closing. We know that people can't have their babies in their communities. There is a problem. There is a large problem. Doctors have left. Physicians have left.

What I hear from health providers, the ones that I speak to in my constituency, what they very, very clearly say is that not only was it the master agreement and all of those things and potential changes that were proposed at the time – it's not just that. It seems to be that the lingering problem I still hear about is trust, that there is zero trust in this government. You can shift, you know, chairs on the *Titanic* kind of thing. You can shift ministers. You can shift deputy ministers. You can shift all kinds of people and make all of those changes. You can fire boards. You can do whatever you like, but the fact remains that Albertans don't have faith. They watched this government do all kinds of things through COVID.

I actually went through, like my colleague from Edmonton-City Centre did – he sort of gave you a bit of a timeline of the activities that happened. You know, it's been a wild sort of few years with COVID. There's been so much happening that I went back to remind myself what this timeline was like.

Madam Speaker, can I get a time check?

4:50

The Deputy Speaker: You have 11 minutes.

Ms Renaud: Okay. Thank you.

I used actually a really terrific article. It was really concise, and I remember reading it at the time. I thought it was quite good. It's from September 2020. Sorry; I got that date wrong. I'm going to have to go back and correct that. They gave us a bit of a timeline about what happened, so it's a bit of a stroll down memory lane.

They talked a little bit about – and I love the way this article set up what was coming in that omnibus bill and what was coming in the changes that we saw. We know that early in September there was the MacKinnon report. We all said at the time that, you know, the UCP is going to use this report as cover. They're going to do all kinds of things, from looking at physicians' pay to nurses' duties and roles. The entire system needed to be overhauled according to this report and according to the UCP government members that stood up and defended that. Clearly, what that told us at that time is that they were on a path. They had a path, they had a goal – they were not going to reverse that goal – and then we saw them continue to do that.

We then saw that Ernst & Young released their report in February. They went a little further, talked about 70 ways to save \$2 billion. You look at that report, and you can see, literally see, some of the decisions and some of the damage that was done as a result.

We know that tensions came to a head in February 2020. That was a really bad time for the then Health minister. That was the time he announced that he was ripping up the contract with doctors. You can remember. I think my colleague from Edmonton-City Centre talked about the minister sort of yelling at another physician, which was horrible. I think we've talked about that enough.

Still, the government members – I can recall at the time that nobody was sort of giving an inch. They were still saying, “No; we're right; we have to do this; we're on the right path, blah blah blah, MacKinnon panel, blah blah blah, Ernst & Young” when people were saying, “We have a blossoming problem; there is a problem; there is this pandemic that none of us really understand the parameters of.” I don't know, still, that we understand a lot of what happened, because we haven't had a chance to even go back and really examine what was happening and what we did as a result.

Then the pandemic hit full force. We had some of the proposed changes to the physicians' contracts. You know, I want to touch on the one thing, and that was with the extra long visits. I know my colleague touched on that earlier. What I heard from physicians at that time: they were saying that this is going to really cause problems for people that are complex. As you can imagine, Madam Speaker, there are a number of people in this province that have complex health issues, health concerns, not to mention coupled with disabilities or mental illnesses or whatever the case may be. But it is only because they have found physicians that can actually work with them and support them – they should be paid appropriately for it. This change was going to change that, and we heard that directly from physicians. This isn't something that we made up; this was actually from physicians.

Once again we could see that the path was outlined by the MacKinnon report, the Ernst & Young report, yet we had this pandemic coming, all of these unknown variables that none of us could know at the time, and still this government was focused on doing things that I have to think they inherently knew were going to disrupt a health care system at a time when there were a lot of unknowns coming at us. That makes me think. For an elected group of people to think that was a good decision is still, years later, an absolute head-scratcher to me. I don't get it. I do not get why they would gamble with the health care system, the wellness of Albertans, at a time when there were so many unknowns here at home, in Alberta and Canada, and around the world.

April 9. Let's not forget this: the AMA sued the province over changes to the way that doctors could bill for service. Now, that's pretty serious, when you have the AMA suing the government. You know, I would hope that the government of the day has a healthy enough relationship with the AMA, that is such a vital organization, that they would have a good enough relationship that it wouldn't come to this place, particularly when we're struggling with an unprecedented challenge in terms of a pandemic. But, no.

A little later in that very same month, on April 24, we had the Health minister announce that rural doctors would be exempt from overhead billing, for changes when seeing patients outside the clinic. Now, I don't know a lot of rural health care providers, actually, because I don't live in rural Alberta. I have met one. But what we heard at the time – we relied on social media, sadly, to hear what people were saying, and I think that rural doctors, rural physicians, were very clear about what this was going to do to them. They very clearly said, “We are going to shut down our clinic,” and I believe some did. Some physicians said, “We are going to leave this province,” and they proceeded to leave. And this government

still was on this path, that had been identified in 2019, knowing what was happening. They could see all around them what was happening, and still they focused on this path.

I would say that there are a lot of people speculating: is this the ultimate goal, Madam Speaker, just to crash this health care system so that the solution is “let's privatize,” because privatizing is always the answer? Well, we know that's incorrect. I mean, let's just look at long-term care. That is not the answer.

This is a government that has continuously just surprised me to an extent that it's almost hard to describe. All of these horrible things were happening in our province. All of these professionals that work in health care, that are the front lines, that knew exactly what was going to happen, were predicting disaster. What we did see was disaster. What we continue to see is disaster. Let's remember, at the time that all of this was going on, what was happening here in Alberta. We were already approaching 100 deaths, so we already knew that it was a problem. We already knew. We saw it. Our hospitals were starting to fill, we were starting to understand the different pressures on people, and still this government continued.

July 10: AMA released a survey that found 40 per cent of all physicians were eyeing a move. They were either thinking about moving or planning on moving, and sadly many did leave. I'm sure some left for completely innocent reasons that were personal, that were not related to this government's mismanagement. But many left because there was no trust and they felt that – you know what? – there was no point in staying if they were working in a province where they could not be respected by the government of the day. They were not being respected, and they just moved elsewhere. They had that ability, and who suffers? It was Albertans.

A little later that very same month, July 29, they released a referendum of physicians, residents, and medical students. They were asked a question. I don't know the exact phrasing of the question, but the question was something along the lines of: how much faith or trust do you have in the Health minister? I think we all remember that number, very close to what the ATA had for the Education minister in terms of trust, that about 98 per cent said they had no faith, no trust. Now, I'm not saying that the current Health minister is in the same league as the last one at all, because I think he's actually quite reasonable and quite lovely to speak to.

I hope that he's hearing some of the concerns, that we're really not just standing up here to hear ourselves speak, that we actually are trying to relay. This is what I hear from people. This is the kind of e-mail that I get. These are the phone calls that I get. When I door-knock, that's what I hear. These are the problems, and we've been hearing this for years. I mean, this isn't new. This isn't new at all.

I don't think any government ever gets it right. I think that really good leadership requires people to listen and do the awkward thing sometimes and to admit mistakes – “You know what? We made a mistake, kind of screwed up, so we're going to fix it, and here's how we're going to fix it” – instead of just defending a bad bill or defending a bad decision. I don't think anyone in here is particularly more guilty than others. I think that we all in our lives can do better. But the sad reality is that the decisions that we make in this place, the decisions that this government makes in this place – let me be clear about that, the decisions that they make – the bills they pass, the regulations that they make impact people's lives directly, and we've seen that. We see it in the state of our health care system right now. It's a disaster. It's a disaster.

5:00

When I have paramedics and firefighters, even the firefighters from St. Albert, telling me about different instances when they've had to respond – one example they gave me this morning. They responded to a young boy that was drowning. He was drowning.

They intubated him. They did all of the things that, you know, EMS responders would do, advanced life support. They're an integrated service, so they can do that. They have that equipment on their truck. They did that. They had the patient stabilized for – I don't know – it was maybe an hour, 45 minutes, and then the ambulance showed up.

That's not normal. That's dangerous, and more people are going to lose their lives as a result. You know, doing health care in a parking lot or in a bay is not okay. Women not being able to give birth in their communities and having to drive long distances: that's not okay. The extraordinary wait times – I understand that there's pressure right now with influenza and all of the things that we're dealing with, but we had a weakened system after years and years of really awful decisions and years of a government literally with earplugs in their ears, not hearing from their own constituents. I'm quite sure that they heard the same thing that we did.

So here we are in 2022, in December 2022, and the government is undoing another mess that they created in 2019 with that piece of legislation, Bill 21, that did so much damage in so many areas. This is just one from this giant bill that was just, like, slash and burn.

The Deputy Speaker: Any other members wishing to join the debate on Bill 4 in second reading? The hon. Member for Edmonton-McClung.

Mr. Dach: Thank you very much, Madam Speaker. Pleased to rise this afternoon on Bill 4 to bring some comments forward from my end of the world, Edmonton-McClung, and speak about some thoughts that I have with regard to Bill 4, which is an attempt to undo some of the harm that was done when the government decided to pass the omnibus Bill 21, that some of my colleagues have alluded to.

Of course, what I sense when I'm talking to constituents and seeing media reports and looking at social media as well is that the population has really lost trust. The government was told that this would happen before they implemented the omnibus bill which brought forward the ability for the government to tear up the contract, the master agreement between doctors and the government, and they failed to heed that warning and went ahead and did tear up that contract. It is very unfortunate that the government never did heed that warning because the damage that was caused is long term, Madam Speaker. It's intergenerational, in my view. To have all of the doctors, 11,000 doctors, in this province go through a process where the government actually just unilaterally tore up their contract is a shocking thing in a democracy to witness, and I can't imagine this healing any time soon.

The government has reached an agreement with doctors, a master agreement, ultimately, under the leadership of a new minister, who managed to bring some semblance of respect back to that relationship, but the harm has been done, Madam Speaker, by the omnibus Bill 21, that included a clause to tear up the contract with the doctors.

It was a little bit surprising to hear that the justification for this tearing up of the contract was that if we're bringing forward Bill 4 now, I should say, it was no longer required given the terms of the agreement with the AMA that has now been reached.

[The Speaker in the chair]

As my colleague from Edmonton-City Centre so eloquently posited earlier today, in my view as well it was never required, never mind no longer required, and my constituents and Albertans wonder aloud to themselves, when I talk to them at the door, as to why indeed the government chose to go forward with it. [interjection] My colleague from Edmonton-City Centre wishes to intervene. Mr. Speaker, I'll accept an intervention.

The Speaker: Please do.

Mr. Shepherd: Thank you, Mr. Speaker. I appreciate the thoughts the member was sharing about the process of negotiation involved here. Of course, I'd note that the Member for Edmonton-McClung spent many years working as a realtor, and of course that is a job where you have to know how to negotiate a deal. So I was wondering, you know, from his experience working as a realtor, helping so many different people to achieve their goals and, of course, negotiating things like pricing on houses, what thoughts he has on the process and the approach that the government brought to the table in trying to negotiate a fair agreement with doctors.

Mr. Dach: Well, thank you very much, Member. It's actually very interesting that you would bring up the word "negotiating," because it's on page 3 of my notes that I made to myself. The note attached to that is that this government is not very good at negotiating. Unfortunately, they have the lack of institutional knowledge that was passed down from one Premier to the next. The decision to go ahead and seek control rather than negotiate is seemingly a lesson unlearned from one Premier to another. I'm unfortunately seeing the new Premier deciding that negotiations are not her primary mode of achieving agreement and that she's looking at imposing things. You know, Bill 1, that we have before us still in the House, is another example of that, where we're looking at the House being circumvented, never mind a government contract. [interjection] I have another intervention. Go ahead.

Mr. Nielsen: Well, thank you. You know, my friend from Edmonton-McClung has spent some time not only before becoming an elected official but, of course, during his time talking to the constituents of Edmonton-McClung, getting their feedback, and I'm just kind of curious. Thinking back to when the contract was first torn up, during your years knocking on doors, talking with constituents, hearing their feedback – what they would like to see before you were an elected official, what kind of changes they were hoping for – did tearing up the doctors' contract even make it onto the list? I know that in my time door-knocking from 2013 in Edmonton-Decore, I certainly didn't hear: gosh, I wish a Health minister would go in there, tear up that contract, and create all kinds of chaos. I'm just wondering if perhaps you might have heard those kinds of things. I didn't hear them in Edmonton-Decore. Maybe it's just simply my riding that had that lack of enthusiasm.

Mr. Dach: Thank you to the Member for Edmonton-Decore for that question and insight about the activity of his constituents and his riding. I can certainly attest that in Edmonton-McClung there was no hue and cry for the then Minister of Health to tear up the doctors' contract. I think most Albertans right across the province were pretty shocked because that's not the way we've had our previous governments operate. In fact, there's been a history of respect between governments and our professional bodies, including the Medical Association, over time, and to see the contract torn up was a pretty big shock.

Now, of course, Bill 4, an attempt to plug that hole, that breach in the trust and respect between the AMA and the provincial government, is just simply trying to undo some harm that they did. While certainly I'm going to support the bill that undoes the ability of the provincial government to tear up a contract, the fact remains that the trust has been broken. Our Medical Association and Albertans as well know now that at the stroke of a pen and the decision of the government they may revisit this once again and see that they'll take unto themselves the same power once again.

The institutional damage we've done, Mr. Speaker, is something that we'll be recording for decades to come. We'll always be referencing

back to this omnibus Bill 21, that is now trying to be repaired by Bill 4, that's before us. It will be the hallmark of a failure by a government that saw fit to tear up a legitimate, bona fide contract and direct to doctors that they would control what they were paid unilaterally. I think it's fair to say that the Medical Association and other professional bodies will always have it in the back of their minds historically whether or not a future Conservative government will do this once again. It poisons the atmosphere. It is not helpful.

5:10

I know that in my past career, as other members have alluded to, negotiations that I've been through with house transactions, probably at my count about 800 of them, were not always easy. They were difficult in many cases, and they took quite a bit of time, sometimes over the course of a number of days. Certainly, I never had the option to stand up and impose a contract upon one party or the other, Mr. Speaker. That was something that needed to be done between the parties to negotiate a settlement between the two.

Thankfully, with this Bill 4 we'll be back to that, but indeed the tenets of conservatism, as far as I have studied them – and I've studied them – would say that laissez-faire would be the rule of the day. Let things be rather than taking control unto oneself. It did shock a lot of Albertans that the original Bill 21 measure to tear up the contract was something that would even be contemplated by a provincial government here in Alberta. People in my constituency really couldn't believe what they were hearing. It's something that I'm sure they'll be glad to see disappearing, but we'll always be fearful that it could potentially be returning once again. I know that the 11,000 physicians in the province are definitely fearful that it might be something that does happen.

Now, I know that the provincial response to the pandemic over time is something that the province has been very critical of. I know that today I think the Premier said in response to questions about the desperate pleas for meaningful, comprehensive leadership in terms of caring for children in respite care, respite care which is no longer there – her response was that Tylenol is on the way, that we have a sufficient amount of Tylenol coming to hopefully prevent this disease. Indeed, that's not what the question was all about. It was asking about care for children, pediatric care for children, and the desperate situation that children are in and their families with respite care. [interjection] I see the Member for Edmonton-City Centre rising to intervene.

The Speaker: The hon. member.

Mr. Shepherd: Thank you, Mr. Speaker. You know, the member was just speaking about the Premier essentially dodging a question today about preventative measures to keep children from getting sick as opposed to just sort of chasing the problem after the fact with medication and, of course, the effects that that's having on the access to care for children at the Stollery here in Edmonton, the Alberta Children's hospital in Calgary.

It does strike me that that says a lot about what the UCP's approach has been with physicians. Indeed, where they could have acted in a way that might have been preventative of a lot of issues, they instead chose to barrel ahead and go with what they tried to do in terms of a cosmetic public approach while, in fact, making the problem so much worse. I'm just wondering what the member's thoughts on that might be.

Mr. Dach: Well, thank you, Member for Edmonton-City Centre, for that intervention. It brings to mind the recent conversations I've had with doctors in the local hospital in my riding, the Misericordia. I won't identify them, but the crux of the conversations that I have had with them is that the local hospitals are beyond the breaking

point. I asked the question: what would be the straw that broke the camel's back? The response was: it's already happened; we're beyond crisis point. We are having situations at the Misericordia hospital and, I'm sure, others where people are not receiving the care they need in critical situations, and there are deaths, premature deaths, that are occurring as a result of the situation that we're in.

Pediatric care was the question of the day today that the Premier had broached to her, and the response was that Tylenol is on the way. Respite care for parents of severely ill children has been taken away so that those physicians and nursing staff can go and help people in children's pediatric care. Once again, the Premier avoided the question and said that Tylenol is on the way.

That's not what the public is wanting to hear, Mr. Speaker. They know that there's a lot of room for this government to make up in terms of trust as a result of such things as the Bill 21 decision to tear up doctors' contracts, and the Bill 4 before us today to try to rectify that by removing the ability to do that is something that is a step in the right direction.

But, certainly, the Premier's responses today to avoid dealing directly with the questions of critical care for children in our hospitals, which are overflowing into trailer waiting rooms, is not the type of response that we wanted to hear as Albertans, and it does nothing to build or rebuild a trust that has been really, really broken badly by the UCP government over the last three years and continues to be broken even further by the types of response we keep getting from the Premier regarding the leadership that we expect to see to help address some of the acute problems in our health care system and our hospitals and with the respiratory disease crisis that we've got going on now.

We end up with the situation here, where, first of all, the government in Bill 21, tearing up the doctors' contract, created all kinds of chaos and acrimony, that was not necessary, and people asking: "Why? Why are they doing it?" Now here we are in the Legislature today removing that piece of legislation that gave the ability to tear up the doctors' contract, and instead of focusing on the extreme issues of the day, that are children's health care, in particular, and respiratory diseases that are causing our hospitals to be overflowing in the emergency wards, the response we're getting is an indirect one from the Premier of this province. We're not getting real action plans that are being looked forward to by Albertans.

When we see children dying of the flu or other respiratory diseases, that affects everybody pretty deeply. We expect respectful leadership from the province, and that's not the tone that was set in 2019 with the omnibus Bill 21, that brought in the ability to ride roughshod over doctors' rights to expect that a contract would be a contract and wouldn't be torn up. But that indeed, of course, is what happened, and over the long term, Mr. Speaker, I think that we're going to find that Albertans are going to be deciding that trust is only going to be doled out in small doses to future Alberta governments, and that's a damage to our democracy.

Unfortunately, the threat to democracy is a many-pronged spear in the hands of this government, and it's not only the threat to the bona fide nature of contracts but also to the institutions of government that the current rendition of the government doesn't seem to hold it in high regard. When you see a Premier and a government focus entirely on things that are ideologically driven to control their agenda and to force, in particular in this case, doctors to accept a contract without engaging in respectful negotiations is something that I don't think will be ever a hundred per cent forgiven in this province, and it shouldn't be.

The issues that Albertans are wanting to have our government focus on are something that we are entirely focused on. There's the health care crisis, and we've come up with a plan for that ourselves. The cost of living is something that the province is struggling with. My constituents remind me of that every door I knock on. The ability

of Albertans to have faith in their government, whether it's a decision to decide to go to university here, to start a business here, to engage in a nonprofit organization: all of these decisions are going to be based upon an underlying feeling about how they are able to interact with their government. There's a wound, a scab that has been placed forever on the relationship between the government of Alberta and its citizens by such legislation as Bill 21, which is now, three years later, being reversed but will forever be remembered by the people of this province.

The Speaker: Hon. members, are there others wishing to join in the debate? The hon. Member for Edmonton-Highlands-Norwood.

5:20

Member Irwin: Thank you, Mr. Speaker. I was pausing there slightly because, yeah, it's intriguing to me that on a government bill that, you know, undoubtedly, their members support, they wouldn't be rising to speak to it, other than the illustrious Health minister, who I appreciate weighing in and listening and interjecting. I really do appreciate that, but I am slightly confused because I think most of us, perhaps all of us, would agree that health care is absolutely a priority for our constituents.

You know, I can say that not just from my experience in Edmonton-Highlands-Norwood, which, of course, I've spent many, many hours, particularly in the summer, knocking on doors. Since then I've been spending many, many hours in other ridings to support some of my MLA colleagues and some of our new candidates, including Edmonton-South West, which has been fantastic, knocking on doors there multiple times. A lot of health care workers there. A lot of health care workers there. A lot of teachers.

Ms Renaud: Lawyers.

Member Irwin: Lawyers. Yeah. Lots of working professionals. Yeah.

I can tell you that I was just knocking on doors there on Saturday – it was cold, but the reception was warm – and, yeah, health care definitely came up a lot at the doors.

As I've said in this Chamber before, you know, I'll often start my conversation with folks just saying: we're out canvassing and just curious what your top issues are. Health care almost always rises to the top, and not just here in Edmonton. I talked about Edmonton-South West, but Medicine Hat is a great example. I was talking to the Member for Cypress-Medicine Hat earlier about my experiences door-knocking there – we like to shoot the breeze in the back – and I just said that, yeah, it was really, really fascinating.

As many of you may know, our NDP candidate actually won in Medicine Hat proper. I was really blown away by the conversations that I had. I canvassed five times there in Medicine Hat, so, you know, I have a bit of a perspective on what folks there were saying. Certainly, there was concern about Bill 1 and the sovereignty act, education, but health care was right up there. Of course, our Premier was running there at the time, so a lot of concerns about the direction that health care might be taking under this Premier should she have won the seat. Of course, she did win the seat, so I would say to those voters that I met in Medicine Hat that their fears may have come true.

As I noted earlier when I intervened, you know, what an opportunity for this government and this Health minister to really take a lead on responding to their constituents and hearing their concerns about health care issues, that I'll get into here in a moment, but whether it's the crisis in children's health care or – I will first accept an intervention from my colleague from Edmonton-McClung.

Mr. Dach: Thank you very much, Mr. Speaker. I wanted to commend the hon. Member for Edmonton-Highlands-Norwood for her incredible work on the ground in her riding. Anywhere you go with her in the riding, to any event or even just on the streets meeting folks, she's known by name. That's not just by business owners or schoolchildren; that's by people who are actually on the streets.

What I wanted to ask about was those individuals who are most clearly affected by health care vulnerability and if indeed you found that there was a difficulty in maintaining the doctors who are required to treat those individuals who really don't have a family doctor – I'm talking about at the Boyle Street community centre and others – if indeed they've experienced a really difficult time maintaining staff and doctors at those centres to treat those most vulnerable people, particularly because there's a huge outbreak of a very viral disease right now on top of the pandemic.

Member Irwin: Yeah. I love that. See, this is the beauty of interventions. You can kind of have your speech sort of mapped out, as I do here very nicely, but – sorry; is that a prop? I've never actually – yeah, it's not a prop. I'm just telling you. I have a little bit of a plan here, but the member, you know, wouldn't have known my plan. I only knew my plan about two minutes ago. He wouldn't have known my plan, but one of my plans was to actually talk just about that, the impact of the crisis in health care on some of my most marginalized constituents, so thank you for that. That would be unhoused folks who I represent, and I do – I don't want to say that I have the honour, because I'll preface this, but I do. I do represent many unhoused folks, perhaps the most in the province. That's not an enviable honour; that's for sure.

Part of that, for folks who know my riding, is that we do have a concentration of social services, including, you know, the Bissel Centre and Hope Mission and Operation Friendship Seniors Society and Boyle McCauley health centre, now known as Radius health, and many, many more. I know I should never start naming because then I will miss folks, and they're all, for any of them watching at home, doing incredible work. In fact, this is my first time debating fully in the House other than intervening, and I always – you'll all recall that I always love to give a shout-out to the folks on the front lines, whether they're in health care or retail or you name it.

I can tell that member that he's exactly right. Unhoused folks in particular are sort of being bombarded from multiple angles right now, you know, and if you are unhoused, you're dealing with a lot of health care issues to begin with. As that member noted, right now in the inner city, which myself and my colleague from Edmonton-City Centre represent, the shigella outbreak has just – we don't even know the half of it, and I know the minister is aware of this crisis as well. I'm certainly no expert, but we know that one of the main reasons why shigella – why its presence increases and why it spreads is because of lack of access to sanitation, lack of access to clean water, and, of course, most predominantly, lack of access to housing, right? So they've got this public health crisis on top of the fact that we are still in the midst of a pandemic. Let us not forget that.

But it's also currently, according to my computer, minus 26. That doesn't tell me the wind chill, and I'm sure it's worse. I can tell you that last night coming home from the Legislature and then a few events in the evening – my typical route is down 96th Street, and I choose that route specifically because that's where Bissel Centre and a lot of the tents are, a lot of the encampments are. Sure enough, last night at, gosh, probably around 8 o'clock it would have been, I think, minus 40 or something like that: folks milling about, sleeping outside in this.

I thought about that this morning, too, because, gosh, I think it was minus 40 or something this morning as well as I'm driving to

the Legislature. I mean, I'm always cold, though; I'll preface that. I'm always cold, but I was frozen in my car. I was shivering in my car and thinking about: holy crow, how is it that people are living in these conditions right now? They are, and I would encourage any of you to – you know, I try to stop and talk to them as much as I can, but you feel hopeless, right? You really do. [interjection] Yes. I will let the Member for Edmonton–City Centre intervene.

Mr. Shepherd: Thank you, Mr. Speaker. I was listening to what my colleague was just saying about the challenges we know folks are facing who are living houseless in the city right now. Certainly, this is a concern I've been hearing from many in my constituency as well. Certainly, I know it has a significant impact on a lot of people here.

We have seen some deaths already in the cold here in Edmonton over the last little while, and I was just reflecting that, you know, a lot of these individuals, when they are seeking help, will go to the emergency room at the Royal Alex hospital. They will go there sometimes simply seeking warmth, but they will also go there seeking care because, of course, in many cases these individuals do experience frostbite and other things, and these individuals will not have an Alberta health care insurance card. One of the things that this government pushed through with this tearing up the agreement with physicians was to remove the ability for doctors at the Royal Alex emergency room to be able to bill for services if they treated one of those individuals with frostbite because they did not have their card. I was wondering what the member thought of that.

5:30

Member Irwin: Yeah. Again, thank you for mentioning that. I mean, it was on my list as well just to talk about what's happening at the RAH, the Royal Alexandra hospital. Of course, it's in my colleague's riding but very close to mine, so we see a heck of a lot of our constituents going there. You know, I can tell you that it's not new that that hospital deals with a lot of marginalized folks, unhoused folks.

I always tell this story. This sounds like a terrible story, but I promise it wasn't that bad. Many years ago, in 2013, I believe, I was biking. In fairness it was before I was a master cyclist, so it was mostly my fault because I was on the sidewalk. I was hit by a car, a silver BMW. We never did find that silver BMW. If you ever see a silver BMW with some damage on the side, let me know. I was hit by a car, and I was okay, but in the immediate aftermath I wasn't. I was in pain, so an ambulance came. Somebody called an ambulance, and I went to the Royal Alex. I still remember being hit by a car but, like, really not knowing if I'd broken my arm or what and having to wait quite a while, like having been low priority. I thought: oh, my goodness, I was hit by a car, and I'm that low priority. My point in saying that is that I know that the strain on that hospital is not new.

However, this is a hospital, and these are health care workers there. Both that Member for Edmonton–City Centre and I know a number of the health care workers there, and they are doing amazing work. I'd give them a shout-out if they're watching, but I know they're not watching because they are incredibly busy.

They have been, again, impacted by a whole number of issues. They're a lot of the ones that are dealing with the shigella outbreak. They're also dealing with the drug poisoning crisis – right? – a drug poisoning crisis that we've seen just skyrocket in the last few years, exacerbated by the pandemic, a drug poisoning crisis where, you know, sadly, we've not seen a lot of action, any action, in fact, from this government to address the immediate pressing issues on the front lines in our area in particular.

Okay. Oh, my goodness, I realize I haven't even got to some of the big things that I want to speak about here. I'll bring it back to

Bill 4 just in case the Speaker is concerned about me going off track. I don't think he would be because he knows I always like to tie up the loose ends there. You know, I mentioned it earlier. This was an opportunity for this government to really take some profound action when it comes to many of the compounding crises we're seeing in health care.

Essentially, what this bill does is that it reverses that absolutely horrific decision that we saw from the UCP regarding tearing up the contract for doctors. I've heard my colleagues talk about this as well, that, you know, because of particularly the previous Health minister, his actions, so many Albertans do not have a family doctor. Family doctors have left this province. Family doctors have retired. Some have retired early. A big part of it is just the way that that minister engaged with them. It's been this ongoing combative approach instead of one that could be collaborative, right? That's what those health care workers in the midst of a pandemic deserved, and they didn't get it. Of course, you know, as we've said on the record here, we're happy to see that they're reversing that decision, but we didn't need to be here. We didn't need to be here when it comes to so many decisions that this UCP government has implemented, particularly when it comes to health care.

I can't stand in this Chamber and talk about health and not talk about the absolute crisis that is children's health care. You know, I've shared this on social media, too. It's hard to believe that we've come to a place where it's almost, like, acceptable that children are being denied care. The members opposite might say: well, they're not being denied care. Well, this is exactly what we see when we see the closing of RFH in Calgary, the moving of respite services. I can tell you that that was Friday night when that news broke, and admittedly I still don't have a whole lot of a social life, so I was following that story closely as it was breaking. I believe it was CBC that broke it first, so immediately I just posted about it and said that this is heartbreaking that children receiving respite services would be moved at a time when their families and them, of course, the patients themselves, are needing those supports so critically. [interjection] I'll let the Member for Edmonton–Mill Woods intervene.

Ms Gray: Thank you very much to my colleague from Edmonton–Highlands–Norwood, who has been responding on Bill 4 and talking now about what we're seeing in children's hospitals and with our emergency rooms being overwhelmed and tying that into what she was talking about just before that point, the doctors leaving the province and the shortages that we're seeing in health care.

I just wanted to intervene to add my own reflection that it's really, really hard to see the news that's coming in and what's happening. I know that the Member for Edmonton–Highlands–Norwood supported our efforts to have emergency debates about these issues not once but twice in the last several days of sitting, that we were not able to have, specifically because of the urgency of what is currently happening when it comes to children's health care and particularly emergency care in light of what's happening across the province when it comes to the flu, COVID, RSV that are happening. I think it ties in really nicely to this debate.

Thank you, Mr. Speaker.

Member Irwin: Thank you. You're absolutely right. The Member for Edmonton–Mill Woods is absolutely right.

You know, that was a hard thing to see yesterday. I'll take you back. I just had to double-check to make sure it was Tuesday today. That was just yesterday. Of course, it was the first opportunity we had since the news broke on Friday about Rotary Flames House. Yesterday was the first opportunity we had to really highlight that as another issue on top of the many factors that make up the crisis in

children's health. Naturally, just yesterday, on Monday, the Member for Edmonton-City Centre did ask for an emergency debate on children's health care, and he was denied, which sends a pretty clear message.

Then not longer after that, moments later, in fact – moments later, in fact – our Member for Edmonton-Strathcona, the leader, was denied an opportunity to debate her bill in this Chamber. In fact, it was moved down the priority list by this UCP government, that, you know, claims to want to prioritize private members' business. No; only when that private members' business is their private members'. It's about health care, you know? I feel like this Health minister – he may not have had a say in that decision – wants to be collaborative and wants to hear our ideas, like the ideas we've outlined in Bill 201, which didn't just materialize out of nowhere. Those ideas in Bill 201 came from a whole heck of a lot of consultation from our side of the House.

In the span of just a few minutes yesterday this government told us exactly what they think about health care. And let me tell you that we will continue to remind Albertans about how this government refuses to prioritize health care and children's health care every moment.

The Speaker: Are there others?

The Opposition House Leader has the call.

Member Irwin: Oh, is that one over there?

The Speaker: I think he was just rising.

The hon. member.

Ms Gray: Thank you very much, Mr. Speaker. I appreciate the opportunity to rise to address second reading of Bill 4, the Alberta Health Care Insurance Amendment Act, 2022, a bill that, when you look at the contents of the bill, appears very straightforward. It is updating, based on the change in title of one of our ministries, Justice and Solicitor General, throughout the bill where that needs to happen. Then the real crux of this piece of legislation is the repealing of section 40.2, which referred to, essentially:

(2) The Lieutenant Governor in Council may, by order, terminate . . .

(b) the AMA Agreement, or [agreements].

It's laid out with a bit more language.

5:40

I'm not going to read that into the record, Mr. Speaker, but essentially the entirety of Bill 4 is removing from government an ability that they gave themselves in 2019 that has been incredibly controversial since the first time that it was introduced following through to when it was used in February of 2020, and now here we are in December of 2022 removing this ability because it was deemed to be so problematic and caused so many issues that moving forward, when it comes to the relationship with doctors, the absolute best thing that they could do would be to remove that and make assurances that similar powers would not be granted again in the future.

This has to do a lot with this government negotiating, bargaining with important front-line health care providers, and we've seen this government's tactics when it comes to bargaining. In the case of these powers to tear up agreements legislatively by order in council, by cabinet behind closed doors, and for cabinet behind closed doors to make those decisions, it really created a loss of trust when it came to the doctors and a toxic relationship. It was certainly characterized as bargaining in bad faith for the government not only to grant itself these powers in an attempt to strong-arm and then to use these powers.

As we debate Bill 4, I think the history of these mechanisms and why they're being repealed now are really salient and really important to the conversation that we're having, and I want to thank all of my colleagues who have spoken and reminded us, Albertans, other legislators here in the Chamber who are listening to the debate about why this happened and the history and the negative impact. I think that in the context of the Official Opposition supporting Bill 4 and supporting the removal of these powers, we need to acknowledge and put on the record the damage that was done by the creation of these powers through Bill 21 and then the use of these powers in February of 2020, because it's been a multiyear campaign against doctors that's had incredibly negative results here in our province.

I believe my colleague from Edmonton-City Centre noted that the minister used the language "no longer required" and suggested that it was never required, and I would have to agree. It would have been better for Alberta had we never gone down this path when it comes to what became quite a toxic relationship with doctors.

Member Irwin: Member?

Ms Gray: Thank you very much, my colleague.

Member Irwin: Yeah. You know, I just started listening to your remarks, but I wanted to get this one out there. I know that you, like me, have knocked on a lot of doors. I've seen you door-knocking a lot in beautiful Edmonton-Mill Woods. It is beautiful. It's a long drive for me, but it is beautiful.

You know, I'm curious: when you're door-knocking, is it similar to what I've heard, that, obviously, health care is a priority? You mentioned the content here in Bill 4 about the reversal of the ridiculous decision to tear up doctors' contracts. Is that something you've heard about at the doors, or are you hearing a lot more about the crisis in health care, including the crisis in pediatric health care, the crisis that we've talked about with the impact on health care workers, which I didn't even get to in my remarks, particularly the morale issues, the burnout, the stress? Hopefully, I'll get another chance to talk about that because I have a lot of stories that I sure would like to get on the record. I imagine that in Mill Woods you talk to a lot of health care workers as well, so I'd love to hear a little bit about that from you, the Member for Edmonton-Mill Woods.

Ms Gray: Thank you very much to my colleague from Edmonton-Highlands-Norwood. Yes, when out knocking on the doors, I have heard from health care professionals as well as doctors. [An electronic device sounded]

Member Irwin: Can we just pause for a second?

The Speaker: Yes.

Ms Gray: Thank you.

The Speaker: The hon. member.

Ms Gray: Thank you, Mr. Speaker. I certainly have heard on the doors. When door-knocking ever since Bill 21 was first introduced in 2019, every now and then I would run across health care workers or doctors who are really attuned to this and aware of it, so I've had some good conversations about that.

But generally speaking, in Mill Woods – Mill Woods is a community designed in the '70s, and in the heart of Mill Woods is the Grey Nuns community hospital. In fact, I see it every day as I drive in and out of my own home in Mill Woods. We have so many health care workers and others who support the hospital who live in the surrounding communities. Absolutely, health care is an urgent

priority for the constituents of Mill Woods and something I hear about often, particularly because in Edmonton the Grey Nuns community hospital, which is 40-plus years old, is the newest hospital in the city of Edmonton. I think that's always something really important to remember as well, because health care needs have grown and changed and population size has grown quite a bit since Mill Woods was first designed and built, beginning in the '70s, and the Grey Nuns hospital was originally created.

So, yes, I would say that there was incredibly high awareness of what was happening through Bill 21 and the dispute with doctors. The highly publicized incident of the previous Minister of Health engaging with a doctor on his driveway really hit a lot of people's radars. That story was spread far and wide because it was emblematic of the toxic relationship and the back and forth that was happening, the threatening of funding and support when it comes to doctors' ability to bill. I know I saw it characterized in many ways in places, that the AMA was of the strong opinion that they had approached the table for negotiating these agreements wanting to be productive. [interjection] Yes. Thank you.

Mr. Nielsen: Thanks. Having a very long time ago had the opportunity to live in the Mill Woods area, actually a couple of blocks from the Grey Nuns, I know, of course, that a lot of support workers do live in the area because they work there. Again, you know, I'm always a person of kudos where it's due: the Health minister trying to repair that relationship with doctors. But I'm wondering if you've had the opportunity to speak to some of the support workers, the folks that clean the hospital, things like that, because we know that that relationship did not go well. It's affected people in their jobs. During your time door-knocking in Edmonton-Mill Woods, have you heard anything about the current Health minister's work trying to repair that relationship with support workers? Is there any success, or has it gotten it worse? Has nothing happened? I'm wondering if you might be able to fill in some comments around that.

Ms Gray: Thank you very much to my colleague, who I did not realize was a former resident of Mill Woods. I'd be curious to know which neighbourhoods you were in, my friend.

Certainly, the hospital is itself like a small city, the variety of people and tasks required to keep a hospital running and to provide that care. Certainly, we know we often hear the phrase "doctors and nurses," but when it comes to front-line health care, the team is so much broader and deeper than just those very front-facing roles: everyone from the cleaning staff, laundry services, the team that operates in the morgue, the teams that hand out the medications, the porters, on and on and on. Of course, during the pandemic we saw a wildcat strike, not at the Mill Woods community hospital but at other locations here in the city. So that toxic, controversial relationship has really had a negative impact in so many different ways. It's been frustrating to watch.

I realize that we're getting close to 6 p.m., Mr. Speaker, so our time to talk about Bill 4 is going to move fairly quickly on us. I want to make a few of my priority points, and one of them is around the conversation about: Bill 21, the tearing up of doctors, the very aggressive bargaining that was taking place over the last several years, which we are now backing away from, which I appreciate, have led to doctors leaving Alberta.

Now, it's certainly a matter of debate in this place as to whether there is an issue here or not, but CPSA put out updated stats for 2021 that, in my mind, show very clearly that there is an issue. It's not because doctors just started leaving Alberta this year, Mr. Speaker. Doctors have always had an influx and an outflux, but

what we've seen is a trend where in 2018 there were 52 doctors who left . . . [interjection] Oh, please. Happy to.

5:50

Mr. Copping: Thank you to the hon. Member for Edmonton-Mill Woods for allowing me to stand and speak. I want to speak to this one issue just for clarity in terms of doctors. My comments that I made earlier – and there's a recognition that we do have not enough doctors, right? We have more doctors than we've ever had before. The number of doctors is increasing, but we don't have enough doctors, and we don't have enough doctors in the right places. We fully appreciate that, and quite frankly we're working on this.

Mr. Speaker, I just want to point out that I was very pleased to reach an agreement with the AMA which will assist us in addressing that issue, providing stability, partnership, innovation, ability to attract and retain. I'd like to point out that although the hon. member across the way was talking about history, that's also part of the history, our reaching an agreement that was accepted by over 70 per cent of doctors. Again I'd like to thank you for your support in moving forward. This was part of the agreement in terms of doing it, and we're looking forward, again, to passing this and continuing to focus on getting more doctors here in Alberta.

Ms Gray: Thank you very much, Minister. Yes, I think it is incredibly important that an agreement has now been reached. Removing the ability to tear up that agreement, through Bill 4, is a very positive step, and I think that's quite good.

Your comments around "We need more doctors," I think, are really true, but I also really just want to emphasize that many, many experts and many in the medical field feel that this government's aggressive tactics through Bill 21 and entering into what many characterized as a war on doctors, which I have seen escalate from when it began in 2019 and continue through a pandemic, which, frankly, is ridiculous, have now led to the highest number of physicians leaving Alberta that we've seen in the last five years, almost three times as many as we saw in 2018 and 2019.

When it comes to growth in the Alberta physician workforce, the minister rightly points out that the number of physicians has increased, but this year it increased only by 45. Last year it increased by 161, the year before that by 262. The number of physicians we're growing by is shrinking, and the trend line is such that it's going to be in the negatives next year if these trends continue. That's particularly concerning given where we find ourselves in the need to find doctors.

The word the minister used, "stability": agreed, incredibly important. I think that's something that we should value and continue to try to protect. Counter to that the behaviour we saw from the UCP government in 2019, 2020, carrying into 2021, when they were characterizing doctors as greedy and self-serving, when they were running public campaigns to vilify doctors in this battle that was happening between the government, when they were working to force agreements and force proposals, including the 10 proposals that the previous Minister of Health deemed essential, essentially none of which are in practice now. I think that's a record that we need to be aware of and to move away from because it's contributed to putting us in the position that we're in now, and it really has been a bit of a mess.

Kudos to the current minister. I'm glad that an agreement has been reached and that we've backed away from that extremely toxic, adversarial negotiating style, the bargaining in bad faith that we previously saw. But the issue we have today continues to exist in that we need more doctors, we need to recruit doctors, and trust has been broken. Certainly, we need to be helping people to find doctors and trying to recover from the care deficit that has been put in place.

Now, in preparing for my remarks for Bill 4, I was briefing myself up on the current state of how someone goes about to find doctors, and I was reminded. Seven and a half years ago, before I was elected, Mr. Speaker, I worked as a software consultant, an IT project manager, and one of the projects that I helped with was the albertafindadoctor.ca website, which still seems to be running and looks similar. I'm sure it's completely different in the back end and in many features from when I worked on it seven years ago – IT moves at a pretty quick pace – but being able to, as I prepared for my remarks, see that previous work brought forward really reminded me of how important it is that people be able to access that public health care and to have that doctor.

As we debate Bill 4, one of the things I mentioned briefly when my colleague from Edmonton-Highlands-Norwood spoke was that when we're talking about health care in this House, the current crisis that we see in children's health care, the current crisis that we see in emergency rooms being overwhelmed, we need to find some time to make sure we're having those conversations as well. There have been some attempts to have emergency debates around that.

The other piece that I think is interesting to consider when we're talking about health care changes in second reading was the private member's bill measuring service standards, Bill 201, because when we're talking about our health care system and how it's performing, whether we're seeing what we expect out of that system, it's incredibly important that we have at our fingertips good data about what is happening, and I think that the private member's bill that was introduced but not debated is really important.

When considering Bill 4 as well as what we're seeing here today, I just want . . . [interjection]

The Speaker: There have already been three interventions. I'm sorry.

Member Irwin: Oh, we already had three? Okay.

Ms Gray: Yeah. We've had three.

Member Irwin: Okay. Sorry.

Ms Gray: No. That's okay. Thank you very much.

The Speaker: No problem.

Ms Gray: One of the challenges when I reflect on the debate that happened for Bill 21 back in 2019 – if I recall correctly, one of the

government's arguments was that they were clarifying and codifying in legislation a power they believed they already had. We've seen the government make this kind of argument on multiple pieces of legislation, including Bill 10, where they were giving themselves new powers under the Public Health Act. We see that happening again, in some ways, when we talk about Bill 1 of this session, the sovereignty act. Throughout so many of these issues . . .

The Speaker: Hon. members, Bill 4 is before the Assembly. Are there others?

Seeing none, I am prepared to call on the minister to close debate.

Mr. Nielsen: Sorry.

Mr. Jones: Oh, he just said it.

Member Irwin: It's your own bill. Why aren't you speaking to it?

The Speaker: Order. Order.

I will say that it's a very late arrival to the feet by the hon. Member for Edmonton-Decore, but I'll give it to him on this occasion.

Mr. Nielsen: Well, thank you, Mr. Speaker. I appreciate that. I know we're coming in under the wire here. You know, as I'd mentioned a little bit earlier during an intervention, always willing to give kudos where it's due, and I thank the Minister of Health for bringing Bill 4 forward to fix a very serious problem that, in my opinion, was the result of – let's be frank. It was kind of a childish tirade, you know, going into negotiations, not really getting the way they wanted, and: well, let's just rip it up. That's not how negotiations work, and I'm glad that the current Minister of Health is trying to do a little better and showing a better way to negotiate. Obviously, by getting the doctors to agree, there was obviously something there that allowed them to feel like they were getting a good deal out of it.

You know, as I was listening to the course of the debate, jotting down many, many, many notes – hopefully, I'll get a chance to talk about those later in Committee of the Whole.

The Speaker: I hesitate to interrupt but see the time for this item has expired. It is now 6 o'clock, and the House stands adjourned until this evening at 7:30.

[The Assembly adjourned at 6 p.m.]

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