

**LEGISLATIVE ASSEMBLY OF ALBERTA**

Title: **Wednesday, March 10, 1982 2:30 p.m.**

[The House met at 2:30 p.m.]

**PRAYERS**

[Mr. Speaker in the Chair]

head: **INTRODUCTION OF BILLS**

**Bill 11****Health Services Continuation Act**

MR. YOUNG: Mr. Speaker, I beg leave to introduce Bill No. 11; the Health Services Continuation Act.

This Act would restore full hospital services and would terminate the present strike in the hospital system. This Bill provides for an arbitration tribunal to resolve the outstanding matters in the dispute between the parties, should they be unable to agree. The Act contains means of enforcement. It applies only to this particular dispute and terminates December 31, 1983, which would be the normal date for a two-year collective agreement.

[Leave granted; Bill 11 read a first time]

head: **INTRODUCTION OF SPECIAL GUESTS**

MR. CRAWFORD: Mr. Speaker, I take great pleasure today in introducing some 50 grade 6 students from McKee school in the constituency of Edmonton Park-allen. Just a brief note of regret — if I might express it to them this way — that I was not able to meet with them today. I would have liked to do so. But I am so pleased they are here, along with their teachers, to see the proceedings. In company with them today are the principal, Mr. Climenhaga, librarian Mr. Betus, Mrs. Kitching, and student teacher Miss Vanderlee. I ask the entire group to stand, please, and receive the recognition of the House.

MR. STEWART: Mr. Speaker, it's also my pleasure today to introduce a group of people from the town of Wainwright in my constituency. Twenty students from Lakeland College, accompanied by Diane McKinnon, are in the public gallery. I ask that they rise and receive the welcome of the Assembly.

MR. COOK: Mr. Speaker, I wonder if I could introduce to the Assembly some 23 students from Mr. Scott's grade 6 class in the Lauderdale elementary school in Edmonton Glengarry. They were able to go on a tour of the building, and I had a chance to visit with them for a few minutes to discuss some features of the Legislature. I'd like to ask them to rise and receive the very warm welcome of the Assembly.

MR. KNAAK: Mr. Speaker, it gives me great pleasure to be able to introduce to you and to my colleagues in the House 25 students from St. Augustine school in the constituency of Edmonton Whitemud. I too wish to express my regret at not being able to meet with them. I

also wish to welcome their teacher, Miss Teresa Adam, and Miss Pelkie, and the parents accompanying them: Mrs. Bakker, Mrs. Batty, Mrs. Malott, Mrs. Cormier, and Mrs. Park. I ask them to rise and receive the warm welcome of this House.

MR. KOWALSKI: Mr. Speaker, the Alberta Association of Improvement Districts is holding its annual convention this week in Edmonton. Some of my constituents are attending that convention this afternoon, and they should be in the members gallery. I certainly hope they're here now, rather than coming in at the 3 o'clock shift. I'd like to introduce to all members of the Assembly, chairman Randy Mercer and his wife Gwen, and councillors Rick Thomas, Rick Fleming, and Lionel Udenberg. I'd ask them to rise and receive the warm welcome of the House.

MR. NOTLEY: Mr. Speaker, it is my pleasure this afternoon to introduce to the members of the Assembly and to you, sir, 10 officials of the United Nurses of Alberta: Kristine Gawreluck, president of Local 33; Pat Dooley, chairman of the emergency services committee, Local 33; Helen Moore, chairman of the health and safety committee, Local 33; Kertha Aggott, chairman, professional responsibility, Local 33; Leo Wilson, treasurer of Local 33; Ruth Heather, secretary of Local 33; Barbara Kowski, president of Local 79; Irene Gouin, vice-president of Local 79; Deborah Weber, treasurer of Local 79; and Barbara Kruger, member of the professional responsibility committee, Local 79. I wonder if they would stand and be welcomed by the members of the Assembly.

head: **ORAL QUESTION PERIOD**

**Health Services Continuation Bill**

MR. R. SPEAKER: Mr. Speaker, in question period today, I have only one question, to the Minister of Labour. I and the other members of the opposition wish to forego the rest of the questions, so that we can move into Bill 11 as quickly as possible.

My question is with regard to the Bill. Firstly, are any amendments going to be considered, other than are in the Bill at the present time? Secondly, has any communication been made with the UNA or the AHA since the notice of the introduction of the Bill yesterday?

MR. YOUNG: Mr. Speaker, a couple of amendments are proposed by way of government amendments. The first would be to change the wording in Section 11(1), which would really delete "or acquiesced". That would require a slight change in other wording in that sentence.

The second change would be the deletion of the Beaverlodge-Hythe hospital board from the schedule, inasmuch as they are in a slightly different bargaining legal position than are the other hospital boards mentioned in the schedule.

MR. CRAWFORD: Mr. Speaker, I just add that a very small editorial change, which has been drawn to our attention by both sides, will also be made in regard to Section 14. It has to do with the reference to "employer" in that section.

MR. YOUNG: Mr. Speaker, I neglected to respond to the second portion of the hon. leader's question which, as I recall, had to do with whether there had been any

contacts with my office, I gather. I have received a written communication from the Alberta Hospital Association. I have not had other contacts, except those which have occurred by virtue of meeting members of the respective parties.

MR. MACK: Mr. Speaker, my question was to have been to the hon. Minister of Labour, dealing specifically with Section 11. It has been responded to.

## ORDERS OF THE DAY

### head: GOVERNMENT MOTIONS

#### 2. Moved by Mr. Crawford:

Be it resolved that pursuant to Standing Order 63(2), notwithstanding the *Standing Orders* and notwithstanding the normal adjournment hour, Bill No. 11, the Health Services Continuation Act, be proceeded with in all its stages in one day.

MR. CRAWFORD: Mr. Speaker, I move Government Motion No. 2, standing in my name on the Order Paper. I intend to address the question of the urgency of the matter in a relatively brief way, because it seems evident to me that the Assembly would wish to deal firstly with that, then perhaps proceed with all due dispatch to the consideration of Bill No. 11, to which I would not refer with respect to my remarks at this point.

Mr. Speaker, I think it is particularly a proper and good thing that the *Standing Orders* of our Assembly allow for a situation such as the one the Assembly and the people of Alberta are faced with at the present time. Standing Order 63(2), if it has been used before in the memory of hon. members here, is certainly not one resorted to on many occasions. I do not remember an occasion when it was resorted to in this Assembly. However, it does have that very necessary regard to matters which may be urgent, necessary or, as the Standing Order says, "extraordinary". It does permit advancing a Bill to more than one stage per day, which would normally be the requirement.

Mr. Speaker, I think the urgency and the extraordinary nature of the situation relative to the strike in the health services industry in the province of Alberta at the present time are matters known to all Albertans. It is widely accepted in the province of Alberta that the Legislative Assembly should indeed move to deal with the matters raised in Bill No. 11.

Mr. Speaker, I wanted to make those declarations in support of this motion in order to emphasize the feeling the government has of the urgency and importance of the matter we believe will shortly be before this Assembly. Having said that, I would say no more at this point, other than to urge all hon. members to support the resolution.

MR. RUSSELL: Mr. Speaker, I want very earnestly to request the support of hon. members of the Legislature for the motion put forward by the hon. House leader. I think it's very clear that the government has waited until, in its judgment, what it deemed to be the last reasonable time at which the Bill we are trying to get to ought to be discussed. Having made that decision, it is in the public interest, as a matter of urgency, to proceed with it as expeditiously as we can.

Hon. members have had the period overnight to dis-

cuss the essence of the Bill with interested parties. I think there's been some indication of responses that might be given to concerns raised. But I'm standing in my place today speaking on the matter of urgency, based on medical advice we are getting, which has accumulated at a rather alarming rate over the last few days. It's quite clear and beyond a question of a doubt that there are a growing number of urgent cases: sick Albertans, unable to receive hospitalization, who are waiting with a great deal of anxiety for admission to hospital services. I believe it's our responsibility to see that the situation is restored, so those people can get those services as quickly as possible. We've considered that.

We've tried to balance the collective bargaining principles and arrangements always involved in a situation like this, on one hand, with the medical evidence which has been carefully assimilated, on the other hand. In consultation with officials in the hospital system, we have tried to see what ought to be the timing whereby the Bill should be passed. I think it's very clear that if we seek to endorse the very best medical advice we've been able to achieve — that is, have the hospital system operating in Alberta again by this coming weekend — and bearing in mind that the hospitals need anywhere from 48 to 72 hours for gearing up in a meaningful way, time is in fact running out.

The government made its move with respect to the announced intention of its legislation yesterday. We hoped to achieve a collective agreement between the two parties over the weekend and Monday, and that failed. So I can't do more than conclude by supporting my colleague's argument on the basis of the urgency, based on medical evidence I have, which I think gives this Chamber a responsibility to proceed with this legislation just as expeditiously as we can.

[Motion carried]

### head: GOVERNMENT BILLS AND ORDERS (Second Reading)

#### Bill 11

#### Health Services Continuation Act

MR. YOUNG: Mr. Speaker, I am pleased today to move second reading of Bill No. 11, the Health Services Continuation Act.

I'd like to commence by briefly outlining the highlights of the Bill. The first is that it will terminate a dispute affecting 85 hospitals in the province of Alberta. Although some of those hospitals have continued to function, some in fullest measure and others in part measure, all are involved in this particular dispute. The Bill provides that on proclamation, the employees shall return to work and the employers shall welcome those employees back to the fullest operation of the hospital system. The Bill also provides that there will be a process to resolve those items of difference between the parties if the parties cannot, in the interim, resolve the differences themselves.

The provision for final resolution is an arbitration tribunal. Arbitration tribunals are a traditional means of resolving differences of opinion between parties. They are, of course, a standard feature of certain legislation in the province of Alberta. I refer to the Firefighters and Policemen Labour Relations Act and the Public Service Employee Relations Act. As well, under the Public Emergency Tribunal provision of the Labour Relations

Act, there has been periodic use of this mechanism to bring the fullest possible fair, objective, and measured judgment to differences parties may have. I do hope it is not necessary to resort to the arbitration tribunal. To that extent, I earnestly seek and urge the parties to do their utmost to fulfil the responsibility those presidents undertook to me that they held; that is, the responsibility to resolve this particular dispute at the bargaining table.

I have already mentioned the term of the agreement. It will extend from January 1, 1982, in whatever measure the parties agree or that the tribunal agrees and decides, until December 31, 1983. There are provisions for enforcement of this legislation, Mr. Speaker. Regrettably it is the opinion of the government that the urgency in the health care system is so great that this dispute, which is the third in three consecutive rounds of collective bargaining between the same two parties on a province-wide basis, should be brought before this Assembly. Accordingly it seems fitting that every reasonable effort be taken to assure that this legislation is accepted — I hope in good spirit, Mr. Speaker — by the parties affected. The Act terminates on December 31, 1983. To that extent it contains a sunset clause, or is a piece of sunset legislation.

Mr. Speaker, I'd now like to turn to the collective bargaining process and briefly discuss the activity, actions, and initiatives taken by the government to try to bring this matter to a speedier conclusion, and a conclusion across the bargaining table, the location for the most acceptable resolution for all concerned. Before bargaining commenced, in the months of September and October, I and senior officials of the Department of Labour met separately with each of the two parties, the United Nurses of Alberta and the Alberta Hospital Association. The purpose of the meeting was for a general discussion, first of all to gain an understanding of their bargaining structure; secondly, so we knew who would be leading the organization and they, on the other hand, could know the senior officials in the Department of Labour.

Following that, the parties went about bargaining between themselves. Through the Department of Labour and our contacts, we know that the bargaining did not proceed as effectively as we and the parties had hoped. After several contacts with the parties, a mediation officer, Mr. Richard Campion, was appointed on December 1, 1981. Between December 1, 1981, and December 17, Mr. Campion called and participated in seven meetings of the two parties. Many issues were on the table. Relatively speaking, very few had been resolved. I speak of in excess of 100 issues now; in fact, I think the number was probably double that.

A strike vote was taken, commencing on or about December 17, during the two weeks preceding Christmas. The strike vote was conducted by the Labour Relations Board, consistent with the procedures established by the board: a secret ballot prepared and approved by the Labour Relations Board. It also requires that the notice of ballot be posted in advance of the poll, so the persons voting would have an opportunity to know where and when to vote. As I mentioned, that vote was completed during the two weeks preceding Christmas. In every sense it was a standard process, conducted by the Labour Relations Board many times during each and every year.

The period following Christmas produced notice that a strike would commence in certain of the hospitals, and a disputes inquiry board was appointed on December 30, 1981. As its challenge, that board had to inquire into the matters in dispute, to try to effect a settlement, to mediate. If it was unsuccessful in that respect, its second

challenge was to produce recommendations on each matter in dispute, and there were many. It was to recommend what ought to be done. Regrettably that was the course that had to be followed, because the mediation efforts to get the parties to come to a consensus were unsuccessful. So the mediator produced a report on February 3, 1982, and I received it on February 3, 1982. I remind you that there are 85 hospitals involved in this dispute, and a responsibility I have under the Labour Relations Act is to communicate at least one copy of that quite voluminous report to each party. That was accomplished on February 5.

At this point, I must advise that the value of the disputes inquiry board report lies in moral suasion or, if you will, in the objectivity of it. It was realized that the only way to be assured that every party would make a decision with respect to the report itself was by means of a vote. That supervised vote was conducted on February 11. The provisions were exactly the same as for the strike vote: a secret ballot of all the nurses and hospital boards affected through the Alberta Hospital Association, and only those who were eligible to vote.

Subsequent to that event, the mediator, Mr. Dick Campion, prior to March 4 held four more meetings with both parties. Again those meetings were unsuccessful. It is fair to say that by this time the number of issues in dispute seemed to be narrowing down somewhat, although in the nature of collective bargaining, it is always a possibility that parties advance their position as being contingent upon the resolution of some other matter. I understand that is what happened in this particular instance.

There was a meeting on February 27, which I should mention for two reasons. One, I should correct the record. Yesterday I indicated it was a Sunday afternoon. In fact, it was a Saturday afternoon. It was for the purpose of understanding the significance of a letter, dated February 15, sent to me by Mr. Renouf, the executive director of the United Nurses of Alberta, and to understand what sort of undertaking had been given in that letter, which suggested that emergency services would be provided. That meeting involved officials of the Department of Labour and the Department of Hospitals and Medical Care, as well as the two associations, and was chaired by the executive director of the College of Physicians and Surgeons. During the meeting, I understand there were discussions with regard to what is medical service and what was the meaning of the letter. I can sum up by saying that it did not produce a clarification which met with the satisfaction of those persons responsible for ensuring the quality and quantity of necessary medical care in the province.

On March 4, I requested and obtained a meeting with the presidents. I made it very clear in my request that I wished to meet with elected representatives of the United Nurses of Alberta, that being the president and one other person — in this case three other persons came, all members of the executive and the bargaining committee, as I understand — and the president of the Alberta Hospital Association and one other member of the executive.

That meeting commenced at 9:30 and went for about 45 minutes. Among other things, we discussed the responsibility of the presidents for the leadership of their respective associations, as well as their responsibility, on one hand, to the nurses of Alberta, who were obviously caught in a difficulty of loyalty to their association and a professional commitment; on the other hand, the com-

mitment to board members and administrators, who likewise were caught with their responsibility to provide services but were obviously in a situation where they were taking the decision that in the interest of the public, given the requests being made, they were setting one interest off against the other.

We considered the responsibility those two presidents and I had for the provision of needed medical and hospital services to the general public of Alberta — the weighing of that responsibility, which they share with me as Minister of Labour, in this case, to assure that this dispute did not weigh unduly against that very fundamental responsibility, which has to be recognized, to the urgent needs of the public by way of medical services.

As well, Mr. Speaker, we discussed the impact of this dispute on the whole concept of collective bargaining as a satisfactory mechanism of resolving the differences between parties — who, in this instance, were caught up in the dispute — generally in our society for the determination of what is fair and reasonable, having regard to their work conditions, their working relationships and that of their neighbors and others in society, and their responsibilities by way of providing a service. We agreed that all of us provide a service in society that, in some measure, is helpful and needed by others.

Subsequent to that meeting, Mr. Speaker, there were further mediation attempts on March 4, 5, and 8. On March 8, the mediator took a somewhat more vigorous position, because it was felt that the issues in dispute had narrowed considerably at that time. The position was taken of advancing suggestions which, it seemed, should be able to resolve a number of the disputes. Mr. Speaker, that meeting appeared to go nowhere, and by 6 o'clock in the evening our hopes were greatly diminished.

The mediator made one more effort, on some other matters, to see if there would be any hope of agreement. By 9:30 it was determined that both parties were adamant — and I may even use the expression "obdurate" — in their positions and were not prepared to change. We considered there was a stalemate. Accordingly, I had to so report to my colleagues in Executive Council on the morning of March 9. I have to advise that our reading of the positions of the parties at that time was that there was almost no prospect of any movement during this particular week with regard to that dispute.

In concluding, Mr. Speaker, I would just like to reflect on two points. One, the Bill before us is here because we have a very special dispute which follows on the heels of two other disputes between the same two parties. This makes three disputes in five years which have impinged upon, damaged, and hurt the services available to the general public by way of hospital treatment. That's a very serious matter. It would appear that the problem between the parties has not been satisfactorily dealt with in the previous disputes. I would go so far as to say that it seems to me a problem of attitude and a problem of understanding how to make a satisfactory working relationship.

Mr. Speaker, perhaps too much is expected of collective bargaining in this sense. Perhaps attention has to be given to a new sensitivity, a new approach, a reconsideration, an examination of what is happening at the working location; that is, the particular nursing unit, ward, or hospital. But it may well be that too much is expected of collective bargaining in this situation. Certainly, too much is expected, given the attitude of the parties, which leads me to my final comment.

I have struggled and assisted, through the Department

of Labour, in every way we know to make collective bargaining — which, like democracy, may not be the best way of resolving differences. But in a democratic society, we have to have some way of resolving differences between groups of employees and employers. Collective bargaining, like democracy, may not be the best way, but I don't know of a better way. I want to say that I would very much like to have seen collective bargaining succeed in this instance. I believe it could have, but it didn't. I'm not sure it's collective bargaining that didn't succeed or collective bargainers who didn't succeed. I think that's a very grave consideration. It seems to me that the privilege of work stoppage — because it is a privilege; not everybody has it — brings with it very great responsibilities.

As I mentioned before, I think the problem in this instance is that the privilege granted, on one hand, has not been fully balanced by acceptance of responsibility, on the other hand. That is why this Bill is before us, and that is why this Bill is urgently before us: because we have struggled and assisted the parties to try to give every opportunity to resolve the differences through collective bargaining, and that has not happened. In the meantime, an urgency has arisen. That is why I am moving second reading of this Bill today.

MR. R. SPEAKER: Mr. Speaker, I would like to address four points on Bill 11, the Health Services Continuation Act. In those four points, I would like to address two comments of the hon. minister: first of all, that we have had three disputes in five years, and we are now at a situation where we must have very severe legislation before the Legislative Assembly of Alberta; secondly, the accusation that there has not been a balance of responsibilities with privileges, and that this balance is out of order. Mr. Speaker, I would like to address those two questions in my remarks.

First of all, what about the necessity of Bill 11? Is it necessary today? What are the basic reasons it is in this Legislature? As far as I am concerned, the minister has not answered that question. I have spoken with a number of nurses and persons from their executives, and I have not heard one of those people say they would not have followed a back-to-work order — not one, Mr. Speaker. If the minister has some information that indicates that a group of nurses or one of the locals will not go back to work, will not follow the legislation, then I would like to know about it in this Legislature.

Why is such a drastic, severe measure necessary at this time? That question is most necessary, and must be answered before we give approval to this legislation. There was another mechanism for this government to use: a back-to-work order. That was used to end the last strike, and it was effective. People went back to work and did their jobs under very unacceptable conditions, but it worked. But today we have in this Assembly a piece of legislation that seems more drastic, severe, and suspicious of the actions of an interest group in this province, the United Nurses of Alberta, and that I don't think is really acceptable. Mr. Speaker, that's unfortunate.

Legislation should only be brought into the Assembly in a responsible way, to deal with the problem at hand. The problem is ending a strike, not punishing people because they said they were not going back to work. I believe an order in council would have ended the strike. That is point number one, Mr. Speaker.

Secondly, the collective bargaining process. The disputes inquiry board that was a new innovation of this government has failed. It prolonged the dispute between

two parties, hardened the positions, and did not reach any conclusions. Mr. Speaker, that only made the situation [worse]. It allowed the government to stand behind the report of a one-man board which, in the words of the nurses, didn't recognize some of their basic problems — I am going to talk about those in a few moments — but was hopefully the guidelines for a settlement that wasn't acceptable.

What else is unfair about this collective bargaining process? The Alberta Hospital Association and the Minister of Hospitals and Medical Care have a partnership in these negotiations. I have said that in this Legislature more than once. When the government of this province pays last-dollar costs, then they have some responsibility to solve the dispute. The Minister of Hospitals and Medical Care would not get involved, because it was up to the Alberta Hospital Association. But how could they solve the dispute without assurance that there would be no question that the government was going to pick up all the costs? The minister said that assurance wasn't given, but we may and we may not; we will see what the settlement is.

Under those circumstances, even if the Alberta Hospital Association wanted to move, they knew they later would have to fight with the government, which holds the purse string, to get the money. A conclusion to the dispute could not happen under those circumstances. In light of that circumstance, collective bargaining is impossible, Mr. Speaker. When this government wants to control the expenditure and authority of other bodies through that mechanism, the effectiveness of the collective bargaining process will not work.

I want to make a third point about this Bill. From my best assessment, I understand that some new, different and rather unusual principles are introduced into this Bill. First of all, after passage of this Bill and Royal Assent, the employees' organization, the United Nurses of Alberta, will be asked to direct all their members to go back to work. I think that in itself is unusual, Mr. Speaker. From precedent and other situations, I understand that the government or the employer, the Alberta Hospital Association in this case, makes that request.

Why is it so different this time? The minister has said that it is different because he has said to both of the presidents, you must have the responsibility for your membership. The government has brought in this legislation and, through the legislation, ordered the nurses back to work, so why not take the responsibility for doing that? The only reason I can see for this is other clauses and other principles in that Act, in terms of severity of punishment. If any of the membership or leadership of the United Nurses association do not follow the directive of this Bill or break a court order, decertification can occur and, along with that, penalties to the membership.

I am pleased that the government has seen fit to take out the word "acquiesced". I want to look at that a little closer before we get into Committee of the Whole. But I am glad the government took that out, because the ramifications and implications of that word in the Bill created great insecurity and a threat to the membership of the United Nurses of Alberta, who would be affected in their livelihoods and their responsibilities to the United Nurses of Alberta by this Bill. Mr. Speaker, threatening decertification is unprecedented legislation. I think we could call it the sledge hammer.

The arbitration tribunal: the legislation says that the principle is that one or more persons can be appointed to that tribunal. I hope that after we have seen the results of

the disputes inquiry board, the government sees fit to appoint at least three people to that arbitration tribunal, with the nurses and the Alberta Hospital Association having the opportunity to appoint or recommend one of those persons — at least three, so we have a broader perspective and assessment of a fair and equitable solution to the benefits that will go to the employees after the arbitration tribunal brings down its recommendations.

Mr. Speaker, those are three of the principles that I comment on very briefly and hope to deal with further in Committee of the Whole.

What, then, has brought us to the point where we have this legislation? The minister said that we've had three disputes in five years and that we haven't had complete responsibility on the part of the United Nurses of Alberta, in terms of the negotiations. I'd like to address those questions. If the minister has said something different, he can certainly stand and correct me accordingly.

First of all, I understand that nine items are outstanding in the negotiations and have not been agreed upon. Mr. Speaker, I'd like to list those nine items: scheduling of weekends and shifts; mandatory overtime; minor vacation improvements; part-time and casual employees and prepaid benefits for these; unpaid maternity leave; that no nurse be alone on a ward; strengthening of the professional responsibility clause; and the seniority clause, where the question is that long-term service is or is not recognized after five years. The feeling with regard to that is that if it's not recognized, a person is of no more value after having given experience and a contribution to the employer. Those are the nine items on the list.

Mr. Speaker, when I examine those items, I find they relate to one very basic item: working conditions in the hospital. I'd like to relate to that topic a report completed by the Alberta Hospital Association in November 1980, *Nursing Manpower: A Study of Factors in Nursing Supply and Demand in Alberta Hospitals and Nursing Homes*. This report, completed at that time, pointed out some very interesting and, I think, very valid results.

First of all, in taking projections, there would be a serious shortage of nurses for hospitals and nursing homes, which would double by 1981 and be six times as large by 1996. The study points out that in 1981, we'd have a shortage of over 1,500; 1986, 3,359; 1991, 3,659; and 1996, 4,346. Mr. Speaker, from some of the questioning we've had in this Assembly, I think the conditions are even worse than that, in terms of shortage. The government hasn't dealt with that problem. But the evidence is here in a scientific study, an investigation of just where we are.

[An hon. member fell from his chair]

MR. R. SPEAKER: Possibly a sleeping pill, Mr. Speaker?

MR. SPEAKER: On the contrary, I thought it was the force of the hon. leader's arguments.

MR. R. SPEAKER: If I can have one bit of a light moment. Most likely, with all the professional care here, I think he's faking it. [laughter]

Mr. Speaker, let's look at the circumstances that come from this report. First of all, factors related to general job satisfaction with regard to the RNs, RPNs and RNAs. What is the greatest dissatisfaction factor? It's number one in all three groups: nursing administration policy and procedures. Further on, the report talks about satisfac-

tion with specific factors in current jobs. Opportunities for growth and advancement were the factors with which most respondents were dissatisfied. But I indicate this with greater emphasis, Mr. Speaker:

Administrative policies were a close second, with 45 to 60 per cent of the respondents dissatisfied in this area. Working conditions, which included hours, patient load, and physical facilities, were dissatisfactory to 37 to 40 per cent.

On the following page of the report, changes desired in nursing. This is most important:

If given the choice of one thing they could change about nursing, respondents would choose working conditions first, and administrative policies second. More recognition and better salaries would be third and fourth on the list.

What did the study find about least-liked aspects of current positions? Working hours and administrative policies ranked as the top least-liked aspects of the current positions.

Mr. Speaker, we go on in the report, and we find that many of the people in the profession

most commonly gave as a reason for leaving [the nursing profession] the fact that employers did not give consideration to the fact that they had a family.

Working conditions.

Many nurses who are currently employed do not plan to remain in the hospital field. Twenty-six per cent of R.N. respondents plan to leave nursing within 5 to 10 years.

The likelihood of inactive nurses returning. And this relates to the number of nurses who are put into the field: out of 1,516 inactive respondents

Thirty-two percent stated they will never return to nursing. Working conditions (hours, patient load, stress) were the number one reason for this decision.

Now the report recommends some priorities for action.

Several major areas became evident as priorities for action based on the documentation in this study. They are presented in order of priority.

What is number one?

Objective examination of current working conditions and commitment to changing those conditions which are responsible for high turnover and nurses leaving the profession. The impact of such action would be (a) to slow the rate of occupational loss, and (b) to slow the rate at which nurses are leaving hospitals for other fields of nursing.

What was the second recommendation, priority?

The establishment of conditions which will make it possible, and indeed, encourage, two groups of nurses to work: (a) the "pool" of actively registered but non-employed or casually-employed nurses, and (b) currently inactive nurses.

Mr. Speaker, why do I quote this study by the Alberta Hospital Association? Number one, I think it's a credible document. Number two, it isolates the problem we are facing. I'd like to add this little comment. Even updating this report at this time, I believe those same conditions exist; if not even worse than they were when the report was completed in 1980.

What about this strike we're facing at the present time? The problem is working conditions. The matters which are left as outstanding issues relate to working conditions, concerns about the working life. It's not wages, not the salary, like a lot of people think; it's working conditions, supported by a study, supported by the concern of the nurses. We ended up in a strike. Mr. Speaker, I want to

make this loud and clear to the government: I don't think we would be at the place we're at today if those problems were solved by this government.

[Applause in the galleries]

SERGEANT-AT-ARMS: Order! Order in the galleries. There will be no hand-clapping, please. Thank you.

MR. R. SPEAKER: Mr. Speaker, that is the neglect by this government that has led us to the place we are today.

The nurses in this province have had to take that problem on their shoulders and carry it into the collective bargaining process, have had to stand firm against the AHA which is getting its directives from the Minister of Hospitals and Medical Care — a body which is unable to answer these questions, that had these matters raised to them and to the government in turn through a document, concrete information and not hearsay or frivolous evidence. Two years ago the government failed to act on it, and again has brought us to the place we are today and brought about the present strike.

How do we solve the situation we are in? The solution does not lie in saying, somebody was not responsible. They are responsible. Those working conditions still exist in the hospitals. After this legislation we are going to ask the nurses, professional people, to go back into the hospitals, back to a situation that is not going to meet adequate health care standards in this province. The load on them will still be tremendous.

The job of the Minister of Hospitals and Medical Care of this government is not over when we finalize this legislation today, because the real problem still exists. It's got to be dealt with. If it isn't, we are going to lose nurses in this province. They'll quit and say, I can't stand the pressure anymore. As this report points out very clearly, after 18 months many of them are burnt out and can't stand the rapid pace.

I asked one of the locals, after they talked with me, to summarize what it's like in their responsibilities. I'd like to refer to these notes, Mr. Speaker, as my notes and my interpretation of what I heard. This relates to the Royal Alexandra General hospital here in Edmonton, from local 33: the existing Royal Alexandra General hospital emergency was designed to accommodate 30,000 patients annually. In 1981 the number of patients approached and exceeded 90,000 to 96,000. The total number of emergency patients is overwhelming. The total is strictly emergency patients, therefore cannot be compared to the University of Alberta hospital where they include all outpatients in their totals. The physical . . .

MR. SPEAKER: Excuse me. I hesitate to interrupt the hon. leader but, as he knows, the purpose of debate in the Assembly is to hear the views of the members who have been elected specifically for that purpose. I would be concerned, having established a precedent of this kind, that in fairness it would be necessary to have no restrictions on any future participants in the debate who might wish to read various representations from various members of the public or various organizations, regardless of which side of the dispute they might be on or what their views might be. Of course the hon. Leader of the Opposition is fully entitled to put forth his own arguments in his own words. But I think that with his experience in the House, he will realize that it would put the Chair and possibly the House in a rather untenable position if instead of hearing the views of the members concerning this

important Bill, we were to read the views of a lot of people who, while they have other responsibilities, don't have direct responsibilities for debate in this Assembly.

MR. R. SPEAKER: Mr. Speaker, thank you very much. I thought I had clarified in my opening remarks that the ideas were information I had gleaned, heard, and were the best evidence I had with regard to the situation in hospitals. They are information I accept as valid.

In summarizing the information I have with regard to the Royal Alexandra General hospital, I find that the patient load in terms of emergency is very high, normally 200 to 250, and sometimes up to 350 on holidays. The majority of times, between five to eight nurses are on the floor, and there may be two nurses working on the floor in emergency on nights. The load is heavy, Mr. Speaker. Those are working conditions we're talking about. Those are circumstances the government should have been dealing with and recognizing as problems in the health care system. It is the issue at debate in the dispute that's been before us since December 17, as the minister indicated — or into September and October, since November 1980. That is the issue that had to be brought to a head.

Mr. Speaker, the nurses carried that load and stuck their necks out and are receiving criticism. They have taken the load from the government to try to bring the problem to a head. When talking to people at work on various shifts, I also learned that, for example, in the Royal Alexandra General hospital an RN is asked to look after the physical and emotional needs of 30 patients: one for 30. When that RN takes her dinner, supper, coffee, or whatever break, that leaves one RN for 60 patients, a very untenable situation. I understand there are people who must be treated on a regular basis. Emergency situations arise that make it very difficult and add terrific pressure under regular circumstances, regardless of the circumstances today when the nurses are not on duty. Those things are not being recognized by this government.

Those are the basic things that have brought us to the point where this government felt they had to bring very severe legislation into this Assembly. They have gone the second mile, as I said earlier in my remarks. The back-to-work order given two years ago after the last strike was now unacceptable. The government feared that the nurses were getting so strong with regard to their concern that they would not follow this legislation, that they would not adhere to a court order, and other punitive measures were necessary. That's what this legislation sets out: decertification, other very severe penalties in controlling their livelihood and their lives for the next two years until December 31, 1983.

That's serious, Mr. Speaker. What the government doesn't recognize — and I want to say it again — is that the problem is created by the government: working conditions that can only be solved by the government, recognizing that the health care system in this province needs more manpower, that better conditions must be there for the professional out in the field. Only when those factors are recognized will there be satisfaction, good morale, and an excellent delivery of health care services. As well, many people who have left the service at the present time will come back so we have adequate personnel to deliver the services.

Following this legislation today, we are going to lose a lot of professional people. Following a period of time when this government does not react to the real problem that's caused the dispute the nurses have brought in

focus, we will lose even more professional people in the health care facilities of this province.

That's serious, Mr. Speaker, because of the basics in life, food, clothing, and health care are all of equal need by every individual in this province, all of us included. If we as a government, as members of this Legislature, renege on our responsibility in any one area, then we are not taking our responsibility with the public, the citizens, the residents of Alberta. In this case, this government has not taken its responsibility.

MR. NOTLEY: Mr. Speaker, in rising to address second reading of the Bill before us, I would like to begin by saying that I think it should be made clear to all Albertans that the work stoppage is in fact a dispute over working conditions and the quality of health care in this province. I think it would be unfortunate if any Albertan somehow got the idea that the debate today is related to wages. It is not. It is clearly related to the quality of health care which should be the right of every single Albertan. The United Nurses of Alberta, in my judgment and I think the judgment of many others, are undertaking a crusade for better working conditions which will not only be of assistance to people working in the nursing profession but, over the long haul, will be the only guarantee of an adequate supply of competent nurses so we can have that first-class health care system.

Mr. Speaker, the Leader of the Opposition alluded to the nursing manpower report, prepared by the Alberta Hospital Association. Before this Assembly deals with the Bill before us, in my judgment there must be a complete explanation by the Minister of Hospitals and Medical Care as to why the government has not acted upon the major recommendations contained in that report of November 1980. This is now March 1982. We are dealing with legislation that is going to deprive some 7,000 to 8,000 people of one of the basic rights in a free democratic society. Before we do that, we have to know clearly and beyond any dispute why in the period of the last 16 or 17 months this government did not move swiftly on the recommendations contained in this report. It isn't good enough to say, we've got to rush into legislation — we were prepared to do it yesterday if unanimous consent had been given — because we have not done the job over the last 16 or 17 months.

Mr. Speaker, when I put the question, what meetings had occurred on this very study, to the hon. Minister of Hospitals and Medical Care on March 8 — I think it might be worth reading the hon. minister's answer on page 27 of *Hansard*:

Mr. Speaker, I meet regularly with the Alberta Hospital Association, either with their full board of directors or just their executive committee, and I would have to search the records to see at what times that study was discussed in any detail. I think the steps our government has taken with respect to the nursing profession and, more particularly, the challenge that faces us vis-a-vis adequate manpower in the nursing sector are well known. I won't repeat what my colleague the Minister of Advanced Education and Manpower just went through in some detail.

Mr. Speaker, the government's initiatives are so well known that the nine points now in dispute as a result of the narrowing of differences in the last few weeks, as a result of mediation sessions, all deal with working conditions and with the issues that were raised in November 1980 by this Alberta Hospital Association study. One has

to ask what the minister has been doing in this period of time. It isn't good enough to say, well, we've had meetings, and I'm going to have to search the records. The minister should have had an explanation, that should have been tabled as a matter of fact, and a ministerial announcement made before we even began the debate today.

Mr. Speaker, the fact of the matter is that while the government would like to suggest to the people of Alberta that in no way, shape, or form they are involved, that it's just a question of two parties, and that they have to reluctantly come in with this legislation — we all know that the last-dollar funding provision of hospitals makes it very clear that the government has to be involved; that if we're going to talk about better working conditions if this report of 1980 is going to become a reality, it's going to have very significant financial implications, that has to be dealt with by the government of Alberta.

Mr. Speaker, instead of the kind of explanation we had outside the House by the Premier and inside the House today by the Minister of Labour, this government might well take the old adage of Harry Truman. He used to have a little plaque on his desk. The plaque read: the buck stops here. There should be no doubt that in terms of the inaction on the working conditions that has led to this dispute, the buck stops with the government of Alberta. The work, the follow-up as a result of that report, obviously was not undertaken or we wouldn't have the kind of dispute we face today.

Mr. Speaker, before members of this Assembly vote on this matter, we have to recognize that we're dealing with some pretty fundamental rights of people: the right to free collective bargaining and withdrawal of one's services. People may not like strikes. Nobody likes strikes. But it's one of the rights we have in this province, and if we're going to take away that right, we have to know that there is no other alternative, that there is in fact an urgency to the matter.

Mr. Speaker, what has been the evidence of that urgency? We've had the letter from Dr. Cameron, the president of the College of Physicians and Surgeons. But as much as I respect the College of Physicians and Surgeons — and I respect that body immensely — what we have is an opinion. We don't have any evidence to back up that opinion. We don't have tabled in the House by the Minister of Hospitals and Medical Care any résumé of the day by day reports the government claims they've been getting from the hospitals. That's important, because three days after the receipt of the letter from Dr. Cameron, we have the Minister of Hospitals and Medical Care saying on March 8, page 25 of *Hansard*:

Insofar as the condition of the hospitals is concerned, the report I got today shows things in a slightly improved manner ....

Mr. Speaker, three days after we get this letter on which the government is basing its case for this kind of legislation, we have the minister advising the House that things have improved. Where are those hospital reports? On what basis has the government concluded the urgency is so great that we must bring in this kind of legislation? What were some of the options the government of Alberta could conceive?

The Leader of the Opposition pointed out that there is the option under Section 148 of the labour Act, a back-to-work order. I want to make it clear, though, that I have opposed order in council back-to-work orders. I'm not going to say something different today from what I've said over the years in this House. But, Mr. Speaker, just

because the Legislature should have to take responsibility for a back-to-work order does not mean that the Bill we have before us is a satisfactory Bill or one that should be accepted. There is a great difference between a simple back-to-work piece of legislation that could have been modelled on the principles of Section 148 of the labour Act — introduced in this House, given second and third reading, committee stage, Royal Assent, so all the members of the Legislature would have had to take their responsibilities on this question — and the Bill we're dealing with today.

I want to take a few moments, Mr. Speaker, to go into detail on some of the provisions of the Bill we are being asked to accept. The question is: was there any alternative? Clearly the most sensible alternative, in my view, would have been to resume collective bargaining, continue the process. In his introductory remarks today, the Minister of Labour admitted that the gap had been narrowed. The gap had been narrowed down to a very small number of items. What were those items? They were working conditions, the very working conditions that are so vividly underlined in the report that this government received in November 1980.

Mr. Speaker, what are some of the steps that might have been taken? Perhaps we should look at the moves and counter moves the Minister of Labour alluded to. In introducing Bill 11, the minister talked about the letter by Mr. Renouf, the executive director of the United Nurses of Alberta, on the question of providing emergency services. I think it would be useful to quote that letter in the record, because fundamental to whether we take away the right to strike is the operative portion of that letter. I'm not going to read the entire letter, but I'm going to read the operative portion.

In view of this arrangement, U.N.A. invites you to consult with us in the event that any circumstances giving rise to an emergency become apparent. We would then be able to respond to such circumstances in order to minimize the chance of an emergency developing.

Mr. Speaker, a very responsible position taken by the executive director on behalf of that particular organization, a position, I might add, that was responded to on the 15th by the hon. Mr. Young, Minister of Labour.

Then another letter, February 22, sent by Mr. Renouf to Mr. Dubensky, the Deputy Minister of Labour, again outlining the offer, if you like, with respect to emergency services, and making one other request. I'd like to quote that request for the record:

In the event that the Lieutenant Governor in Council is considering whether an emergency exists or may arise as a result of the strike, we would respectfully request an opportunity to make a presentation. If the Lieutenant Governor in Council is not prepared to hear us please advise. We would then respectfully request an opportunity to meet with the Minister pursuant to Section 148(2) of the Labour Relations act.

Mr. Speaker, on February 23, 1982, the deputy minister responded and indicated:

With respect to the implementation of the Emergency Tribunal legislation, it is the customary practice to contact the parties concerned prior to any action by the Lieutenant Governor in Council and the writer sees no reason why this would not apply in the instant case.

Mr. Speaker, the government may say, as I think the minister did the other day, that there's a difference be-



tween the consultation re action by the cabinet and action by the Legislature. But surely that's sophistry, because it's the termination of a strike. Surely there should have been that commitment.

There was a meeting following the letter of February 15 — and the minister referred to that — chaired by the director of the College of Physicians and Surgeons. Mr. Speaker, the Alberta Hospital Association identified four principle areas of concern at that meeting. I believe the date of the meeting was February 20. The four areas of concern were, one, the neonatal intensive care unit at the Royal Alex; two, the neonatal intensive care unit at the Holy Cross; three, the neonatal intensive care unit at the Calgary General; and four, the regular intensive care unit at the Holy Cross.

Mr. Speaker, I'm advised by executive officers of the UNA that this concern was in fact addressed, and addressed to the apparent satisfaction of those in attendance. At least no further word was received from the Alberta Hospital Association with respect to the concerns they expressed and the offer of the UNA to deal with those concerns. One really has to ask whether the union, in this fight to battle, if you like, for better working conditions, has not been willing to go that extra mile, not only to be prepared to go through the mediation procedure which is there in the Labour Relations Act, but to make it crystal clear that emergency services are going to be provided. When specific concerns were raised and addressed at a meeting chaired by the registrar of the College of Physicians and Surgeons, no response came back from either the College of Physicians and Surgeons or the Alberta Hospital Association in terms of an inadequate follow-up of those four areas of concern.

Mr. Speaker, let's look at the legislation itself, because the Bill before the Legislature today is indeed a sweeping piece of legislation. One of the things we might well ponder for a moment is the function of a trade union movement in a democratic society. I don't want to go into a lot of history, but over the last 35 or 40 years we've had the development, as you would well know from your experience in labor laws, sir, of the International Confederation of Free Trade Unions around the world. There's a difference between that sort of approach and trade unions in totalitarian countries. The difference is very simple but very fundamental. Democratic trade unions serve the members. Trade unions in totalitarian countries become, if you like, the vehicles of the state, either the extreme left or the extreme right.

The fundamental difference between a trade union, whether it's in a totalitarian country of the left or right, and a free trade union is that a free trade union has only one base. It is there to serve its membership. It is not there to be a vehicle of government policy in any way, shape, or form, whether that government be Social Democratic, Liberal, Tory, or whatever the case may be. Keeping that fundamental principle involved, which is the basis of much of the labor legislation we have in North America and in the democratic western world, let's take a look at the provisions of the legislation this government is asking the Legislature to pass this afternoon.

Section 4: normally what happens when back-to-work legislation is passed or an order in council is passed pursuant to Section 148 of the Labour Relations Act is that the government must serve that order in council on the parties. In fact the government must administer the law. But, Mr. Speaker, when you read Section 4 — and I've consulted with a number of labor lawyers on this — in fact what we are doing in this section is placing a

requirement on the bargaining agent to become the vehicle of this Legislature. And that's wrong; that's just fundamentally wrong. The Leader of the Opposition pointed this out, and he was totally correct. It's just a wrong principle in terms of a free democratic trade union movement.

Let's take a look at some of the other provisions. Let's look at Section 10 of this Act:

If a bargaining agent is found guilty of an offence under this Act or is found in contempt of court in respect of a matter arising under this Act, the Attorney General may give notice to the Labour Relations Board setting out that the bargaining agent was found guilty of contravening this Act or was found in contempt of court, as the case may be, and upon receipt of the notice the Board shall revoke the certification.

Not "may"; "shall revoke the certification". Mr. Speaker, the only discretion here is in the hands of the Attorney General. But we don't even give the Labour Relations Board the latitude to evaluate whether there are mitigating circumstances. Even when President Reagan got into the fight with the air traffic controllers, it was the National Labor Relations Board that reviewed and in their judgment discovered there weren't sufficient mitigating circumstances and decertified the organization. But here we're not even giving our Labour Relations Board, composed of competent people, that latitude. If in the opinion of the Attorney General there has been a breach, "the Board shall revoke the certification".

Mr. Speaker, I would like all hon. members to know what they're voting for, so when they come before the voters of this province in the next few months, or whenever it may be, they can stand proudly before any trade union group of people and say, yes, this is the way it is in good old happy Alberta: "the Board shall revoke the certification". Yes, Alberta, land of the free — unless you're in the trade union movement. Mr. Speaker, I think the members of this government had better think through the provisions of this Bill pretty carefully before jumping up and down and saying, I ever ready I, and voting for one of the sloppiest pieces of legislation I have seen thrown together and presented to a legislative assembly in my years as a member in this House.

We have Section 11, and the minister suggesting he's going to be bringing in an amendment. I guess he would be bringing in an amendment. I can't imagine how this caucus could even allow the kind of Bill to come forward that we have presented to this House where it says — and I think it is worth noting how the words read now, Mr. Speaker:

If a bargaining agent is guilty of an offence under this Act or is in contempt of court in respect of a matter arising under this Act, every officer, representative, agent or adviser of the bargaining agent who authorized, permitted or acquiesced . . .

Acquiesced. What is this, Poland? Mr. Speaker, we go on in subsection 2 to say:

No officer, representative, agent or adviser who was found guilty of an offence under this Act or was found in contempt shall be employed . . . as an officer, representative, agent or adviser of a trade union . . .

Of any trade union, Mr. Speaker; not just the UNA. Where were all the members of this government when this kind of sloppy draftsmanship led to the introduction of a Bill with this kind of pernicious principle, which I don't think a single member in this House would want to stand

and support before the electorate of the province of Alberta when that time comes?

What amazes me is that it could even be released without the kind of review by the cabinet. On what possible basis could a word like "acquiesced", even be in there at any point in time? This government has an awful lot of explaining to do before they can justify Bill 11. You see, there's no question that when 8,000 nurses cease working, there are going to be problems. We all realize that. We all realize that we have responsibilities. Certainly the UNA has recognized its responsibility; I believe other people in this province have attempted to as well. And if the government of Alberta would make it clear to the Alberta Hospital Association that some of the funding would be available for the report of 1980, we could get a negotiated settlement. But, Mr. Speaker, there is no excuse for a Legislative Assembly which has control over last-dollar funding, led by a government which for 16 months has done nothing on a major study prepared by the Alberta Hospital Association, which is now the root of the strike. There is no excuse for that Legislative Assembly to go the next step and pass a piece of legislation which is just bad legislation, which cannot be defended in terms of the excessive power this government is taking upon itself.

The hon. Premier warned about the federal government. He said 17 to 18 months ago, do we want the federal government in our living rooms? Mr. Speaker, as far as the trade union movement is concerned, this legislation is going to put the provincial government in the living rooms, the bedrooms, the kitchens, the bathrooms, the garages, and take over the entire house. I would say that we as members of this House have to ask ourselves whether this kind of legislation is reasonable and sensible because, in the final analysis, what we all want — and I respect that the hon. members of the government side want this as well, and I respect that the Alberta Hospital Association wants it. I know that the United Nurses of Alberta want a first-class health care system. What we have to do, and the reason I appeal to the members of the Assembly to think before we leap on this piece of legislation, is not only be fair but we must seem to be fair. Mr. Speaker, in this particular case we're not being fair, and we certainly don't seem to be fair. We have to set in place a resolution of this dispute which will not poison the many professionals who have now lost confidence in our system and in our ability as a Legislature to act in a fair and reasonable way.

I agree with the Leader of the Opposition. Bringing in Bill 11 is only going to exacerbate the problems the nursing manpower study found in 1980. We're going to have people who are now nursing leaving the profession. We're not going to attract women we should be getting back into the profession, and the gap between the number of people we need and the demand is going to grow larger and larger. We can build hospitals all we like, all over this province, but unless we have people to work in those hospitals, unless those working conditions are satisfactory, we're not going to be able to provide first-class health care.

So if this government thinks it can intimidate the little opposition in the Legislature or the people of Alberta into passing bad legislation, let them think again. I have no hesitation in saying in this House or anywhere in my constituency or in this province that unless we have sweeping amendments, this is a bad piece of legislation that should not dishonor the statute books of our province.

MR. SINDLINGER: Mr. Speaker, I'd like to make a couple of very brief comments about this Bill. I don't intend to go over the details because they've been covered by both sides of the House. I can understand the government's point of view that this is a matter that requires urgent, immediate attention, and certainly a great deal of time has gone by, as the opposition members have pointed out, since this fact became apparent. It did not become apparent with the beginning of the strike; it became apparent with the other two strikes and subsequent reports to that. If there is any onus of responsibility for inaction in this case, it must lie with the government for not acting on those reports.

Mr. Speaker, yesterday I voted no in regard to unanimous consent to introduce this Bill in the Legislature for speedy passage. I did it on a matter of principle, because the six pages of legislation were given to me late in the morning and I was expected to judge and vote on them in the afternoon. In my opinion, that was inadequate time for deliberation and consideration of the Bill. It reminded me a great deal of the procedure being followed in the House of Commons today, where the Liberal Party is trying to force the Conservatives to do something without due deliberation and consideration. I didn't see much difference between the *modus operandi* there and here.

However today, as opposed to yesterday when I voted against it on principle, I vote against it because of its content. I do not feel it is fair to the nurses, and I do not feel that in regard to its long-term implications it's fair to the people of this province. So I will vote [against] it again today. It seems to me that the action is somewhat punitive, and it is more against the nurses than management. I fail to see why the nurses of this province should bear all the responsibility for the problems we have today. If responsibility and blame is to be placed, it must be with management as well as with the nurses.

The second and last point I would like to address is comments made by the Minister of Labour as he introduced this Bill. As closely as possible, I copied down his remarks when he dealt with the reason for the failure of the negotiations between the United Nurses of Alberta and the Alberta Hospital Association. As closely as I could quote the minister, he indicated that it was a problem of attitude and understanding how to make a satisfactory working relationship, that perhaps too much was being expected from collective bargaining and, in this case, that stemmed from the attitude of the parties. In conclusion in that regard, the minister said that he was not sure it wasn't collective bargaining that didn't succeed, but the collective bargainers. Then he went on to address the responsibilities of the parties in the collective bargaining procedure. He dealt with the Alberta Hospital Association and the United Nurses of Alberta. Mr. Speaker, in my opinion, the Minister of Labour failed to identify the third party in those negotiations. That third party was present even before the strike began, and its presence was obvious throughout the duration.

I spent time with nurses on the picket line in my constituency; I visited their strike office. Without fail, it was their opinion that they were not dealing with the Alberta Hospital Association but rather with the Alberta government. So when the minister says that perhaps it wasn't collective bargaining that didn't succeed but the collective bargainers, if he were to include the Alberta government in that group, I would concur. Because it was almost impossible for collective bargaining to succeed in the first place when there was the spectre of the Alberta government behind the Alberta Hospital Association all

the way. There was no onus or motivation on the Alberta Hospital Association to come to terms with the United Nurses of Alberta. I believe that's a deficiency in the structure. It's inherent in the bargaining process or the labour regulations of this province, and there is need for change. But this legislation does not address that need, nor does it solve it at all.

Mr. Speaker, I had the experience of being on the other side of the House through another labour dispute. That was with the teachers in Calgary when they were on strike. I recall quite vividly the scene and the words the Minister of Labour used at that time when we in the Calgary caucus were discussing what to do about the Alberta teachers' strike. The minister's words at that time were that we were going to teach the teachers a lesson. [interjections]

DR. BUCK: You mean we're going to hear from the Tory backbenchers? That's going to be good.

MR. SINDLINGER: Mr. Speaker, if the minister can talk about the attitude of the bargaining parties in this particular case and if the minister can carry an attitude like that into another situation, I have to wonder what the attitude of the minister has been in regard to the United Nurses of Alberta. When we talk about responsibility and who fulfilled their role and who did not in this regard, it's my opinion that the Alberta government has a lot to account for.

MR. YOUNG: Mr. Speaker, on a point of privilege with respect to the concluding comments of the hon. member who has just spoken. It is with some degree of sorrow and regret that I must stand here and tell him that what he says is not a fact. I must do that because the hon. member has taken my words as he alleges and put them into a context which I find completely unacceptable. I simply say it's with regret that I do that, and I leave the matter to him. I think it's a sad day for this House.

AN HON. MEMBER: Withdraw.

MR. SINDLINGER: Excuse me, if I may please address the point of privilege. Mr. Speaker, perhaps my words contain some allegation which the minister did not agree to, and I think it is in fact a serious matter. Given the gravity of the situation today, I would request that we continue debate on the legislation before us, and that we be allowed to carry over the point of privilege until tomorrow, at which time I will address it, if I may have that consideration please. [interjections]

MR. SPEAKER: Although the hon. minister's intervention was stated to be a question of privilege, I assumed it to be something which not frequently but every now and again happens in many parliaments of our tradition. As a matter of fact, if hon. members would care to look up some of the authorities, they will find that one of the reasons, if perhaps not the only proper reason, why a member's speech may be interrupted is that a member who spoke previously may ask for the floor — not insist, but ask — for the purpose of explaining a part of his speech that he thinks may have been misunderstood or misinterpreted. If I interpret what the hon. minister has said in that light, then I suppose that with the explanation he has offered, that's an end to the matter. If it's going to be raised as a matter of privilege, then I agree with the hon. Member for Calgary Buffalo that it would

be prudent for us to see how it reads in print before we go into it further.

MR. RUSSELL: Mr. Speaker, I want to enter this debate to speak about the purpose of this Bill, which is to restore full hospital services to the province of Alberta. I believe the strike is one which all of us wish had not happened and which should never have happened. I say that because in assessing the impact upon the citizens of Alberta, one has to make a judgment as to when a crisis or a very urgent situation is developing. One could argue that in fact the urgency commences even before the strike action commences.

When strike notice is given and the hospitals start to decant the system to prepare for the strike situation about to fall upon them, at that point, each day in increasing numbers, citizens who are constituents of ours have to do without hospital services they urgently require. The longer that situation goes on, the more and more numbers are added to those lists of anxious people and the more and more serious the situation becomes. While this is occurring, the process of collective bargaining continues.

At some point, we as referees in this room have to decide: does it really seem feasible that the collective bargaining process will end successfully before the list of urgent and worried citizens I referred to earlier grows any longer? I say very decisively today that I very sincerely believe the time has come to end that suffering and anxiety the people are undergoing.

Why is the responsibility now ours in this Assembly? I want to speak to that because I want to specifically respond to comments made by the hon. Leader of the Opposition and the hon. Member for Spirit River-Fairview. Whose responsibility is this? Under the Canadian constitution the provision of health care, and that includes hospital services, is a provision of provincial governments. The total responsibility lies with them, and they have taken that on and responded to it in a variety of ways.

In Alberta the tradition has been, and has been supported by members on both sides of the House, that it is a matter which is best dealt with at the local level and embodies the principle of local autonomy. For that reason, a series of pieces of legislation has been drawn up which outlines the responsibility for the delivery of health care services to a variety of groups. Insofar as our hospitals are concerned, the Alberta Hospitals Act says very clearly:

Each approved hospital [shall] have a governing board and, subject to any limitations of its authority imposed by Acts of the Legislature and regulations [thereunder], the board has full control of that hospital and has absolute and final authority in respect of all matters pertaining to the operation of the hospital.

I think that's pretty clear as to whose responsibility it is to run hospitals. That Act was passed by the government which was in office in 1970.

Further reference has been made to the Alberta Hospital Association. I have the new Alberta Hospital Association Act which this Legislature passed at the conclusion of its fall session last year. It is brand new legislation, assented to December 2, 1981. What does it say about the Alberta Hospital Association which has been held up as the proxy of the government? It says:

5. The business and affairs of the Association shall be carried on without the purpose of gain for its members and, subject to section 10, any

profits or other accretions shall be used for the purposes of

- (a) encouraging and assisting members of the Association to provide hospital services of high quality;
- (b) fostering and promoting the concept of local authority and control over the provision of hospital services;

It goes on through many other sections. I will read two more which are extremely pertinent to this debate, Mr. Speaker:

- (d) representing members of the Association in discussions and negotiations with governments and government agencies and with organizations that are engaged in providing or are otherwise interested in the provision of hospital and health care services.
- (e) regulating and promoting sound labour relations on behalf of the members of the Association and their employees or agents of their employees;

We know that subsequent to that legislation being passed, most of the hospitals in Alberta agreed by written contract that the Alberta Hospital Association had full bargaining rights to conclude an agreement with the United Nurses of Alberta. The steps there are very clear: starting with the Canadian constitution by which the responsibility for health care is given to the provinces; thereby delegated totally and completely through the Alberta Hospitals Act to locally owned and administered hospital boards; and thence, through the association of those autonomous hospitals, by the Alberta Hospital Association Act passed very few months ago in this legislature.

Mr. Speaker, I am surprised that in the debate some hon. members would raise those issues. The responsibility of this government is to provide sufficient funding for those autonomous boards to carry out their authorities. Alberta does that at a per capita level that is unsurpassed by any other province in this country.

Having said that, how did the responsibility for ending this labor dispute end up in this Legislative Assembly? As some members have said, it is true that cabinet could have passed a back-to-work order as they did in 1980. I recall the indignation and howls of protest from the members opposite when that action was carried out behind closed doors. Now I hear the opposite argument: why didn't you do it behind closed doors? Why are you bringing your problems into the Legislative Assembly? I am very curious about why the members opposite want to have it both ways. I am standing here saying it is our responsibility as a government to decide when the dispute has gone on long enough. It is also our responsibility to decide on the course of action by which a dispute should be ended. I see nothing wrong when the House is in session on this occasion with bringing this Bill to this Legislature for public debate and hopefully passage. I think the matter of public debate is important because representatives of all interested parties are present for the debate.

From the calls and letters I have been getting in my office and reports from members of the Legislature from around the province, I am convinced that the time has come to end this dispute in the health care and humane interests of people who are literally sick and worried, who are waiting to get into hospitals and can't get in. I have no doubt about the ability of the hospitals to manage and

cope under the stress and limited conditions that they are now doing. The Member for Spirit River-Fairview quoted the answer I gave, and that was a true and honest answer. What he did not do was continue to read on in *Hansard* that same day, whereby I expressed that I was extremely concerned about the situation with respect to people outside the hospital, the urgent medical cases, verified by their doctors, who were unable to receive hospital attention.

It is at this point, speaking of the ability of hospitals, that I should give the members a quick overview as to what the situation was. In summary, we had 66 acute-care hospitals not striking. Obviously they were mainly in the smaller rural communities throughout Alberta, as well as the provincially owned hospitals where the employees do not have the right to strike. That gave us 4,677 beds available, and of those 3,856 were occupied on the particular day of the report I am reading. Non-striking auxiliary hospitals were additional assistance. There were 15 of those, with another 1,616 beds available. They had 1,590 beds occupied. Fifty-six acute-care hospitals were affected by the strike. Here is the serious part of the situation, Mr. Speaker. Those hospitals contained 7,548 beds of the provincial total. Because of where they were situated, primarily in the bigger hospitals in metropolitan centres, they were the kinds of hospitals that give the more advanced secondary and tertiary levels of care. We had 1,928 beds occupied in those hospitals. Of the auxiliary hospitals struck, they had a total of 1,885 beds. Of those, 1,834 were occupied. I think those summary numbers will indicate to members the situation.

At this point, I want to take a moment to pay tribute to the people who kept the bed numbers that I have mentioned operating. There were many, many people who worked under extremely trying conditions, either in an organizational sense, on the wards, nursing the sick, or looking after emergency cases, who really provided yeoman service. It was really their ability to cope under very trying conditions that allowed the strike to continue as long as it did and allowed the collective bargaining to proceed as it did. I think all Albertans owe those people a very sincere vote of tribute.

The question then becomes: how long can this situation I have described go on? Therein lies the nub of this problem. Lately reports and expressions of growing concern have been received by my office. On March 5 we had given to us a report prepared by the medical staff of the University of Alberta hospital, the hospital carrying the prime health care load while this strike was on, certainly for northern Alberta. The president of the hospital had asked them to assess the medical situation within the hospital. I am not going to read the full report. It is very detailed. I am going to refer to a couple of very pertinent medical assessments, the first one being:

... there are only emergency patients and maternity patients entering hospital. There are no elective or ... urgent admissions to the hospital.

The hospital was working at almost full capacity, in excess of 80 per cent, with only emergency patients. That was putting an incredible nursing load on the people working in that hospital.

The medical staff then went through the departments one by one, made their assessment, and ended that by saying:

Despite the great effort, the quality of medical care for some patients in hospital has decreased, as compared to quality during normal hospital, function.

Now what does that mean? It means that under the circumstances, they were probably getting satisfactory care, but at a decreased level to what it would have been under normal circumstances. I think that has to be a cause for concern for all of us.

They go on through more pages of their report and come to some conclusions. Again, I won't go through all the conclusions, Mr. Speaker, but they do say that in order to restore the quality of medical care, the University of Alberta hospital must return to normal function. It is concluded that weeks and months will pass after normal function of the University of Alberta hospital is restored in order to catch up on treatment priorities.

As I say, I've skipped the more serious medical parts of that report, but I have read to you some of the more worrisome phrases in layman's language that give concern to this rising report. Along with this, of course, sitting in my office, every time I heard an ambulance siren go by I'd wonder, are we facing another major medical crisis? Because I don't know if the system could have coped with that. And although some people may not like to hear it, I think the fact was agreed upon out there that there was a concern that had a major catastrophe occurred while the strike was on, with limited services available, it could have resulted in a loss of life. We didn't have one; one hasn't occurred, and I'm pleased to hear that it hasn't. But I know that was always in the minds of certain hospital administrators, and certainly the two gentlemen who were co-ordinating the hospital services in the two metropolitan centres.

What was happening out there? We were receiving reports of hospital staffs becoming fatigued as they tried to carry on during the work stoppage, and I have no doubt that they could have carried on for several more days. But the evidence is there. Six of the smaller hospitals that had been carrying on under the conditions I mentioned finally had to close their doors because the out-of-scope nurses who were providing limited services simply had reached the point of fatigue where they couldn't carry on any longer. So those patients had to be transferred to other parts of the province.

Mr. Speaker, what I'm doing is painting a picture of what has been continually developing and expanding with respect to concerns relating to urgent health care requirements. I think it's very obvious that I got a large number of letters from doctors and private citizens, outlining the details of specific and individual medical cases. I'm not going to read those, but I am going to quote some phrases from some of those calls and notes that I took to give you an idea of the nature of the problems we were concerned with while this has been going on:

I'm writing to ask you to help us immediately. It is a matter of life and death, and is related to the current strike by nurses. My sister is in very critical condition with an illness which has affected her pancreas and liver.

The constituent goes on to outline the urgency of the case. Other direct quotes from Alberta citizens would be:

I found myself in the position to have to beg — yes, beg — for a hospital bed for my sister who is gravely ill and went into a coma on this very day.

This is from a doctor:

I'm writing in regard to a patient who is under my care for cancer of the throat. This patient was given a planned course of radiotherapy to her tumor, recognizing that this treatment alone has a very slim chance of curing the tumor. It was planned to operate upon this tumor within eight weeks after the

completion of the course of cobalt therapy. Because of the present delay in this lady's treatment as a result of the strike, obviously her tumor is growing, and she runs a real risk of reaching the point where the tumor becomes inoperable. I have two other patients in similar situations.

Another person wrote to say:

My mother-in-law has been informed by her surgeon that emergency surgery is required to remove a tumor on her pancreas which has plugged the bile duct. The surgeon indicated that the operation cannot be performed due to the present strike.

Another Albertan wrote to say:

I have an artificial hip due to arthritis. Due to metal fatigue, the leg pin broke on Friday, February 19. I am still hobbling around on crutches at home, and it is no joy.

Another person wrote to say:

On February 7, I was to enter the Holy Cross hospital for a breast lump operation. The hospital refused to take any more patients as they were discharging patients in anticipation of a nurses' strike.

Mr. Speaker, I could go on and on and read many more such letters and messages. We kept track of a log of phone calls in our office which, over the three-week course of the strike, are running at about a hundred calls a week. During the first week, the calls and concerns dealt mainly with the principle of the strike, but about midway through the second week a dramatic switch occurred, whereby the calls were completely dealing with very serious medical concerns and worries. Again, they reflected almost identically the kinds of situations I outlined in the letters I referred to.

Mr. Speaker, none of those letters I quoted or the calls I referred to were emergency medical situations. If they were emergencies, their doctors would have had them in the hospital. If they were emergencies, the union had promised enough nurses to look after them. But they were urgent, of deep concern, and a great source of worry to the people who were living with those problems. So the question facing the government is: at what point do we continue to let those numbers of cases build up while the collective bargaining process goes on, or at what point do we say "enough"?

In the question period during the earlier days of this session, I said that it would be a judgment decision. We were assessing the conditions in the hospitals daily, and have commented on their ability to cope. We were assessing the medical situation daily, and I've just commented on the situation there and how it's been building up. In the end, it becomes a judgment decision. Perhaps the right time to act would have been a week ago; perhaps one could let the situation go another two or three days. But last weekend the hon. Premier, I, and my deputy minister met with the College of Physicians and Surgeons board of directors and got a total medical assessment from them for the province as a whole. Their advice was: you'd better not let this strike go through another weekend, looking at the weekend coming. We then had to pick a time when we thought we could still allow some time for the collective bargaining process to continue, but then we still must allow time for legislation for this Bill to be passed, and allow the lead time for the hospitals to start functioning. They do need some gearing-up time.

I should also make reference to the telegram from the College of Family Physicians, general practitioners in the province, referred to by the hon. member Ken Paproski. They sent us a telegram of deep concern, asking us to end

this strike in the best interests of their patients. They had discussed this at their convention in Banff. Again, it outlines a message of very serious concern based on medical reasons and the quality of health care.

What is even more interesting, Mr. Speaker, is the concern expressed by hospitals before the strike even started. I started my remarks by saying that's why this strike should not have happened, because before it even commenced, people who should have been receiving hospital care were being asked to leave or being denied access to hospitals. I'd like to put in the record a telegram from the board of the Red Deer Regional hospital. It came on February 13, before the strike started:

The board of the Red Deer Regional hospital wish to make you aware of the serious potential situation the community is faced with as a result of the threatened withdrawal of nursing services. The health of patients is now at risk and severity will increase as patients are transferred about.

DR. BUCK: Mr. Speaker, on a point of order. I believe you asked the hon. Leader of the Opposition not to read from documents. The hon. minister's been going on. We appreciate the information. On the other hand, the rules are the rules.

MR. SPEAKER: The hon. Member for Clover Bar certainly shares with all other members of the Assembly, including myself, the responsibility for following proper procedure. I must say I have increasingly shared his concern about the quotations being read by the hon. minister. There was, however, at least at the beginning, a fairly substantial difference. I think it's recognized by members that sometimes quotations which are straight argument are read to the House. That is the kind of thing I was referring to some time ago. Sometimes they are matters of information which are difficult to memorize or paraphrase. I do think, though, that the hon. minister has done a fairly generous amount of quoting, and I'm sure that in his experience as a member he won't find it difficult to paraphrase any additional information, especially anything that may be in the nature of argument with regard to the strike.

MR. RUSSELL: Thank you, Mr. Speaker, I don't need to quote anymore. I think the point has been made about the concern that arose from hospital trustees prior to the strike even commencing. The telegram from the Red Deer Regional hospital goes on to express that concern, and I received a similar expression of concern from the board of the Royal Alexandra hospital and its medical advisory staff prior to the commencement of the strike.

In summary, as I conclude my remarks on this, I want to say how very difficult it has been in this situation to assess these very human problems. It's difficult to listen to those kinds of messages that I have exemplified, and tell those people why they must wait, why the collective bargaining process must go on, and try to explain to them at what time we believe a responsible government should take action to restore full services.

The only other thing I would like to say is that, looking ahead, if this legislation is passed within the next few hours, there will be many more days of work prior to the commencement of full hospital services. I have reports from the two metropolitan co-ordinators of hospital services, Mr. Larry Wilson and Dr. Jack Manes in Calgary, with respect to what gearing-up time they need, what is involved with transferring patients and equipment back

to their home hospitals, if I can put it that way, and thence the actions that will fall into place after that has occurred. So there are still going to be several more days when full services aren't being given. We're very much aware of and concerned with the advice received from the College of Physicians and Surgeons, plus a number of other doctors in private practice.

So I really believe the time has come to end this strike and get the parties back to work. That then leaves the question of the responsibilities of the parties in question. I'm pleased that the union officials have indicated that their members will obey the order and go back to work. That's a responsible reaction to the legislation. There's also a very heavy degree of responsibility on the members of the Alberta Hospital Association. I understand that the Leader of the Opposition is proposing an amendment which will refer the Alberta Hospital Association's study on nursing manpower to the arbitration tribunal. That's an excellent idea, and I fully support it. In any dispute, both sides will have to recognize problems, appreciate the responsibilities and complexities with which the other side deals, and be prepared not only to take but also to give. That responsibility lies just as heavily, if not perhaps more so, on members of the Alberta Hospital Association as it does with members of the union.

There's no question that we need the people who are on strike. Nursing is an essential service to citizens wherever they live, whether in Alberta, Manitoba, or Quebec. We need them. As a government, we're doing the best we can to provide a good health care system and a good system of hospital services. I submit that a responsibility rests with the Alberta Hospital Association and its members to analyze what has happened during this work stoppage, and take what steps they believe are necessary in the provision of continuing good hospital services for our citizens. That responsibility of course must be shared by employees in whatever bargaining units work in those hospitals.

MR. KESLER: Mr. Speaker, I too would like to respond to the ...

MR. SPEAKER: I apologize to the hon. member, especially on the occasion of his maiden speech. But if he would allow me, might I ask the Assembly if we might revert to Introduction of Special Guests. The hon. Minister of Culture has some special guests who have arrived in the course of the afternoon.

HON. MEMBERS: Agreed.

#### head: INTRODUCTION OF SPECIAL GUESTS (reversion)

MRS. LeMESSURIER: Thank you, Mr. Speaker. On behalf of the hon. Member for Edmonton Highlands, David King, I am pleased to introduce to you, and through you to the members of this Assembly, a brand-new boys' cub pack with their leaders. They are situated in the Rosedale area. I would ask that as the cubs rise, hon. members join with me and give a warm welcome not only to them but to Gary Bowman, Robert Hogan, and Steve Rivers.

MR. SPEAKER: I thank the hon. Member for Olds-Didsbury for his indulgence.

head: **GOVERNMENT BILLS AND ORDERS**  
(Second Reading)

**Bill 11**  
**Health Services Continuation Act**

(continued)

MR. KESLER: Mr. Speaker, I too would like to respond to the discussion of Bill 11. Like the hon. Member for Calgary Buffalo, I voted no. I felt that considering the severity of this Bill, its presentation to the members of this Legislature on such short notice is an example of the lack of respect this government seems to have for the members who sit here. I also find that presenting Dr. Cameron's information to this Legislature after the vote was called somewhat out of the ordinary, and felt that that information should have been made available to members prior to asking for that vote.

I'd also like to say that as I went back to my office, I found calls there from the administrative people in my constituency who were rather concerned about the manner in which the Bill was presented for their acceptance or rejection. At 2 o'clock in the afternoon, they were given notice that the Bill would be presented and told to contact their M.L.A. if they had any questions. Again I find that short notice irresponsible, and certainly it shows a lack of respect for those people who will have to deal with the conditions of this Bill once it's put in place.

There's no doubt, Mr. Speaker, that many agree that action was necessary at this time. Like the hon. Minister of Hospitals and Medical Care, I too feel a great deal of compassion for those who are without services and are in need of those services but, as I had a chance to study the Bill through the evening, I really found it difficult to believe that a Bill of such severity was necessary. I find myself asking the question: why would a back-to-work order not have sufficed?

Another concern I have is that if the administrative staff in the Olds-Didsbury constituency were only informed at that late time, how many other constituencies were informed at that same late time. How can other MLAs vote on a Bill as severe as this unless they've had an opportunity to confer with the people of their constituencies? The hon. Minister of Labour referred to "we are the referees here". I agree. But I find myself wondering if perhaps some of the referees in this ball game haven't become players. I'd also like to refer to sections 10 and 11, dealing with decertification of the unions. I wonder if that action isn't somewhat severe, considering the short notice that was given to all parties with respect to this Bill.

I find that the way this Bill has been presented shows a total lack of respect to the concerns of all Albertans. Certainly we haven't had time to get back to our constituencies, find out their conditions, and represent their needs in a vote that will be taken here.

In conclusion, I'd like to say that unless considerable amendments are made to this Bill, it should never be passed in this Legislature.

MR. LOUGHEED: Mr. Speaker, I want to deal briefly with three matters before the Legislature on second reading of Bill 11.

The first matter I wish to respond to is related to matters that have been raised by the Leader of the Opposition and the Member for Spirit-River Fairview that deal with the question of the penalty provisions within this Bill that seem to me, either intentionally or

otherwise, not to reflect the provisions of the Bill. I deal with the question of certification and decertification in this way. It seems to me that the issue of certification of a union under the labour Act is a certification that stems from the provisions of that Act, and provides benefits, if you like, protection, and certainly responsibilities to a collective bargaining union by way of such certification. That is the concept. I accept it, and I believe in it.

The provisions of Bill 11 refer to the question of a breach of the law. Perhaps it's an old-fashioned view of mine that arises out of the question of rights are the rewards of responsibility, but I take the view that a person, a group, or an organization can hardly claim the protection and the benefit of the law on one hand and then, when it suits that organization, say, yes, but in this case I am not going to be prepared to adhere to the law. What is in this Bill is nothing that will happen to any organization, provided there is compliance with the law, and it is a law that has specifically been brought into this Legislature to be debated today and, hopefully, to be approved. Within this Bill is a provision that if there is non-compliance with the law of this Legislature, then certain penalties will be imposed.

In short, the penalties that will be imposed include the penalty that, if established — and this is another point that I don't think has been fairly or adequately presented to the Assembly this morning — it is not a decision that is made by the Labour Relations Board as to whether there is an offence. It's not a decision made by the Minister of Labour. It's not a decision made by the Attorney General of this province. It's a decision by a court, by the judiciary of this province, as to whether there has been an offence of the Act, in the full judicial concept of a judicial hearing. If the conclusion of that judiciary is that there has been an offence or a breach of the Act, then, and only then, is there the matter of decertification.

I find it very hard to understand a situation where on one hand a collective bargaining organization can continue to have the benefits of the labour Act but at the same time, with a specific Bill of the Legislature, can be in the position of refusing to comply with the laws of this province. That's what it is about. It is not a decision that is made by the government. It is a decision that is established by the judiciary, and it only occurs if there is non-compliance. Nothing whatsoever happens if there is compliance with the Bill.

The second point I want to raise is one that troubles me considerably. It's the option that has been suggested by the Member for Spirit River-Fairview; that we would have the option of continuing a situation of allowing the collective bargaining process to continue for some indefinite period of time. I join with the Minister of Hospitals and Medical Care in extending my appreciation, on behalf of the citizens of this province, to the many health professionals who worked in the hospitals to provide emergency and limited medical treatment for a period as long as three weeks. But we, in the position we're in here and the responsibility we have in government and the Legislature, have a very grave and deep responsibility for the health care of the citizens of this province.

Frankly, I was prepared to say that we should let the collective bargaining process continue as long as we could reasonably do so. But as I mentioned in the House yesterday, with reports I was receiving from a variety of sources, I became concerned that we were missing something very fundamental: that true emergency and limited facilities in the hospitals were coping, subject to the

concerns that have been expressed by the Minister of Hospitals and Medical Care, but there was a deeper and graver problem developing with regard to the people who were ill and, under the circumstances that were established, could not be cared for in the appropriate way within the system that was then managing on that emergency and limited treatment basis. It struck me that the responsibility I and all of us have was to get the best professional medical advice we could on the issue, because it is a medical issue.

Therefore it was my view that it was important to call together a special meeting, which I initiated, with the board of directors of the College of Physicians and Surgeons of Alberta. Under their legislation, that organization is clearly established as the professional organization with regard to medical care in this province. They have an established board of directors. I asked for a special meeting to brief me, the Minister of Hospitals and Medical Care, and his deputy on the state of medical care in the province arising out of this work stoppage. I requested that meeting a week ago Tuesday for Sunday. The president of the College of Physicians and Surgeons requested the meeting be held two days earlier, on Friday, and we met. The board of directors of the College of Physicians and Surgeons had a very extensive turnout of professional medical people under very short notice. They had their own meeting, then they came over and met with us and presented a verbal report.

When the hon. Member for Spirit River-Fairview asked about evidence, I find it astounding and very disturbing that in a province such as ours we cannot accept at face value a duly and carefully considered letter which has been tabled in this Legislature from the board of directors of the College of Physicians and Surgeons. Surely that is more than adequate and the best possible evidence of the urgency of the situation.

What advice do we get? We get advice this past weekend that:

... the restricted level of services now available is such as to significantly jeopardize the quality and availability of essential medical care.

What additional advice do we get? We get advice from the top professional medical people in the province that:

The present level of medical services in Alberta is no longer acceptable.

That's pretty serious. What additional advice do we get? We get advice that it is the considered opinion of the board of directors of the College of Physicians and Surgeons that:

... this situation must not be allowed to continue through one more weekend, when services are strained to breaking point subjecting the citizens of our Province to unnecessary risk.

Mr. Speaker and Members of the Legislative Assembly, I don't know how the matter of urgency could be more strongly phrased. I don't know how we can abdicate our responsibility to thousands and thousands of Alberta's citizens on the matter of taking unnecessary risks. I find it completely unacceptable that we should be in a position where we are prepared to say, after three full weeks, and with this evidence, that we simply and definitely allow the collective bargaining process to continue. I believe the vast majority of Albertans do not want us to take those unnecessary risks with the citizens of our province. I am not prepared to take that unnecessary risk. I am prepared to stand in any part of this province and defend the need for and the importance of this legislation today.

I want to make one final point. I agree with the views expressed that Bill 11 in itself and its entirety does not resolve the problem. Perhaps there will be a negotiated settlement, but there will then be an arbitration award and a collective agreement. It will be the responsibility of this government to monitor that collective agreement in a way that deals with the question of ongoing responsibility in terms of health personnel and manpower in this province. We have that responsibility.

But there are others who have the responsibility with us, and must share it with us. We welcome the opportunity to share it. That responsibility involves the question of the need to continue to assure that those involved in the nursing profession in this province are adequately compensated; to listen, consider, and evaluate the views expressed — and there are differing views — on one hand with regard to the question of administration and practicality, of working conditions throughout this province, and to consider too that that issue of working conditions is an issue that does vary both in geographic terms across the province and in terms of the circumstances of the institutions involved. We have an ongoing responsibility, and we accept that ongoing responsibility. It is not our view that Bill 11 abdicates that continuing responsibility. That continuing responsibility is there, and it will be met. The important point in front of this Legislature today is that unnecessary risk being incurred by the citizens of our province, and the need to put an end to it.

DR. BUCK: Mr. Speaker, my remarks this afternoon will be quite brief. I do not think it would serve any purpose to rethrust some of the statements the Leader of the Opposition made so very, very clearly and forcefully. But I would like to bring one or two things to the attention of the Assembly and to the people of this province.

As members of this Assembly and citizens of this province, we are all concerned about the strike. It is the role of government to govern, but it is the manner and style of the way this government governs its people that concerns me. If this Assembly were divided 40:38, we would have had a simple back-to-work order. We would not have had this oppressive legislation that is being presented. Mr. Speaker, that concerns me very gravely.

I am afraid that this government will pass this legislation, order the nurses back to work, and go back to sleep. The nurses had to make a final stand. We may never have to bring legislation back to this Legislature because there may not be any nursing profession left. That's what the nurses are trying to tell this government. They did it once; they did it twice. They said we're going to do it again because it's our last chance. If I can get the Premier of this province and this Assembly to promise this Assembly that when we pass this legislation we will give serious consideration to the concerns of the nurses, I will support the legislation. Otherwise, I cannot support the legislation. It is that serious.

The Minister of Hospitals and Medical Care said we would return to full service. There is no such thing as full service in this province because we don't have enough nurses. Can they not understand this?

[Applause in the galleries]

MR. SPEAKER: Order please. Order please. May I respectfully ask our guests and visitors to observe the usual attitude which prevails in all the parliaments of the self-governing countries of the Commonwealth, all the parliaments which have inherited our very highly respected



traditions of self-government. This is a parliament like the others, and I would respectfully ask our guests to make it easier for me, as the presiding officer of this parliament, to ensure that its proceedings will continue in the way a parliament should operate. I would respectfully ask all for your co-operation.

DR. BUCK: Mr. Speaker, it's not too often that I feel people should be placed in the position where they have no alternatives. I am just as concerned as a professional, as a medical person, about the fact that services were withdrawn. But the people concerned who provide the nursing services had to make that stand, because the government just doesn't seem to listen.

I don't say that it doesn't care. I would like to pay the Minister of Hospitals and Medical Care a compliment. I read an article in that thing you see the girls in — what do they call that paper? They said the minister was incompetent. The minister is not incompetent; the minister is competent. The only thing is that the government is insensitive. The minister is not incompetent. I have great respect for him as an hon. member of this Assembly and as an hon. minister of the Crown. He does a good job, but I'm sure his problem is convincing his colleagues that we'd better get something done. Mr. Minister, that's why we have the impasse.

Mr. Speaker, if there's anything we can get this government to do, if they will pledge that after the nurses have been ordered back to work, every one of the members of that government will read the report the hon. Leader of the Opposition mentioned, to find out what's really going on in nursing. Because we are getting further and further behind. It's not good enough for this government to promise hospitals because they cannot staff the hospitals they have at this time, leave alone promise more hospitals, Mr. Premier. We have to solve the problem of nursing power because we're getting further behind, members of the government. Mr. Speaker, that's what the nurses are trying to tell us.

I am concerned that this government is trying to bring in a Bill that is too restrictive. I would never accuse this government of threatening anyone — never. But, Mr. Speaker, this smacks to me of union busting. The threat is there. It is implied. That is a pretty severe penalty. Dollars are not that important — what the fine may be — but when it says, if you do not do what the Act says we will decertify you in essence that will end the union.

Mr. Speaker, I promised I would be brief. We in this Assembly are ordering the nurses to go back to work. Having associated with those people, I know they will go back to work. I did forget one point, Mr. Minister of Hospitals and Medical Care. The minister was concerned about a major disaster. Those nurses would have gone back to work. We know that. The minister should know that. I want this government to promise that when the nurses do go back to work, this government doesn't go back to sleep and does give serious consideration to the problems out there, the problems of why we have so few nurses, why so few nurses will go back after being out of the work force for so many years. Until the government wakes up to the facts of life, there will always be a shortage of nurses in this province. There may not even be a profession of nursing unless this government takes some action.

Thank you, Mr. Speaker.

MR. SPEAKER: May the hon. minister, as a mover of the motion, conclude the debate?

HON. MEMBERS: Agreed.

MR. YOUNG: Mr. Speaker, in conclusion, I would like to address a few of the comments raised by members this afternoon.

First of all, why the legislation? I simply say again that within five years we've had three disputes that have upset the hospital system, that have created grave apprehension, grave concern, a sense of uncertainty and uneasiness among persons who feel they may have an urgent medical problem. This particular piece of legislation follows on the heels of two other situations where in both cases a different conclusion was reached. Hon. members should have recalled that in the last instance, a collective agreement was arrived at at the bargaining table before work recommenced.

The hon. Premier has responded to the question of decertification and whether or not it is union busting. But because I very much dislike the suggestions being made this afternoon, let me re-emphasize that decertification only occurs if there is an offence; in short, if people who believe they have urgent medical problems are going to be denied that treatment by a failure of the parties to resume services. So in fact it is only in the instance of a violation or a failure to conform with this legislation.

Secondly, it is only if the matter is laid before a judge, and a judge of the court determines that there has been an offence. Thirdly, there is no decertification until the matter goes before the Labour Relations Board. I make that point because the Labour Relations Board — and we've been very careful to make this unique legislation — is not a party, other than simply to do the decertification which is a matter of paperwork. It makes no judgment at all. I want to make it clear that this legislation is unique to this situation and to these circumstances.

The hon. Premier made the point that the law provides certain advantages, and people — not just unions, but all kinds of corporations — take advantage [of] and are assisted by the legislation we pass. They respect that, and it is for their usefulness that we do it. The contrary is also the case. Correspondingly, they have an obligation to recognize and conform to those suggestions.

On the matter of leadership, it is the responsibility of the union to notify its members that this strike has come to a conclusion. I would like to draw to hon. members' attention that for months now the union has played a role of leadership, a role of responsibility, a role which the president affirmed to me is her responsibility. I believe there is a responsibility in that circumstance for the leadership to extend to assuring nurses who are members of that union as to the situation with respect to the strike. Having led this far, the leadership should continue. I would very much regret if there was confusion among nurses anywhere in respect of the interpretation of this because of a mix of signals, if I can put it that way.

Some comments were made about working conditions and the collective agreement. That matter goes to an arbitration tribunal, and I would say no more about it at this time; they are not the issues of substance in the collective agreement that is before us. But because it seriously concerns me, I want to say that I have the impression there was some suggestion that all the matters to resolve the dissatisfactions could be dealt with in the collective agreement.

At its very best, a collective agreement provides a framework of a legalistic nature which outlines the rules by which the parties will conduct themselves. I've looked at the same studies the hon. leader has looked at, and I

note two different headings: satisfaction factors and dissatisfaction factors. Dissatisfaction factors; formal and informal social contact; nurses on the job; nursing activities as part of the job; job independence and initiative; personal feeling of accomplishment: those are the kinds of things listed as being key and fundamental to job satisfaction. They are not the kinds of things which can be written into a collective agreement. That is why there is a tremendous onus of responsibility on the Alberta Hospital Association, the hospital boards, and the administrators, to work and be sensitive to the needs of the employees in these respects.

In conclusion, Mr. Speaker, the privilege of collective bargaining and the privilege to have a work stoppage weighs equally on both parties. I want to make that clear because the hon. Leader of the Opposition suggested I was showing an imbalance in the weight of responsibility. That is not so. It weighs equally on both parties. In the case of the Executive Council and the judgment I had to make, the ability to continue collective bargaining, the need — as the hon. Member for Spirit River-Fairview put it — to solve this by doing more bargaining had to be weighed against the urgency, the apprehension; and the growing illness accumulating outside the hospital system.

In my view, that's a judgment which I am satisfied I correctly made when I supported my colleagues in saying that the apprehension of those sick people should be weighed against the privilege of collective bargaining the two parties share. Because surely people who are ill and unable to get into hospital and get those operations have a right to medical services which, in our society, outweighs the privilege of collective bargaining.

[Mr. Speaker declared the motion carried. Several members rose calling for a division. The division bell was rung]

[Three minutes having elapsed, the House divided]

For the motion:

Adair	Harle	Moore
Anderson, C.	Hiebert	Oman
Anderson, D.	Horsman	Osterman
Appleby	Hyland	Pahl
Batiuk	Hyndman	Paproski
Bogle	Isley	Payne
Borstad	Johnston	Pengelly
Bradley	Knaak	Planche
Campbell	Kowalski	Reid
Carter	Koziak	Russell
Chambers	Kushner	Schmid
Chichak	Leitch	Schmidt
Clark	LeMessurier	Shaben
Cook	Little	Stevens
Cookson	Lougheed	Stewart
Crawford	Lysons	Thompson
Cripps	Mack	Trynchy
Diachuk	Magee	Webber
Embury	McCrae	Wolstenholme
Fjordbotten	McCrimmon	Young
Fyfe	Miller	Zaozirny
Gogo		

Against the motion:

Buck	Kesler	Notley
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Totals:	Ayes — 64	Noes — 3
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[Bill 11 read a second time]

[On motion, the Assembly resolved itself into Committee of the Whole]

#### head: **GOVERNMENT BILLS AND ORDERS** (Committee of the Whole)

[Mr. Appleby in the Chair]

MR. CHAIRMAN: Would the committee please come to order.

#### Bill 11 **Health Services Continuation Act**

MR. CHAIRMAN: We have one amendment, which I believe has been circulated to all members. Are there any questions or comments regarding the amendment?

MR. NOTLEY: Mr. Speaker, in terms of the order of amendments, so we don't get into a situation where we amend and then sub-amend, I have a composite amendment which, if carried, would eliminate that amendment. If not, of course that amendment would be perfectly in order. I wonder if government members would agree to deal with this amendment first, so we don't have to then deal with an amendment to an amendment. I have it ready here, and it would be simpler for members to deal with. I have a sneaking suspicion it may well lose by a narrow margin.

MR. CHAIRMAN: Is it agreed that the committee will deal with the amendment submitted by the Member for Spirit River-Fairview?

HON. MEMBERS: Agreed.

MR. NOTLEY: Mr. Chairman, I would like to move that Bill No. 11 be amended by striking out sections 4, 10, 11, and 14(2).

Mr. Chairman, I will explain the amendment to the hon. members of the committee and then go into it. Section 4 deals with the obligation of the UNA, the bargaining agent, to give written notice. Section 10 deals with decertification and the provisions with respect to decertification. Section 11 is the penalty provision, which would restrict any officer, representative, agent, or adviser found guilty of an offence from serving for a period to the end of the agreement. Section 14(2) is simply a consequential amendment. Because we are striking Section 4, we have to strike out Section 14(2). In terms of the substance of the discussion, we are really dealing with sections 4, 10, and 11.

Mr. Chairman, the reason I felt it appropriate to bring in a composite amendment dealing with these three provisions is that, in my judgment, this is the area of greatest concern. In outlining the reasons for the amendment, I would like to take a moment to review some of the arguments made by both the Minister of Labour and the Premier with respect to sections 10 and 11. A suggestion has been made that Section 10 would only take place if there were an offence and that offence were adjudicated by a court. That's true. So there is no misunderstanding, I would point out to members of the committee that we have a penalty provision within the Act. If there is an offence, the individual, the bargaining agent, or the

employer can be fined \$1,000 for each day in the case of Section 14(1), and in the case of an employer or a person acting on behalf of an employer, \$10,000 under Subsection (3).

Mr. Chairman, we already have provision if an offence takes place. A judge can adjudicate whether an offence has occurred and, as a judge must do with any of the statutes we pass in this Assembly, determine the rights and wrongs of it. Should a decision be held that there was a breach, then the penalty provision applies. We don't need Section 4, because Section 4 is an additional penalty provision. I think that is an important point to make, Mr. Chairman. The penalty provision of the fine is already in the Act, so we don't need this additional provision.

The penalty provision — and I think members should be very clear about what it is and agree. It may well be that this penalty only occurs where an offence has taken place and where the judge has decided an offence has taken place. No one is arguing that point. But the offence may be a major one, or it may be a relatively minor one. The point that must be made and understood by members of the committee is that even if it is a minor one, the Attorney General then has the discretion of taking that minor offence and saying to himself: by George, under Section 10(1) I am going to refer this to the Labour Relations Board, because I have my minor offence and it is totally up to me to make the evaluation as to whether it is major, minor, or whether it should lead to decertification; if I choose it should be decertification, then I can refer it to the Labour Relations Board, and the Labour Relations Board shall decertify.

Mr. Chairman, before any member of this committee says, oh well, that won't happen, the fact of the matter is that we are passing legislation here. We are dealing with an extremely explosive situation. The Minister of Labour well knows that as we all attempt to cope with this situation, it is going to take a tremendous amount of diplomacy on the part of everyone — especially the department of the Minister of Hospitals and Medical Care, but all members, the union, and the Alberta Hospital Association. But in all likelihood, in an explosive situation like this, there are going to be breaches — perhaps accidental, perhaps not — which could lead to the decertification.

Mr. Chairman, I do not argue against penalties. The judge should determine what the penalty is, and we've got a penalty provision. What I object to is giving the Attorney General the latitude to determine that in addition to that penalty levied as a result of a fine, we have an additional one. The Premier says that it only occurs if an offence has been committed, but there's another adage too: the punishment must suit the crime. And the punishment is set out in the fines. To then turn around and say that in addition we're going to give the Attorney General the latitude to refer this and the board shall decertify is, in my judgment, a very punitive provision.

The Minister of Labour has said collective bargaining hasn't broken down, the collective bargainers have failed. But let me say to you, Mr. Chairman, and especially to the Minister of Labour, that if the Attorney General decertifies as a result of a breach, perhaps a minor breach, what happens to the members of that local? It might be X community hospital local. They no longer have a local. But decertification is in fact law; they no longer have a local for the period of the contract.

In this legislation, there are all sorts of provisions that we have to look at, including grievance procedure. As the minister well knows, but the members don't, one of the

major responsibilities of a union local is to be there to help members at the grievance procedure. The grievance procedure sets out an agreement, but you have to have an advocate. That's what you have a union local for. A large part of union work, and I hope the minister realizes this, is the ongoing grievance procedure work. But you see, if we've decertified the local, there's nobody there for a period of two years. So there may well be a hot-headed action, but all the members of that local are going to have to bear the punishment instead of the individual who perpetuated the action. Setting aside the rhetoric, I say to the minister, through you, Mr. Chairman, that I don't think that's good law. I think the minister should reconsider that particular provision.

As I see it, Section 11 is just a totally unacceptable proposition. I just don't know how we can square this with due process at all. If a person has now authorized or permitted — and I'll take the government's amendment at face value; it's certainly better to eliminate "acquiesced". It was so unbelievable before, I'm at least pleased to see that we've struck that. But "permitted" is a word too that is open to a good deal of discretion. All right. The point is that we have a penalty provision. Once that person has been penalized for breaking the Act and has been fined, in addition we are saying in this Act that for a period of two years you will not be able to work for your local, the UNA, and as I read it, for any trade union. I don't think we can make that decision. I really think that is an extremely sweeping kind of provision.

Let's take a hypothetical case. Somebody has made a mistake. A court has ruled that they have permitted a breach to occur — it could be a minor breach — and the judge says, all right, a thousand dollar fine. But as a result of this provision, for the next two years, as a result of one error, that individual isn't going to be able to work for any union. Mr. Chairman, I think that suddenly becomes a fairly significant penalty.

If members of the committee want to restore some semblance of good feeling among the participants — and I think we're all participants in this dispute now; certainly all of us as members of the committee, because we're dealing now with this Bill — I ask them to be very, very cautious before approving a provision which is in fact adding an additional penalty which, if exercised, can only create lasting bitterness and, if it isn't exercised, is just going to poison the co-operative relationships which surely we must be trying to develop now.

Mr. Chairman, eliminating Section 4 would simply mean the department would have the normal responsibility it would have under the terms of 148 of the labour Act, if they had a back-to-work order. I don't think we should force the union to be doing the work of the department. That being the case, Mr. Chairman, sections 4, 10, and 11 can be struck from this Bill. What you would then have is a Bill which would be essentially the provisions of 148 without the embellishment, which in my judgment can create nothing but problems.

Mr. Chairman, it is not very often that these kinds of amendments are accepted. But I would say as earnestly as I can to the minister: let us carefully evaluate it, because as I said in my initial remarks, in the aftermath of this legislation today it is extremely important that we not only be fair but seem to be fair and are seen to be fair. In my view, provisions such as double penalties at the discretion of the Attorney General are certainly going to be inconsistent with a practical approach to getting this matter solved amicably.

MR. CHAIRMAN: Before we continue with debate on the amendment, I wonder if we could have the indulgence of the committee. The hon. Member for St. Albert has to leave very shortly for an event of some significant importance, and she would like to make a comment on another section of the Bill. Could we have agreement on that?

HON. MEMBERS: Agreed.

MRS. FYFE: Thank you, Mr. Chairman. I appreciate the latitude of you and the other members.

First, I would like to make just a couple of comments related to comments made earlier on local autonomy of hospital boards *per se*. I think some members mentioned that there was a partnership between the Alberta Hospital Association and the provincial government. In my mind, taking health costs off the property tax was not a partnership but, in fact, a relief to many taxpayers.

In the nursing manpower study referred to earlier, and the four summary objectives and priorities for action described by the Leader of the Opposition, the two read were primarily areas of concern by the employers; those being the members, the hospital boards that make up the Alberta Hospital Association. I would not underestimate for any minute the responsibility that body has in very seriously examining the concerns that are set out in this extensive report.

But in areas where the government of Alberta can get involved — that is, in the third and fourth areas of priority actions — we have taken significant steps: recruitment of more potential nurses to enter the profession along with the expansion of educational programs, where considerable dollars have been spent on the University of Alberta programs, at the University of Lethbridge, the college in Grande Prairie, in encouraging nurses, through refresher courses, to come back to the profession; also, extensive assistance in recruiting nurses from other provinces. The Minister of Advanced Education and Manpower elaborated on these in question period this week. So I think there are areas for each of us who are concerned about the conditions, but it is not the prerogative or responsibility of senior government to become involved in an area that is the responsibility of the employer, any more than it would be to become involved in any other local government issue, such as a municipal government or directly involved in any school board issue or any health unit employees.

Along with other members of this Assembly, I have been extremely concerned and worried about the situation whereby persons requiring admittance to hospital were unable to qualify as they were not defined as an emergency, but where their physician described their medical condition as urgent. I believe I must also commend the workers who have worked within the system to keep it going. I know many of them put in extremely long hours and worked in very difficult situations to provide the care they have. However, in all conscience I cannot support the continuation of the work stoppage while constituents that I represent have already had medical care delayed and, unfortunately in some cases, effective treatment reduced. I know the anxiety of waiting for surgery of a malignancy. The anxiety of time, in addition to that treatment, is something that weighs very heavily on my mind.

As I want to make my comments very brief, I just add that one area that does concern me relates to the arbitration board. I ask that the Minister of Labour consider very seriously my strong request that, as a majority of the

nursing profession is female, the arbitration tribunal be composed of at least one woman. Women do bring a different perspective to many issues. I see this situation requiring that very important input, and I hope that would at least provide a very necessary and important emphasis in the extremely important work ahead for all parties involved in the dispute.

Thank you again very much for your indulgence, Mr. Chairman.

MR. CHAIRMAN: Are there any further comments?

MR. GOGO: Mr. Chairman, As a member of the government side supporting the Bill on second reading, I've listened with great interest today. I've come to the conclusion that in the interests of Albertans, and certainly constituents in Lethbridge West, we should move as quickly as possible through this Bill. The case made through the amendment by the hon. Member for Spirit River-Fairview is fine. I don't see that he has any option, based on the comments he has made earlier. When considering this, I simply think of the terms that have been used: hypothetical; that the College of Physicians and Surgeons, recognized by statute in Alberta as being the body in terms of medical needs, is virtually disregarded, for want of a better term, because it doesn't have 27 pages of statistics.

Yesterday in my office, I received a letter, dated the 9th, from a constituent: As you may know, I suffer from a coronary occlusion, and I must have open-heart surgery immediately. I've been scheduled at the Holy Cross hospital. I'm writing you simply to say this. "If I have a heart attack before surgery, I die; no if, ands or buts." It's that simple:

My criticism is that you have allowed a small minority to hold to ransom the well being of the rest of the Province .... I implore you to study the effects of this strike ... and persuade your fellow M.L.A.s to act in a responsible fashion [to see that the needs of the majority are met].

Mr. Chairman, "urgency" has been used many times today, and I for one am disappointed when members of this House, after professional opinion has been rendered, have decided to do whatever they can to hold up the needs of Albertans. I urge all members to defeat the amendments moved by the Member for Spirit River-Fairview.

MR. HORSMAN: Mr. Chairman, I want to deal briefly with the arguments raised by the Member for Spirit River-Fairview, particularly with respect to that portion of the amendment which would deal with the deletion of Section 10. I'm glad that in his comments moving the amendment he clarified the position, as opposed to what I understood him to say during the course of second reading. It is not a question of its simply being in the opinion of the Attorney-General that the Labour Relations Board shall be in a position to revoke the certification of the union. We in this Assembly all agree that these measures are very stringent. I don't think there's one member of this Assembly who would ever want to see that action take place.

Nevertheless in exchange for the rights of certification provided to this labor union, amongst others in the province, under the Labour Relations Act, there must be a corresponding responsibility. That responsibility is simply to obey the law. If this legislation is passed in amended form, as there will be some amendments of

course, and becomes the law of the province of Alberta, it is incumbent upon those who are governed by that law to obey it; quite simply that. Therefore if a bargaining agent is found guilty of an offence under this Act, or is found in contempt of court in respect of a matter arising under this Act, we have to take a careful look at that. I don't want to repeat the arguments made so ably this afternoon in second reading by the Premier. But it is very clear that it must be only as a result of adjudication by a properly constituted court in this province that this section could ever come into play.

Therefore I urge hon. members to defeat this omnibus amendment, simply on the basis that I believe it is essential for the strength of this particular piece of legislation to contain Section 10, so that responsibility which is placed upon the people, the bargaining agent, to obey the law of this province once this legislation is approved, passed, and proclaimed — that responsibility must be and will be recognized. Certification under the labour Act is a right granted to the United Nurses of Alberta. That right must be met by a corresponding responsibility to obey this law, when and if it becomes the law of the province of Alberta. Quite simply, no bargaining agent should be able to have it both ways. Therefore they must comply with the law when it is passed.

I'd like to touch briefly on one other aspect raised by the hon. Member for Spirit River-Fairview. I gather he talked about something like little breaches of the law and big breaches of the law, and the concern that perhaps some minor breaches may be committed by some hothead somewhere in the province which would have the result of decertifying the bargaining agent. In that respect, there is discretion granted to the Attorney General: he "may" give notice to the Labour Relations Board. So there is discretion there, a properly exercisable discretion on the part of the Attorney General to judge whether or not an offence is minor, so it is not necessary to proceed to the measure of revoking certification. There is that discretion, and I think it has to be in the legislation so the so-called minor breaches of the law, if there are such things — and I grant you that there are different levels of breaches of the law — can be subject to the discretion of the Attorney General.

The amendments submitted by the hon. Member for Spirit River-Fairview must be defeated. Section 10 is essential to the weight of this legislation. I urge all hon. members to so deal with it when coming to a vote on the omnibus amendment proposed by the hon. Member for Spirit River-Fairview.

MR. KOZIAK: My colleagues have spoken to other sections of the amendments proposed by the Member for Spirit River-Fairview, but basically the three that have been spoken to are those dealing with the penalties that might accompany a breach of the legislation. Having regard for the fact that I support their argument, I want to restrict my remarks to the question of the amendment to Section 4, proposed by the Member for Spirit River-Fairview, which would see that removed.

I read Section 4 of the Bill that's before this committee for consideration, and I look upon it as a responsibility upon the bargaining agent to inform the employees that the strike has ended and that they should return to work. I'm somewhat surprised that others would suggest that this is some kind of new responsibility, a new heavy onus that might be placed on the bargaining agent. I register my surprise, Mr. Chairman, because I wonder how it was that the strike originated. I have no doubt that the

Minister of Labour, that the Minister of Hospitals and Medical Care, that nobody from government in fact sent out a notice to tell the nurses that on such and such a date the strike begins. I have no doubt that no representative of the employer sent out a notice to suggest that on such and such a date the strike begin. I presume it was the bargaining agent that informed the employees, the nurses, that on such and such a date, at such and such a time, the strike begins.

It's just logical that with the passage of this legislation, the employees — the nurses — would want to hear from their bargaining agent that they are to return to work, having regard for the fact that it was from that agent that they received first notice that the strike begin. It would be equally fair that they hear from that same agent that the strike end. I see no reason for the concern that the hon. Member for Spirit River-Fairview has expressed with respect to this section, and so oppose the amendments proposed by him.

MR. CHAIRMAN: Are you ready for the question on the amendment?

MR. NOTLEY: Mr. Chairman, just a couple of quick comments in concluding debate. First of all, with respect to the hon. Minister of Advanced Education and Manpower, the minister really hasn't dealt with the question of the double penalty. In other words, we have provision for a penalty where a breach has occurred. All right; we all realize that. But in addition to that, under Section 10(1) we have the ability to revoke certification.

Mr. Chairman, as members of this committee, we are responsible for the kind of legislation we pass. There is no reason that I can understand why, when we have penalties in one section of the Act, we have to have an additional penalty. Why is it necessary for this club to be there? I say to the Minister of Labour that as we all try to work through this settlement, any provision which can be seen as provocative — and I'm putting this in the most generous and kindly terms to the minister, because he's a kindly man — the fact of the matter is that this is a provocative provision.

Subsection (2), where we decertify — Mr. Chairman, I think we have to recognize the impact of that decertification. The Minister of Advanced Education and Manpower tells us that the latitude the Attorney General has is such that he will only proceed if it's a severe breach. We're not describing the provisions here; we're leaving that up to the Attorney General. Once a breach has occurred and it's been adjudicated, whether it's minor or major is totally up to the discretion of the Attorney General to determine whether or not that breach will lead to automatic decertification. Mr. Chairman, the result of that automatic decertification in Subsection (2) is that instead of having a bargaining agent in a local hospital to look after the ongoing work of protecting the membership, grievance procedures, et cetera, that's all going to be wiped out. I think that is quite unjustified.

The other thing is that none of the government speakers has addressed the reasons we need this two-year prohibition when a breach has occurred. Again, we're setting out penalties. It may well be that if you violate a provincial Act — we pass Acts all the time. Penalties are set out. If you violate that Act you pay the penalty, whatever it may be, and that's it. But in Section 11 we're saying that in addition to paying that penalty, you will not be able to work for any union, not just the UNA, for a period of almost two years. That's not just union offi-

cials. Look what we're doing here, Mr. Chairman: we're saying every officer — Mrs. Ethier is in that position, Mr. Renouf, all the staff representatives, agents or advisors, any legal firm acting as a counsel for the UNA. Then with another amendment, we'll eliminate — we haven't got to the acquiescence yet; that was beyond the pale. "Authorized" I could see, because authorized is a deliberate action, but "permitted"? That's subject to a good deal of latitude. But again, we have penalties, and I think members have to realize this. These people are going to pay a penalty, and in addition to the penalties they have to pay, all of sudden we have this additional little wrinkle that for two years you will not be able to work for any other union — as a lawyer, as a legal counsel, as a staff representative, as an officer. I say to the members of the committee: holy cow, that's pretty severe. It seems to me very hard to justify.

With respect to Section 4, as the Minister of Consumer and Corporate Affairs knows, under the present terms of Section 148 it's up to the department to serve notices on the various people when a back-to-work order is passed. That is the appropriate course of action and, in my judgment [interjection] the bargaining agent by local, every one of the locals. I don't pretend to be a labor lawyer, but in discussing this matter with several people who have a good deal of expertise in this area, what we have here is the concern that we are moving beyond the provisions of Section 148 of the labour Act, which are fairly straightforward and essentially place responsibility with the government to make the bargaining agent the vehicle.

But I would agree with the Minister of Consumer and Corporate Affairs that while I think Section 4 is important, sections 10 and 11 are more significant. However, in my judgment all of them, cumulatively, have the effect of seriously undermining the ability of the bargaining agent to properly represent its members. It will create problems in amicably solving the dispute. In my judgment, it will contribute to an unnecessary, lasting bitterness, which isn't going to help anyone. As I see it, listening to the Premier, the Minister of Labour closing debate on second reading, the Minister of Advanced Education and Manpower, it isn't going to be required. I just don't think it's necessary in terms of carrying out the Act. We already have a penalty provision; therefore, why take this move?

MR. CRAWFORD: Mr. Chairman, maybe you can correct me if I'm irregular in respect of my procedures in any way. But when you indicated that the hon. member would be closing debate on this item, I think that doesn't apply in committee and that other members might also speak.

I just want to make a few remarks in respect of the points that have been made by all members. I hope it doesn't add to the confusion, if any, or simply leave us in the position where further attempts to clarify fall short of the desired result. I would like to point out a couple of things. The suggestion was made that legislation of this type in these circumstances is unusual in some way. This point is made in connection with the differences between this and the normal procedures of the labour Act. That's fine. Those differences are there for all to see. But to say that it's different from what is used in Parliament or in some other legislature in similar circumstances, is not accurate. I think that point should be laid before the Assembly so members are aware of that. One has only to look at legislation that Parliament has had to enact in recent years, in regard to the postal workers and the like,

to see that legislation is specifically aimed at a certain dispute, a specific purpose, has time limits and requirements throughout, and applies such penalties as Parliament thinks fit.

In more recent times, in what I would say is the less important circumstance of the transit strike in Montreal, we've had legislation — which I happen to have a copy of before me — passed in a day by the legislature of Quebec with the support of the opposition and, I might say, by a government, the separatist government of Quebec, which has frequently declared itself to be socialist in its views on economic and social matters; legislation which is at least as powerful in its sanctions and requirements upon the parties as what is being proposed here. I don't apologize for the fact that through ordinary forms of legislative and legal research, we look at such things before preparing our own.

For example, to talk about the requirement to give notice in Section 4, the Quebec Act is right to the point. It requires every association of employees to take any appropriate measures to induce its members to comply — any appropriate measures. I don't know what that means, but we thought that it's certainly broad enough. We thought a reference to the mere giving of notice to be fair in this case. The Minister of Labour has said several times that the structure of the United Nurses and the bargaining units is such that notices can indeed be given, and that there is a mechanism there to do so. We accept that that is so, and it doesn't seem unreasonable to use that mechanism for the giving of notices.

I want to comment on another point: the suggestion that a minor offence somewhere in the province by somebody could bring about an automatic decertification. It is automatic if the proof of a conviction in a court is filed, through my office, with the Labour Relations Board. In other words, it's not a discretionary decertification; it's a statutory decertification, brought about as a result of this legislation — not some whim of the Attorney General, any other minister, or indeed of the board, but something having been determined. Both the Premier and the hon. Minister of Advanced Education and Manpower referred to that. But as I read Bill No. 11, the bargaining agent is the one under Section 10 that faces the decertification. Really it can only deal with two areas of the Act.

Talk about your minor happenings somewhere, sometime in the province: most sections of the Act don't deal with things that could be breached by a bargaining agent at all. They deal with setting up the arbitration tribunal, the manner of setting time limits, and various other things. The only sections that deal with the collective bargaining unit and what it may do would be Section 3, which says that no bargaining agent shall cause or consent to the strike, and Section 4, where it requires the notice be given. For example, Section 3(3) doesn't even apply to the bargaining agent. It refers only to the employees. So if scattered employees here and there fail to do what the Act says, it has no effect whatever on the bargaining agent. That's apparent on the face of the Act, and therefore no decertification could follow because no charge could be laid. It's only in the circumstances I've described, where there is a failure to give notice or the bargaining agent either caused or consented to the strike. Since the whole purpose of the legislation is to end the strike, that is a relatively narrow and straightforward area within which the bargaining agent must not breach the law.

I put that before hon. members of the committee in

order that they will see that further perspective on what it might mean if there were a breach of the law. It is not an extensive measure. It is very much to the point if one of those two situations I've described arises. But it's not something that someone could accidentally stumble into or that could happen to them because of the conduct of some individual somewhere.

The last thing I want to refer to is the reference to the size of penalties. I've said before that I make no apology for referring to what other legislatures do; for example, the fines in the Quebec legislation. And I say again that I think transit matters are less important than health matters, despite the great inconvenience and loss of employment that undoubtedly occurred in Montreal during the transit strike. That's a hardship, and the legislature acted. But after three and a half weeks, surely health services stand so far above concerns of the type I've just described that occurred in the city of Montreal that there's no comparison. Yet their fines provide that, notwithstanding the summary convictions Act of the province, if the offence persists for a day at a time a separate charge can be laid in respect of each day: \$50,000 per day against the bargaining unit and up to \$10,000 a day against any person.

Mr. Chairman, those are some of the comparisons. I am not assessing whether legislation passed in some other jurisdiction is or is not fair. I make the point only to say that so far as anyone would say that what has been brought forward here is unusual in any way in these circumstances, it is simply not the case.

MR. YOUNG: Mr. Chairman, before the question is called, I'd like to reflect on the balance or imbalance with regard to the penalty section, because much has been said and some of it is, at the very least, casting an improper reflection of what the situation really is.

First of all, decertification has had a great deal of attention. It's been well described. It is a penalty to the union. That's there because, apart from the financial penalty, there is no other penalty to the union. With respect to the Hospital Association and the hospital board, a penalty capacity already exists in the Alberta Hospitals Act. The minister can remove the hospital board from office without having to go before a judge to do it. So very clearly, without this there is an imbalance in the penalty accruing to the employer and the employee. This should be seen as a balancing of the penalty between the employer and the employee.

With respect to the fines imposed, they are the same for a representative or someone purporting to act on behalf of management for the individual as for someone purporting to act on behalf of the union — the same amount, so that's even and fair. But the hon. Member for Spirit River-Fairview would make it very uneven. In this proposed amendment, he would delete 14(2), and he would do that without deleting 14(3); 14(2) is the penalty on the union, and 14(3) is the penalty on the employer in terms of fines. His proposal is to delete the one. That's not very fair. I am surprised that the hon. member, who regaled us with theatrics in a shrill voice, would be so unfair in his outlook as to propose to delete the penalty on the one party and not on the other.

I'd like just a moment to reflect again upon the situation before us. Our society is very much an interdependent society. We all specialize and do things that are necessary to the welfare of others. Because there are many of us, we organize in different ways in order to be able to effect the income we receive. That's the question

of determining what's fair and right in terms of the economic situation. Collective bargaining is one of those systems. Sometimes it's a market system. Sometimes it's marketing boards, and one may argue whether marketing boards work well or poorly. One may argue whether the free market system works well or poorly. The same argument can be made with regard to collective bargaining.

The point is that with regard to collective bargaining, we have before us a situation where we can literally totally deprive a portion of society of a service. If you will, that's one of the pressures that hopefully leads to diligent, fair bargaining; no quarrel with that. But there comes a time when we in this Assembly, having regard to the total welfare of our society, have to weigh that privilege against the welfare, in terms of health conditions, of other members of society. I don't want to take it too far. But it gets very much to weighing the possibility of a continued collective bargaining scene which isn't working very well, against life and death, if you want to take it that far. That's what's building, and that's the urgency. That's why we're here, and that's why we have this particular piece of legislation.

I'd like to make one other reference, and that is to the alleged bitterness among employees that the hon. member speaks of. This past while I've had occasion to visit a number of hospitals, and have talked to a number of staff. I have talked to many groups of nurses and many individual nurses. The only time I failed to talk to them is when they paraded in front of my house, in a much touted event, didn't knock on my door, and didn't even create enough fuss that the dog barked. So while I was talking on the telephone to people who were phoning in, I didn't realize that was happening, or else we would have had them in for coffee and cookies and had a good discussion. But I want to say that out of those discussions, there is a deep concern. There is a deep concern on the part of administrators, government, and nurses.

But in the discussions I've had, there is also a great deal of recognition of the nature of some of the problems, more recognition than we're sometimes prone to give if we listen too long to the hon. Member for Spirit River-Fairview, when he waves his arms and makes his rather extreme expression of the situation. There is a recognition that in the work place — and I'd like to say that the work place is a very key element of everyone's life. If any one of us is unhappy in the work we do, first of all we don't have the same motivation for service. Secondly, we don't come away with the same healthy, positive attitude in a psychological sense to go home to our families or our friends, and that surely is going to color our social relationships. So besides being the key to our economic welfare, the work place is the key to our social connections and our social conduct, our mental health, if you will. It's the key to many, many elements of our lives, and it should surely deserve the most critical attention.

I can't stand here for one moment and believe that there is an administrator anywhere who deliberately tries to make life difficult. It may well be that administrators, being human — as members of the Assembly, being human — aren't always as sensitive as they could be, perhaps don't know how to proceed in all circumstances the way maybe they would like to be able to. That's a different question, and that's something we're not going to resolve through collective bargaining. The collective bargaining system can highlight the problem, but it can't resolve the problem.

I come back to the point that I think there's a

tremendous store of good will that existed in the hospitals I saw. That confidence level and attitude need to be brought back again. From my discussions with nurses and administrators, I am confident it will come back, and it will come back quickly. It will need a lot of effort on everybody's part, because some of the problems identified are not going to be turned around overnight. On the other hand, some can be.

The Department of Labour and I have made a commitment to several groups of nurses that if the professional responsibility clause, which really is a consultation committee structure, isn't working the way it should be in their respective hospitals, to please call the Department of Labour. We will be most interested in trying to make it work effectively and trying to make a means of communication function fully and openly between the nursing staff and the administration and, for that matter, any other staff. I am committed, as I believe every member in this Assembly is, that the place of work for all of us should be as pleasant, productive, and satisfying as it can be, for the reasons I've mentioned.

So I'm deeply disturbed when the hon. member talks about deep-seated bitterness. In an emotional situation such as we're in, I understand there is some upset. But let's look and try to build on the positive side.

MR. NOTLEY: Mr. Chairman, several speeches ago I was going to conclude debate. However, that's fine. It's a good discussion, so [we can] carry on for some time. I do want to respond to both hon. gentlemen.

First of all, with great respect, the hon. Minister of Labour can accuse me of theatrics, and I can accuse the Minister of Labour of sophistry. [interjection] Well, I could accuse the minister of bad sophistry, because as I look at the offences — let's just take a look at this, so we have clearly in our minds what section 14(2) in fact says. It's simply a consequential amendment. We are striking out Section 4. So if members agree that Section 4 should be struck out, then 14(2) has to be struck out too. It's just that simple. It's a question of whether you agree with Section 4 being in or not. If you agree with it being in, then obviously Section 14(2) has to remain. If you think, as I do, that it should be out, then 14(2) has to go.

But let's just look at the difference between the bargaining agent and the employer, because as it applies to Section 3, which the Attorney General outlined:

All employees shall continue or resume, as the case may be, the duties of their employment without slow-down ... and all employers shall arrange for the resumption of their services.

All right. What's the penalty there? In its wisdom, the government has decided that:

Any bargaining agent, employees' organization, employee, employers' organization or employer ... [shall be] guilty of an offence and [subject] to a fine

That fine is \$1,000. So there's equality there. Dealing with Section (3) which is the back-to-work, the resumption of work:

All employees shall continue or resume ... the duties of their employment ... and all employers shall arrange for the resumption of ... services.

So there's no question about that.

Then we look at 14(2) as it relates to 4 and 5, but surely they're rather different things. We're talking about a \$10,000 fine for the union, and we've just had the Minister of Consumer and Corporate Affairs telling us that this is a rather minor, straightforward thing; no problem at all

in Section 4; why shouldn't it be done? Then we have Section 5. And I'm sure both hon. gentlemen would agree that in Section 5, we're not dealing with anything other than a rather major matter:

No employer or person acting on behalf of the employer shall

- (a) refuse to permit or authorize, or direct or authorize another person to refuse to permit or authorize, an employee who went on strike before the coming into force of section 3 to resume the duties of his employment forthwith.

Mr. Chairman, we are now talking about a rather different and crucial responsibility: to get the whole show on the road again. To suggest that somehow it's not being even-handed in the amendment is sophistry.

The hon. Attorney General has suggested that the fines are greater as a result of the action of the separatist government of Quebec in the transit strike. I certainly am not here to endorse anything the separatist government in Quebec does, and I don't think we should be using their improper actions in dealing in a heavy-handed way with the transit strike in Montreal as an excuse to do the same thing in Alberta. Therefore, Mr. Chairman, with great respect, I don't think those arguments apply. In summarizing, Mr. Chairman, as I see it, we're still left with excessive provisions in sections 10 and 11.

In concluding my remarks, I want to deal with the point the Minister of Labour ended his comments on, and that is: what comes after this back-to-work legislation? You know, it isn't good enough for members of the House to say, everybody has to pitch in, and it doesn't make any difference what we do in the House. It does. We are part of that process now. This legislation, Bill 11, makes every one of us part of this process. If the process is not seen to be fair, then that is going to contribute to problems.

If the minister tells me that the nurses in this province are happy with Bill 11, he's been talking to different nurses than I've been talking to. And if there isn't potential for bitterness and problems, he's been talking to different staff people than I've been talking to, because there is. I would say to the minister — and he could certainly respond; we could go on for some time. But the fact of the matter is that these provisions are causing concern. And all members of the House, but especially the Minister of Labour, the Minister of Hospitals and Medical Care, and the Attorney General who is going to be caught with the sort of legal responsibilities flowing from this legislation, surely must go that extra mile at this point, to allow an amicable settlement.

Mr. Chairman, that's why we have to be so careful before we rush into legislation which has powers, sweeping in their nature, quite beyond the scope of 148 of the labour Act, which was used two years ago. And the cabinet order was upheld some time later when it went to court. Therefore, the power is there. I'm suggesting to the government that one of the options available is that instead of coming back with an order in council, they could have introduced legislation in the House, which in fact would have been modelled on Section 148.

I think there's an argument, Mr. Chairman — and the Premier was quoted as saying this outside the House — that all members of the House should be accountable in stopping a strike of a provincial nature. I think that's a fair enough comment. My argument is not that we should use the Legislature to do that; it's that this Bill goes further than it should. That's all. [interjection] I forget whether it was the Minister of Hospitals and Medical



Care or one of the hon. gentlemen across the way who somehow suggested that we were trying to have it both ways. Not as far as I'm concerned. This is where it should be. This is where the Act should be. No question. And all of us should be accountable, as we were when we had to stand up an hour ago.

DR. BUCK: It's just the wrong Bill.

MR. NOTLEY: It's just the wrong Bill. That's right. It's the right theatre, but it's the wrong Bill.

MR. KESLER: Mr. Chairman, I'd like to say to the hon. Attorney General that if, in fact, we're going to use a precedent set by the Quebec separatist government, perhaps tomorrow we could begin a Bill for independence for Alberta. [interjections] And I think that. . .

DR. BUCK: Independence from what?

MR. KESLER: Independence for Alberta, Mr. Buck. But I think that to bring other areas of labor into this dispute on these particular items of amendment certainly doesn't help in solving the problem of discussion at this time.

MR. ZAOZIRNY: Mr. Chairman, I just like to . . . [interjections]. Over the roar, I'd like to make a couple of comments in order to participate in this very extensive and, in many ways, excellent debate. Firstly, I noted that the hon. Member for Spirit River-Fairview, in his summary — inadvertently I'm sure — neglected to refer to Section 25 of the Alberta Hospitals Act. I think it's important to underline that section, because there's been a great deal of discussion about having balance in the penalty provisions that can affect either party. For that purpose, I'd like to read very briefly from Section 25:

The Minister by order may for cause dismiss the members of a district board or board of management and appoint an official administrator in their place.

Mr. Chairman, if one wished to make very strenuous arguments about tough and strong legislation, that have been advanced in respect of the certification and decertification sections of the Bill before us, they could certainly as easily be advanced in respect of Section 25 of the Alberta Hospitals Act. That's tough medicine, Mr. Chairman and members of the Assembly. But when we look at that section, hand in hand with the decertification provisions of this Bill and the comparable penalty provisions, then I think it's fair to say there is a real balance. One of the very difficult responsibilities a government carries as government is in fact to ensure that there is that balance, and I'm sure that members of the opposition would not see it any other way. So I specifically want to draw to the attention of all members of the Assembly that section, which I think is very important in the context of the debate we've heard this afternoon.

The other area I wish to comment on briefly has to do with the allegation by certain members of the opposition that somehow the government is in cahoots with the Hospital Association. It's a convenient argument and, I suppose, appealing to those who are looking for villains in this kind of labor struggle. But I suggest to members of the committee that quite apart from the legal arguments put forward by the Minister of Hospitals and Medical Care, which clearly demonstrate that that is not in fact the case, there are other arguments which provide clear evidence that such is just not so.

The first is simply this: if there were that cozy relation-

ship, conveniently suggested by certain members of this House, do you really think that what we have gone through, not only as members of this Assembly but what the citizens of this province have endured for the last three weeks — surely it would have been much simpler for the government, putting the arm around the shoulder of members of the Hospital Association, to say: fellows, give them everything they ask for. We don't want strikes. We don't want confrontation. We don't want the health of Albertans put in any jeopardy whatsoever. Just do it, and that will solve the problem.

Mr. Chairman, that didn't happen, because the government clearly recognizes that it must maintain its position as a referee in legitimate labor disputes, and that it cannot favor one side or the other. That is a very difficult burden for members of the government to have to carry. It is a burden that perhaps other members of this Assembly don't need to carry, although I certainly would not suggest that they would do otherwise. But I simply say to all who are listening to this debate this afternoon that that surely has to be the clearest evidence of the objectivity and fairness the government has tried to display throughout this dispute, and its determination to remain at arm's length.

I simply add in passing that it is my understanding that not only is there some reservation on the part of the United Nurses of Alberta to a legislated end to this dispute, but that the other participant, the Alberta Hospital Association, or certain members thereof, have equal reservations. Surely that must give added weight to the reality that the government is, in fact, acting as a referee and not acting with favoritism or in an improper or imbalanced way in terms of the rights of the participants in this dispute.

Mr. Chairman, I simply want to put those points on the record, and trust that all members will take them into account when determining the outcome of this Bill.

MR. CHAIRMAN: Are you ready for the question? We are now voting on the amendment proposed by the Member for Spirit River-Fairview.

[Motion on amendment lost]

MR. CHAIRMAN: We now go to the government amendment. Are there any questions or comments regarding the government amendment?

MR. KOZIAK: Mr. Chairman, one brief comment. I had some trouble with the word "acquiesce", as it appears in the section we are dealing with. This morning I had the opportunity to meet with a good number of nurses from my constituency. I tried to explain the meaning of the word "acquiesce" to the nurses in my office and, during the course of the attempted explanation, found that it was much more difficult in that way and concluded that my initial reservation about the inclusion of the word "acquiesce" was strengthened by the discussion I had with the nurses. I am pleased that the government is moving an amendment to the section to remove the word "acquiesce", because of the problems it might cause.

Of course, when we talk about lexicon and vocabulary and the word "acquiesce", we have all been treated today to a show that hasn't been matched since the former Minister of Municipal Affairs regaled us with the word "anon" some years ago. Today, after a brief respite and the opportunity to read new books and acquire new

vocabulary, we have heard the word "sophistry" three times from the Member for Spirit River-Fairview.

MR. NOTLEY: Look it up in the dictionary, Julian.

MR. KOZIAK: We must be grateful for that new, fresh bit of vocabulary he has brought into the Legislature, although I disagree completely with the use of it in the argument he put forward. I find that the word would more appropriately describe the arguments of the Member for Spirit River-Fairview than anybody else's in the Assembly.

MR. CHAIRMAN: Are you ready for the question?

MR. YOUNG: Mr. Chairman, just a quick word. I think the word "acquiesce" has been overly cared for. With respect to the removal of the word "employer", that had no relevance because it wasn't mentioned in the preceding section to which the cross-reference was made, so it was a nullity at the very worst. Its removal simply cleans the matter up.

With respect to the deletion of Beaverlodge-Hythe, that hospital board did not delegate its bargaining capacity to the Alberta Hospital Association. That is the reason for deleting it from this particular list of hospitals.

DR. PAPROSKI: At a very appropriate time, I believe, before we vote on the amendment, I would like to make a few brief remarks. Recognizing that the usual bargaining negotiations had collapsed and that there is no prospect that a negotiated settlement will occur imminently, I must voice my support for this Bill with the amendments that have been proposed, and maybe suggest to the minister a few other alterations, if possible.

Certainly this Bill will require the nurses to return to work. We all want that to happen, and I am sure the citizens of Alberta want that to happen as soon as possible. I believe it will maintain fairness, because there will be arbitration. This Bill is being debated in public, and our feelings on both sides of the House are being reflected very carefully.

Mr. Chairman, I have received numerous calls, as I am sure all members in the House have from their constituents, regarding the need to intervene because of the serious nature of the situation with our ill who are at home, and the urgent nature of that problem. Very importantly, I as a government member want to lay on the record to the committee that I have heard from these constituents, and I know most members here have too, that there is an urgency to proceed with this type of legislation, and that there are seriously ill people at home whose lives will be jeopardized if we don't act.

That urgency is reflected by the College of Physicians and Surgeons, and it is a fact. It is not an opinion, as the NDP member states and would have us believe. Also the college of family practice and, of course, citizens across the province, many constituents, and friends and relatives of those constituents, have indicated the difficulty they have been in over the past few weeks. Frankly, Mr. Chairman, my colleagues, whom I have communicated with, have also indicated that there is a need to end this particular strike.

Of course it's not pleasant, Mr. Chairman. I am sure the nurses are not happy with it. I'm sure the Alberta Hospital Association is not happy with the strike and the need to take these particular proceedings. But I can assure you that the citizens will be very happy, especially

those who are ill and waiting for hospitalization. Mr. Chairman, the case for resolving the strike is now, and it has been made. It is no longer an opinion; it's a fact.

I would like to direct a few comments to the Minister of Labour, so he can take this under consideration in addition to the amendments and suggestions he has made already. I am pleased he has made those, because they were on my list. I wonder if the hon. Minister of Labour would clarify Section 3(1). Is the burden really on the nurses to go back to work at 7 o'clock in the morning the next day? I've heard from them that that would indeed be a burden, and I want to be sure that that is not so. I know the strike ends at that time, but do they have to appear on that shift? Frankly, I think that would be too great a burden.

Mr. Chairman, the other point, and I suggest that it be taken under serious consideration: I would like to hear whether the hon. minister would commit that there be a tribunal of at least three people rather than one. I frankly feel it would be more just, more fair, and more balanced in the long measure. Whether or not a female is on the board is apart from that. I think it is important that we have more than one person, and I would like to hear him commit to that direction.

The other question: I would like to hear from the Minister of Hospitals and Medical Care or from the Minister of Labour, whether there will be a set time for the length of the tribunal deliberation? Concern is expressed, and properly so, by the nursing association or union: is this going to take two or three days; will it be a rush job, and is it going to be all over; or is it going to take six months? In other words, is there going to be a reasonable period of time, that this won't be dragged out or be too long?

With those brief comments, Mr. Chairman — and I would like to hear comments on that after we vote on the amendments, if you wish, or before. I would like to note again the importance of the nursing profession. I'm sure we all recognize that they are central to the health care system. We know it, they know it, and the citizens know it. I hope that ultimately the settlement will be satisfactory to all concerned. I believe that the concern for the individual and family, and for the health of that individual and family, will remain intact and that provincial health workers, in general, and the nurses will get back to work and do the job they have been doing so well and continue on that excellent course.

Finally, Mr. Chairman, I trust and hope that progress will be made to improve the work situation we've been hearing about over the past few months. I hope that work situation will improve shortly — over months, and certainly within a year or so.

MR. YOUNG: Mr. Chairman, while the questions that have been raised aren't on the particular amendment before us, I may as well address them now if you agree.

The first point I would make, of course, is that the arbitration tribunal provision does permit the broader or larger number than one. With respect to the duration of the arbitration tribunal, clearly it's going to require sufficient time for the tribunal to evaluate all the issues that are in dispute, and I frankly don't know how long that will be. I hope it proceeds with considerable dispatch. At the same time, I also expect it to proceed with objectivity. And in fairness to both parties, that will require some time, first of all, for a discussion between the tribunal and the parties, and then the parties to be able to respond to the tribunal in an effective and full manner so that it

works from good and complete information. Balancing that, I assure you that I will encourage the tribunal to get a result as quickly as it can, given those necessary factors, because I think this dispute has lasted overly long and that it would be beneficial to all parties to have the new agreement in effect as quickly as is reasonable.

With respect to Section 3, and the significance of 3(1), which says:

This Section comes into force at 7:00 a.m. on the day following the coming into force of this Act.

That hour was put there in order to identify as closely as possible the commencement of the day shift. This legislation should be read in anticipation of a reasonable approach. The reasonable approach is further identified in Section 4, where the use of the expression "forthwith" can be found.

What is contemplated is that first of all, the dispute ends on proclamation, and the parties begin to make the health system function as it should. Of course there will be a couple of days of gearing up, but at least they come back to work, in terms of the employees commencing at or about 7 a.m., whenever their normal shift would start. Some will come in at 7 a.m.; the afternoon shift will come in whenever they come in. I'm sorry, I should back up. If the morning shift in some hospitals starts at 6:30 or 7:30 or 7:15, that's when we would anticipate a return to as near to normalcy as possible.

We expect there will have to be reasonableness and give and take. I think that anything that can happen, that can be attributed to any minor misunderstanding but is related to a normal operation, is what we would expect. We don't expect every nurse to come bounding in the door at 7 a.m. That's clearly not the intent of the Bill. It's a return to normal scheduling and normal schedules, as nearly as possible, commencing with the 7 a.m. turnaround.

The expression "forthwith": we had considered using the word "immediate", but immediate is too rigorous and too strict. We wanted to indicate that the parties should turn their best endeavor to getting the system functioning as quickly as is reasonable. It's intended that reason and discretion should be used in an interpretation of these Sections.

[Motion on amendment carried]

MR. CHAIRMAN: Are there any further questions, comments, or amendments to any other sections of the Bill?

DR. BUCK: Mr. Chairman and members of the committee, I have an amendment to Section 7, and I'll hand it out. The amendment goes:

Section 7 is amended by adding the following after subsection (6):

(6.1) The arbitration tribunal may consider the report of the Alberta Hospital Association entitled Nursing Manpower, a study of factors in Nursing Supply and Demand in Alberta Hospitals and Nursing Homes.

Mr. Chairman, in listening to the hon. Member for Lethbridge West, it is very interesting when you sit over on this side of the House to see how your actions somehow get twisted into making it appear that you are against the well-being and betterment of your fellow man. I think we have to go back a little bit to the nursing strike of two years ago. It was very interesting at that time how the government ran scared when they found out that

public opinion was solidly behind the nurses. It didn't take them long to get their act together.

MR. NOTLEY: The government found the money.

DR. BUCK: The government found the money. Now the government found out that because of public opinion, because of the interpretation out there with the public that the nurses were asking for more money in this dispute, it was safe for them to make a move. But the dispute is not about money in this case. The dispute is about working conditions, and if there are going to be nurses in the future to fill our hospitals. That's what the dispute was all about. Mr. Chairman, the nurses didn't want to strike. I didn't want to see them strike. The general public didn't want to see them strike. But they had no alternative but to strike.

MR. NOTLEY: This government's incompetence caused it.

DR. BUCK: That's right. To the hon. Member for Lethbridge West, the government is making use of the nurses as scapegoats for its ineptitude and its indifference.

MR. NOTLEY: And incompetence.

DR. BUCK: That is what is happening. [interjections]

Mr. Chairman, by moving this amendment, I just want to bring to the attention of the government as strongly as I can that we have to clean up our act. That's what we have to do. That's what the nurses are trying to tell us. I don't think the nurses should be used as sacrificial lambs in this dispute. We don't want them to have to go back to work, and then just forget about them for two more years till they have to go back through the same procedure.

I want the nurses to go back, the public wants the nurses to go back, and they're going to go back. I think the procedure could have been handled much more light-handedly. We could have brought the order to go back to work in this Assembly. I agree that's where it should be; the debate should be in this Legislature. To the hon. Minister of Hospitals and Medical Care, no one is arguing that. I'm not saying that we should call the Legislature back, but now, because I don't like the Bill, it shouldn't be here. It should be here, but the Bill is not right. That's what the argument is all about. Mr. Chairman, the reason I'm going to vote against it is because I don't trust this government. [interjections] It's a good amendment, Julian, you should pass it. But you have to get your lumps first.

The nurses are learning, the firemen have learned, the Alberta Fish & Game people have learned, the Dickson dam people have learned, the teachers have learned, and the farmers have learned that this government doesn't listen. It listens when it is politically expedient. It should never have got to this stage if the Minister of Hospitals and Medical Care, the Minister of Advanced Education and Manpower, and the Minister of Labour got their act together; if the government had listened to the concerns two years ago.

Mr. Chairman, I ask hon. members of the committee to accept the amendment, because we want some action. We want some action on the concerns of the nurses. I won't go through what they are. I'm sure the members will read the report of the association. I am begging the government to listen to the concerns, so that we don't have to go through this procedure in two more years. Mr.

Minister, let's not repeat this in two more years. Let's listen genuinely and take some action, Mr. Minister and Mr. Minister, to make sure it doesn't happen. Then we won't have to go through this.

MR. YOUNG: Mr. Chairman, just before the vote, I simply want to indicate that it's very important that the arbitration tribunal have access to whatever information would be helpful to it to make its best judgment of this dispute. Therefore I find the amendment quite acceptable. But I would also indicate that the nature of the challenge before the whole system does not end with the final reading of this Bill tonight, but rather takes on one further step. It is clear that the system cannot be remedied and the problems overcome while a work stoppage is in progress. They're overcome when the system is functioning and when people are working to build together. That's a major responsibility on every party.

I have assured several individual groups of nurses that if they ask the Department of Labour to assist in building an understanding and a means of effective communication between their local and the administration, the department would be happy to make its services available. That offer is there and goes the other way as well, to the hospital boards. What we're looking at is a lot of need for sensitivity and attitude change on the part of all parties involved.

It's not something that can be sort of dropped on everybody from this building. It isn't going to work that way. We in this Assembly need to support it. We recognize that, but — and it's a big "but" — there are a lot of other actors in making this system work and accordingly, in connection with the amendment, I hope the arbitration tribunal gets access to whatever information it needs to make the best decision.

MR. HORSMAN: Mr. Chairman, I want to indicate that I fully support the amendment. With respect to the responsibilities assigned to me and the Department of Advanced Education and Manpower, we have reviewed very carefully the report referred to in the amendment. We are well aware of the first six points listed by the Alberta Hospital Association: firstly, to increase quotas in basic education programs; secondly, to increase the practical clinical component of college and university nursing programs; thirdly, to increase quotas and accessibility of post-basic Bachelor of Science in Nursing program; fourthly, to increase the number and availability of post-basic certificate courses in specialized areas, particularly obstetrics, emergency intensive care, geriatrics, operating room, and administration; fifthly, to continue efforts to recruit out-of-province nurses, and sixthly, to re-examine the educational processes of programs for registered nursing assistants, to ensure the program is meeting hospital and nursing home needs. Those are the six particular points which have a direct impact on the Department of Advanced Education and Manpower.

I wouldn't want anyone in this Assembly to think that nothing has been done in the last two years since that report came out. Indeed I welcome the support of the members of the opposition when the budget comes forward with respect to new initiatives, which I hope will be found therein, with respect to improving the whole area of postsecondary education for nursing.

DR. BUCK: Do you expect the amendment to double the budget?

MR. HORSMAN: Of course technical amendments like that happen to be votes of confidence when they come from the opposition. So I don't think we're prepared to vote non-confidence when we approve the budget.

The fact of the matter is: there's been a very marked expansion in the programming available for nurses in this province. It is the commitment of this government to do everything possible to remove dead ends for nurses, in terms of their educational opportunities and, furthermore, to try to integrate the various types of nursing programming so that registered nursing assistants can perhaps move on to further their education, and likewise with registered psychiatric nurses.

So a very extensive new program is starting to unfold. We are conscious of the fact that we must expand. But we are also aware, and all members should be, that we cannot — and nobody should think for a moment that we can — meet all nursing manpower needs of this province in the coming years from native-born Albertans or those who arrive on the scene by natural increase. There is going to have to be a very real effort on the part of hospitals to continue their efforts to recruit out-of-province nurses. Just as a matter of interest for hon. members, I think it's important to point out that the total number of nurses coming to this province from outside Canada has increased dramatically in the past three years. In the next few days, I will supply hon. members with an up-to-date report on the subject of immigration into the province, and also the record that we have been able to ascertain of in-migration from other provinces.

Mr. Chairman, I did not want to allow the amendment to proceed without making out the very real efforts being made by the Department of Advanced Education and Manpower: new programming at the University of Lethbridge, new programming to commence in Grande Prairie and Keyano, and expansion of programming at the University of Alberta. Many more outreach programs to allow nurses to take their courses where they live and work, are in the planning stages. Furthermore, I would not want to close without pointing out that we have also committed \$1 million towards nursing research in this province, something that has never been done before in Alberta, and has never been done in any other province of this country. We look forward to that start on nursing research as a very important step to improving the quality of nursing care and to allowing nurses an opportunity to upgrade themselves and, by doing so, to add significantly to the health care services that are provided by the nursing profession.

In conclusion, may I say that I have had nothing but the best relationship and the best type of co-operation imaginable from the Alberta Association of Registered Nurses, with respect to planning the new programs and the research component that has been added to nursing in this province. I don't want the hon. Member for Clover Bar to leave the impression in this Assembly that we have not been doing anything with respect to these very laudable objects set forward in the report to which he refers in his amendment.

MR. GOGO: Mr. Chairman, on a point of order, for my clarification. The amendment I have reads, "moved by Mr. R. Speaker" and not the Member for Clover Bar. Could I have clarification by the Chair if the amendment is in order in that it was moved by Mr. R. Speaker and not the Member for Clover Bar.

MR. CHAIRMAN: When the Chair puts the motion, that will be understood by the Member for Lethbridge West.

All those in favor of the amendment proposed by the hon. Member for Clover Bar, please say aye.

[Motion on amendment carried]

MR. CHAIRMAN: Are there any further questions, comments, or amendments . . . [interjections]

Order please. Are there any further questions or comments with regard to any other section of the Act?

MR. MACK: Mr. Chairman, as the Member for Edmonton Belmont, as I rise in support of Bill 11, I wish to share with the committee the reasons for my support of the legislation which would see our nurses returning to their profession in their respective hospitals.

Over the past couple of weeks, I have received calls from constituents which, in the opinion of the constituents, were of a very urgent nature. One was directly related to an expectant mother who went for emergency treatment at the Royal Alex, was sent home after the treatment, and some four or five hours later lost the child. We recognize that this could have occurred regardless. But in the perception of the parents, they didn't have the opportunity to get full professional care for that mother. In my opinion, that was a very emotional experience on the part of the family as well as the caller to my office.

There were other calls where patients required cancer operations and, although placed on the top list as far as their attending physician was concerned, they were unable to be admitted for treatment. There was a further call from a pastor of a 400-member congregation. Members within that congregation required medical attention. These are sufficiently important issues that an elected member representing a constituency would have to respond in a very positive way.

I commend the minister for making amendments to [Bill] 11. I think they were timely and very important. I would make one or two further observations or suggestions. I perceive, and I think it's fair to say, that perhaps labor relations in the work place are not what they might be. As someone who has spent many years in the field, I strongly urge that the government, through the Minister of Labour or perhaps the Minister of Hospitals and Medical Care, encourage the boards of hospitals to establish a labor/management consultation committee so there is dialogue with the staff. This in no way replaces the collective bargaining process, nor does it impinge on the same, nor does it have any impingement on the language of the agreement. It merely establishes a dialogue and builds strong morale within the work place.

I hope the Department of Labour would assist the hospital boards — not impose upon them — to establish this type of dialogue. I believe it's very positive. I've participated in it. It should be participatory with the top management people and the top representatives of the employees, because other than that, it's not going to work. It has worked in the city of Edmonton. I think it's a very, very positive move, and I certainly support that. I also concur in the comments of the Member for St. Albert that if at all possible, when a choice is made, a lady be considered as one of the members of that arbitration board.

Thank you, Mr. Chairman.

[Title and preamble agreed to]

MR. YOUNG: Mr. Chairman, I move that Bill No. 11, the Health Services Continuation Act, be reported as amended.

[Motion carried]

MR. CRAWFORD: Mr. Chairman, I move that the committee rise and report.

[Motion carried]

[Mr. Speaker in the Chair]

MR. APPLEBY: Mr. Speaker, the Committee of the Whole has had under consideration, and reports with some amendments, Bill No. 11.

MR. SPEAKER: Having heard the report, do you all agree?

HON. MEMBERS: Agreed.

#### head: **GOVERNMENT BILLS AND ORDERS** (Third Reading)

##### **Bill 11** **Health Services Continuation Act**

MR. YOUNG: Mr. Speaker, I move third reading of Bill No. 11, the Health Services Continuation Act.

MR. SPEAKER: Having heard the motion by the hon. minister, are you ready for the question?

[Mr. Speaker declared the motion carried. Several members rose calling for a division. The division bell was rung]

MR. SPEAKER: Being unaware of anything in the Ten Commandments to the contrary, would the Assembly agree that the hon. Minister responsible for Native Affairs might revert to Introduction of Special Guests?

HON. MEMBERS: Agreed.

#### head: **INTRODUCTION OF SPECIAL GUESTS** (reversion)

DR. McCRIMMON: Thank you very much, Mr. Speaker. It's a real privilege today to introduce to the House a group of people from the Blackfoot Reserve, who have come up to see the unveiling of the two statues, particularly of Chief Crowfoot, an historical figure in Alberta, particularly to the Blackfoot nation. They're seated in the members gallery. I ask that they rise and receive the warm welcome of the House.

head: **GOVERNMENT BILLS AND ORDERS**  
(Third Reading)

**Bill 11**  
**Health Services Continuation Act**  
(continued)

[Three minutes having elapsed, the House divided]

For the motion:

X	X	X
Adair	Heibert	Oman
Anderson, C.	Horsman	Osterman
Anderson, D.	Hyland	Pahl
Appleby	Isley	Paproski
Batiuk	Johnston	Payne
Bogle	Knaak	Pengelly
Borstad	Kowalski	Planche
Bradley	Koziak	Reid
Campbell	Kushner	Russell
Carter	Leitch	Schmid
Chambers	Little	Schmidt
Clark	Lougheed	Shaben
Cookson	Lysons	Stevens
Crawford	Mack	Thompson
Cripps	Magee	Trynchy
Diachuk	McCrae	Webber
Embury	McCrimmon	Wolstenholme
Fjordbotten	Miller	Young
Gogo	Moore	Zaozirny
Harle		

Against the motion:

X	X	X
Buck	Notley	Kesler
Totals:	Ayes - 58	Noes - 3

[Bill 11 read a third time]

MR. CRAWFORD: Mr. Speaker, His Honour the Honourable the Lieutenant-Governor will now attend upon the Assembly.

[Mr. Speaker left the Chair]

head: **ROYAL ASSENT**

SERGEANT-AT-ARMS: Order! His Honour the Lieutenant-Governor.

[The Honourable Frank Lynch-Staunton, Lieutenant-Governor of Alberta, took his place upon the Throne]

MR. SPEAKER: May it please Your Honour, the Legislative Assembly has, at its present sitting, passed a certain Bill to which, and in the name of the Legislative Assembly, I respectfully request Your Honour's assent.

CLERK: Your Honour, the following is the title of the Bill to which Your Honour's assent is prayed. Bill 11, Health Services Continuation Act. This is the Bill to which Your Honour's assent is prayed.

[The Lieutenant-Governor indicated his assent]

CLERK: In Her Majesty's name, His Honour the Honourable the Lieutenant-Governor doth assent to this Bill.

SERGEANT-AT-ARMS: Order!

[The Lieutenant-Governor left the House]

[Mr. Speaker in the Chair]

MR. CRAWFORD: Mr. Speaker, as to tomorrow's business, I might indicate that of course the afternoon is not government time. Tomorrow night it is not proposed that the Assembly sit.

Mr. Speaker, I don't know whether to call it 5:30 or move, as I now do, that the Assembly adjourn until tomorrow afternoon at 2:30.

MR. SPEAKER: Having heard the motion by the hon. Government House Leader, do you all agree?

HON. MEMBERS: Agreed.

[At 7:27 p.m., the House adjourned to Thursday at 2:30 p.m.]