

LEGISLATIVE ASSEMBLY OF ALBERTA

Title: **Wednesday, March 30, 1983 2:30 p.m.**

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

PRAYERS

[Mr. Speaker in the Chair]

head: INTRODUCTION OF VISITORS

MR. LOUGHEED: Mr. Speaker, last October 5, against extreme odds, the first Canadian stood on the peak of Mount Everest. Two days later, another Canadian reached the summit. News of the successful expedition injected a feeling of pride across all of Canada. The spirit of conquering the ultimate challenge was felt by all Canadians.

A large majority of the climbers and many members of the team are residents of the province of Alberta. At lunch today, Mr. Speaker, I had the honor of hosting the Mount Everest Expedition and announcing, on behalf of my fellow Albertans, that the interlakes interpretive trail — nature's main thoroughfare in Kananaskis Country — has been selected to honor these brave men who put Canada on top of the world. This trail will be renamed the Canadian Everest Expedition Trail, as a lasting tribute to the men whose enduring personal commitment met the ultimate human challenge. Now, Mr. Speaker, all visitors to Kananaskis Country can climb this interpretive trail, stand at the majestic viewpoint overlooking Upper Kananaskis Lake, and perhaps appreciate to a greater degree the spirit with which the challenge of Everest was undertaken by these Canadians.

Mr. Speaker and members, members of this historic Canadian Mount Everest Expedition are in your gallery. I would like to take the liberty of introducing the six climbers individually to members of the Assembly. I'd ask the members of the Assembly if they would hold their response until I've completed my introduction, and ask the climbers to stand upon introduction and remain standing until I've completed the introductions.

First of all, the Everest team leader, Bill March, from Calgary; secondly, Lloyd (Kiwi) Gallagher, the deputy team leader, from Canmore; John Amatt, the business manager of the expedition, from Canmore; next, Laurie Skreslet, the first Canadian to the summit, from Calgary; next, Dwayne Congdon, the youngest member of the team, from Calgary; next, Peter Spear, who was the highly efficient organizer at the base camp, from Calgary. Mr. Speaker, these represent a team of many, many people who worked hard in making this such an important, such a significant and historic event for all Canadians. Let's welcome them to the Legislature. [applause]

MR. NOTLEY: Mr. Speaker, there is not every occasion when one finds total unanimity in the House, as we will probably find in a moment or two. But as Leader of the Opposition, on behalf of my opposition colleagues may I say that I would like to join the Premier in welcoming the Canadian Everest Expedition members to the Legislative Assembly this afternoon. The teamwork that was shown by the expedition and the many people who worked in

promoting this important event is something that makes us all very proud. Beyond that, Mr. Speaker, by their pursuit of excellence the climbers have shown a standard that I think stands as an inspiration to all Albertans.

On behalf of opposition members of the House, I too welcome the expedition members to the Assembly this afternoon. [applause]

MR. LOUGHEED: Mr. Speaker, nothing to do with anything other than that we had a good lunch and had some logistics problems, but there was one other climber, and I see he is now in the Speaker's gallery. He comes from Calgary. Alan Burgess, will you stand up and be welcomed.

head: PRESENTING PETITIONS

MR. STILES: Mr. Speaker, I beg leave to present the following petitions that have been received for private Bills:

1. the petition of the Alberta Wheat Pool for the Alberta Wheat Pool Amendment Act, 1983;
2. the petition of the Society of Management Accountants of Alberta for the Society of Management Accountants of Alberta Amendment Act, 1983;
3. the petition of Vernon C. Morrison, Edward J. Crowther, and William P. Davis for the Calgary Convention Centre Authority Amendment Act, 1983;
4. the petition of Mr. A. Schellenberg for the Menonite Mutual Relief Insurance Company Amendment Act, 1983;
5. the petition of Bruce Libin, Gertrude Cohos, and Morris Dancygar for the Calgary Jewish Centre Act;
6. the petition of Henry Penner for the Peace River Bible Institute Amendment Act, 1983;
7. the petition of Sister Phyllis Cusack and Sister Rolande Malo for the Sisters of Charity of Providence of McLennan Amendment Act, 1983;
8. the petition of Rudolph H. Dyck and John N. Iredale for the Paramount Life Insurance Company Amendment Act, 1983;
9. the petition of the president and honorary secretary for the Calgary Golf and Country Club Amendment Act, 1983;
10. the petition of the city of Edmonton for the Edmonton Convention Centre Authority Amendment Act, 1983;
11. the petition of the city of Edmonton for the Edmonton Convention and Tourism Authority Amendment Act, 1983.

**head: PRESENTING REPORTS BY
STANDING AND SELECT COMMITTEES**

MR. LEE: Mr. Speaker, I request leave to table the report of the Standing Committee on Privileges and Elections, Standing Orders and Printing, which met at 9 a.m. today to consider the allocation of office space to opposition members. Copies are being made available to all members.

head: **INTRODUCTION OF BILLS**

Bill 33

Freehold Mineral Rights Tax Act

MR. ZAOZIRNY: Mr. Speaker, I request leave to introduce Bill No. 33, the Freehold Mineral Rights Tax Act.

The purpose of this Bill is to revise the basis upon which freehold minerals are taxed from a property-type tax, based upon the assessed value of remaining recoverable reserves, to a production-type tax. This Bill will simplify administrative complexities and cumbersome appeal procedures and is made possible because of changes in provincial taxation authorities granted under the constitutional amendments.

[Leave granted; Bill 33 read a first time]

Bill 210

An Act to Amend the Election Act

DR. CARTER: Mr. Speaker, I request leave to introduce Bill No. 210, An Act to Amend the Election Act.

The Bill's purpose is to allow unconvicted inmates of remand centres and penal institutes to vote on polling day in provincial elections.

[Leave granted; Bill 210 read a first time]

head: **TABLING RETURNS AND REPORTS**

MR. ADAIR: Mr. Speaker, I beg leave to table the annual report of the Department of Tourism and Small Business for the year ended March 31, 1982, as required by statute.

MR. M. MOORE: Mr. Speaker, I beg leave to table a response to Motion for a Return No. 147.

MR. HYNDMAN: Mr. Speaker, I wish to table a response to question 122.

MR. BOGLE: Mr. Speaker, I wish to table with the Legislative Assembly the annual report of the Alberta Educational Communications Corporation for the fiscal year ended March 31, 1982.

MRS. OSTERMAN: Mr. Speaker, I wish to table the annual report of the Alberta Automobile Insurance Board for the year ended December 31, 1981.

head: **INTRODUCTION OF SPECIAL GUESTS**

MR. ZIP: Mr. Speaker, I have the privilege to introduce to you one of our city fathers from Calgary, who is with us in the visitors gallery: Bob Hawkesworth, alderman for Ward 3, which forms part of Calgary Mountain View constituency.

head: **ORAL QUESTION PERIOD**

Hospital User Fees

MR. NOTLEY: Mr. Speaker, I'd like to direct the first question to the hon. Minister of Hospitals and Medical

Care. Is it the minister's or the government's intention to table in this Assembly the telex sent to the minister yesterday by the federal Minister of National Health and Welfare, Monique Begin?

MR. RUSSELL: Mr. Speaker, a series of telexes is developing, and it would be my intention to table the complete exchange if I can get the concurrence of Madam Begin.

MR. NOTLEY: Mr. Speaker, a supplementary question to the minister. In light of reports attributed to the federal minister that she may have to withhold transfer payments if a new user-pay policy is adopted for Alberta hospitals, can the minister outline to the Assembly what legal advice was obtained by the government before announcing the policy, which threatens payments of some \$20 million a month from the federal government?

MR. SPEAKER: There is some question about whether that is a question allowed in the question period. Presumably, the relationship between the Crown and its solicitors is somewhat similar to that between a private client and a solicitor, in that there is solicitor/client privilege, and that kind of information is not ordinarily disclosed.

MR. NOTLEY: Mr. Speaker, perhaps I could rephrase the question and ask what evaluation the minister made of the legal position of the government of Alberta before announcing the policy.

MR. SPEAKER: I have difficulty with that supplementary. How can you possibly give an evaluation of the advice without disclosing the advice?

MR. NOTLEY: Mr. Speaker, in that case, I'll try the question again. Has the minister obtained any legal advice, outside the normal legal advice in-house?

MR. RUSSELL: No, Mr. Speaker. The advice we received, including the legal advice, was in-house. I want to make it clear that it's our opinion and our strongly held view that we are not breaking any agreement, we are not denying any citizen access to hospital services, and we are not tampering with the universality aspect of medicare. I'm fairly confident that when the federal minister has had time to digest the ...

MR. SPEAKER: With great respect, the question asked whether advice was sought outside intragovernment sources, and it would seem to me that the minister is going very substantially beyond the scope of that question.

MR. NOTLEY: Mr. Speaker, a further supplementary question. Can the minister outline to the Assembly whether the government has developed any contingency plans should the federal government insist that payments will not be forthcoming from the federal government? Are there any contingency plans in place, and do those contingency plans involve Alberta withdrawing from the federal/provincial medicare system?

AN HON. MEMBER: Hypothetical question.

MR. RUSSELL: It is a hypothetical question, Mr. Speaker.

MR. NOTLEY: Mr. Speaker, a supplementary question to the minister. What may happen is hypothetical; however, the direct question is: has the government developed any contingency plans in the event of options which the federal government may or may not pursue? Has any study been committed by the Department of Hospitals and Medical Care or any other avenue of the government of Alberta, with respect to developing an alternative strategy should Ottawa say, we won't cost-share this program?

MR. RUSSELL: Naturally we've identified the various options, Mr. Speaker. I think most members in the House could do that too.

MR. NOTLEY: Mr. Speaker, a supplementary question specifically to the minister. Is one of the options the government of Alberta has determined as a contingency plan the withdrawal from the federal/provincial arrangement on health care in this country?

MR. RUSSELL: At the present time, Mr. Speaker, we're certainly not considering withdrawing from the federal medicare plan. We've always been strong supporters of it.

MR. NOTLEY: Mr. Speaker, a supplementary question. The question I asked the minister was not "at the present time". It was whether or not any contingency plan developed by this government includes withdrawal from the federal/provincial arrangement?

MR. SPEAKER: That's a repetition of the previous question. I had the impression it was answered. If the hon. leader has a further supplementary before I recognize the hon. leader of the Independents, might that be the last supplementary on this topic.

MR. NOTLEY: Mr. Speaker, I put to the minister the direct question as to whether or not this government has at any time considered as an option — not what they will do now, not what they have as present policy, but whether a contingency plan has been developed and that includes withdrawal from the federal/provincial arrangement.

MR. SPEAKER: It seems that the hon. leader and I are not communicating, or perhaps I'm not communicating with him. It would seem to me that is the third time that identical question has been asked. I'm unable to see the difference.

MR. NOTLEY: Mr. Speaker, on a point of order. It may in fact have been asked three times. However, the answer the minister gave the first time — and I want to give him another opportunity to expand — related to the government's present policy.

The question was quite different. With great respect, sir, the question was whether or not a contingency plan had been developed that included withdrawal should the federal government not cost-share. The minister answered as to what the government plans to do right now, assuming they will cost-share. My question relates to whether any contingency plan includes withdrawal from the system should they not cost-share. I put it to the minister again.

MR. RUSSELL: Mr. Speaker, I don't know how much clearer I can be. I believe the event that the federal

government may consider withdrawing federal funding is hypothetical at the present time. I've said that our present position is to be a province which strongly supports medicare, and today we have no intention of withdrawing.

MR. R. SPEAKER: This morning, the federal minister said very clearly that amendments would be brought in to the hospital insurance Act to prevent any user fee. Could the minister indicate whether any meetings with the federal minister are his plans and, if so, when those could happen?

MR. RUSSELL: Mr. Speaker, the provincial ministers responsible for health have been waiting for nearly a year now to meet with the federal minister to discuss the proposed new Canada health Act. So far, the invitation hasn't come.

MR. MARTIN: A supplementary question. Could the minister outline why the income-related exemption levels of user fees are at \$3,000 for single people and \$4,000 for families, when the poverty level is \$18,243 for a family of four?

MR. RUSSELL: Mr. Speaker, in relaying his question, I think the hon. member confused taxable income with gross income. The second thing, in answer to the question, is that those are now the limits which are applicable to the Alberta health care insurance plan system. I have also indicated that those levels will be reviewed in the near future.

MR. ALEXANDER: A supplementary, Mr. Speaker.

MR. SPEAKER: Might this be the last supplementary on this topic.

MR. ALEXANDER: Mr. Speaker, in the minister's presentation the other evening, he mentioned "a very large class of exemptions". Could the minister expand upon what he means by a "large class"? How many people in the province of Alberta does he estimate will in fact be exempt?

MR. RUSSELL: Mr. Speaker, it's an estimate at best. But taking into account the categories of citizens who would be exempted from paying any kind of fee, either by way of the nature of their illness, repetitive visits, or because of income qualifications, we believe that at least one-third of the population will be exempt.

Hazardous Waste Disposal

MR. NOTLEY: Mr. Speaker, I would like to direct the second question to the hon. Minister of the Environment, if I may. It is a follow-up to questions I asked several weeks ago with respect to the PCB spill at the Kinetic site. Is the minister in a position to advise the Assembly why the department did not issue a news release after the second set of tests, which showed that their initial tests were faulty, were conducted? Why was no effort made by the department to correct the news release of January 19, 1983?

MR. BRADLEY: Mr. Speaker, the hon. leader's assumption that the department's testing was inaccurate is itself inaccurate. The testing done by the department was clear-

ly accurate. There was a recheck test done by Envirotech of a sample which they had done for Environment Canada, which was requested by the department. The other reason no news release was issued is because any of the levels detected were below the levels of concern identified under Environment Canada guidelines of 50 parts per million.

MR. NOTLEY: Mr. Speaker, a supplementary question. In light of the position of the World Health Organization, which sets a much lower standard, what consideration has the government taken to end the leakage off-site at the Kinetic site?

MR. BRADLEY: Mr. Speaker, on the basis of our comprehensive sampling, there is no indication there is the nature of the type of leakage the hon. member indicates, so there will be no action taken.

MR. NOTLEY: Mr. Speaker, a supplementary question. In the light of world health standards and U.S. environmental standards and a statement contained in a letter of February 18 from the deputy minister to the city of Edmonton that "no leakage is evident and no danger to the public exists", is the minister in a position to assure the Assembly that this government stands totally by that position and that no danger exists?

MR. BRADLEY: Mr. Speaker, that is exactly the position of the government of Alberta with regard to this matter.

MR. NOTLEY: Mr. Speaker, a supplementary question. Is the minister in a position to advise what standards other than the federal standards, which allow a much higher level than other standards in the world — what evidence the government is using to back the assertion that no danger to the public exists?

MR. BRADLEY: Mr. Speaker, the strictest standards that I am aware of at this point in time relate both to the Environmental Protection Agency in the United States and the state of California. I believe the state of California standards are considered to be the strictest there are in the United States of America. I refer the hon. member to those standards.

MR. NOTLEY: Mr. Speaker, a supplementary question. Can the minister advise what assurances the government can give Albertans that the taxpayers of this province will not have to shoulder any of the disposal costs of the two warehouses full of PCBs, given the present financial difficulties of the Kinetic firm described in previous question periods?

MR. BRADLEY: Mr. Speaker, I previously responded that I didn't believe it was my responsibility to become involved in the financial aspects of a company. I think the hon. leader's suggestions are highly hypothetical.

MR. NOTLEY: Mr. Speaker, a supplementary.

MR. SPEAKER: Might this be the last supplementary on this topic.

MR. NOTLEY: Is the minister saying to the Assembly that under no circumstances will there be any public costs associated ...

MR. M. MOORE: Order.

MR. NOTLEY: No, it's a direct question to the minister, and he can answer it himself, Mr. Transportation Minister — no costs will be associated to the public should additional financial difficulties be incurred by Kinetic?

MR. COOK: Mr. Speaker, a point of order.

MR. BRADLEY: Mr. Speaker, the hon. ...

MR. SPEAKER: There's a point of order by the hon. Member for Edmonton Glengarry.

MR. COOK: Mr. Speaker, on the point of order, that question was asked in previous question periods and is asked again. In substance, it's repeating the same question.

DR. BUCK: The situation has changed, Rollie.

MR. COOK: Perhaps the hon. members would like to refer to *Beauchesne*, Citation 357. They've been in the House a lot longer than we have, Mr. Speaker, but if they were to start using the rules of the House, the question period would go along a lot faster. [interjections]

MR. SPEAKER: In addition to which, it seemed to me the question was hypothetical.

MR. NOTLEY: Mr. Speaker, I wouldn't want a hypothetical question. Perhaps I can just rephrase it, in deference to my colleague from Edmonton Glengarry.

Will the minister assure the House that the department has developed no contingency plans whatsoever that would involve one nickel of public costs in the event of serious financial difficulties by this company, which is now storing PCBs south of Edmonton?

MR. BRADLEY: I answered that question. The allegation or the intonation of the hon. leader is hypothetical.

Natural Gas Pricing

MR. R. SPEAKER: Mr. Speaker, my question to the Premier is in light of remarks he made with regard to reviewing the current pricing policy for natural gas exports. I would like to ask the Premier whether consideration now is being given to foregoing the scheduled August price increase of 25 cents per thousand cubic feet in an effort to stimulate sales of our shut-in gas, relative to the U.S. market.

MR. LOUGHEED: Mr. Speaker, I will refer the question to the Minister of Energy and Natural Resources.

MR. ZAOZIRNY: Mr. Speaker, from the manner in which the question has been asked, I believe the hon. member is confusing export pricing of natural gas with domestic pricing pursuant to the energy agreement of September 1981. I simply say that with respect to the domestic pricing arrangement, we have an agreement in place. There is an understanding that in the weeks ahead my federal counterpart, Mr. Chretien, and I will be meeting to assess the energy agreement in light of the world situation. We will be governing ourselves in accordance with those events and in the spirit of the agreement.

MR. R. SPEAKER: Mr. Speaker, a supplementary question. At the present time the United States, Mr. Reagan, is intending to possibly decontrol and deregulate gas prices. In the government's deliberations, is the minister considering any approach such as that?

MR. ZAOZIRNY: Mr. Speaker, I presume the hon. member's question is with respect to our domestic situation. I say very simply and clearly that the position of this government has long been one of advocating market pricing, in terms of the sale of our depleting natural resources and having them treated on an equivalent basis with other commodities, recognizing that with respect to natural gas we have the importance of the petrochemical industry and other factors that must be taken into account in those pricing arrangements.

I simply go on to say that we do have an agreement in place, and it has specific provisions. I don't think it would be useful for me to speculate beyond that, with respect to the discussions that will be ensuing with Mr. Chretien.

MR. SPEAKER: The hon. Member for Edmonton Norwood, followed by the hon. Minister of Tourism and Small Business, who wishes to supplement some information previously sought in a question period.

Medical Costs

MR. MARTIN: Mr. Speaker, I'd like to direct this question to the Minister of Hospitals and Medical Care. Will the government move to make the use of seat belts compulsory, as recommended by the Alberta Hospital Utilization Committee, in the interest of saving lives and, more important to him, saving money?

MR. RUSSELL: Mr. Speaker, I think that question should be directed to my colleague the Minister of Transportation.

MR. M. MOORE: First of all, Mr. Speaker, through successive ministers the Department of Transportation has very strongly supported the voluntary use of seat belts in automobiles, and at the present time has under way effective programs encouraging their use. Included in that is some extensive work with respect to child restraint systems for automobiles. The question of whether or not people should be required by legislation to wear their seat belts is one that properly needs to be addressed by the Legislature. It does take legislation in that regard.

I have not involved myself in discussions with respect to my own personal views on the matter and do not intend to at this time. I do believe, though, that if any Member of the Legislative Assembly believes it's a matter that should be addressed by this House, it would be appropriate for them to take the opportunity that might exist to have it discussed here so that the government might be in some way guided by that discussion.

MR. NOTLEY: Mr. Speaker, a supplementary question to the hon. Premier. Would the government consider a free vote on the issue of seat belts, as did the government of Saskatchewan, and allow members to vote simply on the basis of representation from their constituents as opposed to the normal party lines in the Legislature?

MR. LOUGHEED: Mr. Speaker, it's certainly a subject that has been considered. But I would have to endorse the answer just given by the Minister of Transportation that

perhaps what might be useful is to have a debate, if members wish to have one, with regard to the issue of compulsory, as distinguished from voluntary, seat belts, and then at the conclusion of that, make an assessment as to whether or not the response should be on that basis.

MR. MARTIN: Mr. Speaker, a supplementary question to the Minister of Hospitals and Medical Care. Does the government see more utilization of paramedics and nursing personnel as a possible lowering of costs in the health delivery system?

MR. SPEAKER: Surely that's a matter of opinion.

MR. MARTIN: I'll rephrase it. Do they have any studies about the possibility of lowering costs?

MR. RUSSELL: Mr. Speaker, any studies or presentations made to us with respect to other services usually involve add-on costs rather than cost savings.

MR. MARTIN: A supplementary question. In view of the findings of the Hospital Utilization Committee that Alberta has the highest surgical rate in the country, what has the government done to assess the necessity for surgery at such rates? And does the government have an estimate of the cost of unnecessary surgery?

MR. RUSSELL: Mr. Speaker, that observation was passed to the College of Physicians and Surgeons, whom we asked to explain this high incidence of surgery in Alberta, particularly in some specific locations within the province. They were unable to answer it immediately and are developing an answer with the help of out-of-province consultants. I expect to receive the answer to that shortly.

MR. MARTIN: A supplementary.

MR. SPEAKER: Followed by a supplementary by the hon. Member for Edmonton Whitemud, then the hon. Member for Clover Bar.

MR. MARTIN: The report of the Hospital Utilization Committee made some recommendations to cut unnecessary use of the expensive technological procedures by physicians and surgeons. Has the government attempted to assess this, and are they moving ahead on that?

MR. RUSSELL: We would very much like to do that, Mr. Speaker. It's a matter which has received considerable attention. Unfortunately — or fortunately, depending whether you're looking at a medical or financial outlook — the developments in technology and bringing on newer and expensive equipment, examinations, and procedures far outstrip the savings the might be effected by the abuse of any of the existing procedures.

MR. ALEXANDER: Mr. Speaker, a supplementary question to the minister, pursuant to what I find to be the incredible allegation by the Member for Edmonton Norwood that the minister has in some way reflected a greater interest in saving money than lives.

MR. NOTLEY: Order, order.

MR. ALEXANDER: Mr. Minister, could you indicate to the House when, and indeed if, you ever reflected such an interest in saving money over lives?

MR. RUSSELL: Well, I don't think I ever did that, Mr. Speaker. When I was asked a question about the seat belts, I was puzzled. I was about to editorialize and say that if the members in the House would quit smoking, that would save a lot more use of hospital beds than the use of seat belts.

MR. MARTIN: Just on a point of privilege, to the hon. member from Edmonton wherever — Whitemud. [interjections] There was no reflection on the hon. minister in my questions, and I do not think he took reflection in that way.

DR. BUCK: Mr. Speaker, I would like to ask a supplementary question of the hon. Minister of Transportation. Can the minister indicate to the Assembly what discussions or studies the minister or his department have had in conjunction with the provinces that have compulsory seat-belt legislation, to indicate the mortality and injury rate experience in the provinces that do have seat belt legislation?

MR. M. MOORE: Mr. Speaker, there may be some confusion in the member's mind — and in terms of other members' thoughts as well — about the government's views with respect to wearing seat belts. Quite clearly, for a number of years we have very strongly supported the use of seat belts as a method of restraint, in terms of people riding and driving passenger cars and other motor vehicles. There is no question as to whether or not this government believes that seat belts save lives and prevent injuries. The question is whether or not . . .

DR. BUCK: You have enough jam to do it.

MR. M. MOORE: . . . the wearing of seat belts should be made compulsory by law. It doesn't require research with other provinces, in terms of determining whether or not seat belts do save lives and prevent injuries. Clearly they do.

DR. BUCK: A supplementary question, Mr. Speaker. Is the minister in a position to indicate to the Assembly if he is going to bring in legislation at this time — and on which I'm sure the Premier would allow all his members to have a free vote — to make it compulsory to wear seat belts while driving an automobile in this province?

MR. M. MOORE: Mr. Speaker, as I indicated earlier, and as the Premier indicated as well, we are in a new legislative session, with new members in the Legislature. In my view, it would be very useful for the House to be in a position to debate the matter at some length. I suggest that there are two days in the week, Tuesday and Thursday, when we could well do that . . .

DR. BUCK: You bring in a Bill; we'll debate it.

MR. M. MOORE: . . . and the government might then be guided by that debate. So I look forward to the hon. member taking that approach, Mr. Speaker.

DR. BUCK: No guts, Marvin.

MR. NOTLEY: Mr. Speaker, a supplementary question to the minister.

MR. SPEAKER: Might this be the last supplementary on this point.

MR. NOTLEY: Keeping in mind the limitations of private members' day, particularly the one-hour time set aside, is the government not prepared at this stage to commit to Albertans that it will put on a resolution on this matter, as government orders, so that all members may participate fully in a debate?

MR. M. MOORE: Mr. Speaker, the last time I looked, there were only some half dozen or so Motions Other Than Government Motions on the Order Paper. One, which was debated during the first week of the Assembly, is now number three on the Order Paper. All I can say is that I'm sure there are some hon. members in the government caucus who would be more than pleased to put the matter on the agenda — and I look forward to that occurring — if the opposition members aren't interested. [interjections]

MR. SPEAKER: Order please.

DR. BUCK: A supplementary question to the minister, Mr. Speaker.

MR. SPEAKER: Order please. I realize this is an interesting topic. We've had a lot of supplementaries, and if there's time, we can come back to it.

AOC Loan

MR. ADAIR: Mr. Speaker, I would like to respond further to a question raised last Friday by the hon. Member for Edmonton Norwood. The question related to:

In February of this year, Stelco of Toronto bought into Ram Steel and salvaged the company. Can the minister indicate if Mr. Foster or any other representative of the company informed the government of the impending Stelco deal last October?

Mr. Speaker, I am advised by the Alberta Opportunity Company that the application by Ram Steel of Red Deer involved a number of meetings, at which a requirement for additional equity was suggested by AOC. AOC was informed in late October of 1982 — that's AOC, not the government — that an equity arrangement had been made with Stelco incorporated, and the negotiations that followed led to approval of the application on November 29, 1982. I personally was not aware of Stelco's involvement until mid-November of 1982.

Mr. Speaker, I would like to mention that the Ram Steel application was in fact in line with our stated policies relative to decentralization, job creation, and security. The present shut-down of Ram Steel is a result of a corporate decision to reduce inventory levels, and once the reductions have taken place and the demand for steel picks up, it is our information that the plant will reopen.

Also, my meeting with Ram officials and Mr. Foster, the company's solicitor, was to indicate that any negotiations or suggestions for change in their application must be with the management of the Alberta Opportunity Company and not with my office.

MR. MARTIN: A supplementary question. As I understand the minister, there was some advice on it at that moment. Is it clear that AOC knew there was a chance that Stelco would be buying into Ram Steel?

MR. ADAIR: Mr. Speaker, if I may refer to the first part, where I said that AOC was informed in late October of 1982 that an equity arrangement had been made with Stelco incorporated.

MR. MARTIN: A supplementary question. In other words, we have the position of AOC actually advancing money to Stelco of Canada?

MR. ADAIR: Mr. Speaker, the loan was made to Ram Steel Corporation Ltd. of Red Deer.

MR. MARTIN: A supplementary question. With the knowledge that this would be bought into by Stelco in October. Correct?

MR. ADAIR: Mr. Speaker, my understanding is that they were in fact aware that they had made an equity position arrangement with Stelco, which was one of the 38 partners involved in the company.

MR. NOTLEY: Mr. Speaker, a supplementary question.

MR. SPEAKER: The hon. Member for Red Deer has been trying to get the floor, followed by the hon. Leader of the Official Opposition.

MR. McPHERSON: Thank you, Mr. Speaker. Could the minister advise the House what rate of interest is being charged on the AOC loan? If it becomes possible that Stelco purchases Ram Steel, can he advise us if there is any guarantee to the AOC on that loan?

MR. ADAIR: Mr. Speaker, the interest rate on the loan to Ram Steel is 16.5 per cent. I believe the hon. Member for Red Deer's question was a buy-out. May I have you repeat the question, please?

MR. McPHERSON: If Stelco should purchase Ram Steel, will there be a take-out or refinancing position by the new owners?

MR. ADAIR: The only information I as the minister could add, on behalf of the Alberta Opportunity Company, is that the term of the loan was five years amortized over 15 years. Any other loan conditions are really commercially confidential to the client and to the company. I suggest that they may be obtained from the company.

MR. SPEAKER: Final supplementary on this topic.

MR. NOTLEY: Mr. Speaker, a supplementary question. Is the minister in a position to advise the House what additional equipment, programs, or other expansion was implemented by Ram Steel with this \$8 million loaned by the government of Alberta? And since this \$8 million is above the \$1 million limit set by AOC and must be taken to Executive Council, what aspect of the terms and conditions did Executive Council consider when they approved the \$8 million?

MR. ADAIR: Mr. Speaker, I might just repeat that the terms and conditions of the loan, because it was over \$1 million, did come to the Executive Council, the cabinet. It was approved at that level, on the recommendation of the Alberta Opportunity Company. But as I said earlier, the terms of those loan conditions are commercially con-

fidential to the company. If the hon. member wishes to ask that, he certainly has that right to ask the company, in this case Ram Steel of Red Deer.

MR. R. SPEAKER: Mr. Speaker, I have a supplementary to the hon. minister.

MR. SPEAKER: I was going to suggest that we might come back to the topic.

AN HON. MEMBER: Like next year.

MR. SPEAKER: Order please. There are several hon. members who are waiting to ask their first question.

Student Employment

DR. BUCK: Mr. Speaker, my question is to the Minister of Manpower. Can the minister indicate if the government or the minister is considering the expansion of STEP, in light of the fact that it'll be much more difficult this summer for students in secondary education to obtain jobs than it was last year?

MR. ISLEY: Mr. Speaker, it's under active consideration and will be announced in due course.

DR. BUCK: Mr. Speaker, I'd like to ask a supplementary question. In light of the fact that the government wage rate is at a maximum of \$5.50 per hour, is the minister in a position to indicate if that maximum will be raised so that students who are working under the program for the government will have a greater opportunity to pay part of their expenses for the coming year?

MR. ISLEY: Mr. Speaker, that information will be available when the announcement is made.

DR. BUCK: Mr. Speaker, a supplementary question for a point of clarification. Can the minister indicate to the Assembly if the announcement is impending, or is there any deadline for when the minister will be making the announcement?

MR. ISLEY: Mr. Speaker, the announcement is pending.

DR. BUCK: Can the minister give us an indication if it's going to be in the next week, one month, or six months? Can the minister give us some indication? [interjection] Well, it's a serious problem, Mr. Minister. You can laugh, with your big salary. But students want to know.

MR. ISLEY: Mr. Speaker, I think the hon. member is well aware that the program normally takes place beginning May 1 and that the announcement will be made in time for students to lay their plans accordingly.

Education — Exceptional Children

MR. ALGER: Mr. Speaker, I direct this question to the Minister of Education, with regard to the Association for Bright Children. Is the minister of the opinion that extra-curricular activity other than what is already available is truly necessary?

MR. SPEAKER: I have a little difficulty with that question. Possibly there might be some way that one might consider it to be in order.

MR. KING: I have a little difficulty with it myself, Mr. Speaker, but not out of concern over whether it's in order or not.

The position of the department — and I think of most school jurisdictions — is that what happens in the curriculum is of principal importance but that there are activities outside the curriculum, the extracurricular activities, that can be very helpful and useful in reinforcing and building on what happens in the curriculum. So in elementary and junior high schools, as well as in high schools, you have math competitions, math clubs, or debating societies. In our view, those provide a legitimate and important additional opportunity for children whose interests lie in the direction of the extracurricular activity.

Mr. Speaker, the answer is yes, we believe that extracurricular activity is an important part of education.

MR. ALGER: A supplementary to the minister. Where is the determining dividing line between who is gifted and who, shall we say, is ordinary?

MR. KING: The hon. member is gifted; I am ordinary. [laughter] Seriously, Mr. Speaker, the hon. member is raising in the House a very important question, one that engages the attention of a lot of people in the province right now, particularly the parents of students.

We are concerned that the children anyone might identify as talented or gifted should be challenged as much as possible. They are a terrific heritage for the province, and we want them to be developed in all their capacities as much as they can be. Because of that concern, we have established a task force composed of representative citizens of the province. We are inviting them to study the question the hon. member has raised, and other questions, and make recommendations to the Department of Education about what programming might be developed, what additional assistance might be provided, in order that we would identify such students and then really challenge them to the maximum. The task force was established precisely because at the moment we are unable to answer the question the hon. member has raised.

MR. GOGO: Mr. Speaker, a supplementary question to the hon. Minister of Education. It seems that common complaints are there's not sufficient time now for these activities in schools. Is the minister's department or the government considering amendments to the School Act, whereby the length of the school year would be extended to an appropriate term, such as 200 school days a year?

MR. KING: We couldn't say that the department is considering that at the moment. But as has been indicated — for example, in last year's throne speech — that we do have under consideration a review of the School Act, and decisions will shortly be made on that question. As the general review goes ahead, a whole range of questions will be considered, likely including the question just raised by the hon. Member for Lethbridge West.

MR. ALGER: A supplementary question.

MR. SPEAKER: Might this be the final supplementary.

MR. ALGER: Mr. Minister, if we separate these gifted children from all their associates, will we not be harming them to some degree by isolating them from what we might call a normal environment?

MR. KING: Yes, Mr. Speaker, we might be. That is why there is a very considerable debate going on among those interested in the question. Some argue that gifted or talented children should be separated and provided with special programming. There are some advantages to that; there are also the disadvantages that the hon. member alluded to. So others equally interested and equally concerned have argued that whatever is done should be done on an integrated basis, that the gifted and talented children should be left in the regular classroom with their friends, their colleagues, and that special programming should be provided to them there.

MR. ALGER: I'd like that.

MR. MARTIN: A supplementary question to the hon. minister. It flows from the statement you made to the chamber of commerce. At this point, is it your recommendation to cabinet that we do have a longer school year and a longer school day?

MR. KING: It is my recommendation that we consider any and every option that will increase the productivity and the useful effect of what happens to children in the classroom: If the hon. member is making a submission in that regard and associating himself with the hon. Member for Lethbridge West, I'll take it under consideration.

Lodgepole Inquiry

MR. R. MOORE: Mr. Speaker, I direct this question to the hon. Minister of Energy and Natural Resources. Will the terms of reference of the Lodgepole inquiry include the long-term effects on the farm communities involved, especially the damage to fences and farm machinery that usually doesn't show up until 12 to 18 months down the road?

MR. ZAOZIRNY: Mr. Speaker, the hon. member raises an important question with respect to the terms of reference of this inquiry. It is my understanding that at the first pre-inquiry hearing on February 8, there was some preliminary discussion of the terms of reference. There will be a further pre-inquiry meeting in mid-April, I'm advised. At that time, the full panel of six members will be in place. It is expected that at that second pre-inquiry meeting, there will be a full discussion of the terms of reference. I only add that the prime function of the tribunal will be fact-finding in nature.

DR. BUCK: My question is to the Associate Minister of Public Lands and Wildlife. What studies has the department done as to the short-term effects on wildlife in the area of the blowout of the wild gas well in the Drayton Valley area?

MR. SPARROW: Mr. Speaker, while the well was in operation, aerial photography surveys were taken. After the well was shut down, ground surveys were taken. We're working with presenting those facts to the hearing.

Oil Pricing

MR. OMAN: Mr. Speaker, my question is to the hon. Premier. Great Britain announced today that it was lowering the price of its premium crude by 50 cents a barrel and the rest of its crude by 75 cents a barrel, I believe.

Has the hon. Premier had a chance to assess this and its impact on Alberta?

MR. LOUGHEED: Mr. Speaker, it's rather early to make a full assessment. But as either myself, the Minister of Energy and Natural Resources, or the Provincial Treasurer have developed relative to the budget, I believe it's very important to Alberta that there be stability in the world oil market, and commodities are very much a factor of perception as to the direction in which they're going to go. So we would assess this as very positive news for Alberta, in the sense that the accord some weeks ago by the OPEC nations seems to be strengthened by this decision because the adjustments made by the United Kingdom are within the parameters of the spokesmen for OPEC, which increases the stability of that accord, improves the prospects that there will not be a sharp decline in world oil prices, and should be positive for the stock market and hence positive for the industry and the government of Alberta, both within our natural gas export market and here in Canada.

MR. OMAN: A supplementary, Mr. Speaker. I believe Nigeria had threatened that it would lower or match Great Britain's price. Is this lowering, then, not likely to get a counterreaction from Nigeria?

MR. SPEAKER: With great respect to the hon. member, he is clearly asking for an expression of opinion, and I'm sure there may be many opinions on that.

MR. OMAN: Mr. Speaker, let me phrase it another way. At this point, is it known that the country of Nigeria is following suit?

MR. LOUGHEED: Mr. Speaker, that is an unknown. But the best evaluation we have is that the announcement today from the United Kingdom means that they have dropped their price, on a United States basis, from \$30.50 per barrel for its prime crude to an even \$30, which is the same price as Nigeria has been selling in the market. So to that extent, our quick reaction would be again that it will not trigger a reaction from Nigeria, but we'll have to see how these important events that affect this Legislature evolve.

MR. SPEAKER: I regret that there's one hon. member we haven't been able to reach. He might like to be recognized early in the next question period.

ORDERS OF THE DAY

head: GOVERNMENT BILLS AND ORDERS (Third Reading)

Bill 28 Appropriation (Interim Supply) Act, 1983

MR. HYNDMAN: Mr. Speaker, I move third reading of Bill No. 28, the Appropriation (Interim Supply) Act, 1983.

MR. NOTLEY: Before we proceed with the vote on third reading of Bill 28, I'd like to make a few comments. Mr. Speaker, we are dealing with a very important Bill that deals with interim supply of some \$3.3 billion. During the

course of committee stage of Bill No. 28, my colleague and I, as well as the hon. Member for Little Bow, raised concerns with respect to one of the principles contained in Bill 28. I suppose if one is dealing with an appropriation Bill, one has to look at the appropriations set out. The appropriations we took objection to in Bill 28 were those dealing with hospitals and medical care, as they related to the planning and setting in motion of a system of hospital user fees for this province.

Mr. Speaker, before my colleague and I could vote for Bill 28, we would have to have a better explanation than we've received to date from the government as to why public funds, which we are now being asked to authorize, were apparently being used to develop a policy which, in our judgment, is reckless and irresponsible and which challenges the very basis of our hospital and medical care arrangements with the government of Canada. Some could argue that we don't know what will happen, that Madam Begin has given public utterances, both inside and outside the House of Commons, to the extent that she is going to review carefully the concept of user fees. But one option it would appear the federal government is now considering is discontinuing the funding under the cost-shared arrangements of this important program. Mr. Speaker, before this Assembly authorizes an appropriation Act which gives funding to the Department of Hospitals and Medical Care on an item as important as departmental support service, and that support service presumably is in charge of giving the minister — and through the minister the cabinet, and through the cabinet the government caucus, and through the government caucus, proposals to this Legislature — a suggestion which threatens the very basis of the agreements we have with the federal government on hospitalization and medicare, and until I have some satisfactory responses from the government, I for one am not prepared to support interim supply for this government.

Today during the question period, my colleague and I, as well as the hon. members for Little Bow and Clover Bar, raised options that the government should be considering as opposed to bringing in a system of user fees. We all know that user fees at the very least are going to create a good deal of controversy right across the country, and there is at least the threat — we don't know that it will be followed through by the federal government — that federal funds will be discontinued to this province. When we already have a projected deficit of some \$850 million, we cannot afford to be frivolous with what might be as much as another \$250 million.

So, Mr. Speaker, I think it's important that members of the Assembly take the time this afternoon to express concerns, if they have them, to put on the record where they stand on this issue. We have to be accountable to our constituents. As I said yesterday in the House, there have been many battles that this government has been able to wage with the government of Canada, rallied by the support of the vast majority of Albertans. But I doubt that there are very many Albertans who would rally behind this government on this particular issue. If we are going to pursue the route of bringing in user fees in Alberta hospitals, I suspect we're going to find that there will be very, very few people in the governing party, outside the caucus, who will support that kind of retrogressive move.

Mr. Speaker, we have to take a look at whether there were other alternatives. As I said before, the members for Little Bow, Edmonton Norwood, and Clover Bar raised some of those options today. One of them would be the

implementation of compulsory seat-belt legislation. No-body likes compulsion. The fact of the matter is, as the Minister of Transportation had to admit as he stood in his place, that the department now has evidence that shows the mortality rate is cut by the use of seat belts, that the serious injury rate is cut, and that the cost of health care is cut.

If this government is going to try to make the case for user fees across the province, then in my judgment — and, I think, in the judgment of most reasonable people — they must say, we have explored every option within our jurisdiction to reduce costs. If an option as obvious as seat-belt legislation is not even going to be considered in the form of a government motion — they're asking the opposition members to introduce it. I certainly say that if any government member has the courage to introduce a resolution of this kind, I as Leader of the Official Opposition will designate that motion one Thursday afternoon. Even if it comes from a government member, I'd be glad to make that commitment in the House today. But the fact of the matter is that we should have a motion under government orders, so there could be some kind of resolution of this issue.

Mr. Speaker, I'm not suggesting that it may be prudent — we're all politicians. Perhaps the government may not want to take a stand as a government. Then let it be up to the individual members and their own consciences and the relationship they have with their constituents. That's how the province of Saskatchewan moved in compulsory seat-belt legislation; both parties in the House at that time split down the middle. So be it. We can make important legislative changes on the basis of free votes. Let's not discard that idea. If this government is not prepared to introduce it as a government proposal, at least let it go to the members of the Legislature so they can make that choice.

Before we start hauling in proposals that are going to limit the access — and the minister can say all he likes about this user fee not limiting access to the medicare and health systems of the province. That is not the view of most Albertans. That's not the kind of response we hear from people who have phoned us since the announcement was made on Monday night. That's not the representation we're getting from professionals in the field. The kind of representation that my colleague and I are receiving is that user fees will turn back the clock as far as accessibility of health care goes in this province.

Mr. Speaker, there are other options. I look at the minister's own document, *Hospital Utilization: A Report to the Minister of Hospitals and Medical Care, Province of Alberta, March 1981*. As I look over the people who prepared this document for the government, they're not a group of wild-eyed, independent free-enterprisers or wild-eyed socialists. My heavens, it reads like a who's who of respectable Conservative society. They make a number of recommendations, but the government hasn't moved on those. Page 29:

1. That the Alberta College of Physicians and Surgeons, in close liaison with hospitals across the province, evaluate the significance of the above average surgical utilization rates for the province of Alberta and the regional variations in these rates.
2. The results of this evaluation with appropriate recommendations be distributed to all members of the college and all hospital boards within the province.

And then on page 36 of the report, Mr. Speaker:

The present fee-for-service reimbursement system be modified to reduce any incentive for physicians to utilize technology unnecessarily. The fees committee of the Alberta Medical Association become more broadly representative, and suggest rates of payment for technological services in the context of other professional fees and the relative investment of time required by the clinician.

On pages 40, 42, and 43 it goes on to talk about seat-belt legislation; pages 57 and 62, to talk about alternatives to institutionalization.

The point I make in referring to this document is that there are a number of major proposals contained in the document which this government has not implemented. It isn't good enough to sort of sit on your collective fanny, if I can put it that way, on an important document commissioned by the government, do nothing about its recommendations, and then come in as the minister did the other night and say: oh, woe is us; hospital costs are out of control; we're going to have to bring in user fees in order to curb over-utilization. Mr. Speaker, the fact of the matter is that in the failure of this government to introduce changes recommended by a committee requested to undertake an evaluation by the government — then they say they have no option to but bring in user fees. I say that Albertans are not going to accept that assertion as credible at all.

Out in the province in this week away from the Assembly, I think members might well consider extensive discussion with their constituents to determine just where the people in the different ridings stand on this matter. I can tell you, Mr. Speaker, from the representation I've had from people in Spirit River-Fairview, that I have no doubt where my constituents stand on this matter. From the phone calls we've been getting in our office, I have no doubt where the vast majority of Albertans stand on this matter. Before I'd vote for \$3.5 billion interim supply, some of which is to go for the planning process which has disregarded documents such as this and borrowed thinking from the 19th century to replace it, I have to have a better explanation than I've received from any member of the government to date.

Yesterday in question period the hon. Minister of Hospitals and Medical Care stood up in a very firm way to say he was surprised and shocked that nobody in the opposition stood up after him. Well, Mr. Speaker, it's a very tiny opposition, and it's very difficult for everyone to be here. But let me tell you: we're taking the opportunity now under interim supply, as we should, to make it clear where we stand on this matter and to welcome debate from the government members so their constituents know where they stand on this matter.

Let me tell you that I have no doubt the federal government will take a very firm stand on this issue. Mr. Speaker, as we get into the rough waters ahead, I would be very surprised if at least the middle-of-the-road Tory leadership candidates side with this government on user fees. Somehow I think that the Clarks, the Mulroneys, and the others will be saying: sorry, that's not our department; we can't take a stand. I rather doubt that they're going to side with this government on its effort to turn back the clock. Oh, we may have the member from south of here — Mr. Pocklington may side with the government of Alberta. But it's going to be pretty slim pickings on this issue among the serious contenders for the leadership of a national party.

Mr. Speaker, I think we have to consider just what kind of thing we're getting ourselves into because, on this

issue, I doubt that the Alberta government will have allies in its own party or in other provinces. What we are doing is asking the people of Alberta to be drawn into a corner where we have to take on the mainstream of Canadian society. For what cause? To step forward and improve things? No, to turn back the clock.

Mr. Speaker, I realize that interim supply is always a difficult matter, because you have salaries to pay and obligations to honor. For that reason, it is my intention to move that the resolution that third reading take place be amended by deleting all the words after "that" and substituting therefor:

this House declines to give third reading to Bill 28, Appropriation (Interim Supply) Act, 1983, until the Government announces its discontinuance of its policy of establishing and imposing hospital "user's fees".

I have copies of the proposed amendment for all hon. members and the Speaker and the Clerk of the House.

MR. SPEAKER: I, of course, have had no notice of the intended amendment or any real opportunity to consider whether it's in order. Possibly the hon. Leader of the Opposition might assist me in that regard. My concern is whether the amendment isn't simply a denial of the motion. The motion is that the Bill be read a third time now. My understanding is that the allowable motions on third reading would ordinarily include the one known as the motion for the six-month hoist. Now, it may well be that this is a variant of that, since it specifies another possible time limit. Possibly there are some members in the House who would like to express their views on this point.

MR. NOTLEY: Mr. Speaker, since you have raised some concern, I might just speak briefly on a point of order, and then other members may in fact wish to enter the discussion of the point of order. This is an amendment to the motion setting out a condition. As I review the question of an amendment on third reading, I refer you to page 543 of *Erskine May*, 19th edition:

The amendments that may be moved to the third reading of a bill follow the same pattern as those that may be moved on second reading ... Debate on third reading, however, is more restricted than at the earlier stage, being limited to the contents of the bill; and reasoned amendments which raise matters not included in the provisions of the bill are not permissible.

Mr. Speaker, going on to *Beauchesne*, page 226 of the 5th edition:

It is also competent for a Member, who desires to place on record any special reasons for not agreeing to the second reading of a bill, to move what is known as a "reasoned amendment". This amendment leaves out all the words in the main question after the word "That" to add other words. A reasoned amendment is in the form of a motion and may fall into one of several categories:

- (1) It must be declaratory of some principle adverse to, or differing from, the principles, policy or provisions of the bill.

I think it's pretty obvious that we're taking issue with one aspect of the Bill: the administration of departmental services, which has brought in user fees.

- (b) It may not approve the principle of a bill ...

I think it's pretty obvious that this amendment does not do that.

... at the same time enunciate a declaration of policy ...

- (c) It may oppose the principle rather than the subject-matter.

Mr. Speaker, on page 499 of the 19th edition of *Erskine May*, the point of a motion is to place "on record any special reasons for not agreeing" to the third reading of a Bill. The amendment is declaratory of a principle adverse to the principle and announced policy of user fees, implicitly provided for in the Bill. So I would argue that the amendment we have before the House today meets those conditions. Whether or not the House wishes to support it, of course, is up to the House, but I would argue that it is in order.

MR. SPEAKER: Are there any other points of view?

It would seem to me that although the wording may not be identical with what might be used for a "reasoned amendment", it is in substance a "reasoned amendment", giving a reason for not reading the Bill a third time now, namely the absence of — if I may combine two negatives — a discontinuance of a certain policy. It would be my view, without creating a precedent — and of course no two amendments would be identical — that any doubt there might be as to whether the amendment is in order should be resolved in favor of deeming it to be in order. Therefore I would recognize any member who now wishes to debate the amendment.

MR. NOTLEY: Having moved the amendment and the amendment now being ruled in order, Mr. Speaker, I wonder if I could offer a few comments on the amendment. As I understand the rules, a person may speak on both the Bill and the amendment at the same time. So with your permission, I would like to continue and just offer a few comments now specifically to the amendment.

Mr. Speaker, I think the issue we have to address in the amendment specifically is whether or not this Legislature approves of hospital user fees. I think that's a very simple, straightforward position. Do we approve of hospital fees or not? Frankly, I have no way of knowing what the position of the government will be on the issue of user fees. We don't know whether it will be bringing in legislation. We've been given no indication that legislation will be introduced. That being the case, if the Assembly is to consider the matter properly, it has to consider the matter, as I view it — because it's now a relevant public issue. We have concern expressed from one end of the province to the other. We have Albertans wanting to know where we as members stand, and properly so, because we represent the people. Therefore this is an opportunity. There may be other opportunities; I don't know. It's up to the Government House Leader whether or not there will be substantive amendments brought in at some point in the form of legislation. But this is the only opportunity I know of at this stage to relevantly discuss what is probably one of the most important social issues that we've seen in this province for a long time.

Mr. Speaker, I want to tell you that my colleague and I are especially determined that this issue be properly ventilated. That's not to say we aren't determined about a lot of issues, as you know, but especially about this issue. Because one of the areas I think we in the west can take a good deal of pride in is being ahead of our time in the area of hospital and medical care. It was the old farmers' government in this province, more than half a century ago, that brought in the first hospitalization scheme. It

was the government of Saskatchewan in 1962 that pioneered the first medical care scheme. It was one of the great westerners of Canadian history, Mr. Justice Hall, who came down with the report that made it possible to implement a national medical care plan. In 1966 that plan had certain underlying conditions: universality, accessibility, all people are to be treated alike.

User fees, particularly selective user fees — one hospital may bring in \$20, another \$12.50, another \$18 — completely destroy the concept that people are going to be treated equally. Some hospitals may not have to bring them in at all. You cannot have the principles contained in the legislation that was adopted by the House of Commons in 1966 or in 1956, and allow this kind of helter-skelter approach to payments by users of the health delivery system in Alberta. So I want members to take the time to state where they stand on this issue, and I want to make it clear because I know deep down that we're probably going to enter some real confrontation with Ottawa.

Mr. Speaker, I don't mind telling the government that on the issue of rollback in oil prices, my colleague and I will quarrel with some of our federal colleagues, and we'll be with the government on that issue. But let me make it clear that if this government wants to get into confrontation with the rest of Canada over this issue, they certainly won't have our support, nor will they have the support of many Albertans. There will be a chorus of opposition from one end of the province to the other to say to this government: if you've got to save money, there are other ways to do it; don't try to turn the clock back; don't try to repeal the 20th century.

Mr. Speaker, as members of this House we all realize we have financial obligations. But a tax on the sick, an attack on those people least able to defend themselves — imagine bringing in fees in emergency wards. What kind of barrier is that going to represent? In talking to people in the field, they say it is going to represent a barrier. That kind of approach is just wrong. It's wrong in principle; it's wrong in practice. It's going to be an administrative nightmare. And if this government wants to pursue it, then let them know that there are going to be at least some members in this Legislature, and the vast majority of Albertans, who will be fighting them every inch of the way.

DR. BUCK: Mr. Speaker, I'd like to make a comment or two on the amendment. First of all, I would like to say that I am appalled at the lack of political integrity this government has. We had an opportunity on November 2 to say to the people of Alberta: will you vote for us, because we are going to bring in user fees. Why did the government not have the jam to say this is what we are going to do? It seems to be quite a coincidence that we raised medicare fees 47 per cent; now we're going to user fees.

Mr. Speaker, I stand in my place and say that I feel the people of this province should contribute a portion to their medical insurance. I support that concept. But people do not admit themselves to hospitals; doctors admit patients to hospitals. You don't have a choice. You go to the hospital because you have to have surgery, or you are there for a medical reason.

Before we embark upon this, I think we have to have a look at the reordering of financial priorities by this government. The people of this province could accept, and accept readily, because they are rugged individualists — they can understand that if there isn't sufficient

money, then taxes. Really this is what it is, a tax. But when it's a matter of trying to decide which programs should be eliminated and which should be retained, is it better to spend \$60 million on renovations to the Legislature Grounds, is it better to spend \$200 million on Kananaskis? Or is it better to institute user fees?

I think the people of this province are starting to ask themselves and this government: what are your priorities; where is your social conscience? My right wing friend, the hon. Member for Edmonton Whitemud is smiling. But, Mr. Speaker, I know that this is in response to the right wing membership of the Tory convention. This is what it is. It's a platitude to those extreme right wingers who are starting to guide the destiny and direction of this party. It's sop for them to say, look, we are trying to cut hospital deficit down; we will make the people who can't pay, pay. I think the timing is horrendous. We have 130,000-odd unemployed in this province. How are they going to pay? They don't ask to be admitted to hospitals. They don't have jobs. They are on social assistance. Some are on unemployment insurance. Some of them can't pay their medical premiums now, and they are going to be asked to pay user fees.

The hon. assistant deputy House leader is shaking his head.

MR. HORSMAN: Read the policy.

DR. BUCK: Okay, Mr. Speaker, let's talk about the policy. The people who always have the most difficulty are the people in that gray area who are not on social assistance but are struggling, trying to make ends meet and pay their own way, hon. Member for Edmonton Whitemud. Just in case the hon. member doesn't know it, there are people like that in this province. I realize that the member has probably never met too many of them at the Mayfair; you don't meet those kinds of people at the Mayfair.

Mr. Speaker, it is a question of the inappropriateness of the timing and of this government going to the electorate with promises. But that was not their platform, not one of their planks — number one, we're going to raise your medicare fees 47 per cent; number two, we're going to institute user fees. At this time, I would like the government members to take it back and do a reread. But after having seen the action of government members and their open-mindedness this morning in another committee, I think that's like talking to that wall.

Mr. Speaker, at this time I will be supporting the amendment.

MRS. FYFE: Mr. Speaker, there are a few comments that should be made following the previous speaker. I think it's very erroneous and misleading to say that this new policy will penalize those who cannot afford to pay, that they will be the ones forced to pay. In this House this afternoon the minister said that approximately one-third of Albertans would be exempt from the new policy. This obviously includes those on lower incomes, those on social assistance, those with chronic problems, those having difficulty making existing payments of Alberta health care premiums.

There seems to be a great misunderstanding of the responsibilities in the areas of hospital and medical care. We probably haven't come up with a word that clearly defines medical care from hospital services, but the two are very distinct. Health care insurance is one aspect that provides for medical services, which is doctor fees, op-

tometrists' fees, chiropractic fees, physiotherapy benefits, and other fees that are covered under that insurance plan. Albertans pay approximately one-third of the cost of Alberta health care through their premiums, but this is only about one-tenth of the entire budget of Hospitals and Medical Care.

This year the Hospitals and Medical Care budget will top \$2 billion — \$2.2 billion, to be more precise. This is 23 per cent of the entire cost of the provincial expenditure in the province of Alberta, 23 per cent and escalating. This budget has gone up 17 per cent from last year, and yet the population of Alberta grew by 4.5 per cent. What does the government do to try to curb the growth of programs that we have? Of course they are important programs. Everyone in this room needs hospital and health care services at some point or other. But it's important to keep in mind that we have this horrendous problem of increasing costs. It's also important to keep in mind and distinct in our understanding, the difference between health care insurance and hospital care, or chronic coverage, on the other side. Hospital and chronic care coverage includes the budgets for active treatment hospitals, auxiliary hospitals, and nursing home hospitals. That aspect of the budget this year will be \$1.4 billion, an increase of \$.25 billion over last year.

The new policy will hopefully accomplish a number of things. Firstly, Mr. Speaker, it will enhance the autonomy of hospital boards. This is a question that has troubled me for quite some time. Hospital boards have not had a great deal of fiscal autonomy or authority since they lost their requisitioning powers. Without having requisitioning powers or some authority to be able to be responsible for those fiscal decisions, how do those boards retain the level of autonomy that municipal councils, school boards, or hospital boards had in the past?

Everyone recognizes that new technology costs money, that the increased salaries in hospitals, which should catch up — I don't think we disagree that hospital workers are extremely important. But the fact is that this impacts on each individual hospital budget. We are in a financial crisis in hospitals. Who can stop that? Obviously the people of our province have to be concerned about it. We've had a lot of talk today about seat belts or restraints in automobiles or vehicles. That's only one small aspect. There are many aspects that each of us as individuals, in our life style, in the way that we look after our families — many responsibilities that each of us can take to be more concerned about what hospital costs will mean to each of us in the long term. If there's no responsibility to pay for whatever service, whether it's health services, hospital services, social services, or education services, then there is usually no concern on the part of the user to say in the long term, how will this impact us on the whole?

In some of these socialist or communist countries in the eastern bloc, there are signs in the factories that say, he who does not steal denies his family. I hope we never get to that point where we totally negate any responsibility of government for the services that it provides. Because the government services that we receive through hospital services or any other area are our services and our dollars. We have to be concerned about the increases.

Nobody wants to impose new taxes. Nobody wants to impose new fees. These aren't easy times. This isn't an easy time to do it, and it isn't an easy decision to make. But hopefully this new policy will allow hospitals the autonomy, the discretion to impose a fee that would equal no more than the cost of one day in hospital per

year per family, the maximum amount. If we look upon the bargain we're receiving in this province for the cost we're paying directly out of our pockets, hopefully we will pay this amount, perhaps not a welcome amount, but at least it's an amount that will protect one of the best health care systems anywhere in the world.

The alternative is to cut services elsewhere. There are no free lunches, Mr. Speaker. Each of us as an individual has to become more responsible for this service that we provide. I think it's unfair to try to mislead the public, to say that we're trying to impose this on those that cannot afford it. The hospital boards can make decisions. If they have deficits, if they require it, they now have the authority to move for new fiscal responsibility, not just to raise fees or funds for the sake of having a nice surplus in their hospitals. The boards are far more responsible than that. I've spoken to a number of hospital boards, and they have been looking for ways to try to offset deficits, to be more responsible, for quite some time.

There's a big communication job for each of us in this Assembly, Mr. Speaker. But it certainly doesn't help to purposely mislead the residents of this province by saying that we're trying to impose something on those that can least afford it, because that is simply untrue.

Thank you.

MR. MARTIN: Mr. Speaker, I would like to rise to support the amendment. I think we should take a look at the idea of no free lunches. People pay for their medicare system through their taxes. That does not make it a free lunch. But if it's paid through our taxes, it is at least relative to the people who can afford to pay, paying their fair share. As anybody knows — and it's well documented in many places if we'd just look in certain documents coming out right now — user fees are a regressive tax. The point is, if a person is unfortunate enough to be sick and their parents or family do not make much money — say they make \$14,000 — \$300 is a lot of money. That's what it could be. The minister has said that. If a person makes \$100,000, or has a cabinet minister's salary, certainly \$300 is not much. Then why play around with it? Let's put it in into general revenue and keep decent health care.

Everybody is concerned about costs now. You'd think this government had just newly found out that they have a financial problem. They were spending like drunken sailors on all sorts of projects during the '70s when times were good. The first time that times get bad, we come back hard on the poor and the middle income. There are other ways to cut back. I will not go into all the others that we've talked about; for instance, performance guarantees when we give up billions of dollars to big oil.

Let's just look at the health care system itself. Surely we want to get the best bang for our buck, Mr. Speaker; nobody would deny that. But before we begin to bring in a regressive tax, perhaps we should take a look at some of the other ways we can cut back. We mentioned compulsory seat belts. For the hon. members' attention, this is significant. It comes from their own hospital utilization committee report that was given to the minister. It says on page 40 that

injured victims of traffic accidents form the single most expensive "treatment profile" category within the case load of an active care hospital.

When they took an analysis of this study and looked at Ontario's experience during the late 1970s, they showed that there is an approximate 15 per cent average reduction in deaths — which is significant — injuries, expendi-

tures for physicians' fees, and time of hospitalization. The average cost of treatment for accident victims was reduced from \$419 for a non-seatbelt patient to \$228 for a seat-belt patient, a sizable saving of 40 per cent. That's one area that we could look at. If the government had any political courage, they'd bring it in, because they would save a fair amount of money. We could begin to look at it.

The hon. minister knows, Mr. Speaker, that we could begin to use paramedics and nurses more. There's enough experience around the world where they're doing this. We could look to community-based health care, the preventive model that the hon. Member for St. Albert was talking about. It would save a lot of money. We could look at home delivery. There's a lot of discussion about it. Is it viable for those people who choose to have their babies at home? There's a lot of evidence to indicate that it is viable. We spend \$75 million there. We have the highest rate of unnecessary surgery in the country. It's documented in their own book. We could begin to save money there. Certainly we should look at the whole health care system and try to save money where we can. But I suggest to you, Mr. Speaker, that it is a shameful day in a province as rich as this when we have to turn back the 20th century and revert to a regressive tax such as user fees.

The suggestion that that isn't much money: if we look at the American experience, Mr. Speaker, what happened there? They started off: we want people to understand that it is expensive — the same old rhetoric that we're getting from the Conservatives here today. So they started small user fees in certain states in the United States. Pretty soon, when they were squeezed for money, what's the next step? Three hundred this year, 600 the next year, 900 — where does it stop? This is probably just the tip of the iceberg as we run into more and more financial problems because of the mismanagement of the economy that this government has brought in. The price of oil goes down; where are we going to get more money next time? Again, it will be on the backs of the poor and the middle income in this province. So that could be just the tip of the iceberg.

As the hon. Member for Clover Bar pointed out, if the government really believed in this — they must have known they were thinking about doing this — why didn't they campaign across the province on user fees and higher medicare premiums? No, we were told in the election on November 2 that in Alberta everything's the best in Canada. There was no suggestion at all that they were going to bring in user fees or higher premiums for medicare, no suggestion at all. In fact, in my riding there was some indication from the candidate that they would be lowering them because things were going so well, the economy had turned around. They didn't speak on this issue at all. They were misleading the people of Alberta.

I would suggest to the government that they have time. I notice that they've put it to October 15. I hope this is because they're not sure in their own mind that they're going to bring it in, and that they're going to see what the reaction is among the people of Alberta. I hope they're willing to do this and, before they repeal the 20th century, take a sober look at what they are doing. Because on this issue, I believe the vast majority of the people of Alberta are going to support the opposition. We will fight hard in this Legislature to make sure it's done.

Thank you, Mr. Speaker.

MR. LYSONS: Mr. Speaker, I'd like to just take a moment this afternoon to respond to this motion. I'm opposed to it on some fairly specific grounds. In the country, the hospitals have been asking for years for some way of raising money. No matter how they juggle their budgets, they always seem to come up short for certain programs. It doesn't say that they have to have a user fee. I would expect that many of the rural hospitals won't require a user fee, but then again they may. I think they'll be fairly prudent in who they charge this to. I'm not sure exactly how they may administer this, and I haven't had an opportunity to talk to the minister to see if there would be restrictions.

I just about had to shudder when I saw that the budget was going to be \$2.2 billion this year. That's up \$200 per person from last year. That means that for every man, woman, and child in this province, the budget has allocated over \$1,100. So for a family of four the province must pay \$4,400 into the medical system. That's simply too much.

I think that it would be nice if we had some other way of doing it. I guess the opposition over there is talking about sales tax when they talk about raising extra money. And the money has to be raised. They're not really saying sales tax, but anyplace they've had a socialist government, they've always had sales taxes. So I would imagine they're just following true to form. If that's what they're talking about, they should stand up and talk about it and not make rude remarks across the House.

Furthermore, I'm led to believe that the greater cost of medical and hospital care is from the larger hospitals, not the rural ones. So I would expect that although there's going to be some concern in rural Alberta — and probably a great deal of concern — with the exceptions that the minister has proposed to go along with user fees, I don't think it's going to be nearly the obstacle and the great problem that some of our members in the opposition are advocating.

So, Mr. Speaker, I would like to go on the record as saying that I oppose this amendment.

MR. HORSMAN: Mr. Speaker, I rise to join this debate on this amendment because of the very inaccurate and misleading comments that have been made during the course of the debate, particularly with respect to the allegations of the hon. Member for Clover Bar that people who are unemployed and in the low-income area will be required to pay user fees at the time that they are unemployed or in financial difficulties. The hon. member may or may not have been in the House the other night during the course of the debate when the Minister of Hospitals and Medical Care spoke in the budget debate.

DR. BUCK: I can read, Jim.

MR. HORSMAN: As he has interjected he can read, if he reads well he will read what the hon. minister said on that occasion. I refer the hon. member and all members to *Hansard*. That, of course, is where the hon. minister outlined the several principles — six in number, I believe — that related to the subject of user fees.

The first principle that was mentioned, and the principle which has been completely ignored by the opposition speakers, both inside and outside the House, is that it is a discretionary opportunity for hospital boards to introduce these fees if it appears that their costs are going to exceed the amount allocated in the budgetary year. [interjections] They can interject all they like, Mr. Speak-

er. They can puff and blow, they can talk to their friends in the electronic and the print media, and they can try to distort the facts all they want. The fact of the matter is, it is a discretionary, not a universal user fee system that is being introduced in Alberta. Those are the facts.

No doubt the hon. Leader of the Opposition has been in touch with his NDP friends in Parliament, because I heard them on the electronic media giving the same kind of misinformation to the House of Commons that the hon. Leader of the Opposition has done outside this Assembly to the people of Alberta. [interjections] Like the parrots they are, the NDP in Ottawa are following the lead given to them by the hon. Leader of the Opposition in Alberta. It's completely inaccurate to say that this is anything like a universal user-fee system. That is not the fact, and the hon. Member for Clover Bar and the hon. Leader of the Opposition and his colleague know better.

AN HON. MEMBER: They don't want facts, just distortion.

MR. HORSMAN: So I'll go over the principles again for the hon. members and their friends in the media who are distorting this issue, as well as for the people of Alberta. First of all, it is discretionary. "Discretionary", repeated twice by the hon. Minister of Hospitals and Medical Care during his remarks the other evening. It is not universal. It is going to be made

permissive for boards, on an individual basis and at their own discretion
and not on a universal basis

... to set any number of a range of hospital user fees
if in the judgment of the board they decide
that those are necessary. Okay.

Secondly, it is not proposed to set up a new administrative procedure: "It will be self-administrating." Thirdly, the "principle is that the range of fees all have a maximum," and that the government is saying to those hospital boards who decide to exercise the discretion, all right, if you do it, the highest you can go will be as follows. Then they were listed.

The fourth principle is that there is a very large class of exemptions — different kinds of Albertans [will not] have to pay user fees for the use of hospitals or whom we believe may not be able to pay them. So those groups of citizens have all been exempted.

In question period today, the hon. minister indicated that up to one-third of the citizens of Alberta will be exempted. So it is completely and totally erroneous to come into this Assembly or go outside the Assembly and tell the people of Alberta that everybody is going to be affected by this. This applies not only to the members of the opposition in this Assembly but to the irresponsible news media who have done the same in this province. [interjections] Not all are irresponsible, but many are.

The last principle that was enunciated was that
in any calendar year there is an annual limit that a family would be asked to contribute in the way of hospital user fees.

I want to add one other item. When we look at what the federal government is contributing — the hon. Minister of Hospitals and Medical Care indicated that for the coming fiscal year, we expect the federal cash contribution to go from this year's \$77 million to \$83 million. In question period today, the Leader of the Opposition, unless I misheard him, talked about losing \$20 million a month. But the cash contribution the federal government

is going to make under established programs financing is \$83 million.

MR. NOTLEY: That's worse.

MR. HORSMAN: Worse than \$20 million a month. Somehow or the other, my mathematics is different from the socialists'.

AN HON. MEMBER: Theirs is metric.

MR. HORSMAN: In any event, the fact of the matter is that the hon. Minister of Hospitals and Medical Care ... [interjections] Oh, they are exercised, are they not, Mr. Speaker? Constant banter, constant attempts to obscure the facts, constant efforts to obscure what in fact is the policy that has been introduced by the hon. Minister of Hospitals and Medical Care.

In answer to the remarks on the amendment by the Member for Clover Bar, I just want to add as well the importance of the exemptions that were listed by my colleague the other night and remind him and other members of the Assembly and the news media of this province that:

Social allowance recipients obviously won't be asked to pay, nor will newborns or children up to and including the age of six. Another large group of citizens who suffer from chronic illnesses or special diseases, special treatments which require a lot of hospital care, will be exempt from any of these charges. That includes people like cancer patients, those on renal dialysis, et cetera. The last group is another group that will be defined in detail in the regulations, children who have a single or multiple handicap and require some long-term hospitalization.

Mr. Speaker, it is entirely misleading to the people of this province to indicate, either from members of the opposition or through news coverage of this proposed program or policy, that any of those people will be affected by this policy — entirely inaccurate. It may make good television to go into the cancer wards of the hospitals and interview people and ask them what they think about the program. It may make good television, but it doesn't make the truth. So get the facts straight, and tell the truth to the people of Alberta. Don't distort, the way it has been done this afternoon and in the days since the minister made his speech the other evening.

DR. BUCK: Tell them before the election, not after.

MR. CRAWFORD: This is before the election, Walter.

MR. HORSMAN: As well, since we are in the debate on this amendment, I have no hesitation in reminding hon. members ... [interjection] The hon. Leader of the Opposition wondered whether there would be an opportunity in the future to debate this issue. No doubt he will find ample opportunity. He, as well as every member of this Assembly, knows that the hon. Minister of Hospitals and Medical Care will have to come before this Assembly and ask for supply for his department. I have absolutely no doubt whatsoever, Mr. Speaker, that that will be an opportunity for the hon. Leader of the Opposition to once again parade his arguments. [interjections]

I hope that when he does so the next time we debate this issue, he will level with the people of Alberta and not distort the facts. I put the hon. Leader of the Opposition

on notice that we expect him to tell the facts to the people of Alberta and to the other members of the Assembly. I have no quarrel whatsoever with honest disagreement on policy matters — none at all. It's quite in order to come into this Assembly any time and disagree with the government, as long as it is absolutely clear that we're talking about the same thing. Therefore, let it be quite clear that the next time we discuss this matter in this Assembly, we talk about the actual principles outlined the other night by the hon. Minister of Hospitals and Medical Care, and not something else.

DR. BUCK: Are you running for the leadership?

MR. HORSMAN: The hon. Member for Clover Bar interjects as usual. He is so close to the socialist position on this issue that perhaps he wants a nicer office and is ready to join them. [interjections]

Mr. Speaker, perhaps I have been diverted from the usual level of debate in which I like to engage by the frequent interjections throughout my comments on this amendment. This amendment, based as it is upon, perhaps I can be charitable and say, a misunderstanding of the principles that were enunciated the other night, clearly deserves to be defeated.

DR. REID: Mr. Speaker, perhaps I should first of all give notice to the members of the opposition that I intend to get into the debate on the Minister of Hospitals and Medical Care's estimates when they come in front of the Assembly.

I'd like to make some brief remarks today in regard to this motion that's been presented to us to amend Bill 28. What we've heard is essentially a series of platitudes, some rhetoric, and a lot of allegations which are completely unjustified. To me, the opposition's concerns have come across as being more political than intended to address how to deliver the best medical care and the best health care to Albertans.

What is being proposed by the minister is that at the most, a family in Alberta will pay one day's hospitalization costs per year. That's the maximum. We've heard talk in the question period about paramedics, about home delivery of babies — and that's another argument and discussion I would like to have sometime. Is the suggestion really being made that in Alberta we can employ improperly or inadequately trained people to provide the complex services involved with modern health care? If that's a serious suggestion, then it's a regrettable one. There have been remarks about unnecessary surgery. We don't know if the surgery is unnecessary. It may be that elsewhere necessary surgery is not being done. That's the other side of that possibility.

There's been a complete disregard for exemptions that were mentioned by the Minister of Federal and Intergovernmental Affairs in his remarks. Those exemptions from paying the hospital user fees have been completely ignored by the opposition members. The problem, Mr. Speaker, is that hospital and health care costs have been increasing at a rate far exceeding that of the ordinary inflation rate. In other words, they have been increasing in true dollar value at a rate that the economy cannot continue to absorb. I'm talking about the total economy, not just the government economy. What is happening is that because of technology, we are rapidly reaching the stage everywhere in this world where it is becoming impossible to deliver optimum medical health care to all the population unless it's very carefully delivered, and

unless it's rationalized. At the moment in this province we are looking at the situation where if one takes the total health care delivery through the Department of Social Services and Community Health and the Department of Hospitals and Medical Care, you're looking at a quarter of the provincial budget. And it's going to increase as a percentage of the provincial budget unless we very carefully address the issue. That really is the problem.

What are the alternatives? To decrease costs by rationing services? As the minister stated very clearly in his remarks the other night, there is open access to service in this province. He said every member of this Assembly could go to a doctor's office or to a hospital that evening. That's one alternative: to ration services to decrease costs. We can either increase income taxes or introduce a sales tax. But it should be remembered that when they talk in the socialist ranks about taxing the rich, with the costs we are looking at, the rich in this province will include every unionized worker, and the vast majority of Albertans who pay taxes will pay increased taxes. It will not be a matter of taxing only what they refer to as "the rich". They'll be taxing the average working Albertan.

We can also look at other alternatives by rationalizing the system — day surgery and things like that. I think every doctor in the province is attempting to minimize the costs. We can look at deciding who gets priority for high-cost services. That's a form of rationing, and we may well have to do that. But I don't think the place to be doing that is in the Legislative Assembly. Those are professional decisions that require professional training, and often require long conversations with the relatives. We can look at the ongoing problem of how far you go in keeping people alive when functional life, useful life, has come to an end. How long do you keep people on machinery, at many thousands of dollars a day, when there is no possibility of recovery or cure?

Let's look at the alternatives that are available in some other countries. In the United States they have a system completely different from that in Canada. They have fee for service. We have fee for service here. In Britain they have the National Health Service, the capitation fee; you pay the doctor X number of pounds per year to look after each patient. The National Health Service started some 35 years ago. Let's look at the National Health Service in Britain now.

In Britain we have the worst of alternatives, because the National Health Service has not delivered good medical care to all the British people. There is now in Britain a parallel private scheme with private hospitals. Even executives of the Trades Union Congress — that's the equivalent of the Canadian federation of labor — carry private insurance so they can go to a private hospital and be treated by private practice physicians, because they regard the National Health Service as being inadequate. In fact the greatest contributors to private medical insurance in Britain are the unionized workers. [interjection] That's what they are approaching here, if they are going to look at no alternative other than the tax dollar. We will have the same parallel system in this country, in this province, as they now have in Britain. That's not equality of access and equality of opportunity, Mr. Speaker.

What we've had are shallow answers, a lot of rhetoric, and addressing the media with no regard for the real health care of Albertans. We've had obvious obfuscations, intentional or otherwise, trying to cloud the issue that is before Albertans: the delivery of good medical care, good health care to all Albertans at a reasonable cost.

I will repeat in closing, Mr. Speaker, what I said at the beginning. Those families that are not exempted from paying, will pay no more than one day's hospital cost per year per family. I think that's a reasonable contribution by Albertans to retaining what is currently, and I hope will remain, the best health care system in the world.

Thank you.

MR. HYLAND: Mr. Speaker, I'd like to make a few comments on the amendment before us. We've heard a lot of quotation of figures, and I suspect a lot of them may not have been all there; there may be portions of quotations. We've heard quotations from the Ontario study on the use of seat belts. Mr. Speaker, it's my understanding that when seat belts were instituted in Ontario, the speed limit was also dropped. Where were the savings in injuries: in the changing of the speed limit or the use of seat belts? But we didn't hear the second part of what happened there.

Other hon. members have dealt with the word "imposing" in the amendment. If you plainly read *Hansard* on page 335, I quote the minister: "The five principles of the plan are as follows. First of all, it's discretionary." It's a long way from imposing.

Mr. Speaker, we have heard that hospital fees are paid through taxes. Granted, some of them. But we have ignored that in the province of Alberta approximately 60 per cent of daily operational services offered to people are paid out of non-renewable natural resources. We debated previously in this Chamber changes to certain Bills with the amount of moneys going into the Heritage Savings Trust Fund. So it's not all from taxes; it's from a resource that is depleting.

We have heard accusations of spending like drunken sailors. Well, Mr. Speaker, if you call the best day care facilities in Alberta drunken sailors, so be it. If you call the best hospital system in Canada spending like drunken sailors, other people have different views on that. Attaining those high standards in Canada is exactly the reason why we are in the position to have to reassess, to have to look at other methods of funding, to have the people of the province understand how much it costs to operate a hospital or a bed in a hospital.

We have heard many comments before from members of the opposition relating to the abilities of councils and hospital boards in their powers of what they want to do at the local level. Mr. Speaker, we are giving them an option. They don't have to take it; it's discretionary. If they feel that in the operation of their hospital they can get by without user fees, they don't have to use them.

We've heard some comments about the amount of money in the economic resurgence plan. That money is going to various businesses, small and large — there is no doubt about it; nobody has ever tried to hide that — in an attempt to get the economy back on the road. At least we as a government have made an attempt. There have been other governments that haven't. We are at least trying some things, so that the economy straightens out and people get back to work. We're not just sitting idly by.

Mr. Speaker, I ask you and the members of this Assembly: who provides the jobs? Large industry, small industry, and small business provide the jobs. Those people who are attempting to help in the economic resurgence program will employ and do employ the amount of unemployed people we have in the province today. So I would urge the members to defeat the amendment because of what I said previously. It is not really telling the

facts. It's indicating that the hospital user fee is mandatory, and it's not.

Mr. Speaker, I would urge the members to defeat the resolution.

MR. McPHERSON: Mr. Speaker, I would like to enter the debate on the amendment as well with a few brief comments.

I don't think anyone would question the fact that medicare and its importance should continue. My view of medicare is one whereby we should be assisting people against any catastrophic financial disaster as a result of any kind of illness or sickness. We in this province do just that. Our program, the medicare program, is universal. We have heard from many speakers this afternoon on the exemptions. They are there. People will be exempted from as much as one-third of the program that is going to be instituted, because of the vast array of exemptions.

But I believe that we as a government, and the people of Alberta, must recognize that we have to address the demands of the system. The supply is there; the evidence is before us. Per capita costs have gone up from \$327 to \$1,154 in the last 10 years. The patient-day costs in the last 10 years have gone from \$66 to \$230 per day in a hospital — \$2.2 billion out of a \$9.4 billion budget, representing 23 per cent of the budget of this province.

The supply is there. What we must be cognizant of is the demand. The system as it is now and the programs we have now simply do not allow people to appreciate how expensive it is to provide the medical system we now have.

People consider that when anything is free, it's available and they can use it right off. I can cite my own example. In driving to the Legislature last Monday, I cracked up my car. There was a lot of damage. But it was insured; I was able to take care of it. I can tell you that I did a small bit of damage about eight months ago — about \$250 worth. It took me until I cracked up my car to get my insurance before I would spend the \$250 to fix my car, because it was coming out of my own pocket.

All we're asking is that people have some recognition of the very high expense of hospital care in this province. I also think that the new program will stimulate important dialogue between physicians and their patients. Now the physician will have the opportunity, because it will be presented to him clearly by his patient. If he is going into hospital for a given period of time, he's going to be asking the hard questions. How long will I have to stay in the hospital? Is it necessary for me to be in the hospital? We have got to address the demand problems our system faces. Certainly we have the supply. So I would urge all members of the Assembly to vote against this amendment.

Thank you.

[The question being put, Mr. Speaker declared the amendment lost. Several members rose calling for a division. The division bell was rung]

[Eight minutes having elapsed, the House divided]

For the motion:

Buck	Martin	Notley
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Against the motion:

Adair	Hiebert	Pahl
Alexander	Horsman	Paproski
Alger	Hyland	Pengelly

Anderson	Hyndman	Reid	No.	Title
Appleby	Isley	Russell		Amendment Act, 1983
Bogle	Jonson	Shaben	23	Alberta Heritage Savings Trust Fund
Bradley	King	Shrake		Special Appropriation Act, 1983-84
Campbell	Koper	Sparrow	24	Appropriation (Alberta Heritage Savings Trust Fund, Capital Projects Division)
Chambers	Kowalski	Stevens		Supplementary Act, 1983
Cook	Lee	Stiles	25	Appropriation (Alberta Heritage Savings Trust Fund, Capital Projects Division) Act, 1983
Crawford	LeMessurier	Stromberg	28	Appropriation (Interim Supply) Act, 1983
Cripps	Lysons	Szwender		
Diachuk	McPherson	Thompson		
Drobot	Miller	Topolnisky		
Embury	Moore, M.	Trynchy		
Fischer	Moore, R.	Webber		
Fyfe	Musgrove	Young		
Harle	Osterman	Zip		
Totals:	Ayes—3	Noes—54		

[Bill 28 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 sittings, passed certain Bills to which, and in the name of the Legislative Assembly, I respectfully request Your Honour's assent.

CLERK: Your Honour, the following are the titles of the Bills to which Your Honour's assent is prayed:

No.	Title
10	Rural Electrification Revolving Fund Amendment Act, 1983
18	Alberta Heritage Savings Trust Fund

[The Lieutenant-Governor indicated his assent]

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

SERGEANT-AT-ARMS: Order!

[The Lieutenant-Governor left the House]

[Mr. Speaker in the Chair]

head: **GOVERNMENT MOTIONS**

11. Moved by Mr. Crawford:

Be it resolved that when the House rises at 5:30 p.m. on March 30, 1983, it shall stand adjourned until 2:30 p.m. on April 6, 1983.

[Motion carried]

MR. CRAWFORD: Mr. Speaker, next week on Wednesday afternoon it is proposed to start in Committee of Supply. We will be dealing with the Department of Advanced Education. The next department to be called in supply will be the Department of Agriculture.

Mr. Speaker, I move we call it 5:30.

MR. SPEAKER: Does the Assembly agree with the further motion by the hon. Government House Leader?

HON. MEMBERS: Agreed.

[At 5:08 p.m., pursuant to Government Motion 11, the House adjourned to Wednesday at 2:30 p.m.]