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**LEGISLATIVE ASSEMBLY**  
**OF**  
**PRINCE EDWARD ISLAND**

**TRANSCRIPT OF  
STATEMENTS BY MEMBERS  
AND THE  
ORAL QUESTION PERIOD  
FOR**

**Thursday 30 November 2006**



**ORAL QUESTION PERIOD 30 NOVEMBER 2006 PRELIMINARY PROCEEDINGS**

**STATEMENTS BY MEMBERS**

**Speaker:** The hon. Member from Alberton-Miminegash.

***GOING TO THE CORNER - ISLAND HISTORY BOOK***

**Mr. Dunn:** Thank you, Mr. Speaker.

This past July, the first of a two volume history of the sister communities of Elmsdale, Elmsdale West and Brockton entitled *Going to the Corner* was launched. The comprehensive and well illustrated book is anything but boring. Contained within its pages are copies of actual newspaper articles, diary entries, excerpts from journals, numerous pictures and much more.

It is a wonderful history of the early years, economy, the community, and the social life of the area. The book is divided into eight chapters covering such topics as agriculture, public buildings, businesses, organizations, and a salute to district veterans, and much more. It even has a miscellaneous chapter covering everything from health care to prohibition.

Mr. Speaker, I congratulate the research committee for this book. They are: Margaret Adams, Lillian Adams, Allan Graham, Norma McLellan, Arlene Morrison, Jean O'Brien, Kay Williams, and the administrative assistant, Susan Murphy, on a job very well done.

Just as the final copies of *Going to the Corner* are moving off the shelves, work on the second volume has begun. The second volume will concentrate on the genealogies of the

original settlers of that area.

This is a fascinating book and would make an excellent Christmas gift, especially for those with an interest in Island histories. *Going to the Corner* is available at a number of locations and I know for sure that if you go to the corner, you'll find it at the Elmsdale Corner Gas owned by Larry and Jacinta Arsenault.

Thank you, Mr. Speaker.

**Some Hon. Members:** Hear, hear!

**Speaker:** The hon. Member from Glen Stewart-Bellevue Cove.

**FAMILY PHYSICIAN OF THE YEAR**

**Dr. McKenna:** Mr. Speaker, this past month has been very special for Dr. Alfred Morais of Charlottetown and I want to take this opportunity to publicly congratulate him on being honoured as the 2006 Family Physician of the Year for Prince Edward Island.

To be nominated by your peers for this prestigious national award certainly indicates that Dr. Morais is well thought of, not only by his patients but also by his colleagues in the medical profession.

Dr. Morais was born in Halifax and raised in Charlottetown. He is a graduate of the University of Prince Edward Island and the Dalhousie Medical school. In 1986 he started his practice at the Charlottetown Clinic and in 1991 moved to the Parkdale Medical Centre. He lives in Charlottetown with his wife, Anne, and his three children; two in university

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and one in high school.

While extremely busy as he serves about 2,000 patients, he believes as a physician he must also advocate on behalf of his patients and assist them through the various channels of the health care system.

In addition to enjoying his busy family medical practice, Dr. Morais plays hockey, is the team physician for the Charlottetown Jr. Abbies and, along with other doctors, works with the PEI Rockets. I understand, by the way, that he is a die-hard Habs fan. I can also attest that he can also hit a golf ball very well as well.

Again my sincere congratulations to Dr. Morais on this well-deserved recognition as one of 10 national recipients of the Reg L. Perkins Award for Family Physician of the Year for 2006.

Thank you, Mr. Speaker.

**Some Hon. Members:** Hear, hear!

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**PAYDAY LOAN PRACTICES**

**Mr. R. Brown:** Thank you, Mr. Speaker.

Yesterday there were some questions about the need for a payday loans act. I could go on for hours about it but I want to read a letter from a constituent of mine.

Re: Payday Loans

I would like to share with you today a recent

experience I had with a payday loan company in hopes that you, as a legislator, will bring the concern I have about these operations to the Legislative Assembly.

Living on a very restricted budget, I found myself short on cash this month and I wondered how I would make it through until the next payday. A thought came to me that I could call one of those stores even though I've heard horror stories on television about the exorbitant fees they charge. I called the payday loans' store and had a conversation over the phone with the loan clerk who agreed to lend me \$30 for two weeks at a cost of \$17. Feeling that \$47 was an excessive amount to pay back for a \$30 loan, I agreed to those terms because I really needed the money for laundry and things.

After I was lured to the store by this agreement, the clerk asked me for what seemed to be a lot of personal information, which I wondered if she ever had a legal right to be asking for: health card number, social insurance number, bank account numbers, and other personal information that I feel very uncomfortable about divulging.

Once all the information was gathered, I was informed that they couldn't give me a \$30 loan but only in \$20 increments. Not wanting to owe them too much, I decided on \$20 and asked what it would cost me in two weeks to pay it back. I was shocked when she told me that I would have to pay \$48 in return for \$20 in which wasn't all interest but a brokerage fee. The interest rate merely was 16 cents a day.

Feeling outraged, I cancelled the whole contract and demanded to have all my forms

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given to me that contained my personal information. I also requested that she delete my file from the computer and stood by and watched her.

Ahead of me when I entered the store was a young woman with a small child going through the same drill. She too questioned why it was so much but agreed to the terms. My heart went out to her for perhaps she needed the money to feed her family and could not walk away like I did.

(I know, Mr. Speaker, that the members are pushing me for time so I'll not read the rest of the letter.)

Thank you.

**Speaker:** Questions by Members starting with Responses to Questions Taken as Notice.

The hon. Leader of the Opposition.

### PHYSICIAN RECRUITMENT

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

There's a natural concern and apprehension in the West Prince area over this government's plan to shut down two hospitals and replace them with a centralized facility. Mr. Speaker, when the report was released which looked into the issue, there was a recommendation for a rural physician recruitment plan.

A question for the minister of health. Why did this government neglect for 10 years the need for a physician recruitment plan dedicated to rural needs?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Thank you, Mr. Speaker.

And the statement is absolutely untrue. During the time that this government over the last 10 years has been undertaking a recruitment and retention strategy, we have recruited well over 100 doctors during that 10 year period.

**Some Hon. Members:** Hear, hear!

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

It's a shame the minister doesn't quote how many you have left or how long they stayed for. But why - just an easy question for the minister of health - why did the committee looking at this issue feel the need to make such a recommendation?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, throughout the rest of Canada as well as Prince Edward Island, there is an ongoing need for doctors, family doctors, for physicians. Particularly in the West Prince and the rural areas, family doctors are difficult to recruit. Although we have recruited that many over the period of time that I've indicated, obviously, not all of them have remained. And for any number of reasons, which the rural residents particularly in West Prince are very familiar with, many full-time and locums have come into that area but they have not chosen to remain. They do

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stay there for a short period of time so there is a need to be able to get permanent physicians who will in fact stay in the area. Some of them do but not all of them and that is not only a Prince Edward Island problem. It is also shared throughout the rest of the country.

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

**Leader of the Opposition:** Thank you, Mr. Speaker.

The fourth recommendation called for development of recruitment and retention strategy. Why would they have to make such a recommendation if you had been doing the job over the last 10 years?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, I didn't hear the last part of that question. Would he mind repeating the last part?

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

And I'd ask the minister to please pay attention to the questions instead of what the Minister of Finance is trying to tell him.

Number four in the committee's report called for the development of a recruitment and retention strategy. Why would they make such a recommendation if you had been doing such a good job over the last 10 years?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, I think hon. Leader of the Opposition is well aware that beginning in 2000 there was a new strategy implemented by this government and that has reaped the effects as I have indicated. We have attracted to our shores many, many individuals; however, there is an ongoing need to be able to retain those individuals and part of the recommendation, I'm sure, was aimed at not only the recruitment but also the retention. I think that the recommendation was actually added to the last part, which is the retention aspect, and, yes, we are doing what we possibly can to attract and to retain and to keep these individuals and the strategies of 2000 and 2004 point to that.

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

**NEW HOSPITAL IN WEST PRINCE**

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

And the lack of physicians points to the fact that not enough is being done. The government attempted to make it appear as if the entire medical community in West Prince endorses the idea.

I would like to read briefly from a letter sent by an Alberton physician earlier this year. I quote: I really don't think enough thought or research has gone into this proposal. I feel we have made many mistakes within our health care system in the last number of years under the guise of reform, mistakes that have cost us both financially and with the loss of services and personnel. I would hate to see us make another mistake due to (indistinct) and lack of information.

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Mr. Speaker, can the minister truly say that the closures of two hospitals and the expenditure of millions on a new one will respond to these concerns?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, I can certainly state that one of the aims is to do exactly that is to address together the combination of what a new, a brand new, single hospital with all the efficiencies that it can provide will be able to attract and to retain. I must also remind the hon. Leader that all of the doctors in 2005, I believe it was, did endorse the concept at that time. It was the first time that the concept was put forth publicly and all of the doctors in the two hospitals did sign that.

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

Perhaps he should check out that quote that I just read but a new question now for the same minister.

Can the minister guarantee that this proposed facility will offer new medical services which are currently unavailable in West Prince?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Thank you, Mr. Speaker.

And I have been asked that question many times and I have made it abundantly clear that new services will not be offered. There will be efficiency, however, in the services that are

presently offered by the two hospitals, which will be retained and put in.

When I talked about efficiencies, it could be around technology. Certainly, the x-ray care that is taken now, new equipment, certain new pieces of equipment would obviously be available that we would take a look at but there will not be new services that are not there now being offered available in the new hospital.

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

Will the minister please inform the House how many beds will be available in the new facility?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, I know that hon. Leader of the Opposition is asking these questions and not expecting an accurate answer and the reason why is that we do have a couple of very well-defined functions and stages of planning which must be undergone. The first one is the master planning, which is ongoing presently at the Queen Elizabeth Hospital. We recently completed both at the Prince County Hospital. I'm sure that the Leader of the Opposition was paying attention to those. The functional planning follows the master planning so it would be inappropriate for me at this particular time to say here is the exact dollar cost that is going to be attributed, a budget. It's also inappropriate for me to tell you exactly what, how many beds are going to be offered there but I can tell you that the

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broad strokes were - and it has been made public for a long, long time - is that the same services that are presently being offered will be available in the new, single concept hospital. Beyond that, it is up to the residents of the area. It is up to the planning committees to decide exactly the breakdown of those.

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

**Leader of the Opposition:** Thank you.

How are the residents of the area going to decide that?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, what this government has been very well noted for an very good at doing is consulting the individuals. We have just in fact ended up with a list of the recommendations and a very good comprehensive report. Because we did that, we took five or six weeks. We did form a committee. The people of the West Prince area responded wholeheartedly and we have accomplished over six public meetings and numerous other occasions and opportunities available to sample what their thoughts were on the hospital. So Mr. Speaker, there are consultative forms that have been proven very effective in the past. We would continue to make use of those.

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

**COST OF NEW HOSPITAL IN WEST PRINCE**

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

And I had the opportunity to attend many of those meetings, public consultations that did take place, and I thought that it was really quite a divisive issue when I attended those meetings. That's why I was a little surprised by how decisive the report was.

But I've got a new question to the minister. I'm wondering: Can the minister - and he said he can't give us a direct cost - but I'm wondering can he give us a ball figure on how much the new facility will cost?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, no, I'm not going to fall into that net either. If one were to take a look at some of the media reports, it could be from a very small figure up to a very, very large figure. There's all kinds of speculations because, once again, people and certainly journalists do not know at this particular time the size of the building and the footprint of the building. As I have said, we are starting from the premises of services but there is a great unknown beyond that and I certainly do not have the final figure in my head. Therefore, I would be unavailable and not ready to make any type of public notice.

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

**Leader of the Opposition:** Thank you, Mr. Speaker.

I find the minister's answer irresponsible. I think here we are looking at two facilities in communities that are being closed down that are very vital for those communities. They've been in place for many years where there's been lots of fundraising take place for those



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facilities. You've announced that they're going to be closing, that a new facility is going to be built. Surely, you would have some indication of how much a new facility would cost. Over or under \$20 million?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, once again in his preamble to the question, he mentioned closing. Hospitals are not closing. They are certainly going to be an amalgamation into one new facility but those existing hospitals are going to be used for other hospital services and, again, it is certainly not up to me at this particular time to indicate exactly all of what is going to be talked about and the utilization made of those existing hospitals but long-term care would certainly be a good bet in that area. There is a need for those types of beds in that area but there is not going to be any closure. That I want to make certainly abundantly clear, not only to the Leader of the Opposition but to everybody. But, no, again it would be irresponsible, to use the word in a different context from the Leader of the Opposition, of me to speculate at this early stage without the necessary utilization of the experts and the people from the area providing input to indicate what that ballpark figure might be.

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

And I've listened very intently to the minister's answer and I think probably the people of West Prince have listened very intently to that answer. From what I gather

according to what your position is now, we're going to have three hospitals in West Prince, is that correct?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, once again, the hon. Leader is trying to mix the picture to throw as much mud into the puddle as he possibly can to try to mix the messages. What we have attempted to do is to listen, is to consult and, obviously, the people of West Prince have indicated that they have voted in favour of a single, West Prince hospital and that is what we are going to do now is to move on to the next stage and to the master planning stage to find out exactly how that can be carried out.

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

**Leader of the Opposition:** Thank you.

Can the minister please inform me when the vote took place to decide the move towards one hospital and what the percentage breakdown was on that vote?

**Mr. R. Brown:** Good question.

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, once again, I certainly, in taking the approach used by the hon. Leader of the Opposition, recognize that there was not a vote. It was not the intention - I think the people were aware early that it was not a matter of raising hands in a meeting and counting them. They used a thematic analysis and a thematic analysis was to identify the

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themes and from that to analyse the responses of the - Yes, that's exactly what it was, a thematic analysis. It's a well used research tool and from that there was a concept derived that, indeed, it was the overwhelming majority of the people up there wanted this type of an approach.

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

There was a vote. Now there wasn't a vote. There was going to be two hospitals closing down and the new one being built and then the two weren't going to be closed down and a new one was going to be built. I'm wondering - no wonder the minister has no idea on how much this hospital is going to cost. I'm wondering: Can he just now perhaps since he's willing to talk about all these different scenarios, can he give us a scenario on how much this new facility might cost?

**Mr. R. Brown:** Good question.

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, the hon. Leader of the Opposition certainly does have difficulty getting things straight in his mind. His questioning that leads to that is that he just doesn't quite know what type of questions to ask to elicit the appropriate responses. I think what is most abundantly clear no matter how he asks and/or phrases his questions is that the people of West Prince were given an opportunity to be consulted and they did render a decision and that decision is to go ahead and to build a single hospital in the

West Prince area following the consultation and going to be embracing further collaboration from the residents of (indistinct).

**Some Hon. Members:** Hear, hear!

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

## PHYSICIAN RECRUITMENT (FURTHER)

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

And we can check Hansard. The minister said vote and then he said no vote and then he said they weren't closing down and then he said, well, they are closing down. So I'm not really sure where the minister is going on this. But I'm wondering: Is there any independent evidence to suggest that a larger, new facility will have any more success in recruiting physicians to small, community orientated hospitals?

**Mr. R. Brown:** Good question.

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, there are many reasons and all of these were identified by the individuals who attended the meetings, those six public meetings as to the advantage of building a new hospital. The hon. Leader himself referred to one of the main ones is that a newer hospital and only one of them with efficiencies would certainly attract more doctors and nurses, health care providers and not only the physicians but all of the health care providers to a new, single area. It is these

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types of bits of information that the people are looking for and it is this type of building that indeed would be able to provide a more efficient, well-appointed health care to that area.

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

**Leader of the Opposition:** Thank you, Mr. Speaker.

Earlier this year, the Society of Rural Physicians of Canada made the following observation - I'm sure the minister is very aware of this organization, being a minister of health in the country - and I quote: We need to stop closing rural hospitals, rural operating rooms, and rural obstetric programs. Provincial centralization of medical services and closure and downgrading of rural hospitals has seriously hurt service delivery.

Mr. Speaker, this group has a great deal of expertise in the area of rural medicine. Isn't the minister concerned, like the society, that closures and downgrades will in fact hurt service delivery?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, I certainly take opposition to how he is phrasing his question is that there are closures and that there are downgrades. I have explained that there are no closures. There is going to be a single, more efficient hospital offering the same services. As to downgrades, I would look upon it as just the opposite is that this is the opportunity for an upgrade. And Mr. Speaker, just because the Leader of the Opposition is not in favour of a single, more

efficient hospital that the residents of the area are so well supportive of it does not mean that we should not put it there. We have listened. We have consulted (indistinct). We are going to ahead and build that hospital.

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

**Leader of the Opposition:** Mr. Speaker, there is a myth in this province created mainly by this government that our hospital systems need to be reduced and centralized. The fact of the matter is this: On a per capita basis, we are in the bottom half of the province when it comes to spending on hospitals. The problem is not health care costs. The challenge lies in this government's failure to adequately recruit rural physicians. This government created the crisis and now threatens to worsen the situation in West Prince by a government that doesn't recognize that it has to do a much better job at recruiting and retaining doctors. As the Alberton doctor pointed out, I don't think we have to jump in with the wrong pretense that it will solve all our problems; it won't. Mr. Speaker, shouldn't the minister be looking at a far more aggressive recruitment plan before he proceeds with this idea?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, as I have indicated in the very first response to the first question today, we have had a very ambitious recruitment and a retention plan since we came into government 10 years ago. And all the Leader of the Opposition has to do is to be able to take a look at the figures and go through and count up how many new doctors have come here. Mr. Speaker, I know that you, yourself, in the eastern end of the

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province are very aware, however, that getting a new physician is not the same as retaining them long-term and that is the second part and that is also part of the strategy which we're working on. The hon. Leader of the Opposition here has been quoted that he is not in favour of community rural hospitals, which is not the stance of this government. We have indicated that the community rural hospitals are very, very important to us. The reason why the single concept of West Prince is being entertained is to be sure that the community hospital in West Prince will be there for a long, long period of time to support the people of that area with a new, improved, efficient hospital.

**Some Hon. Members:** Hear, hear!

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

I'm sure, like any government, they've hopefully done their research into building a new hospital. I'm wondering: Do you have examples of other areas of the country that have amalgamated two hospitals into one and proved that it's easier to recruit doctors?

**Mr. R. Brown:** Good question.

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, we have done lots of research. We have listened to lots of people. We are aware that in a small market that there are many number of reasons why physicians and nurses and health care workers would choose not to go to those centres but to

areas of greater population and areas where maybe there are more of their culture speaking the same language, having the same traditions. So when we have indicated that we are able to modernize a hospital, as was the case with Summerside to Prince County when we are working to modernize the Charlottetown-based hospital, the Queen Elizabeth, that is the type of message that you send out to these physicians to these professionals that it is a modern, well-equipped hospital and there is a good reason, there are good practices, medical practices being carried on and they do reply. They will then take a long, hard look at coming to those centres. We have proved it with the Charlottetown and the Summerside scenario and that is the type of information that is good for us and what we have paid attention to.

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

**Leader of the Opposition:** Thank you very much, Mr. Speaker.

And I hate - I want some direct answers from this minister so I'm going to ask a direct question and I'm not going to get into the debate on the shortage out here at the ER. But my direct question was: Can you provide other examples of where amalgamating two rural hospitals and building one new facility made it that much easier to recruit health care physicians?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, there is all kinds of information available from word of mouth, newspaper accounts, and I'm sure some research as well that point out just exactly

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what I have said that if you have a type of health provision provided in a particular area that is professional, that the esprit de corps is good and that is what has happened in a couple of our hospitals. And that is what we are attempting to be able to provide to the West Prince area, then people will notice and people will come and that is the type of health care that we are looking for and will provide to the residents of West Prince.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

### DISABILITY SUPPORT PROGRAM

**Mr. R. Brown:** Thank you, Mr. Speaker.

A question to the minister of health. I've been receiving some calls over the last few weeks about disability support program, and as a matter of fact, I had a constituent in the officer the other day. The constituent has indicated that \$600,000 has been cut from the budget from last year's forecast to this year's budget and he feels like he's being squeezed out. Is that what's going on in your department in order to make up for that \$600,000 cut?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, certainly not. I know that with the disability support program, there's always ongoing concern as to whether the dollars and the services, more importantly, will follow. We have over a thousand clients in the province drawing from that fund and it's always an exacting science or art to try to provide all of the disability services that people are looking for but we do as well as we possibly can.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** Mr. Speaker, this constituent of mine also said there is a new screening tool and he feels that this screening tool - and he's done some research on it - it's more about getting people off the disability support program. It's more like a questionnaire of, you know, do you really need it? How can we get you off it? And this person has a disability and he's just wondering. When did you introduce this screening tool and why such an onerous task for people to prove that they're disabled, especially if they're in a wheelchair?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, I certainly would take exception to that. I understand what we have attempted to do is make it easier for individuals to fill out the questionnaires. And I know, Mr. Speaker, that in talking to the advisory body, the disability advisory body which provides assistance and recommendations to me, that there is a duplication of forms and certainly they have made the recommendation to which I support is that we have to be able to simplify the process as much as possible so that we will be able to get to the concern of the individuals and be able to provide the very best service. So I certainly take exception of that particular type of question.

**Speaker:** The hon. Member from Morell-Fortune Bay.

### IGNITION INTERLOCK PROGRAM

**Ms. Crane:** Thank you, Mr. Speaker.

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My question is to the Minister of Transportation and Public Works. This fall in the Throne speech, the province mentioned about the introduction of an addiction interlock program. Could the minister expand on what that program is all about.

**Speaker:** The hon. Minister of Transportation and Public Works.

**Ms. Shea:** Thank you, Mr. Speaker.

Ignition Interlock Program is a tool which is used to combat impaired driving. And how it works is the person who is suspended for an impaired offence can apply for early reinstatement of their license if they qualify for this program. If approved, the device is installed in their vehicle which is basically a Breathalyzer which disables the vehicle if the driver is drinking.

**Speaker:** The hon. Member from Morell-Fortune Bay.

**Ms. Crane:** Another question around that, minister. If a person is convicted then of an impaired driving offence, does that mean the person is actually going to be able to get on the road sooner than they would normally? Is there an advantage to that?

**Speaker:** The hon. Minister of Transportation and Public Works.

**Ms. Shea:** Thank you, Mr. Speaker.

The advantage would come in allowing the person to begin to re-establish their driving privileges under a tightly controlled access certainly would be better than having a driver on the road who is drinking without a license.

They'd have to, of course, receive approval from the courts to be entered into this program. They'd have to make application to the Registrar of Motor Vehicles and if approved, both their license and their vehicle would be flagged as restricted so that information would be available to law enforcement that they are a part of this Ignition Interlock Program.

The program is being introduced on a voluntary basis and it's the case in most provinces which use it. The cost of the program is borne completely by the individual and there's no cost to taxpayers for this program which can run the user up to about \$100 a month.

**Speaker:** The hon. Member from Evangeline-Miscouche.

## ABORIGINAL HEALTH ISSUES

**Mr. Arsenault:** Thank you, Mr. Speaker.

Today my question is for the Minister of Health and Social Services. I understand that you are back from Aboriginal meetings in British Columbia. Could the minister update the House on the discussions that took place?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Well, Mr. Speaker, during the past number of days, it is correct that we were able to gather all of the representatives, that is the Aboriginal representatives and many government representatives to go over the Aboriginal health needs. And more importantly after listening to exactly what those needs are is to come up with a better

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action plan and a health approach in the future which would meet those needs. And I'm sure that the members in the Legislature here as well as the Islanders are very familiar with the fact that among the Aboriginal population right across the country, there's a higher incidence of diabetes and other diseases such as fetal alcohol syndrome disorder or disease as well that the Aboriginal populations are witness to and suffer more than others and those in other health deprivations we talked about.

One of the co-chairs who was the Premier of the Province of British Columbia, hon. Gordon Campbell in fact started off the conference with the recognition that the Aboriginal population indeed is the silent third, if you will, founding organization and/or population in Canada that is (indistinct) with solitude. In other words, the French and the English have been able to identify and work on many of their problems but the Aboriginal population, the third solitude referring to the Aboriginals, have not been able to do that so it was around their health care which we put our discussions.

**Speaker:** The hon. Member from Evangeline-Miscouche.

**Mr. Arsenault:** Thank you, Mr. Speaker.

Just a quick question to follow up on this issue. Just what are the next steps that will take place following this meeting?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, a number of the premiers who were in attendance and certainly

the leaders of the Aboriginals did purposely, of course, come with a number of next solutions, one of them which applies to our province and to which I will be making further overture to it during my statement, ministerial statement shortly, involves agreements as to (indistinct) provide that health care and I will be elaborating on it at that particular time.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** Thank you, Mr. Speaker.

I just want to follow up on the member's statements, questions about the Aboriginals. Mr. Minister, I wrote you a letter a month before the homeless shelters for Aboriginal peoples in Charlottetown closed. Why did it take you a month to come up with a decision on re-establishing some funding for these facilities?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, one of the reasons why there was a delay, which we now have met and one of the shelters has been open since the First of November, is the fact that it is the requirement of the federal government. And we - it was not an opportunity in British Columbia to lay blame on any particular group of people and/or level of government but the housing situation which the hon. member opposite has brought up is a shortage of funds that was put there by the federal government to provide the capital building program, i.e. the erection of the facility but did not provide the operational dollars. Obviously, people have a need and they

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responded a number of years ago that, yes, there would be a need for two shelters for the Aboriginal concerns and health difficulties but they have been struggling for quite some time with keeping those open. And that is the reference to which the hon. member did pose to me in a letter. We were able to look for and to find some dollars and with other partners, we have been able to keep it open for a limited period of time but it still is a concern of the province here and the department of health is that we will be able to keep it open because the funds are limited.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** Mr. Speaker, it's a shame the way this government did this, wrote the letter. The Attorney General was at the meeting and the member from Charlottetown was at the meeting at the Aboriginal Council's meeting. That concern was brought up. I issued a letter to the Attorney General and yourself a month before. Let's - you waited until the place closed until it came an issue so you could come in like Robin Hood and save the day. That's what you were doing. You guys wanted to wait to play politics with this issue and that's a shame on your part and that's why I brought it up, Mr. Minister.

Now are you going to continue to fund this housing program? It is true. Are you going to continue to fund this program or are you going to make them go from month to month?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, it is deplorable that the opposite member would indicate that

something such as this was done for a political reason. I have taken the time to outline how the housing operation evolved and the fact that it was fraught with economic difficulties right from the beginning because the federal government did not provide operating expenses when we do have housing ministers, national forums. We talked to the federal government about this. It is an ongoing difficulty and all of the other Canadian provinces and territories, not only Prince Edward Island. It is not the responsibility. We do not have in budget the health care budget; that is, the operation of these health care or these housing operations the same as with non-native. There are operations here in the province that are not getting operating budgets as well, Mr. Speaker. It is not the sole responsibility for us to keep them open but it is a program. It is a problem, the health care of the Aboriginals that we are working on, and maybe British Columbia is one of those areas, a solution that we'll be able to take a look at and go further in the future.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

### ABORIGINAL HOUSING TRUST

**Mr. R. Brown:** Thank you, Mr. Speaker.

I cannot believe this minister. Minister, there was a bill passed in the federal government, Bill C-48 and under Bill C-48 there was a number of reserve accounts set up in September. One of those accounts was Off-Reserve Aboriginal Housing Trust, off-reserve - \$200,000 this year, \$200,000 next year, \$200,000 the year after, point 700,000. The minister has tapped into those trusts and now I understand that some of the money has



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been transferred according to his fiscal update. Don't tell this House there wasn't money available. Don't get up here and say there's a problem here that there's money not available. There's money in this Bill C-48. Would you not agree that that money could be used for this Aboriginal housing project?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** No, Mr. Speaker, I would not agree that it would be used for the housing. It was a health care. We are passing that along in the form of health care but the idea of being able to keep these housing operations open, that is the difficulty which we are facing. It's one thing to be able to provide health care services and another thing to be able to keep facilities open. They are two distinct different areas of need and I have taken pains to indicate that, unfortunately, the provincial government is not in to the operation of these facilities. It is our requirement as a province to be able to provide health care services but not with the operation of these facilities.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** This minister is in the business of leaving people on the street. Aboriginal people on Prince Edward Island are Islanders. They are Islanders and under the constitution of Canada, the government is responsible for social assistance and helping our individuals here. Let's make no mistake about it. Don't try to blame the federal government for your inability to help here. Now what is the Bill C-48 money going to be used for in Off-Reserve Aboriginal Housing Trust?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, we have had a series of meetings with the Aboriginal leadership and we are coming up with a policy and a strategy exactly how that money is going to be spent. Once again, I differ with the hon. House Leader, the Opposition House Leader, is that he is mixing his apples and his oranges. I have already carefully explained for it that, yes, all Canadians receive health care which we have a budget for and that includes Aboriginals. The dollars that the hon. House Leader is talking about, however, we have met with them and we are going to be able to channel those into very well needed, in this case, Aboriginal health care.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** Are you telling me that none of this money can be used for keeping the houses open?

**Speaker:** The hon. Minister of Health, Social Services and Seniors.

**Mr. Gillan:** Mr. Speaker, it is my understanding that this is not housing rent dollars.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

### CAIS PROGRAM FORMS

**Mr. R. Brown:** Thank you, Mr. Speaker.

A question to the agriculture minister, Mr. Speaker. I've been doing some work and the

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Canadian Federation of Independent Businesses has done a study of the CAIS program and they have issued a report calling, The Case Against CAIS, and in this they have interviewed a lot of farmers and the difficulties they're having with filling in these forms and the complications of this system. Now he and the federal government promised 9 or 10 months ago that they'd fixed this problem. Now I know they're going to get up and blame the previous federal government but they promised they'd fix this program. When is this program going to get fixed so farmers can get their money and get on the land doing the things they want to be doing and not in their houses filling out government forms?

**Leader of the Opposition:** Good question.

**Speaker:** The hon. Minister of Agriculture, Fisheries and Aquaculture.

**Mr. Bagnall:** Thank you, Mr. Speaker.

As you know, the CAIS program was a program brought in under the previous government and the farmers that asked for years and years when this program started to have this changed, it hasn't changed and under the previous administration. But right now under Minister Strahl, that is one of the things that they are doing. At the ministers' meeting we were at, that was one of the items of discussion. There will be a shorter form. We will be able to do it in an easier way.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** Can the minister say when? When will this be done?

**Speaker:** The hon. Minister of Agriculture, Fisheries and Aquaculture.

**Mr. Bagnall:** To my knowledge, they're working on it and it should be in the near future but I haven't got a date yet but I'm sure it won't be 10 years.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

### PRICES FOR ISLAND POTATOES

**Mr. R. Brown:** No, it definitely won't be 10 years because there will be a new federal government after the next election.

I've also been looking at some issues here and some of the potato statistics that have been in Prince Edward Island - 2003, 2004, and 2005. It seems that we, our Prince Edward Island farmers are consistently paid less for their potatoes per hundredweight than the rest of the farmers in Canada. Example being in 2003, hundredweight prices were \$5.87 while in Manitoba and Alberta, they were getting \$15 a hundredweight and \$11 a hundredweight. I'm just wondering why the discrepancy. Why do our farmers get less for their potatoes than everybody else in Canada?

**Speaker:** The hon. Minister of Agriculture, Fisheries and Aquaculture.

**Mr. Bagnall:** Mr. Speaker, you know, the problem we have there is that a lot of our potatoes are grown for production for processing and the processing market is not overly as great as the seed market so it depends on where he's talking about and what area. But you know, Mr. Speaker, we had the highest growth, GDP on potatoes on

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anywhere so I mean we're over and above.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** Mr. Speaker, I notice - and I could stand to be corrected here - but Manitoba I think has a big processing plant or Saskatchewan. They have some big processing plants out there and in 2003, their average hundredweight in Manitoba was \$7.44 as opposed to us here at \$5.87. Now I know he's going to get up and say we produce more potatoes but their potatoes out there they produce - we produce 27 million hundredweight and they produce 21 million hundredweight so I'm just wondering. Manitoba has a plant and I stand to be corrected on that, processing industry too but why are they getting more for their potatoes than we are on Prince Edward Island?

**Speaker:** The hon. Minister of Agriculture, Fisheries and Aquaculture.

**Mr. Bagnall:** Mr. Speaker, one thing about Manitoba, they have a large seed production there and the price of seed is much higher than processing potatoes so that does change the marketplace drastically in the potato industry.

**Speaker:** The hon. Member from Charlottetown-Kings Square.

**Mr. R. Brown:** That's a good point the minister has just made. You know, before this government came in, Prince Edward Island had a great seed potato industry on Prince Edward Island. We had the Elite Seed farm that was going great and we were selling lots

of seed potatoes and since this government came in, that industry has gone by the wayside. So that's what happened here. It's not as much as it used to be.

Can the minister look into these figures and help our farmers get their prices up to the national average anyway?

**Speaker:** The hon. Minister of Agriculture, Fisheries and Aquaculture.

**Mr. Bagnall:** Mr. Speaker, our farmers are getting a good return on their investment but the problem being is, you know, the processing market is a stable price and it's set. It's set by the processors for the potato marketing and that's where we're getting into it because I think we're the only place in North America that did not get a price increase from the processors this year. And when the negotiations were taking place, they turned down to go with a zero percent increase and to jump up 8% next year. But that's what the problem being is in the processing and seed potatoes.

**Speaker:** Final question, the hon. Member from Charlottetown-Kings Square.

**SUNDAY OPENING OF LIQUOR STORES**

**Mr. R. Brown:** Thank you, Mr. Speaker.

I just want to question the Minister of Tourism. The minister of industry and the Premier now has agreed that liquor stores can open on Sunday. I'm just wondering: Is the Minister of Tourism fully supportive of opening liquor stores on Sunday on Prince Edward Island?

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**Speaker:** The hon. Minister of Tourism.

**Mr. P. Brown:** Thank you, Mr. Speaker.

One of the services that a lot of our visitors have been looking for on the weekends is access to retail alcohol and we looked at that. And government has looked at it along with the Liquor Control Commission and I'm sure that before the summer months that the decision will come forward.

**Mr. R. Brown:** So you agree with it.

**Speaker:** End of Question Period.