

LEGISLATIVE ASSEMBLY OF ALBERTATitle: **Friday, April 15, 1977 10:00 a.m.**

[The House met at 10 a.m.]

PRAYERS

[Mr. Speaker in the Chair]

head: **INTRODUCTION OF BILLS****Bill 236**
The Auditor General Act

MR. CLARK: Mr. Speaker, I beg leave to introduce Bill No. 236, The Auditor General Act. Basically this legislation would establish an auditor general in Alberta on grounds very similar to the federal Auditor General. The provincial office would allow for intensive investigation of government spending. Such investigations would be selective, with regular accounting procedures left to the Provincial Auditor, as is currently the case. The auditor general would be appointed by the cabinet but, like the Ombudsman, could be removed only by vote of the Legislature.

[Leave granted; Bill 236 read a first time]

head: **TABLING RETURNS AND REPORTS**

MR. GETTY: Mr. Speaker, I'd like to table a reply to Motion for a Return No. 110 as ordered by the House, and file a copy of a study into underground storage of hydrocarbons.

DR. HORNER: Mr. Speaker, inasmuch as there's been some interest in the House relative to a number of motions for returns, particularly 101, I felt I should file some of the documentation. Additional documents will be filed later next week. I hope all hon. members will read them. We'll need all their advice.

DR. BUCK: Is that the lamb processing plant?

head: **INTRODUCTION OF SPECIAL GUESTS**

MR. KIDD: Mr. Speaker, it's a great pleasure for me to introduce to you, and through you to the Members of this Legislative Assembly, 35 high school students from the Springbank community high school. They're in the members gallery. They're accompanied by their teachers Mr. Carl Christensen, Mr. Tom Laubman, and Mr. Kevin Gibbons. I would ask them to rise and receive the welcome of this House.

MR. CHAMBERS: Mr. Speaker, I'm pleased to introduce to you, and through you to the members of the House, some 55 fine-looking boys and girls from Scott Robertson school located in my constituency. They're accompanied by their teachers Mrs. Goebel

and Mrs. Sephton, and parents Mrs. Hoekstra and Mrs. Russell.

I might add that I think children from Scott Robertson school have visited this Assembly every year. I'd like to congratulate the teachers and the students for their interest in the democratic process.

They're in the public gallery. I'd like to ask them to stand and be recognized by the members.

head: **ORAL QUESTION PERIOD****Grain Marketing**

MR. CLARK: Mr. Speaker, I would like to direct the first question to the Minister of Agriculture. It deals with the whole question of grain handling. Could the minister indicate whether the government is currently giving consideration to Alberta withdrawing from the Canadian Wheat Board?

MR. MOORE: No, Mr. Speaker.

MR. CLARK: Mr. Speaker, a supplementary question to the minister. Does that mean, no he couldn't give us an answer, or no the government isn't considering attempting to move out from the Canadian Wheat Board operation?

MR. MOORE: Mr. Speaker, over the course of the years we have in a variety of ways encouraged the operations of the Canadian Wheat Board to improve in a way we think would be beneficial to Alberta farmers. Indeed, we have felt that the jurisdiction of the Canadian Wheat Board over grain that is grown and processed in this province is something that could be changed. In other words the control by the Canadian Wheat Board over, for example, rapeseed that is grown and crushed in Alberta crushing plants should be the subject of some new discussions regarding how that control is handled.

On the other hand, when it comes to export grain marketing, we realize the method of marketing that has been developed over the years by the Canadian Wheat Board has been fairly effective for Alberta farmers, and we are not in any way anxious to opt completely out of the Canadian Wheat Board's operations in terms of export grain sales.

MR. CLARK: Mr. Speaker, a supplementary question to the minister. Has the government taken steps which would lead to these renegotiations with the Wheat Board, say, with specific regard to rapeseed? Are renegotiations under way at this time between the government of Alberta, or its agencies, and the Canadian Wheat Board?

MR. MOORE: Mr. Speaker, we are not really dealing in that situation with the Canadian Wheat Board, but rather with the government of Canada and the legislation that's provided to give the Canadian Wheat Board certain powers with respect to grain marketing in the designated region, which hon. members know is Manitoba, Saskatchewan, Alberta, and the B.C./Peace country block.

We've made a number of representations relative to that problem and others to the Hon. Otto Lang, who is minister responsible for the operations of the

Canadian Wheat Board. The representations made by this government, supported quite strongly by Unifarm and other organizations, led to some changes in the Canadian Wheat Board operations to create a separate pool for malting barley, for example. Last year it provided farmers with something like \$1.50 per bushel more than they were receiving a couple of years ago for malting barley.

So we've made representations in a number of areas and will continue to do so when we feel it's in the best interests of farmers in this province.

MR. CLARK: Mr. Speaker, a supplementary question to the minister. Are any negotiations going on now with the federal government with regard to Alberta attempting to have changes made in the Canadian Wheat Board, from the standpoint of sales responsibilities?

MR. MOORE: Mr. Speaker, no, I would have to say no negotiations are being carried out with regard to any changes in the Canadian Wheat Board Act or its jurisdiction with regard to sale of our grain outside Canada.

MR. CLARK: Mr. Speaker, a further supplementary question to the minister. I raise the question in the context of this grain handling question. Has the Minister of Agriculture arrived at a conclusion on the recommendation made to the minister by Mr. Omar Broughton, I believe in 1974, that the Alberta Wheat Pool should come under the direct control of the Minister of Agriculture?

MR. MOORE: Mr. Speaker, I'm not aware of any recommendations made with respect to the Alberta Wheat Pool in terms of the company or the act coming under control of the Minister of Agriculture. I can say that during the last two weeks, I along with other members of our caucus, met with the president of the Alberta Wheat Pool, a number of the board of directors, and had a very effective and worth-while meeting with Mr. Harrold, regarding not only operations of the Alberta Wheat Pool but the manner in which they operate under the private act.

We had discussions relative to whether that was an appropriate way for the Alberta Wheat Pool to continue, whether there might be a joint effort between government and the Alberta Wheat Pool to improve the act so their operations would perhaps be carried out better in certain areas than they are now.

I would have to say, Mr. Speaker, that that meeting was very effective in terms of an understanding between me and the president of the Alberta Wheat Pool about the operations of the Pool.

MR. CLARK: Mr. Speaker, a supplementary question to the minister. Has either the Minister of Agriculture or the minister responsible for co-operatives given instructions to Legislative Counsel to commence drafting legislation which would do away with the private act under which the Alberta Wheat Pool now operates?

MR. MOORE: Mr. Speaker, I'm not aware that any instructions have been given to anyone to draft a new act. Indeed, further discussions will be carried out among me, the president of the Alberta Wheat Pool,

and others with respect to whether any review or change is necessary.

It's quite frankly my view that the act, which I believe was brought in in 1970, does have certain areas in it that purport to give undue powers to the board of directors or the delegates of the Alberta Wheat Pool which they in fact are not using. It may well be beneficial for a review of the act to be undertaken relative to some changes that might really help the Alberta Wheat Pool and the problems they may have from time to time with either their membership or other persons suggesting they have undue powers in certain areas delegated to them by way of a private act of this Legislature.

I think it's important any suspicion that might be cast upon the Alberta Wheat Pool because of the drafting of that act be done away with if it's possible for us to do that.

MR. CLARK: Mr. Speaker, one last supplementary question to the minister. Was the minister in a position to give a commitment on behalf of the government to the president of the Alberta Wheat Pool that the government would not be moving unilaterally and bringing in legislation doing away with the private act under which the Alberta Wheat Pool has operated for a great number of years in this province?

MR. MOORE: Mr. Speaker, first of all I'd have to say that the president of the Alberta Wheat Pool is the kind of individual who quite frankly didn't ask that kind of question. I think he knows this government has enough responsibility not to do away with the private act unilaterally, but rather to make changes, if changes are made, in full consultation with the Alberta Wheat Pool or board of directors and their delegates.

MR. NOTLEY: Mr. Speaker, if I could put a supplementary question to the hon. minister leading directly to the first question put to him by the hon. Leader of the Opposition, concerning the jurisdiction of The Canadian Wheat Board. Does the government of Alberta have a position today with respect to the promise made by the Hon. Otto Lang in 1974 that there should be a referendum among producers on the feed grain policy announced in 1973 and in part amended in 1976?

The question really relates to whether or not the government of Alberta feels there should be a referendum among producers on this matter as was promised in that federal election campaign.

MR. SPEAKER: The hon. member is clearly asking a question of opinion as to the merits or other aspects of a referendum.

MR. NOTLEY: Mr. Speaker, perhaps I can rephrase that and instead of asking for an opinion from the Alberta government, ask for the position of the Alberta government with respect to the referendum.

MR. SPEAKER: A rose by any other name . . .

MR. NOTLEY: Mr. Speaker, perhaps I can ask the question in this light: has any representation been made to the federal government with respect to the

referendum promised by the federal minister in charge of the Wheat Board?

MR. MOORE: Yes, Mr. Speaker, representation has been made, although in some respects rather indirectly. The Hon. Otto Lang asked the Canadian Federation of Agriculture if they would review the question of whether or not a plebiscite should be held and what form a plebiscite should take.

The Canadian Federation of Agriculture asked for a response from farm organizations and provincial governments. I responded directly to the Canadian Federation of Agriculture, suggesting to them that the new feed grains policy, brought in in 1974, had really not been in operation long enough, particularly in spite of a number of changes which had been made with respect to domestic feed grain pricing, to create a situation where farmers could intelligently make a decision with all the facts at hand as to whether it was effective or whether we should go back to full Canadian Wheat Board control.

In short, Mr. Speaker, it's my view that a plebiscite is not timely and we would be better to wait a year, maybe longer, until farmers had a better opportunity to review and understand what is currently happening.

MR. NOTLEY: Mr. Speaker, a further supplementary question to the hon. minister. When the changes in the feed grain policy were announced last year, the minister indicated some concern. My question to the minister with respect to the changes announced in 1976: is the government of Alberta of the view that these changes are disadvantageous to Alberta producers?

MR. SPEAKER: We're still in the realm of opinion. As a matter of fact the concluding portion of the hon. minister's answer was in that category as well. Perhaps we could get the question down to a matter of fact rather than opinion.

MR. NOTLEY: Mr. Speaker, maybe I can put it again and just ask the hon. minister whether or not any representation has been made to the federal government vis-a-vis the changes announced in the feed grain policy as of, I believe, June or July of 1976?

MR. MOORE: Yes, Mr. Speaker. Through the Alberta Grain Commission we did make some suggestions that we thought would improve the domestic feed grain pricing policy more than what had been announced by Mr. Lang in June. Those changes came into effect August 1. I expressed the point of view when they were announced in June that they would not be as beneficial to the western Canadian and Alberta livestock feeding industry as some people might have thought. Indeed to some extent that has been the case.

The new feed grains pricing policy is based on the price of corn and soya bean in the United States. To some extent it has had a detrimental effect on the Winnipeg Commodity Exchange, and that does concern us.

Flooding — Fort McMurray

MR. CLARK: Mr. Speaker, I'd like to direct the second

question to the hon. Deputy Premier, responsible for emergency services. I raise the question in light of the situation in Fort McMurray today and ask the minister if he can give us a brief account of the seriousness of the situation and if he can indicate whether emergency measures people are going to be responsible for a blast, hopefully to remove the ice flow on the river itself.

DR. HORNER: Mr. Speaker, the latest report I had just before coming into the House is that in fact 35 to 40 families in the trailer court park had to be evacuated. The flooding is a result of a jam on the Athabasca River backing up the Clearwater. Some blasting has already been done by the Department of the Environment and more is going on later this morning. I think 11 o'clock is the next attempt to blast the Athabasca River ice. Disaster Services, Environment, and the town are working together in the emergency situation, which we hope will be rectified very shortly.

Land Transaction — St. Albert

MR. JAMISON: Mr. Speaker, I'd like to direct a question to the Minister of Municipal Affairs. This is a follow-up to my question last week regarding a land transaction by the city council of St. Albert. I was wondering if the minister has had an opportunity, as requested by an ex-councillor of St. Albert, regarding the possibility of illegal financial transactions with the city.

MR. JOHNSTON: Mr. Speaker, I can advise the House that one of my senior municipal inspectors is now in the city of St. Albert. He has not been able to give me a complete report as to that transaction. However, I have been assured of the total co-operation of the city of St. Albert.

Rent Regulation Appeal Board

MR. R. SPEAKER: Mr. Speaker, my question is to the Minister of Consumer and Corporate Affairs. Could the minister indicate whether the civil servants who work in the rent regulation offices have been given notices that their jobs will be ending as of June 30, 1977? [laughter] Maybe the question is a joke, but I think the answer is often even a greater joke.

MR. HARLE: Mr. Speaker, when officials were employed for operation of the Rent Regulation Appeal Board, all were aware that the legislation would end on June 30 and that some clean-up would obviously have to take place after the act officially no longer affected rents. For that very reason, of course, it would not be expected that notices of termination would be given at this time.

Rent Increases

MR. R. SPEAKER: Mr. Speaker, a supplementary to the minister. Will the minister be tabling any results with regard to monitoring of rent increase notices which are to be effective as of July 1, 1977?

MR. HARLE: Mr. Speaker, I would expect when the announcement is made, the facts the government feel important at that time would be stated.

Vehicle Insurance

MR. TAYLOR: Mr. Speaker, my question to the hon. Minister of Consumer and Corporate Affairs involves the concept that a large deductible in collision insurance policy would tend to make people more responsible. Has the hon. minister made any study of what a larger deductible made mandatory by legislation might do in the way of safety?

MR. HARLE: Mr. Speaker, I'm not certain I understand the import of the question. As I understand the present situation, obviously the amount of the deductible would determine the basic amount of the premiums. On the compulsory part of the Alberta automobile insurance policy now, it would obviously have a bearing in that respect. But to legislate something like that would seem to me to be getting into the area, really, of methods of merchandising insurance policies. I'm not sure the government would be anxious to enter that field.

MR. TAYLOR: A supplementary, and perhaps I could enlarge slightly. There's a school of thought that feels that while the larger deductible made mandatory by legislation would reduce the premium — and I think that's logical — it would also make a percentage of drivers, who today are irresponsible because they have no deductible, more responsible.

My question really is: has any study been made, or does the minister know of any study that has been made, to ascertain whether responsibility increases with the amount the person has to pay out of his own pocket at the time of an accident?

MR. HARLE: Mr. Speaker, I know of no study. But I would point out that if you increase the amount of the deductible, of course it would affect the collision portion of the premium. But the converse is also true: by having a low deductible, you increase the premium. It takes a fair amount of responsibility to accumulate assets to pay the premium. So I'm not sure which balance should be favored.

DR. BUCK: A supplementary question, Mr. Speaker. Can the minister indicate if the minister or his department has had any studies done on looking at other jurisdictions where the first \$250 is not insurable, and what effect that has had on premiums?

MR. HARLE: I know of nothing that has come across my desk that would indicate any studies as such on that particular matter. But I would say this: the superintendents of insurance and the Alberta Automobile Insurance Board continually have under consideration all areas of a policy, and I'm sure if there was some benefit to be obtained from that type of approach it would be looked at.

DR. BUCK: A further supplementary. Can the minister indicate if he knows of other jurisdictions, especially in the United States, where this has been tried? Is the minister aware of that, and does he know if it works?

MR. HARLE: Well, Mr. Speaker, I'm not personally aware of any jurisdiction that might have thought of that approach. I would say this though: there is a

continual monitoring of efforts made in all jurisdictions in automobile insurance, because everybody has the same problem. It's not something peculiar to Alberta.

Three Rivers Dam Project

MR. NOTLEY: Mr. Speaker, I'd like to direct this question to the hon. Minister of the Environment and ask whether he has had an opportunity to study the report of the Environment Department's science advisory committee in respect to the proposed Three Rivers dam?

MR. RUSSELL: Mr. Speaker, offhand I can't visualize what report the hon. member is referring to. I have received a number of letters and briefs with respect to it. I believe the science advisory committee did send me a small brief, which has been acknowledged. But that's been the extent of it.

MR. NOTLEY: Mr. Speaker, a supplementary question to the hon. minister. Has the department or the minister had an opportunity to evaluate the claim of the science advisory committee that the phase one report seriously overestimates the economic benefits of the project; specifically that the benefits would be about 50 cents per dollar spent, rather than the \$1.59 claimed in the phase one study?

MR. RUSSELL: Well, Mr. Speaker, by his question I believe the hon. member is falling into the same trap many other people are; that is, jumping to premature conclusions with respect to the regulation of the flow of the Oldman River.

Based on our experience with the hearings on the Red Deer River we adopted a different tack with respect to the Oldman River, and in that case, made the preliminary reports available to the public and invited response. That has happened. As a result of that we have established a joint public-service/citizens management committee, which is now designing the phase two study which will be used for the very extensive public hearings being planned.

Certainly the kinds of questions the hon. minister is referring to are now in fact being studied by the management committee and will be answered in the phase two study. So the short answer to the question is yes.

MR. NOTLEY: Mr. Speaker, a supplementary question to the hon. minister. I thank the hon. minister for my promotion. I'm not sure what that will do to the caucus.

MR. CLARK: Less problem in your caucus than in theirs.

MR. NOTLEY: Yes, I'm sure that's true!

Mr. Speaker, to the minister: will the claim of the science advisory committee that the water projections in the irrigation area are inflated also be assigned to the present committee that is designing the phase two study?

MR. RUSSELL: Yes, Mr. Speaker. The purpose of making the phase one studies public at this early date was that we could identify as many contentious

points or unanswered questions as we could and provide that information at the phase two stage.

MR. NOTLEY: Mr. Speaker, I've one supplementary question which might better be directed to the hon. Minister of Agriculture. The science advisory committee had indicated there was a need for thorough evaluation of irrigated crop markets. The committee went on to suggest that such crops are nearing their market potential. My question, Mr. Speaker, to either the Minister of Agriculture or the Minister of the Environment: will there be a specific study evaluating the crop potential for irrigated land?

MR. MOORE: Mr. Speaker, no, I don't believe there is a specific study relating to that. But quite frankly I don't understand any statement that indicates that the potential growth of irrigated crops is limited.

MR. NOTLEY: Mr. Speaker, the question was not what in fact could be grown. The question was with respect to market potential.

MR. MOORE: Mr. Speaker, I presume the hon. member is referring perhaps to some very intensive irrigation farming such as vegetable production or some item such as that. But certainly with regard to cereal crop production, sugar beets, and a number of other areas, the potential is unlimited. Of course it's no different on irrigated land than it might be on dry land.

Kidney Transplant Team

MR. KUSHNER: Mr. Speaker, I wish to direct my question to the Minister of Hospitals and Medical Care. It's a question I sort of casually follow from time to time. This is in reference to a team operating in the Foothills Hospital. I wonder if it actually has disappeared; we don't hear any more of it. I wonder if the kidney transplant team is in fact functioning in the Foothills Hospital in Calgary and what the successes or failures might be.

MR. MINIELY: Yes, Mr. Speaker, I'm pleased to report to the hon. member and to this House that the kidney transplant team has been functioning in the Foothills Hospital for the last two to three months. I would emphasize that the hospital has provided me [with its] report on the early success of kidney transplant operations in the Foothills Hospital which I believe the hon. member would find interesting relative to the performance of the kidney transplant team at the hospital to early February.

Hospital Waiting Lists

MR. KUSHNER: A supplementary question to the minister. I wonder if the minister could inform this Assembly what the waiting is of hospital patients this year compared to last year. I understand that it has risen quite substantially.

MR. MINIELY: Mr. Speaker, that question arose during the course of subcommittee examination of the estimates of Hospitals and Medical Care. I gave an overview which was based on an internal assessment, telephone inquiries, and discussions with the

hospital system in Alberta. Basically as was done in September 1976 — we did this one as of February 28 this year, I believe.

The general situation is that the waiting lists are comparable on a seasonal basis because they fluctuate in terms of magnitude and size. They are generally higher, for instance, in midwinter than in early fall or summer. They are comparable to any previous years. The general overview and situation, Mr. Speaker, is that hospitals are not experiencing any difficulty with respect to the handling of immediate emergencies or immediate hospital admissions that are required.

That's not to say, Mr. Speaker, there aren't at times — because there is a question of judgment relative to patient or to doctor, individual situations that all of us run into — when one says they should have gotten into a hospital faster.

I would remind all members of the Legislative Assembly that an additional factor we should always bear in mind in this area is that we have a greater capacity for patients in Alberta active treatment, auxiliary and nursing home systems than any province in Canada, along with Saskatchewan which is close to this province. I think the overall perspective is that restraint has worked, Mr. Speaker, and there has been no real difficulty in terms of waiting lists or length of waiting for emergencies.

Patients' Hospital Stay

MR. KUSHNER: A supplementary question to the minister. I wonder if the minister could inform this House if the stay per patient has been reduced or increased in the last year?

MR. MINIELY: Mr. Speaker, I was trying to say in my answer that we have not yet compared on a month to month basis. This fall we will have a better impression of a comparative situation that takes into account the seasonal factors. The first informal overview was when I met with the hospital boards and we first pulled together in a co-operative way to try to dampen the annual cost escalation in the hospital system. Then, an actual internal survey was done — talking of the hospital system — in September 1976. This fall we will be able to compare on a basis which would take seasonal factors into account, but that kind of comparison would be invalid until we reach a later stage.

MR. KUSHNER: Mr. Speaker, I wonder if I can rephrase that question. What I was trying to get from the minister was: could the minister inform this House if the stay per patient in the hospital as far as care is concerned has declined or increased.

MR. MINIELY: Mr. Speaker, I'm sorry, I thought the hon. member was referring to the waiting list situation. As I indicated during the course of estimates examination yesterday in the Legislature, I recently met with all the hospital boards, which have very large budgets and frankly have been largely the ones that have had to assess their priorities during the application of restraint in our metropolitan centres of Edmonton and Calgary.

One of the very interesting facts that has come to my attention, in addition to a report from the hospitals

that the quality of care has been maintained and yet we have been successful in applying the 11 per cent expenditure restraint in 1976, is to look at these underlying factors. In specific response to the hon. member for Calgary Mountain View, one of the underlying factors is that the efficiency of hospitals and the average stay period in acute general hospitals is on a downward trend. When I've asked hospital boards and the medical profession for their judgment on the desirability of this downward trend in length of average patient stay, their response to me has unanimously been that this is a desirable trend in the acute general hospital system and should be carried on.

Alberta Wheat Pool

MR. CLARK: Mr. Speaker, I would like to direct my question to the Minister of Consumer and Corporate Affairs. It's in the same vein as the initial question to the Minister of Agriculture. It deals with the matter of the Alberta Wheat Pool private act and the possibility of the Alberta Wheat Pool coming under the jurisdiction of the co-operative activities branch.

Is his department at this time planning any legislation which would bring the Alberta Wheat Pool under the ambit of the co-operative activities branch of the minister's department?

MR. HARLE: Mr. Speaker, I thought the Minister of Agriculture covered the situation very adequately. No, we are not at this time actively working on any proposed legislation. I can only supplement what the Minister of Agriculture said, and say that is the position of the government at this time.

MR. CLARK: Mr. Speaker, a supplementary question to the minister, with regard to the portion of his answer "at this time". Has the minister previously had under consideration in his department the concept of bringing the Alberta Wheat Pool under the direct control of the co-operative activities branch?

MR. HARLE: Not in my time in the portfolio, as far as I'm aware.

Mannville Hospital

MR. R. SPEAKER: Mr. Speaker, my question is to the Minister of Hospitals and Medical Care, with regard to the financial audit on the Mannville Hospital. Has the minister obtained that audit report? Will it be tabled in the Assembly, and when?

MR. MINIELY: Mr. Speaker, I have just received the report in my office. I hope to be tabling it next week, as I have indicated I would.

Field Chemicals — Monitoring

DR. PAPROSKI: Mr. Speaker, my question is to the Minister of the Environment. I wonder if the minister would inform the House whether his department is responsible for testing and monitoring of chemicals and/or pesticides in the field to assure proper control in Alberta.

MR. RUSSELL: Mr. Speaker, to the degree that the operators and retailers — by operators I mean applicators — of chemicals and pesticides fall under the jurisdiction of the act, the answer is yes.

DR. PAPROSKI: Mr. Speaker, on a supplementary, I wonder if the minister would indicate to the House whether his department is responsible for removal of such chemicals, if a decision is made that these chemicals are harmful to the environment.

MR. RUSSELL: Yes, Mr. Speaker, the answer to that is in the act.

DR. PAPROSKI: A final supplementary, Mr. Speaker. In view of the thousands of field chemicals coming into the environment in Alberta — and across Canada, for that matter — I wonder if the minister would indicate to the House whether his department is presently reviewing the monitoring policies regarding this particular issue.

MR. RUSSELL: Mr. Speaker, I'm unable to answer that question now, but I will pursue it with the department and report to the hon. member.

Red Deer River Water Level

MR. TAYLOR: Mr. Speaker, my question is to the hon. the Minister of the Environment. Are the engineers of the Department of the Environment keeping close tab on the amount of water and the lowness of the water in the Red Deer River?

MR. RUSSELL: Yes they are, Mr. Speaker. We're getting weekly reports for each major river basin in the province.

MR. TAYLOR: A supplementary. In view of the very low water in the Red Deer River at the present time, have the engineers expressed any grave concern about the supply this coming summer?

MR. RUSSELL: Well, Mr. Speaker, that supply will be affected by whatever rainfall occurs during the summer months. But based on accumulated snowfall and spring runoff, we're looking at somewhere around 60 per cent of normal runoff at this time. Insofar as the flows themselves are concerned, they're either normal now or slightly below normal.

MR. TAYLOR: Supplementary. In view of the fact that the answer appears to be the damming of the Red Deer River, has the government or the hon. minister received yet the recommendation from the environmental conservation board regarding that project?

MR. RUSSELL: No I haven't, Mr. Speaker. When we were coming to the completion of the public hearings, I discussed the matter with the authority. They indicated they would probably need seven or eight weeks to write their report. That's the schedule we're still aiming at. So I hope to have it toward the latter part of May.

MR. SPEAKER: The hon. Member for Clover Bar, followed by a supplementary answer which the hon. Provincial Treasurer wishes to give.

Starter Home Program

DR. BUCK: Thank you, Mr. Speaker. I thought you'd lost me in that shuffle of yours.

MR. SPEAKER: There hasn't been any shuffling.

DR. BUCK: Mr. Speaker, I'd like to ask the Minister of Housing and Public Works: when the minister made a statement that the Alberta starter home program was 20 per cent cheaper than comparable housing by private developers, can the minister indicate first of all for clarification, was that including the price of land?

MR. YURKO: Mr. Speaker, my office issued a news release on that matter. The news release is available to the hon. member. I suggest he get a copy, read it, and know exactly what I said.

DR. BUCK: The point is, Mr. Speaker, I'd like to know if the minister knows what he said. My question to the minister is: was he comparing apples with apples, or apples with watermelons? I'd like to know, Mr. Speaker, if the houses built by Alberta Housing Corporation were built on land comparable in price to the houses being built by private developers.

MR. YURKO: Mr. Speaker, I have the news release in front of me. It's easy enough for me to indicate what we presented in that news release: factual data. We indicated the actual construction costs. The construction was done by sub-contractors, by the private sector in every case. The Alberta Housing Corporation simply acted as the general contractor. The news release indicated the amount of overhead added to the cost. It also indicated the fact that the lots were priced at an average of \$10,700. But that price contained a small amount of profit to the city of Edmonton, as well as the complete cost for servicing, with the profit included.

The intent of the news release was not necessarily to show the fact that the price of the land was lower. It was intended to show that if the lot was priced reasonably, and the construction costs were indeed somewhere in the order of \$24 per square foot, homes could in fact be built under the SHOP price structure.

DR. BUCK: Mr. Speaker, supplementary question to the minister. Can the minister indicate if lots are available to private developers at the same price they're available to Alberta Housing Corporation?

MR. SPEAKER: Order please. We seem to be analysing a news release, and possibly doing a little informal research on the side in the question period. Perhaps we could pursue this topic on another occasion after the hon. member has reviewed the news release, because of the fact that the question period is not intended to explore facts or news which is generally available.

DR. BUCK: Mr. Speaker, I beg to differ. I believe that the minister misled . . . [interjections] Well, the minister in his release didn't compare apples with apples. Mr. Speaker, regardless of what the news release said — maybe I didn't get the news release — I would

just like to ask the minister: in the figures he quoted comparing the two different prices in administration costs, were selling and advertising included in those costs?

MR. YURKO: Well, Mr. Speaker, I suggest very strongly that the member read the news release. The news release was very factual in presenting information, and only indicated that the total price structure was some \$20 per square foot less than a comparable house on the market. Now, it didn't attempt to indicate the comparison on why it was \$20 per square foot less. If the member wishes, we'll be prepared to provide a comparison. HUDAC recently published a complete analysis of a 1,080 square foot house which came out to \$55,000, and in fact itemized every item of cost and compared them between 1968 and January 1977. So all these comparisons are available.

But that wasn't the purpose of the news release. It was simply to state that the total cost of these six homes came out approximately \$20 per square foot less than what was selling on the market.

Now indeed the price of the private lot is considerably higher than the \$10,700 average price. But that shows that the \$10,700 average price of a lot is possible, and that if it is \$21,000 or \$25,000 or \$34,000 there is indeed a lot of profit in that lot on the private market.

Home Improvement Program

MR. KUSHNER: Mr. Speaker, a supplementary question to the minister. I wonder if the Minister of Housing and Public Works could inform this Assembly when the second phase of the senior citizen improvement program is going to start.

MR. YURKO: Mr. Speaker, the program was announced as effective April 1, and applications and queries are constantly coming in to the department. Application forms are being distributed to the banks and treasury branches as of today, I believe.

MR. SPEAKER: May I respectfully draw to the attention of hon. members that there seems to be some difficulty at the moment in adjusting the sound system. Therefore it might be well if any hon. members who address the Assembly raise their own volumes and supplement the sound system.

Treasury Branch — High Level

MR. LEITCH: Mr. Speaker, I'd like to reply to a question asked of me last Wednesday by the Member for Spirit River-Fairview which was why the treasury branches had located a branch in High Level and not in Fort Vermilion or La Crete, in light of the fact there were then two other financial institutions serving that community.

I've now had the opportunity of reviewing my file on the matter, and the answer is this: although there are now two other banks in High Level, it was our assessment that it could support a third financial institution. In addition, Mr. Speaker, that branch will provide some support services for the mobile banking service that will be provided to Fort Vermilion and La Crete, and to the agency which is in Rainbow Lake.

High Level is a central point for those three centres and, as I said, will provide some support services to those being provided to those three centres.

It's also important for me to observe, Mr. Speaker, that the mobile service, which I think is a first in Canada, will be providing treasury branch services to Fort Vermilion and La Crete and will be a full banking service, although it is a mobile service. It's simply a question of the number of days it will be in each of those centres. We will also be using that mobile service to assess whether it's practical to establish full-time, permanent branches in those centres.

Lastly, Mr. Speaker, I'd simply like to acknowledge how much help the treasury branches and I received in arriving at these decisions to expand our services from the MLA from the area; the Minister of Recreation, Parks and Wildlife; and the Minister of Business Development and Tourism in his capacity as chairman of the Northern Alberta Development Council.

MR. CLARK: They both need the plugs.

AN HON. MEMBER: Yes they do.

ORDERS OF THE DAY

MR. SPEAKER: May the hon. Member for Stony Plain revert to introduction of visitors?

HON. MEMBERS: Agreed.

head: INTRODUCTION OF SPECIAL GUESTS (reversion)

MR. PURDY: Mr. Speaker, it's my pleasure to introduce to you, and to members of this Assembly, a number of students from the Queen Street school, situated in the town of Spruce Grove. I had the pleasure of visiting this school on Tuesday morning and discussing with them my role as an MLA, and the function of the Alberta Legislature. They are accompanied by their teacher Mr. Ibsen. I would ask them to rise and be recognized by this House. They're in the members gallery.

head: GOVERNMENT MOTIONS (Committee of Supply)

[Dr. McCrimmon in the Chair]

Department of Hospitals and Medical Care

MR. CHAIRMAN: The Committee of Supply will come to order. Will you turn to Vote 1, Hospitals and Medical Care, on page 193 of your estimates.

MR. MINIELY: Mr. Chairman, to commence Vote 1 today, in view of the fact that during estimates examination yesterday the hon. leader appeared to be not very clear on the approach I've outlined in this Legislature several times to the major policy questions in Hospitals and Medical Care, I would like to table the address to the Legislative Assembly that I

made on October 27, 1976. I know the hon. leader was in the House at the time I made this address. It covered many of the factors we were discussing yesterday, but perhaps he wasn't listening very clearly. I would commend to him that he read this, because it talks about the directions we're trying to accomplish in Hospitals and Medical Care.

MR. CLARK: Mr. Chairman, just to start off. If the minister is going to take that kind of attitude, we can be here for some time in the course of Vote 1. If he is going to start giving us answers this morning, we can move along quickly. On the other hand, if he is not going to, we will be here for a long time on Vote 1.

MR. R. SPEAKER: Mr. Chairman, just to add my comments in starting this discussion. The minister may table a speech he has given. I recall in that speech the concept of planning, projecting ahead, looking at all the difficulties, doing things in a more organized manner. Well last night we questioned for over two hours and we heard the same kind of stuff. That's why we get a little fed up with the kinds of answers we get. We don't get any concrete type of direction or material with regard to the subject at hand. At some point planning comes to decision-making. That's what we're asking for. I think in answering questions today the minister should keep that in mind.

Mr. Chairman, to the minister. We'd like to ask some questions for clarification with regard to the contractual agreements the minister has entered into with, first of all, Mr. Willis. I wonder if the minister could just go over the financial arrangement as to what the total cost would be, so that we interpret it correctly. We understand at the present time that after the first five months the contract was revised. The annual salary, income, or remuneration to Mr. Willis was increased from November 1, 1976, to a sum of \$50,000, and on March 16, [under] the new agreement which became effective April 1, it was increased \$5,000. So his remuneration would be \$55,000. That's an increase of 22 per cent. I wonder if the minister could comment on the reasons for that.

Added to the contract were a number of expenses with regard to paying for the office space of Mr. Willis, paying for travelling, paying for clerical expenses and overhead. I wonder if the minister could just comment on that expense allowance.

MR. MINIELY: By all means. The first retention in connection with some broad policy of retaining Mr. Willis — as a team member I would point out, because working with other disciplines, also with officials and directly with me as minister, was on a part-time basis. That move to the situation now, where basically the amount of time demand I place on the contract is rather overwhelming.

So the adjustment takes into consideration the fact that it pretty well involves full-time: one could say 95, 99 per cent. It's really been more than a full-time situation with the hours I've demanded. I've demanded very long hours under the contract. I arrived at the contract on the basis of comparing the cost of a senior public servant in terms of the considerations. If the hon. Member for Little Bow wants to put his pencil to it, I would suggest that he compare because this is the approach I took. He would com-

pare the senior public servant on a full-time basis. He would compare the costs of space provided through Public Works for the office location, utilities, and other factors. The Minister of Housing and Public Works tells me the average overhead per person would be \$5,000 and that may not take into account all cost factors. Also, on a full-time basis I felt it appropriate that the cost of executive secretarial service be provided for in the contract.

The increase in the contract commencing April 1 [is] from \$50,000 to \$55,000. The basic contract is arrived at on the basis that there is no tenure. No long-term public service position is involved. There are no public service benefits or other benefits existing in the public service. All those factors were taken into account in arriving at what the appropriate amount under the contract would be.

The increase the hon. Member for Little Bow refers to, from \$50,000 to \$55,000, was based on a straight 10 per cent consistent with the government's projected expenditure guideline increase.

MR. R. SPEAKER: Mr. Chairman, to the minister. Does the overhead considered in the first agreement include office space rental? The second agreement indicates that the government will pay all monthly rental by the company in leasing the office space. So, one, was that initially included in the overhead, and two, what is the cost of office space the government is supporting at the present time?

MR. MINIELY: On the part-time contract I referred to, before it moved to the time demands I've been placing recently, there was no provision for rent and overhead. But basically, as I required time — which I've indicated has been overwhelming under the contract, particularly during this period of policy development and policy decision-making we've been talking about in the Legislature — the practice endeavor of Mr. Willis disappeared. In my judgment, under those circumstances provision for overhead costs and secretarial services is appropriate when it moved to those kinds of time demands.

MR. R. SPEAKER: Mr. Chairman, the minister didn't indicate the actual amount of rental paid by the government on behalf of the company at the present time. What does that come to on a yearly basis in dollars and cents?

MR. MINIELY: I think a basic breakdown of the overhead was filed with my office, the amount of rent. I could only approximate here all the items that went into the overhead projection.

MR. R. SPEAKER: Mr. Chairman, I'm not satisfied with that. I'd like to get at the total cost of this contract. As I add it up at the present time, number one is \$55,000 for Mr. Willis for his personal use. Number two, there's \$10,000 available for overhead. That's \$65,000. Number three, there's a clerical expense of \$16,000. That's \$81,000 per year. Number four is expenses; that says, "reasonable subsistence". I don't know what that will amount to, but I'd like a figure on that too; what the limit is on expenses, what is projected. So, we're up to \$81,000 per year, which means a two-year contract is now up to \$162,000. The other thing is rental space.

Are we talking about a \$200,000 contract, or what are we talking about? Does the minister know what he committed himself to?

MR. MINIELY: Mr. Chairman, exactly. I've indicated to the hon. member, if he wants to compare, that it's based on the factors comparable to a senior public servant who would be on time-demand. Overwhelmingly in terms of the cost, the overhead cost is based on comparable. If the hon. leader or hon. Member for Little Bow wishes to look at the overhead costs the government pays in terms of space and other factors for any senior public servant, you will find it is comparable.

Every cost in the contract is laid out in the contract. The hon. Member for Little Bow has read it off: the basic fee, the provision for overhead, the provision for full-time executive secretarial service. And basically the travel and subsistence is consistent with any other senior public servant. The claims must be filed if travelling on business for the portfolio or for the ministry. The travel claims must be consistent with the regulations laid down for any other senior public servant.

MR. R. SPEAKER: Very simply, I'm asking the question. When this contract was signed, the minister must have asked the question of some civil servant, some employee, or Mr. Willis: what will be the cost of the rental paid? Now, there have got to be some limitations. Does he hire four floors on the top of a brand new office building somewhere? Are there are no limitations? Is he licensed to do whatever he wants to do? That's all I want to know. What is the ballpark figure, if that's what you want to use?

MR. CLARK: During restraint.

MR. R. SPEAKER: During restraint, that's right.

MR. MINIELY: Mr. Chairman, the limitation's right in the contract.

MR. R. SPEAKER: Mr. Chairman, I must read the . . .

MR. CHAIRMAN: Order please. We will have one speaker at a time.

MR. R. SPEAKER: Mr. Chairman, I want to read from the new signed contract that becomes effective April 1, under Section 11 (c) where it's amended:

. . . all monthly rental paid by the Company in leasing the office space within which the Company operates its consulting services to the end of the term of this Agreement.

And it says:

The monthly rental for the purpose of this clause shall mean the monthly sum paid by the Company to the landlord or owner of the premises within which the Company operates its consulting services inclusive of utilities, but excluding any and all sums paid for equipment rental.

Now that's a general statement, but there is no figure on it. I'm saying, what is the figure?

MR. MINIELY: I think what the hon. Member for Little Bow is asking for, which will be down to me in a matter of a minute, is the rental component of the

overhead factor. But the overhead factor is limited by the contract. The overhead factor is spelled out in the contract, and that's to include rent. So basically, the limitation is within the contract. That's what I don't understand, Mr. Chairman, of that component.

I can say — because our meetings vary between my office and Mr. Willis' office — that it's certainly no rich amount of overhead, because it's basically one executive office with space for a secretary. There is nothing incomparable about it to any senior public servant's office that I've visited in either the Hospital Commission or the Health Care Insurance Commission. So I'm not sure, Mr. Chairman, what is the real import of the question of the hon. Member for Little Bow.

MR. R. SPEAKER: Well, Mr. Chairman, in one of the earlier questions I said, is the rental of the building included under overhead? As I understood his answer, the minister indicated it was not. So, what I'm trying to do is sum up what taxpayers in the province are going to pay this one consultant and be responsible for. If it is not included under overhead — as I understood the answer of the minister, it wasn't — then the new amended agreement indicates that the government will pick up all rental.

All I'm saying, if the minister signed this agreement, he must have asked the questions: how much is the rent going to cost us? How much office space has he got? I think it's unfortunate if he signed this agreement without knowing the answer to that question, and that now we have to wait for great answers to come down from up above here. Hopefully, some policy decisions come down from the bureaucrats, if that's where the minister gets them.

MR. MINIELY: Mr. Chairman, I think the hon. Member for Little Bow is confusing two parts of the contract. The first part of the basic contract limits the total amount of overhead, which includes rent, utilities, and all factors of overhead. The amendment to the contract is with respect to termination — termination by myself as the minister, or termination . . . Because as I say, there is no tenure that exists . . . In the case of senior public servants, there is a period of tenure, and other benefits are involved.

Again I would say, Mr. Chairman, the details of the contract were arrived at, attempting to be comparable with what the cost would be for any senior public servant and to utilize people outside government, which I think is a sound process in terms of not becoming insular in our policy development.

So the thing is, in the contract the total overhead is spelled out in an exact figure. The rent is simply a commitment in the event of premature termination of the contract as it moved to a full-time contract, or requiring full time of the private consultant. The termination provides for the provision of picking up the rental component of overhead for a period of six months.

MR. R. SPEAKER: Okay, then that clarifies the answer. If the minister had indicated that earlier, we would have had this clarified.

Now, in signing the agreement of termination or this termination clause, what type of rent are we looking at? What was the indicated figure that that rent could possibly be?

MR. MINIELY: Three hundred? Four hundred?

[Someone in Members Gallery]: It's around that.

MR. MINIELY: It's around that. The rental component — I'm just having . . .

[Someone in Members Gallery]: We're invoicing one-twelfth of \$6,000 . . .

MR. MINIELY: Yeah, but that's all overhead items, isn't it?

[Someone in Members Gallery]: [Inaudible]

MR. MINIELY: Very basically, that's . . .

MR. R. SPEAKER: Possibly we could sell the fellow a blue card and get him elected in Edmonton — although we don't know about that either.

Okay, so we've established that the cost of the contract is \$81,000 a year. Over the two years it's around \$162,000. Now the second thing I would like to ask of the minister is: basically what specific type of responsibilities has Mr. Willis taken on in the last five months? What specific responsibilities have been assigned for the next few months into the future?

MR. MINIELY: Mr. Chairman, yes I'm happy to answer that. Basically, Mr. Willis is involved as an outside consultant working with me and with senior officials on the following basic questions.

One, the organizational structure that would best suit the future management of the portfolio, as between the alternatives of commission structure and departmental structure; all broad policy questions in the health care field as to the longer term policy directions we're developing; the organization of seminars, again working with, as I said, Dr. Bradley, Dr. MacLeod, senior financial persons in the portfolio, basically as part of a policy development team working with me and with the MLA for Sedgewick-Coronation and the MLA for Lethbridge West as two MLAs sitting on the two commissions at the present time, addressing themselves to all the policy issues I have delineated.

Those issues are basically as I've outlined and provided in the copy to the hon. leader. I've indicated that some of the major questions will be that we're in a period of making careful choices in the allocation of public funds, within priorities for citizens as to citizen need; to try to move to a more sound decision-making structure that will allocate provincial funds on the basis of citizen priorities and not on the basis of institutional or interprofessional rivalry.

One of the major questions will be working with my colleague the Minister of Social Services and Community Health [on] the delineation of a health care team that will be required in the future.

Mr. Chairman, I would commend to the hon. leader, the hon. Member for Little Bow, and all members, to read the study into health care in Canada in *The Financial Post*. It would indicate we are at a turning point, and we have to look very carefully at our allocation of dollars in the longer term to priorities.

Recently — in the last 10 years — we have gone through the most major expansion in expenditure in

the health care field in our entire history. Yet the results show we have not improved the general level of health care of our citizens. One of the major questions will be to direct the resources through sound structure and within priorities to ensure we are attacking the contemporary problems of today and tomorrow in the long term future.

So the priority of levels of care is now moving very rapidly to a conclusion. There's no question in my mind that we've arrived at a stage where I can say we have to put high priority on extended care — longer term care — if we're to meet the objective of reducing our acute care, or general hospital care situation, to what is unanimously agreed as a Canadian objective, and to ensure that our citizens have access to the proper level of care that's efficient and effective to meet the needs of our citizens.

Mr. Chairman, I could go on for a long, long time, because I've recognized in this House that I don't think there's a more complex area in trying to arrive at overall broad policy directions than there is in Hospitals and Medical Care and working with my colleague in the total health care field. That's what we are now trying to do after an extensive period of seminars and consultation throughout the province, locking people away to discuss these issues, and ultimately to lead to broad directions, which I said yesterday and I'd repeat again. I know we are all pressured to make fast decisions. I think one of the difficulties for government is the fact that too frequently we're responding to individual pressures and not looking at the longer term.

I've indicated in the Legislature — and it's my intent to take the approach to the portfolio — that to take the extra time required to delineate long-term directions in the best interests of our citizens in health care is more important than reacting to immediate decisions which unless we're careful may prejudice the sound allocation of resources in the longer term to arrive at the solutions of our joint and mutual task.

MR. TAYLOR: Mr. Chairman, there are a couple of points I would like to deal with before we finish Hospitals and Medical Care. The first is a point I have raised in this particular vote in the last two or three years. I don't know how common it is in the rest of the province, but I feel more and more it should be looked at in the Drumheller district. I'm not making any insinuations against the calibre of people on the boards, but it's the principle that I think is concerning many of the ratepayers of the Drumheller area.

I'm talking about having two boards to administer the hospital cares of the Drumheller area. We have a board of five members or so looking after the nursing home and the auxiliary hospital. We have a board of seven or eight members looking after the general hospital. All of these hospitals are one complex sitting in one area, and there's a separation of jurisdiction. There has to be close liaison between the two boards in connection with laundry, food services, heating, lighting, and so on.

But invariably throughout the area, people have asked why are we having so much government? Why can't we have one board that will operate the general hospital, the auxiliary hospital, and the nursing home? In addition to that we have another board: the foundation operating the lodge. That is a little dif-

ferent and separate. But certainly the work of looking after sick people, whether they're in the general hospital, the auxiliary, or the nursing home, should in my view be the responsibility of one board.

I realize that this is not a situation that has suddenly arisen. As a matter of fact the present government inherited it, and we were unable to get it resolved with the administration of which I was a part. I still feel that the principle is wrong in having two boards operate these three facilities in the Drumheller area. Now it will not only save money by doing away with one board, but it will be a better co-ordination, better service for the overall, and easier movement from one to the other, which I think is sometimes very essential.

So once again I would request the hon. minister to take time in his busy schedule to review this, and see if within the next year we can't work out an arrangement under which we can make the change to one hospital board in the Drumheller area. I understand this operates successfully in other places, and I believe it would be good in the interests of administration and sick people to have the one administration in Drumheller.

Now the second point I want to raise is an item that gives me great concern. I asked the hon. minister for some statistics on abortions in the province of Alberta. The minister has tabled those, and I believe there are still some to be tabled for the total year of 1976. But in the first six months of 1976 there were some 2,087 abortions carried out in the province. Five hundred and seventeen of these involved married women, and 1,570 involved single girls, women over 35 right down to under 15 years of age.

The thing that appalls me is that it appears very definitely that abortion is being used as a birth control method. I realize that maybe the main difficulty arises from the federal legislation that has not defined the health of a woman before an abortion can be carried out. But in my view, right across Canada, we have gone too far in just accepting abortions on their face value, and I'm not sure that anyone who wants to be aborted is turned down.

As I mentioned previously in the House, one nurse stood up at a public meeting of mine and said that in the hospital in which she works, they have a special day for abortions. And that they just go through as fast as they can get a doctor to carry out the operation.

I realize this is a very ticklish thing, but when I read in the paper about the fuss people are making about baby seals, I just shudder how calmly we accept the abortion of babies across this country. I realize there is a proper place for abortion, and I would be the first to recognize that. But in my view this thing has gone far beyond the proper stage. The Badgley report has set out a number of abuses in connection with this. While some of them are federal, I think there's also some provincial responsibility as set out under Section 251 of the Criminal Code. I'm raising this because I feel that simply denouncing it isn't going to be too satisfactory.

I would like to see the minister, in conjunction with the hospitals, do at least two things during this coming year. Number one, to set up places where women could learn of alternatives to abortion. When you realize that 1,570 of the total in Alberta in the first six months last year were single women, 875 of

them under 20 years of age, it looks as if it's really a tragedy in the lives of these girls. In many cases they have no one to turn to. They're ashamed, frustrated, nervous; they don't know what to do.

I would like to see every hospital — which are listed in the return and which information I appreciate — having an office where someone can sit down and talk about alternatives to abortion so the girl does not feel this is the only way out. Girls not wanting abortion but wanting to know the facts of life could come to this office. I think this would be a real service to the people of the province.

The second point I'd like to mention is that we should have places where teen-age girls and women could go for moral counselling so they have an opportunity to decide whether the baby should be permitted to be born. There are scores of people across this province, across the country who want to adopt babies. When they hear of 4,000 abortions in Alberta, maybe 40,000 in Canada, no wonder they wonder what's going on.

I don't believe in aborting live babies. I oppose it very, very strongly. By the same token, I understand there's a proper place for abortion. I know it's difficult to decide which side of the line to take in many cases, but I think scores of these and maybe more than that are simply cases where abortion is being used as a birth control method. In my view that's not right. It's not morally right. It's not spiritually right. And it's not doing our country any good.

In a country like Canada today, with hundreds of childless couples who would love to have a child in their home, we're aborting 40,000 babies a year. We're raising spending money and giving concern to the baby seals. I'm not saying it isn't proper, but if I have to choose between baby seals and human beings, I'm on the side of human beings.

I'm not going to deal at this time with the financial cost of these 4,000 or so abortions a year. That is not the major concern I have at this time. The major concern is the loss of life: what it's doing to the lives of these girls who don't appear to have any place to go for counselling and moral support. I would hope that the minister would see during this coming year if some place could be set up in our hospitals where abortions are carried out, where a girl could go to talk the thing over, to get some moral support, to get help. Because they certainly need help when they get to that stage.

MR. MINIELY: Mr. Chairman, I'd like to thank the hon. Member for Drumheller. I'm aware, and I think we're all aware in this Legislature, of the concern of the hon. Member for Drumheller relative to the matter of abortion. It is a very complicated matter and as the hon. member said, really a national matter. In Alberta all we do under federal legislation is designate hospitals approved for the purpose of performing it. But nevertheless I appreciate the hon. member's comments.

I would say with respect to the alternatives that through joint planning [with] my colleague, the Minister of Social Services and Community Health, this would be a shared responsibility. We've made a great deal of progress in joint planning in areas between portfolios. I think that is one that I would have to discuss with the Minister of Social Services and Community Health relative to alternatives. Neverthe-

less I would like to take your comments under advisement on that matter and carry them forward in joint consultation.

I think the first matter the hon. Member for Drumheller raises points out why in my view in hospitals and medical care — with the questioning members of the opposition undertook yesterday and which some comments I made today illustrate — structure, organization, and administration are extremely important in the longer term. Because I think the hon. Member for Drumheller has pointed out the difficulty of fragmentation at the local level.

One of the challenges will be to allocate provincial funds that can be allocated. And as you point out, having two different boards tends to encourage decision-making which even with the best of people involves institutional rivalry or competitiveness, or professional rivalry or competitiveness. Our challenge in this Legislature is to try to find the mechanisms to overcome that and ensure that the dollars that can be allocated will be devoted in the interest of citizen priorities and what is really required by Albertans for quality health care. It's a question which concerns me.

I would caution, however, that another side to the factor is that as we move toward combining local decision-making structures — if we make a decision to move that way, and there has been quite a bit of combining of boards in the hospital field — I think we have to consider very strongly the combination of responsibility and accountability to priorities; in other words, as I said yesterday the reassessment of the question of financial responsibility for those who are going to be developing program and service, be it the local authority or whatever body, to request expansion of service. Because the difficulty is that if there's no financial responsibility at the local level then a natural forcing of the choice of priorities becomes difficult. Everything can be said to be a priority where the sole financial responsibility rests at the provincial level. So I don't think we can separate those two questions. I think they have to be brought together. Frankly, Mr. Chairman, that's one of the major areas I've been devoting a considerable amount of time to. The solutions are not as easy as delineating the problems, as I think the hon. Member for Drumheller appreciates.

MR. NOTLEY: Mr. Chairman, I don't want to beat a dead horse here. I wasn't able to be present last night but I was reading over the transcript of last night's session. Dealing with the entire debate, Mr. Minister, concerning the possibility of requisitions, there are several points I want to raise flowing as much as anything out of the minister's answers. If he happens to have the transcript here, it's 71.5 to 71.10. If you don't, Mr. Minister, I'll read it because it concerned me.

... we would ... consider the alternative of reassessing and possibly legislating for nursing home boards, or any other boards for that matter that operate on deficit as a sheer result of sheer inefficiency. In that event the board should be clearly accountable to their local taxpayers.

And then Mr. Clark asked the minister whether or not it's the intention to introduce legislation this year with respect to the question of requisition for nursing homes or anybody else, and the minister says — and I

notice this seems to be a fairly carefully phrased question: "... no, it certainly won't be at this spring session."

Mr. Chairman, to the minister: as I read the minister's answer, it's obviously quite ambiguous. My question to the minister, in a very direct way, is: where do things stand at this stage? Going back to your answer here — because it would appear from it that you're looking at some form of requisition — you draw out the phrase, those boards that have a deficit as a "result of sheer inefficiency". And then you relate that to accountability to the local ratepayers. So flowing from your remarks, I would ask you just to clarify what is meant.

MR. MINIELY: Mr. Chairman, I'm happy to broaden that answer, because I think it is a very important one, and perhaps yesterday I did not broaden it sufficiently with respect to my current thinking on the matter. As I indicated earlier today, one of the difficulties is that we rush to meet an immediate problem or crisis, pass legislation and sometimes in the pursuit lose sight of what's in the longer term the really sound solution.

In the question of nursing home financing, the deficits that exist in the nursing home field, I have been attempting to meet the immediate problem by bringing it into a policy that will be more sound in the longer term. That's the reason I have brought it into the current, almost finalized discussion of longer term nursing home finance policy.

Some of the deficits are created simply because we've had an historical system of providing to every nursing home regardless of the conditions they're operating under, the same rate both in terms of capital construction cost and level of care. Some nursing homes have much heavier care patients than other nursing homes do, yet our historical system has been that we provide the same rate to every nursing home operator and even as between ownership.

The reason I say not in the spring is because I don't believe I will have a sound answer in sufficient time by the spring session on legislation the financing of deficits. So in the meantime I recognize and appreciate that as I said yesterday, I'm 'ad hocing', I'm looking at the causes of individual deficits.

Now if we move to an element of local financial responsibility, whether in nursing homes, general hospitals, or auxiliary hospitals, under any system a given board or given administration can overspend. Sometimes the result is simply not adhering to a budget. Number one, I don't mean to imply in that situation that it's sound policy in the longer term for the province to pick up deficits that are just poor management. So I have to conclude, following that through logically, that taxpayers have to see directly the cost of that kind of management in our system if we're going to use funds wisely.

That's no final decision. That's the stage of my current thinking on it. I want to assure the hon. member that whatever element — if we go back to an element of local financial responsibility for whatever matter or conditions — number one, I hope it to be not a perfect, but a more sound longer term solution to the problem; number two, that any part of local responsibility, whatever would be considered local financial responsibility, should be clear to taxpayers. And I think if needs be, as we move toward that kind

of possible solution, we would have to require in legislation or in regulations that there be full advertising of the reasons for any local requisition, that there be full awareness, that all efforts be made for taxpayers to be directly aware of the reasons that additional costs on a local tax base were being placed upon them.

Again, these are not final decisions. I've tried to outline the stage of current thinking, and conclude by saying again I hope I'm in a position to make the decisions. What I'm concentrating on now in this as well as other policy areas will be more sound in the longer term and not solely react to immediate situations which may not be consistent with what's sound in the long term, and try to bring those two things together. I appreciate that's difficult and can create anxiety.

MR. NOTLEY: Mr. Chairman, is the minister in a position to be a little more definitive in terms of a time frame? Obviously no policy is forthcoming this spring. Is there a target date for the fall? Obviously in terms of the financial year of the various hospitals — if in fact local requisition is going to be extended to active treatment hospitals — that's something on which they'll have to know the policy before we get into the next budgetary year.

So I'm just interested in knowing, beyond the process of policy assessment obviously taking place now, whether there have been any target dates at this time to arrive at a policy on this matter.

MR. MINIELY: Without in any way underrating the importance of the matter we're discussing — because it's one of the key areas — I would point out that it's only one in some very major and complicated questions in policy direction that I'm looking at. If I did what the hon. member is asking me to do, I would be doing the very thing I feel is not sound, which is to try to say, I'm going to have a decision on a specific area, acknowledging the importance of it — and it is high on my priority list — there are many other areas that have to be looked at. [This] would perhaps jeopardize some other things and may result in the very process that I'm concerned about, that is, prejudicing what may be sound in the longer term in the interest of making a rapid decision.

So other than to assure you that to come up with something sound in this area is high in my priorities right now, I do not want to tie myself to a specific date.

MR. NOTLEY: Mr. Minister, so that I can understand your policy formation process here . . .

AN HON. MEMBER: Slow, slower, slowest.

MR. NOTLEY: Slow, slower, slowest? Yes.

Perhaps I can paraphrase what I thought you said and you can tell me whether or not this is correct. Yesterday, in relating this question of local requisition, you tied it to inefficiency, sheer inefficiency.

MR. MINIELY: As an example.

MR. NOTLEY: As an example, all right.

It seems to me that you can look at the question of local requisition from two vantage points. One van-

tage point can be that some access to the local ratepayer is necessary to give a hospital or any board that muscle necessary to exercise real autonomy. That has certainly been brought to my attention by some hospital boards, not by others. There is some division among hospital boards. I think I'd have to say that. I've had some people on hospital boards say very emphatically yes, we want the power to requisition because that will allow us to do our job properly. I've had other hospital boards say no, stay away from it. So I can understand that you've got both sides of that issue among hospital board representatives in the province. However, at least one fairly clear argument for requisition is the base of autonomy that access to the taxpayer provides any level of government.

But it seems to me the other argument is one that I sensed you were concentrating on — I may be wrong, and this is where I would like you to clarify it — and that is that where there are inefficiencies and where there is a deficit, that deficit has to be picked up locally. In order to acquaint the taxpayers with the situation there would have to be advertising, and the taxpayers would then be obliged to either see their services suffer or pick up the deficit.

But it would be a rather different approach than the autonomy approach. It would be almost a punitive approach of picking up the pieces if things went wrong in the administration. Now is that the thinking of the government at this stage in the policy formation process? Or is it the wider question of allowing the greater flexibility to the local board that the requisition offers?

MR. MINIELY: No, Mr. Chairman. I was answering a question specifically related to an immediate problem. That was the context I was answering. As a matter of fact, it's the other way around. If I was of the view that in my assessment of the question our historical manner of handling local requisitions in the hospital or nursing homes was the right thing to return to — pre-1972 — then I would have a decision, and it would be before this Legislature now. But I do not believe that the historical method that has been utilized was by itself sound.

What I'm trying to arrive at is a system that accomplishes two or three basic principles: one, that it encourages the efficiency of utilization of dollars, recognizing that our taxpayers are all the same taxpayer. But responsibility and accountability are important principles in any element, whether it's a provincial level of government or a local authority who should have access to the local rate base.

In the broad question of local requisition, basically I am more inclined to remember that historically deficits simply were not allowed. It there were deficits, they said they did have to go to the local . . . The province wouldn't pick up deficits until 1972 with the Alberta property tax education plan and with the assumption of 100 per cent of cost by the province.

But that's only one part of the question. The greater consideration, I think, is that if we do return an element of local financial responsibility, the province indicate that we're prepared to fund to a level of quality and program and service, whether it be a nursing home, a general hospital, or an auxiliary hospital; and that the local authority have some capacity, working with their citizens, to raise funds loc-

ally for program and service beyond what the province would delineate as a standard that we would fund. Because as I have indicated, in my view we're not in a very large public expenditure for careful management for just a short term period; we're in for some years of careful management, recognizing that it's all the same taxpayer. I think that's a more important question than sheer inefficiency or deficits as a result of inefficiency.

But that can still happen. No matter what system we move to, a given board of any health care institution can end up with a deficit. In that particular question, I think probably the capacity should be, first, to review the deficit and see what gave rise to it. In that situation — again to use the term I used yesterday — if it's an approved program, that should qualify for provincial adjustment of budget. If it's not, and it is the other factors, then that . . . but not at the jeopardy of the local program and service they would like to have beyond the level of provincial funding. That question should have some definite accountability into it, more accountability than running to the provincial government and saying: we overspent and just simply didn't manage our budget well, and they were not approved expenditures. Because we approve program and service. If they spend on unapproved program and service, we have no capacity to pick up the deficit. That should be directly accountable and, I think, directly accountable to local taxpayers. There's just one element of it.

MR. R. SPEAKER: Mr. Chairman, I would like to pursue my question with regard to the contract with Mr. Wilson — Willis, pardon me.

MR. MINIELY: We have a Mr. Wilson.

MR. R. SPEAKER: Yes, but I'm referring to the contract with Mr. Willis, Mr. Chairman.

The minister indicated some broad general areas in answer to my last question. I would like to be just a little more specific with regard to that and ask: will Mr. Willis be making recommendations with regard to mental health programs?

MR. MINIELY: I think that might be one area. His terms of reference are broad with relation to the portfolio, and not specifically in mental health. But as I would utilize other advisors and senior officials for views on mental health, I would ask him for his views based on his experience. But again I would say that that's just one input into that factor. That's not the primary responsibility. The involvement under the contract is in broader issues than solely the question of mental health. Although that's one — working with my colleague the Minister of Social Services and Community Health I probably would continue to solicit Mr. Willis' view along with others. Whether I accepted them or not would be like any other one who works with me in the portfolio. As I think the hon. Member for Little Bow knows, input must be gathered and garnered from a lot of different areas to try to arrive at what's in the best interests of citizens.

MR. R. SPEAKER: Could the minister comment on the consulting work Mr. Willis would do in the whole area of services with regard to public welfare — I guess you could say that — relative to the social work

area? What kinds of recommendations would he make there?

MR. MINIELY: Well I don't know. If I gather the implication of the question of the hon. Member for Little Bow, in my portfolio I'm not the least bit interested in interprofessional rivalry that might exist. I'm not the least bit interested as between one profession and another. I'm interested in garnering input from many different areas in trying to arrive at what's in the best interest of citizens in the longer term. I suppose with anyone I know — take members of the medical profession, some are specialists and some are general practitioners — there is a divergence of views.

One of the basic roles of any minister of the Crown or anyone in this Legislature is to take these views and take the responsibility for what's in the best interests of citizens. When we reach that stage, I think that's when we debate whether the directions are sound.

I think that basically there is no question that Mr. Willis has an extensive background in the area of social work. He has worked with me, and frequently will register his bias and state that it's a bias. But so do many others who work with me in policy development. I think the important thing is that we bring all these things together and arrive at a policy that takes in the input from a whole variety which, as you know from the questionnaires, the consultation process, and the team seminars, has involved a lot of different disciplines in trying to arrive at sound programming in my portfolio in the future.

MR. R. SPEAKER: Mr. Chairman, just so the minister doesn't mistake my motives at the present time, what I'm trying to establish are some of the specific program areas in which Mr. Willis will be doing consulting work. Some of the others I'd like the minister to comment on are preventive health services, preventive social services, the senior citizens programs, extended health care benefits, community-based programs. Will Mr. Willis be making recommendations in those areas?

MR. MINIELY: Mr. Willis, particularly recently, has been involved in a lot of broad areas as far as his particular advice and other people's advice. I indicated to you that basically I have been using the contract in a team sense, working with senior officials and the deans of medicine. I indicated in the estimates that it's my hope, during this policy formulation year in particular, to contract the associate dean in the development of comprehensive cardiac care so that it's utilized in a team sense in the development of overall broad policy. I might call on Mr. Willis' views or input to me under the contract in any given area of the portfolio. I guess that answers the question.

MR. R. SPEAKER: Mr. Chairman, further to the minister: will Mr. Willis be called upon to assist the minister in establishing the priority areas where new hospitals or new nursing homes are established? Will that be his responsibility too?

MR. MINIELY: No, it's a broad policy in the team sense. I might, for instance, involve him because I found to this point that he has an excellent sense of

balancing the need for a health care program with accountability for funding which is unusual, in my experience, with people of his training and educational background. I might use him in the broad development of policy that relates to facility and health care programming and service. Again, balance that with input from other areas and try to make the broad decisions that are in the best interests of the citizens of this province.

MR. R. SPEAKER: Mr. Chairman, to the minister just to clarify your last answer. I'm not quite sure how you relate this broad overview or direction this consultant is giving you. In making those recommendations, how can he avoid not indicating where specific hospitals or nursing homes are to be located, where facilities should be increased or decreased, or management structures at a local level should be changed? I don't quite follow how he can avoid not giving that particular answer. Maybe the minister could clarify that to a greater extent. Maybe the minister could also comment how the consultant would get involved, say, with the medicare organization at present. What kind of recommendations and consulting work? What problems is he looking at there? What about just basic handicaps in the province?

MR. MINIELY: Mr. Chairman, I think the hon. Member for Little Bow is confusing the development of broad policy under which individual and specific decisions then fit. In my view, individual and specific decisions that the hon. member is referring to are the day to day administrative decisions of senior public servants. Once objectives in a broad plan have been developed in broad policy terms, then the individual decisions that relate and are accountable to the broad policy directions would be in place. Those should be exercised and administered by senior public servants who are responsible for day to day administration, working directly with the minister if they require guidance from me on an individual or specific decision that's related to broad policy objectives. What I'm trying to emphasize is that I'm trying to utilize a team approach in the development of broad policy for the portfolio in which individual and specific decisions would be accountable to a broad plan. That's not to say I might not say, as I would with others, what do you think of us developing facility X? What's your view or input on it under the contract? But the primary purpose is to aid in a look at broad policy development, not individual and specific administrative decisions.

MR. R. SPEAKER: Mr. Chairman, to the minister: what you're saying is that the future of the Alberta Health Care Insurance Commission and the Alberta medical care commission are in the hands of this particular consultant. In his broad recommendations made to you it will be determined whether those two are combined into a line department or whatever structure is to follow. This is the person who's making that particular recommendation. Is that correct?

MR. MINIELY: No, as a matter of fact that's not correct. Historically the first person to assess administrative and organizational structure was me personally. You would appreciate that [in] my desire to do

this, as the minister I could not devote the detailed time to it that would be necessary. We retained a financial organizational person to take a look at it, and also had extensive discussions with Dr. Bradley and Dr. MacLeod on organizational structure and what would be better in the longer term. So in the final analysis the decision relative to organizational structure will rest with me, the Premier, and my cabinet colleagues, no one else. It will be made on the basis of what we think is in the best long-term interest of arriving at the questions that I've delineated and answered for the hon. Member for Drumheller, the hon. Leader, and the hon. Member for Little Bow.

MR. R. SPEAKER: Mr. Chairman, to the minister. I can't follow the answer to that particular question. As I understand it, the basic two responsibilities of the minister are to look after the Alberta Health Care Insurance Commission and the Alberta Hospital Services Commission. That's the bulk of your responsibility. From your own statement, if this Mr. Willis has been hired to look after organizational structures — what's best for the future, those big platitudes — and he isn't going to make recommendations as to the future organizational structure of these two bodies — which you've just said — I really can't follow what the person is doing. He isn't getting involved in the number of other programs that I've listed. He may and he may not. He's going to do some broad policy work, which I don't quite understand. He isn't going to get involved in organizational structure of your two basic responsibilities. You say you and the senior staff members that you had prior to hiring are going to do it. Well I don't see where he fits into this whole plan at the present time. It isn't clear what we're going to get out of this \$162,000 in the next year and a half.

MR. MINIELY: Mr. Chairman, the hon. Member for Little Bow may choose to take that position. I would only say that I have found and I believe that with anyone I work with who I draw [on] for input and advice, I go on track record, the basis of the contribution, the experience, qualifications, and the contribution that they can make to the overall challenge that's in the portfolio. I would go on record as saying that to this point the track record and contribution that's been made working with me and senior officials has been exemplary. If there was ever any question in my mind about that then the situation and the status would vary. As I said last night and I would say again, I think that involving people who do not have a permanent interest in the public service to advise elected government, working with senior public servants and ministers who are responsible for policy, is a sound approach to the challenges for government now and in the future. I think where I've been able to assess someone, whether it's a member of the medical profession or the deans who can aid in the process of contributing to a final result that may be sound or in the best interest of this province, then I feel that's a sound approach. I've delineated some of the broad policy areas that I'm looking at in the portfolio. Mr. Willis' views as a consultant under contract as with others would be provided to me. I might call for his views on many different areas during this process of policy development.

MR. R. SPEAKER: Mr. Chairman, I'd just like to conclude my questions with a comment on the situation as to how I see we're leaving it at this point in time. The specific responsibilities that Mr. Willis is taking or is going to be taking are not clear. We talk about organizational structure that he's going to look at in one breath. In the second breath, it's indicated that he's not going to interfere with the management of these two commissions and is not going to make any recommendations. It's broad overall policy structure; I don't understand that. We also have an indication that he may or may not get involved in responsibilities that are the responsibilities of another minister of this government. The minister says that he may do that. Here we see a minister hiring a consultant who's going into another department, and to undermine another department and try to pull it all over.

MR. NOTLEY: Empire building.

MR. R. SPEAKER: Empire building. Because already within that Department of Social Services and Community Health are people, professionals, top paid people who can do a good job. The whole area of mental health — that's why I raise that question — Dr. Hellon, [with] lots of experience, a professional person, can and will do a good job. But here we have someone slipped into the middle from another department to try to superimpose himself. We talked about the preventive health service. He may get into it; he may not. Preventive social services, the same thing. So I see a person at \$162,000 in the next year and a half performing a function that could have been performed by the people in the department. I just can't see our getting anything out of it.

The minister has not explained to my satisfaction, and I'm sure not to the satisfaction of anybody else listening to this debate. We can talk about generalities, back track record, future track record, present track record. We don't even know what the track record is. Not a document has been presented in this Legislature.

MR. NOTLEY: It's expensive.

MR. R. SPEAKER: We know it's expensive. Not a document in this Legislature. Not a new policy decision. No new direction. We had the presentation of a two-year-old speech to tell us what today's policy is.

AN HON. MEMBER: Six months ago.

MR. R. SPEAKER: Was that six months ago?

MR. CLARK: Two years.

MR. R. SPEAKER: The speech was six months ago?

MR. MINIELY: . . . contemporary.

MR. R. SPEAKER: Yes, even two years is contemporary to the minister. But that is not satisfactory. I can't see the purpose of hiring this person. We have top-flight consultants in the Health Care Commission, people who have the capability of doing the job assigned. If the minister doesn't understand his own organizational structure and needs to bring in somebody at \$162,000 to understand it, that seems very

difficult for me to understand. In one breath he says he looks after his own decisions in the department, he'll make them with regard to the commissions; in the next breath, we don't know whether it is somebody else or himself. Mr. Chairman, I'm just not satisfied that we are going to get our money's worth out of this one.

MR. CLARK: Mr. Chairman, following along with the comments made by the Member for Little Bow, some very specific questions to the minister. Mr. Minister, in your remarks today you talked about the concern about interprofessional rivalry, so I pose a number of very specific questions to you which have been brought to my attention and I feel should be asked. They come from people of the medical and university communities. I start by saying that you may find some of them a bit obnoxious, but that will be regrettable.

First of all I would ask the minister if the Mr. Willis the minister has taken on at the salary mentioned is the Mr. Willis who was involved with the Family Service Association of Edmonton for a number of years?

MR. MINIELY: Do you have any others?

MR. CLARK: Can I have the answer?

MR. MINIELY: Yes.

MR. CLARK: Very good, Mr. Chairman, just so *Hansard* recognizes the minister as saying, yes.

The next question would be, is this the same Mr. Willis who has been involved for a number of years with the College of Clinical Social Work in Edmonton, and the movement to try to get the College of Clinical Social Work made a recognized profession in Alberta? Is this the same Mr. Willis?

MR. MINIELY: Yes.

MR. CLARK: And is this the same organization the minister spoke to a year ago in Edmonton at their annual meeting?

MR. MINIELY: Yes.

MR. CLARK: Mr. Chairman, moving to the appointment of Mr. William A. Fletcher, another consultant in the minister's department at somewhat a more reasonable figure, I believe \$28,000 a year plus travelling expenses and so on, could the minister indicate to the House if this Mr. Fletcher has been involved in the Family Service Association of Edmonton?

MR. MINIELY: Yes.

MR. CLARK: Mr. Chairman, to the minister. Is this the same Mr. Fletcher who has been active in the attempt to formulate the College of Clinical Social Work in the city of Edmonton?

MR. MINIELY: Yes.

MR. CLARK: Mr. Chairman, could the minister indicate to the House if Mr. Fletcher is going to be

involved in the area of co-ordination of mental health planning, as far as his responsibilities are concerned, for the \$28,000 a year.

MR. MINIELY: Policy recommendations, yes; co-ordination, no.

MR. CLARK: Mr. Chairman, would the minister indicate to the Assembly why the agreement between Mr. Fletcher and the minister says: "The Minister hereby agrees to engage the services of the Contractor as a Co-ordinator of Mental Health Planning to the Minister . . .?"

MR. MINIELY: I think the operative word is planning.

MR. CLARK: I don't see the word planning at all. [interjections] Oh, I'm sorry: "Co-ordinator of Mental Health Planning". Now the minister says the operative word is planning. Is he not involved in the co-ordinator area at all?

MR. MINIELY: I said the operative word is planning.

MR. CLARK: I don't agree. I think it's unbelievable that the minister would now try to say the operative word is planning. Here's a person we are taking on staff at \$28,000 a year from virtually the same background as Mr. Willis, who has been hired as the co-ordinator of mental health planning. I ask the minister what kind of effect the minister thinks this has on the morale of people who have worked in the field of mental health in this province for years and years? I think it has a very serious effect on the morale, not only [of] the people in the minister's colleague's department, but people in the mental health association in this province and other professionals outside government services. As I see it this is a slap in a face to those people.

To move on from there. To the minister. Has Mr. Lowen, who is the minister's executive assistant, been employed at any time or involved with the Family Service Association of Edmonton?

MR. MINIELY: Yes.

MR. CLARK: Mr. Chairman, also to the minister. Has Mr. Lowen also been involved with the efforts to establish a College of Clinical Social Work in Alberta?

MR. MINIELY: Yes.

MR. CLARK: Mr. Chairman, then I ask the minister: are Mr. Willis, Mr. Lowen, or Mr. Fletcher in any way relatives of the minister?

MR. MINIELY: No.

MR. CLARK: Mr. Chairman, a further question to the minister. One more question I should ask. Is the minister in a position to indicate to whom Mr. Willis sold his practice?

MR. MINIELY: Mr. Chairman, what I think I should do at this stage, because I believe the hon. leader's questions are feeding into something which [it] is disappointing to me that a leader of any party in this Legislature would do . . . Basically, the very thing I

talked about, all the people mentioned and about whom the hon. leader talked, have been chosen by me on the basis of their ability and their potential contribution to the portfolio.

I think the hon. leader is leading to or implying the fact that my brother at one time worked as an employee and knows these people. My brother in no way or at any time has benefited from any of these arrangements. The people were chosen on the basis of my assessment of the contribution they could make to the portfolio.

I am well aware — it's not exclusive to the field of social work — of the rivalry that exists between two bodies in social work. I am also well aware of the rivalry that exists between colleges of the Alberta Medical Association and the College of Physicians and Surgeons. Mr. Chairman, I'm not the least bit interested in that rivalry. I am interested in arriving at sound policy directions for the people of this province. And if the hon. leader is suggesting in the import of his questions that I as a minister would in any way develop policy that is not in the best interest of citizens, I think he should debate that when I lay policy before this Legislature. I think possibly all the hon. leader has indicated to me so far is feeding into a rivalry that exists at a professional level.

If I as minister spent my time honing in on rivalries between professional bodies in the health care field as opposed to what's in the best interests of citizens of this province, we would never get anything done.

MR. CLARK: That's about what's happening in your office, Mr. Minister. Getting nothing done.

AN HON. MEMBER: Oh, come on.

MR. CLARK: Now, Mr. Chairman, to go back to the question at hand. I ask the minister — and I told the minister at the outset that he would find some of these questions obnoxious, but better we raise them here than outside — is the minister in a position to indicate to whom Mr. Willis sold his practice?

MR. MINIELY: Mr. Chairman, I'm not sure how that's relevant, or whether that's even in the terms of reference of the Legislature. What's relevant to this Legislature is that it is a fact that my brother and Mr. Willis have known each other for some period of time. It is a fact that when I required Mr. Willis' time on a contract basis — and I say, overwhelming and full time — he sold his practice to my brother. I don't see how that is in any way relevant to the issues before this Legislature.

The fact that some of these people — I know many other people whom I have known for some years, whom I have assessed can make a contribution to the portfolio. I would use their services. The issue is whether Mr. Willis is performing a function in relation to policy development in my portfolio which I delineate as being sound. And the hon. leader and other members of this Legislature can judge that when they are laid before the Assembly. That's the issue: whether they are in the best interests of citizens of this province. When that comes, I will welcome the debate.

The only other side of the issue is whether or not my brother has in any way benefited from any contractual arrangement from this provincial government.

The answer is unequivocally no. As a matter of fact he probably loses the other way, from the sheer fact that he is my brother and happens to be one member of a health professional group.

MR. CLARK: Mr. Chairman, in response to the minister, I simply have this to say: Mr. Minister, you indicated to us earlier today that you're concerned about the interprofessional rivalries in the health care field. I raised the questions today because of the concern expressed to me by a number of people in health care professions across this province who, very frankly, are extremely concerned about the overreliance in your office on people who have been involved in the area of the College of Clinical Social Work, fully recognizing that this group has been trying for a number of years to get recognition as a profession. Some people in that profession have made a significant contribution to the health care system in this province.

But I say to the minister: I think you've made extremely poor choices in not broadening out a great deal the input as to where the minister is getting, especially when we look at the situation of Mr. Willis, who is on a contract now with this government for \$162,000 for two years. That isn't any ordinary kind of consultant's salary, Mr. Minister. Under no circumstances.

Mr. Minister, in the House today you haven't been able to give us one tangible, concrete thing he's done. Yet he got an increase of \$5,000 after five months of working for the minister. And I know Mr. Willis. I have nothing personal against Mr. Willis; Mr. Fletcher. [interjection] Well, I don't care whether the minister thinks I have or not. I knew Mr. Willis when he was on the school board. The minister can wink to his friends in the gallery all he wants. All I'm saying is that there are a significant number of people in the health field in this province who are very concerned about this kind of relationship in the minister's office, when we have a health care commission and a medicare commission.

Mr. Minister, we now get to the area of the consultant in the area of mental health. We've heard nothing from the minister to indicate, really, the area this consultant is — concretely, what's he going to do? Mental health isn't in the minister's area of responsibility. I can see having a person who would be concerned about the co-ordination of activities as far as mental health patients in active hospitals, auxiliary hospitals, and so on are concerned. But that isn't the explanation we've got from the minister.

MR. MINIELY: Well, that's what it is.

MR. CLARK: Well then, why haven't you told us before now? I make the point again, at \$23,000 do we need someone in that area? Frankly, I have — and I don't say this to flatter the minister's colleague — considerable confidence in Dr. Hellon and the people in that department.

I simply make this point: I think it's regrettable that the majority of people the minister has hired in his office are from virtually the same background, the same organization, the same professional group, fully recognizing that this professional group is in conflict with other professional groups in the province with regard to becoming or not becoming a profession. I

just think it's extremely regrettable. It does nothing other than cause increased rivalries in the whole health service area. It causes problems with the relationships with the professions. I think it's regrettable; it's retrogressive. Frankly, from the comments the minister made last night and today, I've seen nothing — nothing — we've got as a result of these consultants.

I suppose you could look at the salary of Mr. Willis and say, you know, \$162,000 in two years would keep one hospital bed open for 162 days. From what I've heard, I'd sooner have that hospital bed open 162 days. We've heard nothing concrete at all as to the contribution to date.

MR. MINIELY: Mr. Chairman, I'll just make a final comment — the hon. leader is entitled to his views — and say this. The people have been hired on the basis of their qualifications and their capacity to contribute something to the portfolio objectives. Other things are maybe a matter of circumstance. I have hired and promoted chartered accountants, members of my own profession. I work with many CAs in portfolio and policy development. I'm working with many members of the medical profession in terms of policy development in the portfolio.

My interest and concern is not to become involved in interprofessional rivalry, but to take input . . . I would say it is important in the health care field, though, that we have balanced input, that it not be solely one area. That is not the case in my portfolio. Where people may be slotted would certainly be related to their education and qualifications. If the hon. leader wants to question Mr. Willis as an individual, I suppose that's relevant to him. I would only say, based on his contribution and track record to this point, that I think it's been outstanding and exemplary. I think any professional giving advice, whatever professional base it's from — our job in this Legislature and that of this minister is to recognize that the advice may be biased, and to develop the policy in the best interests of citizens of this province.

But I would say again, I am not the least bit interested in becoming embroiled in a professional rivalry amongst social workers, members of the medical profession, the members of any other health profession, or in institutional rivalry in the health care system. That's not our task; that's not our job. As far as I'm concerned, any person from any professional background who can make a sound contribution to what we're trying to accomplish in broad objectives is a person who . . . I think there should be no anxiety on the part of government to bring people from outside government. That's one of the underlying things we might have to do more of in the future. The nature of government is to become insular. Not just public servants but frequently we as ministers become insular.

I think it's important we involve people who have talent and can make contribution to what we're trying to do, who do not have a permanent role in government but are from the private sector. I believe in that concept and philosophy, and I would stand on that, Mr. Chairman.

MR. R. SPEAKER: I'd like to refer directly to the Estimates of Expenditure. At their initial stages, the government has indicated the two responsibilities of

the Ministry of Hospitals and Medical Care:

- 1) the financing of active and extended care hospitals, and personal nursing home care of Albertans, through the Alberta Hospital Services Commission, and
- 2) the provision of health care insurance coverage for Albertans and extended health care coverage for senior citizens through the Alberta Health Care Insurance Commission.

Those are the only two responsibilities outlined. The estimates, if it's program budgeting as such, are to meet those two responsibilities. Responsibilities beyond that ministry are to be taken under question to see if they are in the right place in the right department, in the right place in government, or whether they're really necessary.

Both of those areas have adequate senior management. They have consultants. They have people who are experienced, professional, and have ability to deal with those two particular matters. The people who have been hired directly by the minister are now, in my mind — and the term insular is used — acting as a cushion between the people we have hired to take these two responsibilities. The talents, the abilities, the responsibilities as outlined — the difficulty I have had in understanding what responsibilities Mr. Willis particularly is going to take on — are not in keeping with these two objectives outlined in our Estimates book.

I think the objects seem to be established by the minister to try to accommodate these particular individuals. I don't see that as a good situation. I really think it's abuse of the minister's responsibility.

DR. BUCK: Mr. Chairman, I'd just like to enter into the debate for a minute or two. I guess what we're here for basically is to see if in our estimation public funds are being properly spent. And I guess, Mr. Chairman, when we look at the estimates on that basis, we have to really decide if the minister responsible for the expenditure of these funds has or hasn't been doing a proper and a competent job.

Mr. Chairman, when we look at the consultants the minister has hired to advise him, I would have less difficulty voting for the hon. Minister of Social Services and Community Health than I would for this vote. Because basically what we are doing here is duplicating to the tune of approximately \$200,000 the expertise the minister has in her department, and the expertise and the programs the minister is responsible for. So I can't understand the empire building that's going on here.

When we get to the question about relatives or in-laws and outlaws I couldn't care less. I couldn't care less if it was the hon. minister's wife. If she were qualified and we needed that person, I would say fine. I'd be the first person to vote for it. So that doesn't enter into it.

MR. MINIELY: She's a nurse.

DR. BUCK: She's a nurse. Okay, we could probably use her.

But what we are trying to establish here is: are these positions essential and necessary to advise the minister? That information would be very valuable to the hon. Minister of Social Services and Community

Health. Then I think we could in all conscience vote that vote in.

Now, Mr. Chairman, to me it is really symptomatic of just what is wrong with this government; and that is the same thing that brought the Liberal government down — what's \$1 million? This government's philosophy seems to be: what's \$10 million? You know, it's only money. We've got it, let's blow it. And really this is what we're doing. We're blowing \$200,000 of the taxpayers' money.

When we look at the people hired here, their curriculum vitae is a mile long. These people are very, very qualified. But I don't think we need them for this minister's department. That's basically the argument. Because if the minister wants to build an empire to administer the Hospital Services Commission and the Alberta Health Care Insurance Commission then he has the people. He has the deputy ministers. He has the expertise in that department. So he is really doing nothing more than empire building. Because when we talk about broad parameters, they are certainly broad all right. They are so broad that we can't really see what they're going to do to advise the minister in an area where his responsibilities do not lie. They certainly don't.

If the minister needs any advice, I think he needs advice on how he's wasting money in the way they're constructing new hospitals. I would be willing to look the minister in the eye and the deputy minister responsible for some of the hospitals, because I think they're wasting space. They are building beautiful monuments. But from what I figure a hospital should do, some of these hospitals are not that functional. Hospitals should look after sick people. They're not supposed to be architectural masterpieces.

Mr. Chairman, I went very quickly through a confined area in the Elk Point Municipal Hospital. You practically need a telescope from the minute you walk in the door to the far room which, I believe, is for emergency entries. There's enough room to have a square dance in the waiting room and from that door to the area where we're going to be treating patients. You could have a square dance in that area. Now are we building hospitals to serve patients, or are we building hospitals to contain air? Because if anything, some of these new hospitals are going to give nurses varicose veins worse than they have. The hon. minister knows, because he's married to a nurse — and so am I — that nurses don't really need a quarter-mile trip from one door to the next door to the next door. What they need in some of these hospitals is roller skates. So I think if the minister was going to take this \$200,000 he should have hired more help so we could make the hospitals function to serve people.

When we get into the area of nursing homes, Mr. Chairman, I think this government should change its philosophy a little bit about nursing homes and senior citizens' homes. I think what we need is quantity, and cut down a little bit on the quality. Some of these nursing homes for senior citizens are beautiful. But you ask the people: would you sooner have sufficient homes to look after 200 people at a little lower quality, or would you sooner look after 100 people and have the Cadillac quality we have now? I think the senior citizens of this province would tell you, let's look after 200 senior citizens at Chevy class and not 100 at Cadillac class. [interjections]

MR. FARRAN: [Inaudible] never built any at all.

DR. BUCK: And the hon. Solicitor General said, we never built any. Well let's just have a look at the track record from the time the previous government was in and from the time this government was in till now. Let's compare apples with apples, Mr. Solicitor General, and you wouldn't look so good.

MR. CLARK: He doesn't now.

DR. BUCK: And you as a government — not as a minister, because we have problems there. But that's a different debate.

So, Mr. Chairman, what we are trying to decide here is if the minister has used his best judgment on how the taxpayers' money is going to be spent. I say he has not justified to this Legislature the expenditure of \$200,000 and he should resign.

MR. TAYLOR: Mr. Chairman, I don't want to prolong the debate, because we've had so many arguments over and over and over. But I would like to mention two or three points.

In connection with hiring assistants or advisors, I find it difficult to evaluate the arguments because the work for which the men have been hired has not yet been done. I don't know how I can evaluate something that hasn't yet been done, that's in the process of being done. So whether it's money well spent, poorly spent or misspent, I think has to wait until we see the results of what's going to happen.

As far as I know the executive assistant, Mr. Lowen — I never knew him before — I have found him most efficient, courteous, and helpful in regard to getting information for hospitals for my constituents. I've never found him arrogant. I've never found him too busy to listen. So as far as an executive assistant is concerned, I'm doubtful if the hon. minister could have chosen a better man, even though I never knew him before I met him in that particular department.

I know Dr. Willis. I have high regard for the integrity of Dr. Willis. I used to be delighted with the understanding he showed for the poor and the unfortunate people when he was on the radio. I've never had any personal experience with him, but I have very high regard for him.

But some of the work that's going to be done will involve the commissions and, as the hon. minister said, whether or not we have two boards to operate one hospital; or it may involve the various types of services given in hospitals and so on. Whether that work can be better done by advisors or by the commission, I frankly don't know. The minister who has the responsibility has decided he needs some help to look into resolving some of these problems.

I have said in this House before and I say again: I was never enthusiastic about the setting up of a hospital commission. It was done with the ulterior purpose in mind of getting the people off the shoulders of the minister and getting the hospital done at arm's length. I argued that in cabinet. There's a place for commissions. But in my view the minister has to be responsible and has to keep in touch with things that are going on. If this is a move to bring the commission more directly under the minister who must answer in this House, who must stand for re-election outside, then I think this is democratic and it

may have some very, very good results.

If I've heard any criticism of the health department during the last several years, it is because the commission which it's understood outside is making the decisions and yet is not directly before the Legislature or directly before the people. Not that the commission hasn't made itself available when requested. Nevertheless they are appointed, not elected. I think the minister has to be directly connected to something that is as close as hospitals and health care are to the people, even though it may be obnoxious and difficult at times. That's his choice in entering politics and when he accepts the ministry.

In regard to the point raised by the hon. Member for Clover Bar about Cadillac service in nursing homes and lodges, I have to express my view on that. I have been in a number of lodges and nursing homes. I haven't seen any extreme luxury. As a matter of fact, these are the people who laid the foundation, who went through the pioneering days in this province. If anybody in this province is entitled to a little luxury, it's the senior citizens now in our nursing homes and our lodges. So I'm not going to begrudge one cent of what we're doing to make them happy in giving the autumn and winter of their lives a better time.

I too want more nursing homes. I live in a constituency which has been promised a nursing home or a hospital of some type for several years, and we still haven't got it. I represent a county, the county of Wheatland, that hasn't got one health unit in it. And people are wanting to get a nursing home or health facility of some type. We're working towards that, and I'm hoping we can. It seems to me that a great deal of emphasis is — I shouldn't say too much, but a lot of emphasis — has been placed on urban areas, perhaps to the loss of the rural areas. I think there has to be a better balance there.

If this work by these people is going to evaluate the work of the commission, the best place to place hospitals and so on, how we can get more hospitals, how we can treat the people better, how we can maybe cut down some construction costs by making our hospitals more serviceable, that I think has to depend on doctors, nurses, and people who have to work in them. But if these results can be done to give the people of Alberta better health service with prospects of longer life and better care, then it may well be that every cent in this budget is going to be well spent.

I think we have to wait for the results. Since the appointments have been made and the budget has been presented, I would suggest to all hon. members, let's proceed with the work and see if the dollars we're spending are going to produce the best possible results for the people we all represent.

MR. R. SPEAKER: Mr. Chairman, I want to make it very clear to the minister that in no way are we reflecting on the performance, ability, or character of these particular people we're talking about, Mr. Willis, Mr. Fletcher, and so on. What we are saying is: number one, we would like to know what specific types of duties and responsibilities they are taking within the terms of reference and responsibilities of the minister. We feel that they have not been clarified to us. We have had generalizations. We have had no specifics.

They have been under contract for over five months

now. Mr. Willis has — I'm not too sure of Mr. Fletcher. But Mr. Willis has been on contract for over five months. The minister isn't able to present to us in either verbal or written form anything that's concrete as to what the responsibilities are at the present time on an ongoing basis, or what the future responsibilities will be.

If that isn't available, I can't understand the purpose of taking on the consultants. Before doing so, the minister should have had those types of things clear in his mind. At the present time they are not clear to us, they have not been clearly expressed by the minister. So we can only conclude that there are no terms of reference. It's an *ad hoc* approach, that wherever he can go into social policy or health policy in other departments, where he can superimpose on professionals hired in the Department of Social Services and Community Health, in the commissions, the minister will do so at whim.

Mr. Chairman, that's not good enough. We feel that their purpose, their function, the reason to be there, and the reason we should support an expenditure of nearly \$200,000 — that's what we're committing ourselves to, nearly \$200,000 — hasn't been clearly stated to us. We're not satisfied. We feel that that first decision, in light of the information we have, is bad management. How in the world can we have good management in the future, deal with these people, give them direction and come up with something in the next year or year and a half? At the present time we haven't seen that capability being illustrated.

DR. PAPROSKI: [Inaudible] regarding the comments that were just made by the opposition members. Surely, Mr. Chairman, when I hear the Member for Clover Bar — and my wife also is a nurse, and she also is still nursing from time to time — I can assure you that every nurse in this province would indicate very quickly that one of the best exercises is walking, and they don't mind walking. They do their job very well, and as a result their physical fitness in this province is top rate.

But more importantly, Mr. Chairman, I think it has to be laid on the table by members other than the opposition that in this province the quality and quantity of active hospital, nursing homes, auxiliary hospital care, and medical care generally is second to none in Canada. It should be reinforced and underlined, because all too often with the comments we've heard over the past day or two the hon. members here would be led to believe this is not true. I suggest maybe the hon. opposition members should visit the other provinces from time to time, then come back and compare notes regarding the quality and quantity of the hospital care, whether it be in the active auxiliary, nursing homes or general community care and then make your comments.

Mr. Chairman, especially at the community level, the co-ordination and planning of hospitals and medical care by the department which the minister is in charge of, and the fresh look he's now injecting by getting outside opinions and consultants is not only needed but it is a way of injecting those new, fresh ideas and direction in conjunction with the government we have now and of course with the Legislature.

Mr. Chairman, all too often this particular area, this

outside information and opinion, had been ignored by the previous government. In fact, as we all know, they lost touch. When you lose touch, Mr. Chairman, the government is not only not responsive, it's not flexible. That government is out. I can assure you there's no way this minister will allow that to happen. Because we know that in medical care and hospital across the board this particular area is constantly changing. It requires a constantly new, fresh outlook. It requires this particular type of injection of new ideas, ideas, Mr. Chairman, not only from the medical care point of view. I mean [not only] the medical doctors, but people who are not necessarily in the front line in that way as MDs, people who are social workers, nurses, and other health professionals. I commend the minister for the excellent job he is doing in selecting these people, albeit the cost is high. But then the cost is high across the board and can be higher if the proper direction and policies are not formulated for the short, medium, and long run.

I would like to conclude my comments, Mr. Chairman, by congratulating the minister again for the excellent selection he has made. I hope he carries on this selection, knowing full well that if they don't do their job, they won't be there carrying out this consulting work.

Thank you.

DR. BUCK: Mr. Chairman, I would just like to say a word or two to the hon. Member for Edmonton Kingsway. It seems to be a typical Tory trick to turn things around. We are not questioning, hon. member, the health care that is being delivered to the people of this province. It always was and still is the best in North America. I think we're unanimous on that. I say it was and still is.

But what we are trying to establish, Mr. Chairman, especially to the hon. Member for Edmonton Kingsway, is, when we are talking about the planning of hospitals, nursing homes, and auxiliary hospitals, what does this \$200,000 in consultants' fees contribute to that procedure? I say it doesn't contribute one dollar's worth of input. Because the minister has quite obviously overstepped the bounds of his responsibilities. That responsibility lies with the Minister of Social Services and Community Health, the hon. Member for Rocky Mountain House. I could vote in all conscience if that appropriation was in the minister's estimates. But it does not belong in this department, because if we are going to use that service it is a duplication. That's \$200,000 the hon. minister Mr. Minielly does not have to spend in his department.

When the hon. Member for Edmonton Kingsway talks about planning these facilities, we have the people, we already have the expertise in place in that department. So if we are going to concede a new department here that's going to be looking at mental health and all these other things, social counselling, then either create a third department or we give it to the minister it belongs to. What we are saying is that approximately \$200,000 does not need to be spent in this appropriation.

I would like to say to the hon. Member for Drumheller that everybody in this Legislature is interested in having adequate care for our senior citizens. We're unanimous in that. But we are not saying that we are not happy with the care. What we are saying

is that more care is required. The point I was trying to make is that because we are going into these lavish facilities, we are not able to look after as many people as we should be able to look after.

I would like to say, in defense of the present minister, that I was not happy with some of the facilities we built as an administration. When we opened the senior citizens' home in Lamont about six years ago, I said to the then minister, Mr. Ludwig, Mr. Minister, I am not happy with that facility. Because there were 50 units that cost over \$600,000. He said that's one of the cheap ones we're building. Mr. Chairman, it is lavish. I would be much happier if we used only three-quarters of those funds and looked after 25 or 50 more people. Because that is what the problem is. We are not looking after sufficient people, and we will never do it going the Cadillac route.

If you speak to the senior citizens, I think if they had a choice, they would rather have less lavish facilities, but twice as many of them, Mr. Chairman. My plea is that maybe we are spending too much to get too little.

So, Mr. Chairman, getting back. These consultants [are] men of extensive expertise but in the wrong field. They are not experts in building hospitals, auxiliary hospitals, senior citizens' homes. They are experts in social counselling. Let's put them into the right department. Let's move this \$200,000 into the Ministry of Social Services and Community Health. Because if those experts in that department need some help, let's give it to them. But let's get it out of this department. Because these people are not going to contribute \$200,000 of knowledge as to how we should build hospitals, Mr. Chairman.

DR. PAPROSKI: As a comment in response if I may, Mr. Chairman, I'm very pleased that the hon. member finally acknowledges that we have the best hospital care in Alberta in the past, now, and hopefully in the future. Mr. Chairman, the only way we can maintain that future quality and quantity of hospital care is by proper planning.

Mr. Chairman, the hon. member has unfortunately prejudged the end result of that planning. The hon. members of the opposition want to know the results of that planning in advance — which is an impossibility. Surely if the hon. members had any knowledge of research, consulting, and planning, they would recognize very quickly that two, three, or even more ideas may be necessary before a final decision is made regarding such an important topic as health care, hospital care, community care, physical, mental, and social care, at a community level. He should realise this decision does not come overnight and it doesn't come from medical doctors alone but from a wide variety of health workers. There could be no better thrust and injection in this regard [than] by having somebody outside of the medical profession *per se* as one alternative — not for one minute denying the fact that the hon. minister doesn't have and will continue to have input from the medical profession.

So, Mr. Chairman, finally to be clear on that point. As a member of this Assembly, and of the health care field if you wish, I'd rather have duplication, triplication, and quadruplication in the planning input before we make disastrous mistakes as have been made in the past prior to 1971 when we built too many hospitals too fast and found out our budget was being

outstripped. So we have to be very careful because the lives and the well-being of all our citizens are at stake here.

[Mr. Chairman declared Vote 1 agreed to. Several members rose calling for a division. The division bell was rung]

[Three minutes having elapsed, the House divided]

For:

Adair	Horner	Schmid
Appleby	Hunley	Schmidt
Ashton	Hyndman	Shaben
Backus	Jamison	Stewart
Bradley	Johnston	Stromberg
Butler	King	Taylor
Chambers	Kroeger	Tesolin
Chichak	Lysons	Topolnisky
Cookson	McCrae	Trynchy
Diachuk	Miller	Webber
Doan	Miniely	Wolstenholme
Dowling	Moore	Young
Farran	Paproski	Yurko
Gogo	Purdy	Zander
Hansen	Russell	

Against:

Buck	Clark	R. Speaker
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Totals:	Ayes - 44	Noes - 3
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Agreed to:

Department Total	\$645,553,939
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MR. MINIELY: I move that the resolution be reported, Mr. Chairman.

[Motion carried]

MR. HYNDMAN: Mr. Chairman, I move the committee rise, report progress, and beg leave to sit again.

[Motion carried]

[Mr. Speaker in the Chair]

DR. McCRIMMON: Mr. Speaker, the Committee of Supply has had under consideration the following resolutions, reports the same, and asks leave to sit again:

Resolved that for the fiscal year ending March 31, 1978, amounts not exceeding the following sums be granted to Her Majesty, for the Department of Hospitals and Medical Care: \$234,192 for minister's office; \$2,696,087 for Alberta Hospital Services Commission administration; \$431,753,000 for financial assistance for active care; \$60,156,000 for financial assistance for long-term chronic care; \$37,295,000 for financial assistance for supervised personal care; \$113,419,660 for medicare.

MR. SPEAKER: Having heard the report and the request for leave to sit again, do you all agree?

HON. MEMBERS: Agreed.

MR. HYNDMAN: Mr. Speaker, on Monday the Assembly will continue in Committee of Supply, beginning Orders of the Day with the Department of Municipal Affairs, followed by the Department of Housing and Public Works.

MR. SPEAKER: The Assembly stands adjourned until Monday afternoon at half past 2.

[The House adjourned at 12:58 p.m.]

