



Second Session, 38th Parliament

OFFICIAL REPORT OF
DEBATES OF THE
LEGISLATIVE ASSEMBLY
(HANSARD)

Wednesday, February 15, 2006
Afternoon Sitting
Volume 6, Number 2

THE HONOURABLE BILL BARISOFF, SPEAKER

ISSN 0709-1281

PROVINCE OF BRITISH COLUMBIA
(Entered Confederation July 20, 1871)

LIEUTENANT-GOVERNOR
Her Honour the Honourable Iona V. Campagnolo, CM, OBC

SECOND SESSION, 38TH PARLIAMENT

SPEAKER OF THE LEGISLATIVE ASSEMBLY
Honourable Bill Barisoff

EXECUTIVE COUNCIL

Premier and President of the Executive Council	Hon. Gordon Campbell
Minister of State for Intergovernmental Relations	Hon. John van Dongen
Deputy Premier and Minister of Education and Minister Responsible for Early Learning and Literacy	Hon. Shirley Bond
Minister of Aboriginal Relations and Reconciliation	Hon. Tom Christensen
Minister of Advanced Education and Minister Responsible for Research and Technology	Hon. Murray Coell
Minister of Agriculture and Lands.....	Hon. Pat Bell
Attorney General and Minister Responsible for Multiculturalism.....	Hon. Wally Oppal, QC
Minister of Children and Family Development.....	Hon. Stan Hagen
Minister of State for Childcare	Hon. Linda Reid
Minister of Community Services and Minister Responsible for Seniors' and Women's Issues.....	Hon. Ida Chong
Minister of Economic Development and Minister Responsible for the Asia-Pacific Initiative and the Olympics.....	Hon. Colin Hansen
Minister of Employment and Income Assistance	Hon. Claude Richmond
Minister of Energy, Mines and Petroleum Resources	Hon. Richard Neufeld
Minister of State for Mining.....	Hon. Bill Bennett
Minister of Environment and Minister Responsible for Water Stewardship and Sustainable Communities	Hon. Barry Penner
Minister of Finance.....	Hon. Carole Taylor
Minister of Forests and Range and Minister Responsible for Housing	Hon. Rich Coleman
Minister of Health	Hon. George Abbott
Minister of Labour and Citizens' Services	Hon. Michael de Jong
Minister of Public Safety and Solicitor General.....	Hon. John Les
Minister of Small Business and Revenue and Minister Responsible for Deregulation	Hon. Rick Thorpe
Minister of Tourism, Sport and the Arts	Hon. Olga Illich
Minister of Transportation.....	Hon. Kevin Falcon

LEGISLATIVE ASSEMBLY

Leader of the Official Opposition	Carole James
Deputy Speaker	Sindi Hawkins
Assistant Deputy Speaker	Sue Hammell
Deputy Chair, Committee of the Whole.....	Harry Bloy
Clerk of the Legislative Assembly	E. George MacMinn, OBC, QC
Clerk Assistant	Robert Vaive
Clerk Assistant and Law Clerk	Ian D. Izard, QC
Clerk Assistant and Clerk of Committees	Craig H. James
Clerk Assistant and Committee Clerk	Kate Ryan-Lloyd
Sergeant-at-Arms.....	A.A. Humphreys
Director, Hansard Services	Anthony Dambrauskas
Legislative Librarian	Jane Taylor
Legislative Comptroller.....	Dan Arbic

ALPHABETICAL LIST OF MEMBERS

Abbott, Hon. George (L).....Shuswap
Austin, Robin (NDP).....Skeena
Bains, Harry (NDP).....Surrey-Newton
Barisoff, Hon. Bill (L).....Penticton-Okanagan Valley
Bell, Hon. Pat (L).....Prince George North
Bennett, Hon. Bill (L).....East Kootenay
Black, Iain (L).....Port Moody-Westwood
Bloy, Harry (L).....Burquitlam
Bond, Hon. Shirley (L).....Prince George-Mount Robson
Brar, Jagrup (NDP).....Surrey-Panorama Ridge
Campbell, Hon. Gordon (L).....Vancouver-Point Grey
Cantelon, Ron (L).....Nanaimo-Parksville
Chong, Hon. Ida (L).....Oak Bay-Gordon Head
Chouhan, Raj (NDP).....Burnaby-Edmonds
Christensen, Hon. Tom (L).....Okanagan-Vernon
Chudnovsky, Dave (NDP).....Vancouver-Kensington
Coell, Hon. Murray (L).....Saanich North and the Islands
Coleman, Hon. Rich (L).....Fort Langley-Aldergrove
Conroy, Katrine (NDP).....West Kootenay-Boundary
Coons, Gary (NDP).....North Coast
Cubberley, David (NDP).....Saanich South
de Jong, Hon. Michael (L).....Abbotsford-Mount Lehman
Dix, Adrian (NDP).....Vancouver-Kingsway
Evans, Corky (NDP).....Nelson-Creston
Falcon, Hon. Kevin (L).....Surrey-Cloverdale
Farnworth, Mike (NDP).....Port Coquitlam-Burke Mountain
Fleming, Rob (NDP).....Victoria-Hillside
Fraser, Scott (NDP).....Alberni-Qualicum
Gentner, Guy (NDP).....Delta North
Hagen, Hon. Stan (L).....Comox Valley
Hammell, Sue (NDP).....Surrey-Green Timbers
Hansen, Hon. Colin (L).....Vancouver-Quilchena
Hawes, Randy (L).....Maple Ridge-Mission
Hawkins, Sindi (L).....Kelowna-Mission
Hayer, Dave S. (L).....Surrey-Tynehead
Hogg, Gordon (L).....Surrey-White Rock
Horgan, John (NDP).....Malahat-Juan de Fuca
Horning, Al (L).....Kelowna-Lake Country
Ilich, Hon. Olga (L).....Richmond Centre
James, Carole (NDP).....Victoria-Beacon Hill
Jarvis, Daniel (L).....North Vancouver-Seymour
Karagianis, Maurine (NDP).....Esquimalt-Metchosin
Krog, Leonard (NDP).....Nanaimo
Krueger, Kevin (L).....Kamloops-North Thompson
Kwan, Jenny Wai Ching (NDP).....Vancouver-Mount Pleasant
Lali, Harry (NDP).....Yale-Lillooet
Lee, Richard T. (L).....Burnaby North
Lekstrom, Blair (L).....Peace River South
Les, Hon. John (L).....Chilliwack-Sumas
Macdonald, Norm (NDP).....Columbia River-Revelstoke
MacKay, Dennis (L).....Bulkley Valley-Stikine
Mayencourt, Lorne (L).....Vancouver-Burrard
McIntyre, Joan (L).....West Vancouver-Garibaldi
Neufeld, Hon. Richard (L).....Peace River North
Nuraney, John (L).....Burnaby-Willingdon
Oppal, Hon. Wally, QC (L).....Vancouver-Fraserview
Penner, Hon. Barry (L).....Chilliwack-Kent
Polak, Mary (L).....Langley
Puchmayr, Chuck (NDP).....New Westminster
Ralston, Bruce (NDP).....Surrey-Whalley
Reid, Hon. Linda (L).....Richmond East
Richmond, Hon. Claude (L).....Kamloops
Robertson, Gregor (NDP).....Vancouver-Fairview
Roddick, Valerie (L).....Delta South
Routley, Doug (NDP).....Cowichan-Ladysmith
Rustad, John (L).....Prince George-Omineca
Sather, Michael (NDP).....Maple Ridge-Pitt Meadows
Simons, Nicholas (NDP).....Powell River-Sunshine Coast
Simpson, Bob (NDP).....Cariboo North
Simpson, Shane (NDP).....Vancouver-Hastings
Sultan, Ralph (L).....West Vancouver-Capilano
Taylor, Hon. Carole (L).....Vancouver-Langara
Thorne, Diane (NDP).....Coquitlam-Maillardville
Thorpe, Hon. Rick (L).....Okanagan-Westsides
Trevena, Claire (NDP).....North Island
van Dongen, Hon. John (L).....Abbotsford-Clayburn
Whittred, Katherine (L).....North Vancouver-Lonsdale
Wyse, Charlie (NDP).....Cariboo South
Yap, John (L).....Richmond-Steveston

LIST OF MEMBERS BY RIDING

Abbotsford-Clayburn.....Hon. John van Dongen
Abbotsford-Mount Lehman.....Hon. Michael de Jong
Alberni-Qualicum.....Scott Fraser
Bulkley Valley-Stikine.....Dennis MacKay
Burnaby North.....Richard T. Lee
Burnaby-Edmonds.....Raj Chouhan
Burnaby-Willingdon.....John Nuraney
Burquitlam.....Harry Bloy
Cariboo North.....Bob Simpson
Cariboo South.....Charlie Wyse
Chilliwack-Kent.....Hon. Barry Penner
Chilliwack-Sumas.....Hon. John Les
Columbia River-Revelstoke.....Norm Macdonald
Comox Valley.....Hon. Stan Hagen
Coquitlam-Maillardville.....Diane Thorne
Cowichan-Ladysmith.....Doug Routley
Delta North.....Guy Gentner
Delta South.....Valerie Roddick
East Kootenay.....Hon. Bill Bennett
Esquimalt-Metchosin.....Maurine Karagianis
Fort Langley-Aldergrove.....Hon. Rich Coleman
Kamloops.....Hon. Claude Richmond
Kamloops-North Thompson.....Kevin Krueger
Kelowna-Lake Country.....Al Horning
Kelowna-Mission.....Sindi Hawkins
Langley.....Mary Polak
Malahat-Juan de Fuca.....John Horgan
Maple Ridge-Mission.....Randy Hawes
Maple Ridge-Pitt Meadows.....Michael Sather
Nanaimo.....Leonard Krog
Nanaimo-Parksville.....Ron Cantelon
Nelson-Creston.....Corky Evans
New Westminster.....Chuck Puchmayr
North Coast.....Gary Coons
North Island.....Claire Trevena
North Vancouver-Lonsdale.....Katherine Whittred
North Vancouver-Seymour.....Daniel Jarvis
Oak Bay-Gordon Head.....Hon. Ida Chong
Okanagan-Vernon.....Hon. Tom Christensen
Okanagan-Westsides.....Hon. Rick Thorpe
Peace River North.....Hon. Richard Neufeld
Peace River South.....Blair Lekstrom
Penticton-Okanagan Valley.....Hon. Bill Barisoff
Port Coquitlam-Burke Mountain.....Mike Farnworth
Port Moody-Westwood.....Iain Black
Powell River-Sunshine Coast.....Nicholas Simons
Prince George North.....Hon. Pat Bell
Prince George-Mount Robson.....Hon. Shirley Bond
Prince George-Omineca.....John Rustad
Richmond Centre.....Hon. Olga Ilich
Richmond East.....Hon. Linda Reid
Richmond-Steveston.....John Yap
Saanich North and the Islands.....Hon. Murray Coell
Saanich South.....David Cubberley
Shuswap.....George Abbott
Skeena.....Robin Austin
Surrey-Cloverdale.....Hon. Kevin Falcon
Surrey-Green Timbers.....Sue Hammell
Surrey-Newton.....Harry Bains
Surrey-Panorama Ridge.....Jagrup Brar
Surrey-Tynehead.....Dave S. Hayer
Surrey-Whalley.....Bruce Ralston
Surrey-White Rock.....Gordon Hogg
Vancouver-Burrard.....Lorne Mayencourt
Vancouver-Fairview.....Gregor Robertson
Vancouver-Fraserview.....Hon. Wally Oppal, QC
Vancouver-Hastings.....Shane Simpson
Vancouver-Kensington.....David Chudnovsky
Vancouver-Kingsway.....Adrian Dix
Vancouver-Langara.....Hon. Carole Taylor
Vancouver-Mount Pleasant.....Jenny Wai Ching Kwan
Vancouver-Point Grey.....Hon. Gordon Campbell
Vancouver-Quilchena.....Hon. Colin Hansen
Victoria-Beacon Hill.....Carole James
Victoria-Hillside.....Rob Fleming
West Kootenay-Boundary.....Katrine Conroy
West Vancouver-Capilano.....Ralph Sultan
West Vancouver-Garibaldi.....Joan McIntyre
Yale-Lillooet.....Harry Lali

CONTENTS

Wednesday, February 15, 2006
Afternoon Sitting

Routine Proceedings

	Page
Introductions by Members	2233
Motions without Notice	2233
Amendments to Standing Orders	
Hon. M. de Jong	
Statements (Standing Order 25B)	2233
Multiculturalism in B.C.	
R. Chouhan	
D. Hayer	
All-Native Basketball Tournament	
G. Coons	
Tri-Cities Business Excellence Awards	
I. Black	
International Development Week	
R. Fleming	
Mart Kenney	
R. Hawes	
Oral Questions.....	2235
Consideration of user fees in health care system	
C. James	
Hon. G. Abbott	
Hon. G. Campbell	
Compliance of Copeman clinic with federal and provincial legislation	
D. Cubberley	
Hon. G. Abbott	
Hon. G. Campbell	
Long-term care facilities	
K. Conroy	
Hon. G. Abbott	
M. Farnworth	
Changes to health care system	
D. Chudnovsky	
Hon. G. Abbott	
Hon. G. Campbell	
J. Kwan	
Coverage of bank account charges for income assistance recipients	
C. Trevena	
Hon. C. Richmond	
Potential changes to school boards' mandate	
J. Horgan	
Hon. S. Bond	
Class size in education system	
J. Horgan	
Hon. S. Bond	
Relocation of regional fire commissioners	
N. Macdonald	
Hon. J. Les	

Throne Speech Debate.....	2240
I. Black	
K. Whittred	
C. James	
M. Polak	
L. Krog	
R. Hawes	
Point of Privilege.....	2262
Hon. G. Abbott	
Throne Speech Debate (<i>continued</i>)	2262
R. Fleming	
Point of Privilege (<i>continued</i>)	2265
L. Krog	
Hon. G. Abbott	

WEDNESDAY, FEBRUARY 15, 2006

The House met at 2:05 p.m.

Prayers.

Introductions by Members

M. Karagianis: Today in the House I have two members of my constituency. I have spoken about them in the past. They have now formed a society called the Voices Against Child Abuse. They are strong lobbyists on behalf of protection of children and the children's commissioner. Please make welcome Wendy and Brian DeCorte.

R. Lee: In the House today I have the pleasure to receive a group of university students from Taiwan. They are here to learn about our political system. The Taiwan youth group is led by Mr. Hong Jen and an adviser, Mr. Albert Sit. Members are Chen-Shiao Yeh, Kay-Ti Kuo, Yi-Fan Chen, Nai-Ling Chen, Yu-Chia Tung, Siang-Huei Chou, Chu Ou Yang, Cheng-Yu Chi, Chin-Pin Tseng, Jyun-Jhe Du, Pai-Jan Chan and You-Jhen Zeng. Would the House please make them welcome.

Hon. R. Thorpe: On February 11 a resident of Summerland, British Columbia, by the name of Kristi Richards fulfilled a lifelong dream. But before she could achieve that dream, she had to overcome serious injury in an accident in 2003 and then, in 2005, a major spleen injury in freestyle skiing.

Just a couple of weeks before the Olympics she qualified to represent British Columbia and Canada in Turin. On February 11 she placed seventh. I'd ask all members of the House to congratulate Kristi on her achievement. Now she's focused on 2010 here in British Columbia.

L. Mayencourt: In the gallery today we have two very special guests, Dr. Alfredo Tura and his fiancée Danila Trif. The reason it's important for me to introduce them today is that, as said earlier, this is Multiculturalism Week in British Columbia. These two immigrants to British Columbia have contributed greatly. They are internationally trained doctors, one from Romania and one from Italy.

Dr. Tura successfully lobbied this government and members of the Legislature to expand the number of training spaces that would be available to internationally trained doctors in British Columbia. They did that out of great desire not just to help themselves but to help all British Columbians have better access to health care. Please join me in welcoming Dr. Alfredo Tura and his fiancée Danila Trif.

D. Routley: Could the House please help me welcome my mother Edna Woods, stepfather Bill Woods and my daughter Madeline Routley, who join us today.
[1410]

R. Cantelon: I'd like the House today to acknowledge the efforts of another Olympian, Allison Forsyth,

a constituent who unfortunately did not fulfil her dreams. She fell during a training run and is returning home for surgery and therapy, but she intends to be back in 2010. I'd like the House to acknowledge and send her good wishes and success in the upcoming Olympics.

D. Jarvis: I'd like the House to wish good health to a friend of mine and an old friend of this House, Val Anderson, who was here for 14 years and is entering the hospital tomorrow for some minor surgery. Also, Val's real name is Valentine, and yesterday was his birthday. I wish everyone would wish him well for that.

Motions without Notice

AMENDMENTS TO STANDING ORDERS

Hon. M. de Jong: Mr. Speaker, in the fall session of this parliament, this chamber experimented with some changes to some of the procedures that we have followed. It is the government's view, and I think the opposition's view, that those changes proved themselves to be a success and are deserving to be enshrined more permanently in the rules that govern this place. So with leave, I seek to now move the following:

[That the Standing Orders of the Legislative Assembly of British Columbia be amended as follows:

1. That Standing Order 14 be amended by adding a further sentence at the end of the Standing Orders as follows:

"In addition, the House may appoint one of the Members of the Official Opposition to be Assistant Deputy Speaker."

2. That Standing Order 25B be amended by deleting the words "Three Private Members" in the first sentence and substituting the words "Six Private Members", and further by amending Standing Order 25B (2) by deleting the words "three Members" and substituting the words "six Members".

3. That Standing Order 47A be amended by deleting the words "15 minute" in the first sentence and substituting the words "30 minute".]

I so move.

Leave granted.

Motion approved.

Statements (Standing Order 25B)

MULTICULTURALISM IN B.C.

R. Chouhan: February 12 through 18 is Multiculturalism Week in British Columbia. During Multiculturalism Week people all across the province in all walks of life share and promote the wide variety of cultural traditions, customs and heritage of our neighbours, co-workers, family and friends. My own constituency of Burnaby-Edmonds is blessed to be one of the most ethnoculturally diverse parts of this prov-

ince and, indeed, Canada. According to the 2001 census, there are more than 26,000 immigrants from at least 49 different countries living in my constituency, and we are very proud of this.

While Multiculturalism Week is a time of celebration, it also offers opportunities to raise awareness of the challenges and to confront the attitudes that prevent British Columbians from creating the vibrant and prosperous province that we want to build. Too many new Canadians are unable to utilize the skills they bring when they immigrate to Canada, and far too often they face barriers to success in the job market, in the education system, within their families and in the community as a whole.

Also, 2006 marks the ten-year anniversary of the Black History Month Act passed by the B.C. Legislature in 1996, and February is Black History Month. I rise today to pay tribute to black history in British Columbia and around the world.

Finally, February 13 was the 629th birthday of Guru Ravi Das. Guru Ravi Das fought against racism and for equality for all human beings. I hope that all members of this House will join with me in celebrating Multiculturalism Week in B.C. and will work together to overcome these barriers that face so many people in this province.

D. Hayer: From Chinese New Year to Easter Sunday, from Vaisakhi to Hannukah to Eid, from longhouse to temple and every faith and culture in between, multiculturalism is the heart of British Columbia. From February 12 to 18 we celebrate Multiculturalism Week.

[1415]

Immigrants from nations across the globe who make up these many cultures are the ones who have built our British Columbia and created a culture of diversity that is unparalleled. With the tireless efforts of our Premier to include our first nations with their remarkable heritage, culture and art, we will continue to work together to make B.C. the best place in the world to live. Equality, respect and the proud celebration of our differences, combined with an outstanding work ethic and desire to succeed, are what make us strong.

This week we celebrate the contributions of our first nations along with those people in B.C. from across the globe — from Europe, Africa, Asia, India, Middle East, and North, Central and South America — who retain their cultural values along with a desire to live and work in harmony and equality. Whether at Greek Day in Vancouver or watching a Kabaddi game in Surrey, we have great opportunities to experience the world cultures right here at our home.

British Columbia is not and will never be a melting pot of cultures, yet we all have common goals and dreams for ourselves and our families. I urge everyone during Multiculturalism Week to savour a different food, celebrate a different cultural activity and enjoy the diversity that makes us so successful in British Columbia.

ALL-NATIVE BASKETBALL TOURNAMENT

G. Coons: I'd like to take this opportunity to mention and honour an event that has occurred yearly in my hometown of Prince Rupert for the last 47 years — the All-Native Basketball Tournament. The week-long tournament, which occurs in the beginning of February, has had a long and brilliant history. Twenty-one first nations communities were represented — from the Okanagan, Vancouver, Vancouver Island, Central Coast, Haida Gwaii, the Nass Valley — and many other nations from the northwest including our brothers and sisters from north of the border, Alaska. Fifty-six teams from four divisions — women's, intermediate, seniors, masters — arrived in town with over 700 athletes prepared to take home the glory.

I had the privilege of being involved with the opening ceremonies. Over 150 dancers from the Gitmaxmak'ay Nisga'a dance group started the event with 700-plus athletes and coaches on the gym floor of the Jim Ciccone Civic Centre. Thousands of fans and family packed the facility.

In my welcoming remarks I designated the All-Native Basketball Tournament as our Spirit of B.C. annual community event, as this spectacle promotes and celebrates the values that are important to all British Columbians. The All-Native Tournament definitely demonstrates the five key elements that define that spirit of British Columbia — achievement, effort, inclusion, celebration and excellence.

It is the largest athletic cultural event in Canada, and it does not receive any provincial or federal funding. I would like to congratulate the finalists from last week. In the seniors division, Hydaburg edged out a strong New Aiyansh team. Skidegate Saints over Kitimaat in the masters. Hydaburg Intermediates beat out a strong local favourite, the Friendship House. In the women's division, Prince Rupert Rain persevered over a gutsy Metlakatla B.C. team.

I would encourage everyone in the House to attend the 48th All-Native Basketball Tournament next February in Prince Rupert.

TRI-CITIES BUSINESS EXCELLENCE AWARDS

I. Black: On January 28 I was privileged to attend the Tri-Cities Chamber of Commerce Annual Business Excellence Awards. The awards honour individuals or organizations who demonstrate positive attributes and characteristics that help Coquitlam, Port Moody and Port Coquitlam remain vibrant, strong and caring communities.

The six award winners honoured include Club Aviva, whose comprehensive early development gymnastics program earned them the business excellence award for the outstanding small business of the year.

Ken Woodward, a fine man and a good friend and president of Unistrut Building Systems, won chamber member of the year.

Billy Weselowski from Innervisions Recovery Society, which provides guidance, support and care for

people affected by addiction, won the award for legacy leadership.

Linda Balzer, a longstanding community advocate who has sat on many boards ranging from the Terry Fox hometown run to the Port Moody Arts Centre, won citizen of the year.

PTI Punch Tools, the largest metal stamping and tool and dye shop in western Canada, whose owners won entrepreneurs of the year....

[1420]

Singled out as both business and newsmaker of the year that night was Amec, which has been a fixture in tri-city communities for almost 80 years employing 920 British Columbians in 12 offices throughout the province and 40 more offices around the world. This engineering services firm is one of the largest in Canada. In June of last year Amec garnered international media attention through the NASA launch of its Port Coquitlam-produced BLAST telescope and provided yet another example of how British Columbia is a world leader in the engineering and technology fields.

I would like to congratulate the winners and all those nominated for the awards. The gala was a great evening, and the Tri-Cities Chamber of Commerce is worthy of all of our praise for helping make their communities and indeed all of British Columbia a more prosperous, caring and contributing society.

INTERNATIONAL DEVELOPMENT WEEK

R. Fleming: I appreciate the opportunity to recognize that last week, February 4 to 11, was International Development Week. Events were held across British Columbia from Castlegar to Vancouver to talk about Canada's role in reducing poverty around the globe.

Each year International Development Week highlights and illustrates the work of Canada's development community. It is a week that promotes what Canadians are doing every day on a volunteer and professional basis to help some of the world's poorest people in developing countries.

Another purpose of International Development Week is to inspire a new generation of Canadian youth to direct their passion for a better world by getting involved in international development work. British Columbians have a tremendous sense of the responsibility of global citizenship. They are actively engaged in tackling some of the most pressing issues for the developing world — issues like small arms control, environmental contamination, democracy and human rights, trade issues, access to clean water and food, and local economic development.

There have been many encouraging signs and gestures from the developing countries of the northern hemisphere in recent years. This started with an acknowledgment that the gap between rich and poor countries is at an unacceptable level and that this problem is this century's most urgent issue.

Last week young people in B.C. intensely discussed ideas to reduce global poverty. I know that politicians and elected decision-makers in this part of the world

were identified as key in that effort. International Development Week reminds us all of the need for strong leadership to follow through on our collective commitments to increase foreign aid, to reduce crushing debt levels, to reduce disease and to bring clean drinking water to every part of the world.

MART KENNEY

R. Hawes: Last week Canada lost an icon. Mart Kenney passed away on February 8 in Mission at the age of 95. Mart's incredible music career began in the 1920s when he started forming dance bands in Vancouver. By the '30s Mart Kenney and his Western Gentlemen were established as the premier dance band in Canada. They were the first band carried nationally on CBC radio, and every Sunday night countless thousands tuned in for *Sweet and Low*, a CBC broadcast direct from hotels where the band was performing. Through the Second World War the band entertained troops all over Canada with over 200 victory performances. Mart Kenney was Canada's answer to Glenn Miller. Mart continued to play professionally until age 92, when the ravages of old age forced him to hang up his alto sax.

In his adopted home of Mission, Mart and his wife Norma were a driving force in developing the Mission heritage park into a revered local landmark. I had the honour of serving on a city council with Mart for over four years. So many, many times, when we were at events together, people would come up and say something typically like: "You're Mart Kenney. I saw you in 1940. You shook my hand, and I've never forgotten it." It was kind of like watching a rock star with a bunch of groupies.

Mart Kenney was not only a great musician, but as the *Winnipeg Free Press* noted, he is a great Canadian whose contribution to our culture and society is truly remarkable. Among his honours are the Order of Canada; the Order of B.C.; honorary doctorate of laws from the University of Lethbridge; honorary citizen, city of Regina; and freeman, district of Mission. Mart Kenney — a Canadian giant, ever a gentleman, gone at 95 but never forgotten.

[1425]

Oral Questions

CONSIDERATION OF USER FEES IN HEALTH CARE SYSTEM

C. James: Yesterday the Premier announced his intention to visit European countries like Sweden to see how they run their health care system. Well, Mr. Speaker, you don't need to travel to Sweden to know that they use user fees to run their health care system in Sweden. My question to the Premier is: does "transformative change" mean that patients who can afford it will get health care services and that those who can't, won't?

Hon. G. Abbott: I think it's very important for our health care system to learn not only what British Co-

lumbians think of their health care system and how it can be improved.... We do look forward to having a conversation with British Columbians about that. It's also important that we learn from success stories nationally, and it's important that we learn from health care systems internationally as well.

I think it's often important, at least conceptually, to think that we might learn things outside the bounds of this Legislature. I think it's important that we do that. All of the jurisdictions that we're proposing to visit are ones that have important elements in them where we can learn more about making a better health care system in British Columbia.

We know that the Conference Board of Canada, looking at 119 different indicators, said that British Columbia had the best overall health care system in Canada.

[Applause.]

We should be proud. We should be encouraged. We should also redouble our efforts to make our health care system an even better one.

Mr. Speaker: Leader of the Opposition has a supplemental.

C. James: I thank the Health Minister for his response. The Health Minister mentioned "important elements" in looking at European countries, so I ask the question again of the Premier. Is one of those most important elements, as the Health Minister is quoted, user fees?

Hon. G. Abbott: The Leader of the Opposition obviously wants to look at particular characteristics. The fact of the matter is that in every health care jurisdiction in the world, whether they're provinces or nationally administered health care programs, there are a great variety of permutations in terms of what is offered as far as insured services in those jurisdictions. There are also a thousand permutations in terms of how those programs are funded.

It would be interesting, for example, to know how many Canadians didn't realize that the Canada Health Act does not ensure services like ambulance, pharmacy and so on. There are a lot of different variations in the world, but none of that speaks to whether we can learn from the experience elsewhere. There is no question that we can, and I'm a little surprised at how, frankly, narrow we are hearing in terms of the comments from the Leader of the Opposition in respect of whom we should talk to, when we should talk to them, what we ought to learn and how we ought to improve the system. We have a wonderful health care system, but it can be improved.

Mr. Speaker: Leader of the Opposition has a further supplemental.

C. James: There's no question that innovation is important, but the public deserves to know what kind of innovation is on the table and what kind of innova-

tion isn't. User fees are a very clear part of many European countries when it comes to health care. Let's take a look at Germany, another country that the Premier mentioned he is looking at. They have user fees in Germany. As well, there's the fact that doctors are on salary. I wonder whether the Premier has had the conversation with doctors about going on salary.

I ask again to the Premier: are the issues of user fees and doctors on salary parts of the terms of reference that he's going to use to look at transforming our health care system?

[1430]

Hon. G. Campbell: We tried to be very explicit yesterday in the throne speech. Everything that we do will be within the Canada Health Act. It will respect the five principles of the Canada Health Act.

But we're talking about adding a sixth principle, which is sustainability. I understand the other side doesn't understand sustainability. Sustainability means we will have a health care system that is excellent and that provides services to the next generation of British Columbians, as well as our generation of British Columbians, and that's critical.

On this side of the House we think we can actually learn from others. Other parts of the world are wrestling with the same challenges that we face. The World Health Organization has ranked France number three. They rate Canada 30. They rank Sweden number seven. They rate Norway number ten. We can learn from them. Why are we afraid to ask questions? Why are we afraid to go out and find out how we can do better for patients in British Columbia and lead the country?

I know that all members in this House care about health care, and I'm sure all members will be engaged. I heard the Leader of the Opposition saying in January that she thought we should aspire to be like Manitoba. Well, Manitoba came out number ten in the Conference Board study. British Columbia comes out number one in the Conference Board study, and we're going to stay number one.

COMPLIANCE OF COPEMAN CLINIC WITH FEDERAL AND PROVINCIAL LEGISLATION

D. Cubberley: Well, it's very interesting to hear the Premier say that everything we do will be within the Canada Health Act.

You know, Mr. Speaker, the Minister of Health has been silent on the Copeman clinic and its violation of the Canada Health Act and the B.C. Medicare Protection Act for the last eight months. This model sets a dangerous precedent — patients paying thousands of dollars for access to a family doctor. Is this the model the minister and the government have in mind when they talk of transforming our public health care system?

Hon. G. Abbott: I've never been silent on the Copeman health clinic. Whenever I've been asked a question by a member of the media or anyone else, I've

given them an honest response, which I'll do again today. We believe that elements in Mr. Copeman's clinic are not within the bounds of federal-provincial statutes in respect of that.

My staff are working with Mr. Copeman to adjust his business plan, his advertising and so on, hopefully to bring him into compliance with the Canada Health Act and the Medicare Protection Act. That conversation continues. I do hope that those issues can be resolved.

Mr. Speaker: Member has a supplemental.

D. Cubberley: I notice that the minister never directly speaks to the matter of whether introducing fees for preferred access to family doctors constitutes an infraction under the Canada Health Act, which is clearly what legal opinion would tell you it does. The Copeman clinic is in clear violation of the Canada Health Act. Paying user fees for access to family doctors introduces a completely new form of privatization into B.C.

Isn't the real reason the minister has been silent when it comes to the Copeman clinic that this government never had any intention of challenging the introduction of two-tiered medicine into British Columbia?

Hon. G. Campbell: Let me be clear to the opposition. This government intends to make sure that we have a health care system in British Columbia that is sustainable and that is within the principles that have been established by the Canada Health Act. That's number one.

Number two. You know, I would think that here today in the first session, the first question period, someone from the opposition would stand up and say: "Congratulations to all those health care workers that have made us the best health care system in Canada." That's what this health care system is like.

I would particularly expect the Health critic for the opposition would understand that under the NDP government in the 1990s, there was a doubling of the number of private clinics in British Columbia.

What we're doing in British Columbia is that we're going to make sure that patients get the care they need in a timely fashion. We're going to increase the number of doctors we train. We're going to increase the number of nurses we train, unlike the NDP, who cut the number of nurses we were training.

[1435]

We're going to add medical technologists, unlike the NDP, who cut medical technologists, and we're going to keep working to keep B.C.'s health care system number one in Canada.

LONG-TERM CARE FACILITIES

K. Conroy: Promises, promises, promises, Mr. Speaker. That's all we hear from this Premier. We have yet to have delivered the promise of 5,000 long-term care beds for seniors. I think the seniors of Desert Valley Care, now more than ever, would like the minister

to honour that commitment. Desert Valley Care is a private care facility in Osoyoos, which just announced that all seniors currently cared for there have 18 days to pack up and hit the road.

Minister, you have failed to build long-term care beds for seniors. Our hospitals are overflowing; there's nowhere for these seniors to go. What are we going to do about that?

Hon. G. Abbott: I'm very proud of what this government has been able to do in terms of alternative levels of care for the frail elderly in this province. We have come a long, long way from the NDP decade that saw only 1,400 additional units added across that ten-year period. We have enormously improved the quality, as well as the quantity, that is available to British Columbia's seniors. We have seen over just the past few years 5,000 units in this province that have been remediated, which have gone from often three- and four-bed wards to single rooms. So the quality of life that our seniors enjoy is much better.

When we took office, people were waiting upwards of a year across this province for residential care. Today the range between the health authorities is between 18 and 36 days' wait on average for residential care.

Mr. Speaker: Member for West Kootenay-Boundary has a supplemental.

K. Conroy: I want to correct some history — 1,400 beds in ten years; 600 net long-term care beds in five years. You've had five years to produce 5,000 beds, and you've got 600? That's a shame.

I think the seniors in Osoyoos deserve some answers. Maybe they'd like to know why this Liberal government has cut 35 percent of long-term care beds in the Osoyoos area alone. With no beds in the public system, seniors are being forced to look at private options — expensive, huge fees they're paying for these beds. With 18 days' notice, where are they going to go? How about this government and this minister transform a few of these private facilities back into the public system so that these seniors can be assured of care?

Hon. G. Abbott: We are well aware of the specific instance — the private care home — that the member references. The Interior Health Authority is aware of it, as well, and is working to find accommodation for those who might be displaced should that facility close.

On the general issue of the provision of further alternative level of care beds, we are adding literally thousands of additional units in the current year, and we will be adding thousands more units in 2007 and 2008. We are moving forward. We're making a huge investment in this area of public policy and administration, and I think it is exactly in the right direction.

The member says: "Well, why doesn't the government just take over the private homes?" I guess that's sort of a typical NDP response here. Unless something is owned by the government — unless it's bureaucra-

tized, centralized, socialized and nationalized — somehow it doesn't have worth. In fact, I think we are doing the right things in this province, and qualitatively and quantitatively our seniors are enjoying a better life.

[1440]

M. Farnworth: The residents of Desert Valley are not the only seniors in this province wondering what the future holds for them. The seniors of Mayfair Manor in Port Coquitlam are in the same dilemma. Staff there were not paid for months. In fact, the place looks to be on the verge of collapse, and a trustee has now been put in place.

My question to the minister is simple. Is this the kind of care and is this the kind of compassion that this government wants to bring to seniors in this province? Is this the kind of model that seniors can look forward to under their transformed model of private care?

Hon. G. Abbott: I doubt whether even the member himself believes what he just read into the record. Frankly, to suggest that somehow Fraser Health Authority hasn't been on this — the Ministry of Health have not been on it — is utterly unfair to the officials who have worked very hard to ensure, whether it's at Mayfair Manor or elsewhere.... When a private facility....

The government does not even contract with this facility. It is a private sector facility, but when problems occurred, Fraser Health has moved forward to try to ensure the welfare of the patients at Mayfair Manor, and the province has moved forward and tried to ensure the best care for those patients. Again, this is all ringing very hollow because remember that when we took office in 2001, what we saw was inadequate seniors facilities across this province — no washrooms in many of the rooms, four-bed wards, inadequate hallways...

Mr. Speaker: Thank you, minister.

Hon. G. Abbott: ...inadequate doorways, much remediation to be done.

CHANGES TO HEALTH CARE SYSTEM

D. Chudnovsky: The Premier tells us that his government is going to innovate in health care, and to do that, flights to Europe are required. But we've got innovation right here in British Columbia this week. The innovation that we see in British Columbia is private contracting-out of surgeries to try to deal with the wait-list crisis this government created by closing acute care beds.

My question to the Premier: wouldn't it make more sense to reopen the acute care beds that this government has closed all over the province, rather than transforming the system by flying to France?

Hon. G. Abbott: One of the traditions in this House is that whenever issues like this come up, the NDP invariably responds to them in both a hysterical and

hypocritical fashion, and I am glad to see the member here is no exception to that.

What we have seen is an enormous gap between the NDP rhetoric in respect of this and NDP action in respect of this. In office, the NDP doubled the number of private clinics in the province. In office, they contracted out cancer care to an American private facility. In office, they contracted cataracts to a firm over in North Vancouver. In fact, in a most recent instance, which I think speaks to the fundamental hypocrisy of this particular movement, is the national leader of the NDP. I understand, when he suffered a pain in the Shouldice, he immediately moved to try to get that done in a private clinic. Clearly the gap between rhetoric and reality is insurmountable here.

Interjections.

Mr. Speaker: Members. Members.

Member for Vancouver-Kensington has a supplemental.

D. Chudnovsky: The government talks about transformation that's going to come in the future, but British Columbians are well aware that this government has already transformed our health care system. Waiting lists are soaring, the food is terrible, and the rooms are dirty. Beds are closed, emergency rooms are overcrowded, and seniors don't have access to the care that they need and deserve. British Columbians are tired of that kind of transformation in our health care system.

Why not keep the promises that the government has made over the last six years to improve the system, rather than transforming our public health care system by running it into the ground?

[1445]

Hon. G. Campbell: Well, the government promised that we were going to double the number of doctors we trained after nothing was done through the 1990s. Guess what. We're doubling the number of doctors we're training in British Columbia. This government promised to increase the numbers of nurses we were training, so what we've done is increased the number of nurses trained in British Columbia by 62 percent. The government undertook to provide for additional MRIs, additional CT scanners, additional facilities. We promised to build a new hospital and cancer clinic in Abbotsford. We're doing that. We promised a new academic ambulatory care centre, and we're doing that.

We promised people that we would do what we needed to do to take care of them. We've watched a 35-percent increase in the number of hips that are being replaced in British Columbia, a 65-percent increase in the number of knees that are replaced in British Columbia. We are recognized with the new surgical innovation centre that we're going to increase that by another 35 percent in British Columbia. That's what we promised, that's what we're delivering, and that's why we're number one in Canada.

J. Kwan: Let us be clear. This Premier and this government promised British Columbians health care when and where they need it. This government and this Premier promised 5,000 long-term care beds. Instead of delivering both of those promises, he closed thousands of long-term care beds and only managed to build 600 in their place.

Let's ensure that the Premier and the Health Minister take a trip to Kelowna, because I'll tell you what. People are waiting in hallways in ERs across this province. Patients need a bed today, and the trip to Norway and elsewhere will not find them that bed they need today. In fact, Kelowna hospital has transformed a hallway ward of its very own. This hallway ward has eight permanent beds in operation. The community there call it and have dedicated it to the Premier.

So why doesn't the Premier take a trip to Kelowna and land there and transform those closed acute care beds in the region by simply reopening them to ensure that hallway ward will actually be eliminated and dealt with effectively for the people in that community?

Hon. G. Campbell: You know, Mr. Speaker, I'm really quite interested that the opposition is so frightened of anyone going outside and finding out what else is happening in the world. Maybe we can learn something from what's happening in those places.

Interjections.

Mr. Speaker: Members. Members.

Hon. G. Campbell: Let me just say I have visited Kelowna. In Kelowna we've opened an operating room, which the NDP never did. In Kelowna we've added an MRI machine, which the NDP never did. In Kelowna we're going to provide a new medical school, which the NDP didn't even think of, for the whole province. While the opposition may want to put on their blinkers and say we're not going to pay attention and we're not going to learn, I can tell you, we're always going to learn what's best for patients in British Columbia.

COVERAGE OF BANK ACCOUNT CHARGES FOR INCOME ASSISTANCE RECIPIENTS

C. Trevena: I'd like to ask the Minister of Employment and Income Assistance if he will guarantee to pay bank charges for people who are receiving benefits and now need to have bank or credit union accounts.

Hon. C. Richmond: I think we shouldn't lose sight of what we are trying to do for those most vulnerable in our society. About 70 percent of our caseload now are already on electronic deposit.

[1450]

What we are trying to do is encourage the last 30 percent, the most vulnerable, to get on electronic deposit. To that end, we have worked out arrangements with several banking institutions, including the credit

union right in downtown east side Vancouver, to prevent those who prey on these people from robbing them of their money every last Wednesday in the month.

Mr. Speaker: Member for North Island has a supplemental.

C. Trevena: I would like to ask the minister how giving time-limited free gifts of five pairs of cotton socks or two T-shirts or a travel mug, all in a canvas bag, is going to help people stop being preyed upon. Surely it would be better to ensure that people get the benefits they need rather than giving them gifts. How are people going to afford the bank charges when all they get is \$510 a month for everything — for rent, for food, for transport, for clothes? I'd like the minister to tell me.

Hon. C. Richmond: We on this side of the House feel it's much more important that those people keep that cheque or keep that money, rather than some unscrupulous landlord or person taking it from them and giving them a hundred dollars' worth of drugs. We also are told by the people who work with these less fortunates every day that one of the most important things you can give them from time to time is a pair of socks. I think that's a pretty small amount to give them the incentive to help us let them open a bank account so they don't have to walk around with a cheque or with money in their pockets.

POTENTIAL CHANGES TO SCHOOL BOARDS' MANDATE

J. Horgan: There was a second travelling road show announced in the throne speech yesterday. That magical mystery tour is going to take the Minister of Education, along with the Premier, to various school districts across the province. My question to the Minister of Education is this. While you are travelling around the province visiting school trustees, are you going to reinforce your support for locally elected, autonomous boards, or are you going to be passing out pink slips in the name of repurposing?

Hon. S. Bond: I can't believe it. Time after time this afternoon we've heard concerns about talking to the people of British Columbia. To make light of the fact that the Premier and Minister of Education actually want to talk to parents and school trustees and students so we can ensure we have the best education system possible.... Unbelievable. Unbelievable.

In fact, we're going to ensure that this province has the system that our students deserve not simply for today but for tomorrow and for the years that follow. We're going to ask those questions. It's important. That is leadership, Mr. Speaker.

Mr. Speaker: The member for Malahat-Juan de Fuca has a supplemental.

CLASS SIZE IN EDUCATION SYSTEM

J. Horgan: That sounds like pink slips for trustees to me.

I'm curious. The leadership that was absent from 2001 to 2005 can't be replaced by a quick tour and a couple of promises. I want to go back to the Minister of Education. She talked about some statistics and getting information from school boards. Last week she announced that 9,000 classrooms in this province have more than 30 students in them. I'd like to ask the minister if she could tell this House and parents across the province: what research, what educational design theory, what anecdotal support does she have for condemning 9,000 classrooms to 30 or more students? What evidence?

Hon. S. Bond: Every day in the province of British Columbia in classrooms, teachers do an extraordinary job of making sure our students get the best education possible. In fact, let's look at the outcomes.

Interjections.

Mr. Speaker: Members, we listened to the question. Let's listen to the answer.

Continue.

[1455]

Hon. S. Bond: Today in British Columbia we have record completion rates — 79 percent of our non-aboriginal students, the highest rate ever. When we look at the results for 15-year-olds in the province, in 41 countries no one performed better than British Columbia's students in both math and reading. Great things are happening.

RELOCATION OF
REGIONAL FIRE COMMISSIONERS

N. Macdonald: The fire chiefs in the Kootenays have looked at the reorganization of the office of the fire commissioner. They have seen that it is an error, and they have articulated that clearly. My question is to the minister responsible, the Minister of Public Safety. Why persist with a reorganization that fire chiefs across the Kootenays are saying is ill-considered and ultimately destructive?

Hon. J. Les: I appreciate the question. The member and I have exchanged correspondence on this issue previously, and I understand he will be meeting with me and the fire commissioner in the next several days to further discuss this matter. Simply put, what we are doing is making fire services advisory personnel more widely available across the province on a more dispersed basis so that that service actually will be more readily available to communities across the province. I think that is an improvement, and I look forward to carrying on that conversation with the member opposite in the next several days.

[End of question period.]

Orders of the Day

Hon. M. de Jong: I call reply to the throne speech.

Throne Speech Debate

I. Black: I feel privileged to stand and make the following motion. I move, seconded by the member for North Vancouver-Lonsdale, that:

[We, Her Majesty's most dutiful and loyal subjects, the Legislative Assembly of British Columbia in session assembled, beg leave to thank Your Honour for the gracious speech which Your Honour has addressed to us at the opening of the present session.]

Citius, altius, fortius — these three Latin words mean swifter, higher and stronger, and they are the official motto of the Olympic Games. Baron de Coubertin borrowed the motto from Father Henri Martin Dideon, the headmaster of Arcueil College in Paris. Father Dideon used the motto to describe the great achievements of the athletes at his school, and Coubertin felt it could be used to describe the goals of great athletes around the world.

Swifter, higher and stronger can just as easily be used to describe the attitude, determination and focus of this B.C. government opening a new and compelling chapter of progress in the history of this magnificent land.

[S. Hawkins in the chair.]

Yesterday's throne speech illustrated much more than a government with a few ideas to work on between now and the next election. The speech reflected the boldness of a government willing to embrace the historical challenges inherent in protecting our most sacrosanct institutions, like public health care, and the trust a government is willing to place in the opinion and views of the electorate through engaging them to define the services desired.

It touched on matters critical to my great riding of Port Moody-Westwood — the gateway plan most urgently, but also arts funding, developing business opportunities with Asia and environmental actions, including the Kitasoo spirit bear conservancy. The speech also touched on issues on which I'll expand shortly, specifically education, law and order, and health care.

[1500]

It is clear moving forward that we will ask the difficult questions and place provocative matters squarely in the public view for the education and input of our citizens, for that's what leaders do. We tackle the tough problems. As my dad has said on many occasions, if it was easy, anybody would be doing it. Well, it's not up to anybody. It's up to us.

Transformation. It's one of my favourite words, actually, as it most often speaks to progress, to improvement and to badly needed revitalization. In my case, it has defined most of my career as I developed an

expertise in business transformation, taking organizations in a distressed state to sustainable financial and strategic health.

It was a phenomenon I witnessed from the relative sidelines as the Premier and this government started on the long road back from the dysfunctional and bankrupt state they inherited in 2001. It was a key motivator in deciding to put my shoulder to the wheel, to do my part, to join the remarkable team of men and women that now comprise our government. The word was mentioned 13 times in yesterday's throne speech, and all hyperbole and media drama aside, I can't think of a time in recent history when the word and the actions and obligations that define it are more needed than right now.

Health care has long remained the number one concern of British Columbians, and it certainly is the primary focus area of my riding of Port Moody-Westwood. As our population ages, the need to meet this concern will grow. Consider this: in the last four years knee replacements have gone up 65 percent; hip replacements are being done 35 percent more; and cataracts, 20 percent — and all of this with what the health authorities are referring to as the seniors tsunami still ahead of us.

With one in four people expected to be seniors in less than 25 years, up from only one in seven today, future health care needs must be planned for now, for we will have a small number of people — including me — paying for more complex and expensive services required by a disproportionately large percentage of our population, including most of my esteemed colleagues who, incidentally, are living longer and are more aware of some of the expensive drugs, equipment and treatment options available.

If we fail to take action, if we fail to face down the daunting health care demands and costs most certainly ahead, there is no question that demand will exceed our capability, resulting in massive queues, poor and inconsistent service levels, and distress and disruption for almost every family in our province. There are those who mistakenly cling to the old adage that more money equates to better health care. This misnomer should be relegated back to the 1960s and the time of punch-card computers.

We need to evolve, like today's medical technology, and not look at yesterday's solutions to solve tomorrow's problems. In the United Kingdom even the left-leaning Labour Prime Minister Tony Blair realizes the old one-size-fits-all method of health care delivery has seen its day come to an end.

Today they have ditched this dictum and have embraced alternative forms of delivering services to patients, including — yes — private sector involvement. Thanks to trail-blazers in Britain and innovative and alternative funding methods such as public-private partnerships, that country is seeing new hospitals being built and the expansion and modernization of existing ones.

We can learn from this. We must learn from this and from other countries like Sweden, Norway and

France — not exactly hotbeds of capitalism, we must hasten to point out. Even federal NDP leader Jack Layton has seen to embrace private sector's involvement in our health care system. If the private provider that provides publicly funded services, like the Toronto Shouldice clinic, is good enough for Jack, it is surely good enough for the general public.

Let me be crystal-clear, however. This government is resoundingly committed to a public health care system. No one will ever be denied treatment because of their financial status. Canada and British Columbia will never adopt an American-style health care model. It is not our way. It does not reflect our values.

We will not only enshrine into provincial law the five principles of the Canada Health Act but also add a sixth and a very important one — sustainability. Moreover, we will also meet the essential and decades-overdue objective of eliminating the mystery, uncertainty and emotion around these principles by developing clear definitions of them. If going backwards is not an option and standing still is not an option, then we must go forward.

[1505]

I applaud and resoundingly support this plan that calls for doing so by listening to our electorate, learning from the world leaders and engaging in real dialogue with the B.C. men and women — apparently so easily dismissed by our opposition — on whom we rely every day to deliver what is currently the best health care system in the land.

I know there are those, including the opposition, who are resistant to change, who oppose the evolution of our province's health care system. Quite frankly, these narrow-minded ideologues are either sadly misinformed or reluctant to adopt any views beyond the special interest groups that fund their very existence.

The opposition is clinging to fundamental beliefs that are out of touch with today's realities and that lack an understanding of tomorrow's challenges. Indeed, simple proof of this lies with the NDP opposition leader's embracing of Manitoba's health care system. "A province" — Manitoba — "that is leading innovation and change and providing a model for the rest of Canada in terms of what can be achieved when New Democrat values are put into action," she said in January of last year. Well, those NDP values of Manitoba are relegated to a national ranking of last.

On the other hand, we rank number one in Canada for public health care, because great employees are following a comprehensive and solid plan. It's quite simple, really. We are spending more on health care — an additional 24 percent versus under the NDP — and we're spending it better.

Being the best is not good enough for this government. We must do better for British Columbians, and to get there we know we have to be bold enough to address the very heart of the matter. Our government will listen to British Columbians on this important topic.

We will listen to the Premier's council on aging and seniors issues, and we will listen through the newly formed foundation for health care innovation and re-

newal. We will listen through provincewide consultations that will ask the question: what are the fundamental changes we must make to improve our health and protect our precious public health care system for the long term? We will consult with all British Columbians and not just base our decisions on the views of a few special interests.

It must be noted that the beloved NDP icon Tommy Douglas based a Saskatchewan model of state-run health care on the British National Health Service model. He was a true pioneer, and there were many who scoffed at his plan. There were mass protests organized by those who wished to keep the status quo, but he persevered, and we all benefit today because of it. There's an irony staring us in the face here.

The NDP are today creating the same opposition to progress for the betterment of our people and the protection of our most vulnerable that Tommy Douglas himself had to overcome to bring us health care in the first place. Our plan will build on Tommy Douglas's vision and help establish sustainable health care for everyone.

Our plan outlined in the throne speech is comprehensive, including not only consultation and the study of international best practices but the training — up to 62 percent in the case of nurses — and recruitment of our medical professionals, a \$60-million backlog reduction program for knee and hip surgeries, the application of technology, provincial research initiatives — all complemented by housing strategies, addiction services and related support services.

Another great institution that's at a crossroads and another example of our government willing to acknowledge and tackle the tough issues is public education. Here, too, we have a fundamental shift in the current environment that we cannot ignore: thousands fewer students every year; a more complex curriculum in many areas, creating higher demands on our classroom teachers; evolving societal impacts on our communities; and a classroom composition that is awfully different than when I went to school.

Frustrating all of this is a decision-making or authority structure that is spread across at least three levels of government — ministry, school district and the school itself — with very fluid, if nonexistent, accountability and other checkpoints within it.

Our plan outlined in the throne speech will not only look to improve that situation for the betterment of our kids and the public education system as whole, but it will also do so by continuing with the Premier's education round table, staying mindful of the Vince Ready recommendations, and by increasing the focus on technology investment and, most urgently, on parental awareness, involvement and support.

Similar to my comments on the efforts to develop definitions around our principles of health care, the recent effort of the Ministry of Education to pull together and analyze class-size data for the first time will help eliminate the debate in many areas and will allow the partners in education to concentrate their efforts on

mutually acknowledged challenges starting from a demystified common starting point.

[1510]

My recent visitations to many schools in my riding absolutely and resoundingly support the need for this focus, this analysis and this discussion going forward. In my many hours of discussions with principals, teachers, union reps, special education specialists, leaders of parent groups of atypical normally special needs children, four observations consistently came through.

(1) No one defended the status quo. All see need for change of some kind to move forward.

(2) There is not a clear understanding of who exactly is in charge of every element of the system. Questions were posed to me that were really in the domain of the school district, and there were questions being posed to the school district that were really best channelled to the Ministry of Education.

(3) This is not just a matter of more money. All acknowledge that despite the election positioning to the contrary, there is more money in the system. In the case of my school district 43, this is almost \$20,000 more per teacher than five years ago. When money was mentioned, it was as a means of a transformational end of some kind.

(4) I asked every principal for the number one concern, and I was surprised and highly educated as a result when every single answer came back differently. Every one was a material concern, and every one led to compelling dialogue that must continue. You see, parents demand the best for their kids, and taxpayers want an education system that makes the best use of their tax dollars. They elected us with that mandate, and we are acting on that mandate.

Our children need to be educated in an environment where they will achieve to their very best capability. That is why we have enshrined class size into law. Last week's first-time publication of class sizes by school districts and, more importantly, the ensuing discussion, debate and attention that has resulted are proof that this legislation will be an effective tool to ensure that some baseline standards exist throughout the province.

Parents need to be informed of this information, and that's why this data was collected and made known to the public. Building on this, we will continue to listen to parents and teachers and to make sure that both the students and the needs of the taxpayers are met. In doing so, we will not rule out allowing more local autonomy.

We will meet the growing need to have instruction relevant to today's evolving world. The curriculum will be placed under scrutiny to make sure our province's children are receiving the best possible education, and we will work with our province's teachers and educators to build public education and allow for more choice and flexibility. We will also, however, work on the governance model to help better define for parents and taxpayers where the accountability for school boards begins and ends.

All of these steps will translate to meaningful and measurable progress for students, teachers and all the other employees in our school system, which will benefit all British Columbians for future generations to come.

Let me speak to law and order for a moment. The rights of law-abiding British Columbians should always come ahead of the rights of criminals. Those who prey on society must be told once and for all that their actions are unacceptable, and they will be punished.

Too many communities are facing the menace of crystal meth and other illegal drugs. In addition to a new public awareness campaign, those who peddle these narcotics must be targeted and feel the full brunt of the law. Addicts and those at risk will be helped through prevention and treatment programs. We've put over \$1 billion aside in mental health and addiction funding. However, criminals must and will be treated with contempt.

We will push the new federal government to introduce new Criminal Code provisions that will force judges to impose minimum sentences for drug dealers — no excuses, no mitigating circumstances, no sob stories. The message should be very clear. If you peddle poison, you will go to jail — period.

To support this, we will give our police some new technology and new teams, and we will enact new amendments in law. We will strengthen the power of our coroner's office, introduce new community courts and involve our first nations communities as part of an integrated prevention strategy. Make no mistake: fighting crime is a priority for this government. Gang violence, sexual predators and those in cybercrimes will be targeted through new police technology and resources as part of our comprehensive plan for taking our province forward.

You know, I enjoyed one of my most inspiring moments since becoming an MLA a few weeks ago back in my riding. To raise awareness for the B.C. Association for Community Living, a group of ambitious climbers will declare from the highest mountain in Africa, Kilimanjaro, their organizational goal to build a community where everybody belongs.

[1515]

This is the first time that people with developmental disabilities will participate in a Mount Kilimanjaro climb. Two Coquitlam residents, Ron Berg and Eric Andersen, are among the group of 45 attempting the climb as we sit here right now. Both are developmentally disabled but are not going to let that stop them for a second.

Meeting these men, their families, their climbing support persons and their supporters and sponsors was an inspiring and moving experience, and I was thrilled to attend their send-off dinner and to leave them with B.C. pins for people they meet along the way and the greetings of our province and our Premier.

As of last night the entire group had reached the Karanga valley camp. They have reached the 4,000-metre mark of the 5,895-metre peak. From there, their

team has a few choices to make as they choose the route they will take to the summit.

I view the work we do in this very House in a similar fashion. I would like to truly believe that we all aspire to climb the same metaphorical mountain — extraordinary public education, sustainable and comprehensive health care — and that our different politics between the government and the opposition have us simply debating the best route from the base camp to get us to the summit.

But I have been left wanting for that debate. I have heard little in the past months of an alternative route, just that the one proposed is unacceptable. All I've heard around the proverbial campfire from our opposition is: too steep, too long, too few involved, too many involved, too much consultation, not enough consultation, no unionized Sherpas. Were we to be persuaded by this banter, we would be left no closer to our goal with a cold winter coming and rations running out.

I not only accept that the primary role of Her Majesty's official opposition is to oppose, I embrace and celebrate that pillar of our democracy. But it is incumbent on the opposition not only to oppose but also to propose. The throne speech delivered yesterday contained over 60 actionable items — not ideology, not partisan platitudes and not throwaway press moments. I expect in the coming days that we will hear much from the opposition, as we started to hear today, about parts of the throne speech that displease them.

Sadly, like only picking at finishing threads of a complex tapestry, my ultimate concern is that we will witness a repeat of the performance of this past fall, when we government MLAs sat politely and too often silently whilst opposition member after opposition member spouted empty philosophy or, more often, negative, hollow and pessimistic observations: no alternatives; no specifics of an alternative plan; no evidence that any idea floated had been researched, costed or validated by experts in the field.

While polite we will endeavour to remain, silent we will not. That time and that free ride are over. We as a government will be calling for more than empty opposition rhetoric such as oft heard lately. The people expect more. More what? And what people? What's the plan, and who's to pay for it? In the face of transformation discussions, it is time for the opposition to declare a position and be specific.

The opposition leader's comments in the media yesterday were typical. The Premier shouldn't go to talk to the world leaders in health care provision. He should go to visit some hospitals here in B.C., apparently to validate that there's a problem with the current approach to health care that's built up over the past 40 years.

Forgive me, but that's the very reason we're going to check with the world leaders in health care: because we already know that despite spending over 25 percent more today than we did in the best year of the NDP — now about \$12½ billion a year, up just a little over \$9 billion — we're not financially able to face the demands

that are coming at us in a few short years without a fundamental rethinking of the entire system.

Health care, as we currently approach it, is not sustainable — period. This is not politics; it's simple arithmetic. Yes, we have undertaken with this throne speech a desire to ask the tough questions, to address the problems beneath the surface — those that are too easily but often fatally ignored — to investigate and check up on our own progress and to avoid the otherwise politically safe trappings of doctoring the status quo that further camouflage the eroding underpinnings of all those public institutions we hold so dear.

[1520]

This is what leaders do, and this is the call we are answering with this throne speech, with this government and with that Premier. There's only one consolation about the rabble-rousers at the base camp of the mountain. Should they not wish to change their approach or to develop an alternative route up the mountain and be prepared to debate its merits in good faith, then those of us who are prepared to climb, to achieve, will set off anyway. We are soon out of range of their thrown stones, and their catcalls soon are lost in the howling wind.

Citius, altius, fortius: swifter, higher, stronger. In four short years those words will resonate more with the citizens of this province, because we'll be living the exciting experience of hosting the 21st Winter Olympic Games.

The call for all of us as legislators is to model this behaviour, this ambition for extraordinary achievement, between now and then. Let us lead with the same passion, purpose and conviction displayed by the best of our athletes, and let our constituents, our students, our teachers, our hospital patients and workers, our seniors and those most in need be the beneficiaries. To do anything less, whether in government or in opposition, would let down those who entrusted us with the very responsibility of representing them here in this House.

K. Whittred: It is now my pleasure to rise and second the motion made by the member for Port Moody-Westwood.

I am pleased to respond to the throne speech. In keeping with the tradition of the throne speech, I'd like to take just a moment to honour a few of the individuals in my community of North Vancouver who have received some sort of special tribute in the last year. First of all, I'd like to acknowledge that we have three new mayors on the North Shore: Mayor Mussatto of North Van city, Mayor Richard Walton of the district and Pamela Goldsmith-Jones of West Vancouver.

I'd like to complement Gerry Brewer, a longtime resident of my community who has been honoured by the chamber of commerce with the 2005 lifetime achievement award. In fact, I would like to honour the chamber, because it is this year celebrating its 100th anniversary of serving the people of North Vancouver.

The other day I had the honour of attending a ceremony where Charles Gould was honoured with a

60-year pin from the Canadian Legion. Imagine — 60 years. He's 82. He served with the navy during World War II, and this was quite a moving ceremony.

Also, I would like to pay tribute to Mrs. Pamela Ewens, who was a veteran of the year for North Vancouver. She was the poster girl on the poster that was put out to celebrate the Year of the Veteran, and she also is a resident in my community.

I also want the House to lend their thoughts to the Perrault family. Senator Ray Perrault has recently been in ill health, and I'm sure that all of our thoughts are with that family.

Artist Ted Harrison was recently awarded the Order of the Owl. This is an order given in North Vancouver for the people who support the Artists for Kids program, so our congratulations go out to Ted Harrison.

Finally, Farzin Barekat of Sutherland School scored a perfect 80 out of 80 on the Canadian Open Mathematics Challenge in November. He was invited to attend the Canadian Mathematical Society camp at York University, and he's hoping to be named to the Canadians' International Mathematical Olympiad team. There is someone who.... I can hardly imagine, given my record in mathematics, that anyone could score a perfect score in a math test.

The theme of this year's throne speech is one that is near and dear to my heart. It is about dealing with change and how governments deal with change, especially the challenge of demographic change.

[1525]

The other day I was at a meeting. The presenter at this meeting presented a model, and in this model, which was very fancy — you know, PowerPoint and all sorts of graphs and bells and whistles — he showed that at a date in the not-too-distant future there will actually be nobody living in North Vancouver. He showed and demonstrated that if you follow the current trends of aging, that the aged will indeed have passed on and the declining birth rate will, in fact, have reached zero. Obviously, this was a tongue-in-cheek analogy, but it does serve to focus and to point a little humour on the problem that is facing all governments in the western world.

One of the great joys I've had since being elected in 1996 has been a variety of assignments that have all allowed me to deal with seniors' issues. For the past ten years it has been my honour to have the opportunity to listen, to learn and to observe firsthand the issues that relate to aging. In that process I have learned many things.

Among them, number one, is to give my head a shake whenever I think about the age of the people we are actually talking about. I'm always amused when someone comes out and talks about seniors. I hear a news report, and it will say, "An elderly person of 58," and I think: where did this person come from? In reality, when we talk about the aged today, we are really talking about probably the 80-year-plus population, and I think we need to remember that.

I never cease to be amazed at the absolute and amazing resiliency, the knowledge and skill of older

people in our society. I'm thinking of people like a lady in Quesnel. I was at an event and this lady came up to me. She was dressed to the nines, she was coiffed, and she looked like a million dollars. She said "I'm celebrating my birthday today," and I thought, well, maybe she's turning 70, but she was 92. I just never, ever get over those kinds of experiences.

There's a woman in North Vancouver — perhaps you've seen her on the advertisements — Olga Kotelko, who took up track and field in her 70s. These are images of the new elderly, and they are also part of the challenge as we look and have to deal with the problems and issues associated with aging in our society.

I recall visiting a seniors home where it had been traditional to send flowers to the family of every resident who celebrated a 100th birthday. They had to discontinue this practice, because they simply could no longer afford it. They had too many people over the age of 100.

There are a few things, however, that also amaze me. I am completely amazed, and I never cease to be amazed, by the complete lack of dialogue and understanding regarding the status of long-term care and the Canada Health Act. It doesn't matter which expert in Canada you listen to. Some of these are actually quite left-wing academics, and every single one of them will say that this dialogue has never happened. Long-term care has never been part of the Canada Health Act, and I am absolutely delighted that if we're going to have a conversation with people, maybe that can be on the table. Maybe we can finally have that discussion and find out exactly what people want and where they think it ought to belong.

I never cease to be amazed at the apparent desire of so many groups that consider any kind of change to be somehow a betrayal. I had an experience not too long ago of visiting a home. I was actually with a relative who was looking for accommodation for her mother. We went to this home where my grandmother had been in the early '70s, and you know something? It was exactly the same. They might have painted the walls with a different shade of green, but it was the same old place.

[1530]

I cannot understand why people are so reluctant. They seem to want to preserve a system that was designed for the 1960s in this year of 2006. So I am delighted to be part of a government that is not only willing to discuss these things, but also willing to be a leader in this dialogue about what we must do to ensure that our very valued and treasured public health care system will be there not only for ourselves, but much more importantly, will also be there for our children, our grandchildren and their children.

I want to take a moment now and just ask: how does this translate into programs on the ground? How does this bridge to our own communities, and are there initiatives that are already underway in communities to try to address some of these pressing issues? Well, yes, in fact, there are.

In my community of North Vancouver I'm very proud to say that the health authority is taking leadership in terms of primary health reform, and this is a very important initiative. It is one that is probably acutely necessary. They point out that the demand in the community is rising at about 8 percent a year, and that by 2017, health care on this file will absorb about 71 percent of the provincial budget compared to the 42 percent it now absorbs.

Of the patients in the health system, 90 percent are affected by this initiative, and what it really means is a move toward more one-stop shopping in terms of health, of not having to go from this doctor to this doctor and this doctor, but to be able to go to a community clinic and get your needs assessed and get whatever you need — whether it's nutritional advice or blood work or whatever — done in one go.

There has been much talk about this as we move from a society that has largely had a health care system based on the needs of youth, which was acute care, to one that is based on the needs of the aged, which is, of course, focusing on much more chronic care.

I'm happy to report that community consultation is alive and well. There are our community advisory committees that are working. They are meeting on a fairly regular basis, and I look forward to the progression of this particular initiative.

Another health care initiative in my community that we're very proud of is the emergency room expansion at Lions Gate Hospital. There are going to be new treatment spaces, bringing the total number to 50, and those are much needed. There will be a new triage sector. They are going to give family and friends, as they wait for their loved ones, more space in which to look after them. There's going to be a separate place for people who are disruptive, and I believe there's even to be a separate intake for the elderly. They are looking to create the first paperless and wireless environment in the province. That is in itself a rather significant initiative.

There was \$8.2 million allocated for this project, and we're very proud on the North Shore that the Lions Gate Hospital Foundation successfully raised \$14 million to allow this to proceed. The foundation was so successful in the community that all this money was raised two months ahead of schedule, so that is indeed an accomplishment.

One of the questions that was raised in the throne speech and about which there's been much conversation is: what's the difference where you get your treatment as long as you get it? I would like to respond to that by citing a personal experience from my family recently. My daughter required what was fairly minor surgery. She lives in the Fraser Health Authority, so I was the one that was driving her to this appointment.

She was having this done at a private clinic that was located in Surrey. The whole experience was quick. It was pleasant. It got the job done in a very short and efficient period of time. It was paid for by the public health system. It was publicly administered, publicly financed, and I really haven't got many complaints about it.

[1535]

The only thing I would say, if I had to make a recommendation, is that I thought the administrative end of it could be streamlined a bit, but I'm sure they can work that out over time. I will admit that along with a great many other people, I suppose, I have a little bit of adjusting to do to get used to the idea of going to get surgery done in a place that is sort of, you know, in a mall. It doesn't seem.... We're kind of used to these big buildings. However, all that being said, I really just don't understand what the fuss is about.

I'd now like to turn my remarks to education. Again, I'd like to focus on the challenge of some of the demographic changes, because these are, in fact, enormous in my community of North Vancouver. Once again I am delighted that we are able to finally put these issues on the table. We can go out and talk about them, and we can, hopefully, find solutions.

We have, not only in North Vancouver but basically all over the western world, a falling birth rate. In North Vancouver we have expensive housing. We have an urbanized, very high-density environment. All of these factors conspire to a rapidly declining enrolment in North Vancouver schools. This, of course, has resulted in school closures and realignments.

I can give you an example of just how significant this is. We were at a meeting the other night — the other North Shore MLAs and myself. Just using the example of one family of schools — and for those of you who don't know, a family of schools is a high school and the elementary schools that feed into it — there are currently 192 grade 12s. There are 85 kindergarten children. That is in just one family of schools. There are in North Vancouver about six or seven high schools, so there would, in fact, be seven families of schools. They are all being impacted in a similar way.

How has our local school board responded to these challenges, Madam Speaker? I think that North Van is a model that can be emulated across the province by many, many other districts. It's a district that certainly has had as big a challenge, I think, as almost any other district.

One way that North Vancouver has responded is through their Early Learning Foundations program, affectionately known as ELF. This is a program that was launched last fall. It's an early learning foundations program that's developed in partnership with childhood educators in the community to provide learning and opportunity for preschool learners to prepare them for school readiness. This, of course, is one of our very, very important themes, and that is to make sure that every child who enters school has equal opportunity to learn.

This program is in fact a model of one of the Ministry of Education's priorities of literacy and making schools the centre of the community, particularly through using underutilized facilities. Of course, when you have declining enrolment, you have closing schools and you do have facilities that are not thoroughly used.

I congratulate our board. I congratulate the parents who have been involved. I congratulate the other partners for the way that they have gone forward on this. It is built on two main goals, which are to provide additional learning support for young children and, also, to develop and implement a range of supports that provide a whole continuum of early childhood services.

Currently the board takes these unused facilities and leases them to various preschool businesses and non-profits for their preschool endeavours. The partnerships are worked out through the home, through early learning settings, the school and the neighbourhood working community.

There are currently seven of them operating throughout North Vancouver. They have partnered with organizations such as North Shore Neighbourhood House and the city of North Vancouver to incorporate early learning foundations into plans for the new Westview Elementary School. That is certainly a model of a program that can be emulated by other districts.

[1540]

In addition to that, one of the things that is happening to move ahead with education is two new schools to replace aging schools. This, of course, is also very, very important and in keeping with the goals that were enumerated in the throne speech to move ahead with innovation. It's sometimes difficult to move ahead and to be very innovative if you've got a school that's 70 years old and the wiring won't support technology and all of those sorts of things.

These are both going to be replacement schools. They won't be additional schools, obviously, because they will be replacing aging schools. I am most pleased about the Sutherland project because that is one that I've had very intimate involvement with since the very beginning. It's the school where my children attended, and it would be my community high school, so I am just very, very proud to be part of this project.

We had our groundbreaking several weeks ago. The shovel is in the ground now. They're starting to dig the hole, and everybody is very excited.

The new Westview School is an elementary school. The official groundbreaking takes place, I think, later this week. It, too, is expected to be completed in about 2007, I think.

What lies ahead in communities that are having to deal with downsizing, particularly in schools? I know how challenging closing schools is to communities. I also know that you can't have schools without kids. So it's sort of a circular problem.

When my daughter was in grade six, I think, she came home from school one day, and she had a note. This was the end of June, and it said that the school was closing. I remember that we were just in shock. There had been no notification. There had been no consultation — just that the school was closing. It was a case of the school.... The population had dwindled until there were very few children, and they were going to have to be moved. So I've got personal experience with that in my own family.

We need to ask ourselves what lies ahead in terms of communities that are challenged and how they're going to use this surplus school land. I think that we all need to encourage, in keeping with the theme of the throne speech, councils and boards to be creative in their deliberations.

Do you know that the site where my original elementary school in my community is, is still there? It's got this old school on it that just sits there. It weathers, and it's getting run-down, and it's not used for much of anything. It's not very much use to the school board. It's not very much use to the community.

There is this tendency in communities, again, to never want to change anything. Every time somebody suggests, "Let's do something with that piece of land," my goodness, there are a dozen groups that come out of the woodwork with all sorts of reasons why you've got to save that school. It has now been 30 years, almost — 25 years, anyway — and you really have to ask yourself why. There are ways to be more inventive, and I think we all, no matter what side of the House we're on, have to put ourselves to this kind of challenge.

I would like to tell you a story, again, from my own personal experience. A few years ago I had the pleasure of presiding at the ribbon-cutting of the Nikkei Home in Burnaby. The Nikkei, as you know, is an assisted-living facility. I was presiding at this, and I observed that I was standing on almost the very spot that I used to conduct my history classes from.

In the course of things that school property was sold. The school district was able to build a state-of-the-art facility, which was the flagship for a number of years. It no longer is because time marches on, and there's always a new flagship. But for a time that was the state-of-the-art school, and it had many bells and whistles that would not have been possible.

[1545]

The community, on the other hand, got not only the Nikkei assisted-living facility, it got supportive housing, and it got three major towers of housing as well as condominiums. It sits there today, proudly — wonderful housing. That is what I mean by: let's make some useful use out of some of this property.

I know that in my own community we are now facing.... With the new schools we need, we want.... The community, the parents and the board want some bells and whistles in these schools. They are going to have to raise some money, and I'm just hoping that we don't get resistance from people who are reluctant to change ever.

Another important sector of the throne speech focused on improving the quality of life of British Columbians. Specific mention is made about dealing with the scourge of crystal meth and about support for community treatment programs.

Again bridging from the throne speech to my community, several important initiatives are underway. Last August, I think it was, I was invited to a meeting, and this was a meeting of the lower Lonsdale folks. Someone had organized it and had brought this community together because of concerns around drug

addiction and lawlessness in general. It was a very fruitful meeting. It was really a very good meeting, and I was amazed at the calibre of discussion that went on. Out of that meeting a group was formed that consists of the police, the city, the health community, and so on. That group works in conjunction with the North Shore Task Force on Substance Abuse, who work in association with the North Shore Safe House.

Recently we had the opening of an adolescent day program, and this is one of the very substantive things that came out of this consultation. It's a program that offers counselling, rehabilitation and treatment services, and it enables youth to return to their families each evening. This innovative program was the result of the collaboration and consultation that went on between the various parties involved — the health region, the city and the police.

I might say that this is not all of the work that has to be done. I've learned that there's still a great deal that needs doing. Recent meetings with the North Shore Safe House and the shelter regarding funding challenges indicate there's still a great deal of work to do to break down the silos of government and to achieve an integrated approach by the contributing ministries. I want to make a commitment to my community that I will be following up on behalf of my constituents with the ministers on these issues, to try to find useful resolutions and solutions.

Finally, I want to spend just a moment and talk about the role of North Vancouver as a vital part of Canada's Pacific gateway, a significant part of the Port of Vancouver. I often say that North Vancouver-Lonsdale is like a window to the province. We can sit at the Lonsdale Quay and watch the economy and trade of British Columbia go by in front of us. We can see the lumber, the coal, the potash, the fibre and the sulphur — much of this, of course, bound for Asia. We have about a third of the port.

[1550]

Most exciting is a project in North Vancouver which is right now in a conceptual phase, and this is regarding the possible location of the national maritime centre for the Pacific to be located at the foot of Lonsdale. If any of you are in North Vancouver, I hope you will come and visit what is known as the Burrard Pier, because it is the single site in Burrard Inlet where you can walk out and be very, very far out into Burrard Inlet. It's the only place on the port where you can stand and be surrounded by what is, in fact, a working port. You are adjacent to the shipbuilding industry. You are adjacent to Cates Tugs. You are right there; it's right in front of your eyes. You just can't miss the activity of the port that is going on around you. It is an unparalleled sight; I guarantee you that. It is an unparalleled sight in Burrard Inlet.

The city of North Vancouver is currently forming a society which is working on forming partnerships and a business plan. I submit that it is an opportunity for everyone — every level of government, the province and the private sector — to get involved. It is a showcase, or it has the opportunity to be a showcase, for

maritime Pacific culture, aboriginal culture and the Asia-Pacific ties. I might add, it is a perfect location — 12 minutes from downtown Vancouver.

Finally, I would like to conclude by recalling a time.... I think this was an assignment I had in school at one time, where we had to pick what we thought was the most interesting time in history and tell why we would want to live there or live at that time. I chose the time of my grandmother's life. I think my grandmother was born around 1896, and I think she died around 1976. If we look at the big themes of the throne speech — big themes about transformation around the big ideas in our culture, education and health — we could ask ourselves: what kind of transformation took place then, and how does that relate to what we've been discussing today?

Well, let's look at education. My grandmother was born into a highly stratified class structure. She used to tell wonderful stories about how she was a schoolmaster's daughter and how that sort of fell nowhere. They weren't lower class. They couldn't go into service. Of course, they weren't upper class where they would go to what was called public school, so they had to go to church school. She tells about the sacrifices her family made to get uniforms for them. The other side of that was that for a woman of her generation, she was actually quite well educated in a very classical sense. But no one could even suggest that education was a big deal for her at that time in history. Certainly not as a woman was she expected to be educated and was she expected to be educated in anything that was even remotely considered unladylike, I guess. It probably explains a little bit about why her family left England and came to Canada looking for more opportunity.

In the area of health this was a time when smallpox would wipe out entire families, typhoid would wipe out entire families and penicillin had not even been thought of. In my grandmother's lifetime, life expectancy when she was born in 1896 — I actually looked this up — was 47 years. In her lifetime life expectancy increased about 50 percent.

I think one of the most interesting changes in her lifetime was the transformation of the role of women. Of course, when she was born women had no status whatsoever. In fact, when she was married, women had no status. She was a chattel. She belonged, really, to property of her family — first of all, her father and then her husband. She went from that to becoming a voter and, later on, to becoming quite an independent woman.

How does this relate to the throne speech? Well, I ask you: would any of these changes have happened if nobody had challenged the status quo? What progress would we as British Columbians make if we were not willing to ask the tough questions?

[1555]

I congratulate and am proud of my government for having the courage to confront our demographic challenges head-on. It is a model and an opportunity for all of us to look at our own communities, to go back to our communities and to ask: what can we do? What can I

personally do to find a solution to the problem — not to criticize but to go back and to help find a solution? The choices we make today, each and every one of us, will have impact on the future — not so much on ourselves but on our children and grandchildren.

C. James: Members, fellow British Columbians, I rise today in response to the government's seventh Speech from the Throne. As we all know, a long tradition — and certainly, a tradition under this government — is that our throne speeches are long on rhetoric and short on specifics. Certainly, yesterday's throne speech was no different. Perhaps as a surprise, I'd like to start off with what I liked about the throne speech because, yes, there were a couple of things in that throne speech that I liked.

First, I'd like to commend the government on its choice of the spirit bear, otherwise known as the Kermode bear, as British Columbia's new provincial animal. It's an excellent choice. British Columbia is a wondrous place, and the Kermode bear certainly captures the spirit of our province's citizens, our aboriginal heritage and our natural environment. The Kermode bear is very special to me because I consider myself one of the privileged people who actually has had an opportunity to see a Kermode bear on my honeymoon with my husband in 2004. It is an experience and a bear that I won't forget.

There is one more thing I liked about the throne speech, and that's the government's acknowledgment that change is necessary. In fact, if we went through the throne speech, you could see 24 separate mentions of the word "change" which were preceded by the words "transform," "transformation" or "transformational." I'm guessing that the Premier's office has discovered another best-selling change guru to take their vision from. Nevertheless, the recognition for change was important and a small, if welcome, sign.

However, when we took a look at the throne speech, I have to say that on the whole it exceeded even the opposition's expectations for disappointment. It most assuredly disappointed British Columbians who were hoping for signs that this government understood its mission and its responsibilities to the people of this province. Despite the management jargon so beloved by this government, the simple recognition of the need for change doesn't translate into recognition of what needs to be done.

The government quite rightly focused on health care as an area with a pressing need for change. In fact, more than half of the throne speech was taken up with health care. It's the government's prescription for health care that I'd like to talk about today as well as other areas that I believe the government has simply forgotten.

The throne speech contains some very disturbing commitments that will affect the future health and well-being of people in B.C. After years of privatizing our health care system by stealth and neglect, the government has now embarked on an aggressive agenda to move very clearly to a two-tiered health care system.

The Premier stated that the principles of the Canada Health Act are ill-defined. We heard that a number of times. But the blame for growing health care wait-lists, overcrowded emergency rooms and declining care for seniors rests in one place. It rests with this government, not with the principles underlining medicare.

[1600]

The problem isn't that the principles of the Canada Health Act are undefined. The problem is that the government ignores those principles. The government has begun to use the word "innovation" in reference to health care, but as we all saw just last week with the government's knee and hip replacement scheme, innovation is just a code word for more privatization.

What was the first thing the Vancouver Coastal Health Authority did with the money it was given? It took it and went out to use taxpayer dollars to subsidize private, for-profit clinics. That's not innovation, and it's not new. It's old. It's not the future. It's the past. For-profit medicine is an old idea, a failed idea. No matter how the government tries to dress up its agenda, everyone here knows exactly what they're talking about, so I'd suggest we just stop pretending.

What the government could be doing is looking for innovation within the public system. There are models to look at right here in Canada that get better results for patients and more efficient results for taxpayers. That's what was missing from the throne speech. Although the throne speech spoke to the government's intention to move aggressively towards for-profit medicine, sadly, it was silent on all of the other key issues that are facing British Columbians — issues that, if we go back in history, as this government often does, actually have spilled a lot of ink in previous throne speeches by this government but were forgotten soon after.

Let's take a look at last year. Last year the government promised the best in child care. What have they delivered? Forty million dollars in cuts. The Premier had an opportunity to join other Premiers across this country — Conservative Premiers in the Maritimes, Liberal Premiers in central Canada and the NDP Premiers in the Prairies — who asked the Prime Minister to honour the federal government's agreement on child care. We heard nothing, Madam Speaker — nothing from our Premier. The Premier simply shrugged his shoulders and cancelled his own child care action plan.

The Premier sat silently and watched while the federal child care agreement in B.C. died. Well, that's not good enough. Child care deserves attention from this government. We all know that child care is unaffordable for many families. Even if some families can afford it, the wait-lists for child care spaces have skyrocketed. While he was looking for votes, the Premier promised child care to B.C.'s families, and then, after the election, the promise was gone. Well, we believe that it's time for the Premier and the government to live up to their commitments.

Let's take a look at another promise from last year. Last year the government promised the best in education. Then what did the government deliver? It deliv-

ered the most days lost to a strike in our province's history. After years of denying there was a problem with our children's education, we now know that there are over 9,000 classrooms across this province that are overcrowded.

The Premier offered no substantive plan to improve education in this throne speech. The only promise received was a promise to visit school districts. In that list of who was going to be visited in those school districts, there was a glaring omission. Where were the people who were locally and democratically elected by the people in their communities to carry out looking after our education system? The throne speech made no mention of discussions with the province's school trustees and school boards.

[1605]

As well, there is no plan in this throne speech to reduce class sizes, no plan in this throne speech to improve education outcomes and no plan to improve the government's relationship with the people in our education system.

Madam Speaker, it is unfortunate to say that this is a long record of throne speeches under this government and this Premier that are famous for making promises that aren't kept, like the promise to build 5,000 long-term care beds by the year 2006. That broken promise isn't simply a broken promise. That broken promise is seniors around our province who can't find a long-term care bed to go to, whose families are struggling with a lack of care. That broken promise is the people who built this province who are suffering now because of this government's direction. That's meant the waits have gotten longer and longer and longer.

Let's take a look at another promise made in previous throne speeches: to "enhance training, resources and authority for front-line social workers to properly protect children at risk." Tragically, everyone knows how that promise turned out. After months and months of hiding the truth, after months and months of denial, the government at the end of this last year finally admitted that budget cuts and incompetence led to very tragic circumstances. However, there was nothing to fix that in the throne speech — absolute silence on a key issue that needs addressing here in British Columbia. No Children's Commission. No meaningful change.

Some of the government's throne speeches have been incredible examples of how completely out of touch this government is with real citizens. Everyone will remember the heartlands throne speech. Living up north at the time, that heartlands speech was known as the "hurtlands." That's how it was described in other parts of the province. Yet we saw no mention of the heartlands after that language was in the throne speech that one year.

Citizens have a reasonable expectation that the government's throne speech will outline its key priorities to its citizens. That's what people expect. They expect that the throne speech will tell them the vision, the direction and the goals the government has for the people of British Columbia. That's what was so disap-

pointing about yesterday's speech. The only priority that we saw in that entire throne speech was a plan to further privatize our health care system.

There was no mention of the pine beetle crisis. There was no mention of the crisis in forestry. Child care was virtually ignored. British Columbians who hoped the government would outline its plan to position B.C. for the future.... There was nothing in this throne speech approaching a coherent economic or social vision. At the same time that our provincial treasury has benefited from the high end of a cyclical boom, the B.C. Liberals missed another opportunity to outline how they will prepare B.C. for the inevitable downturn in commodity markets or to position our province for the future.

Like much of what drives this Premier and the government, the words on the page seem intended to position the B.C. Liberals politically rather than to position our province strategically and economically. In a rapidly changing global economy that is a very serious mistake. It's well understood that global leaders of tomorrow will be those places that best combine sustained economic growth with social inclusion, widely distributed opportunity and justice. Those things go hand in hand if we are truly to be a leader in this world.

[1610]

In a highly competitive global economy where our most important resource is the capital we possess in people, sustained economic growth and strong social programs are, in fact, two sides of the same coin. Divided societies, where the gap between rich and poor is allowed to grow, simply can't compete effectively in the value-added, knowledge-based marketplace. This failure on the part of government is evident everywhere from the significant growth in child poverty.... We saw the Premier stand up and talk about the employment record in British Columbia. The very next day the statistics came out to show that British Columbia was number one when it came to child poverty — number one across this country. I certainly didn't see the Premier standing up and speaking to that statistic, and I certainly didn't see anything in this throne speech to address that crisis issue.

When we take a look at apprenticeship and training opportunities, again an area completely ignored by this government, an area where business, where labour, where communities are joining together to point to a crisis.... Again, this government's record speaks for itself on taking apart one of the best apprenticeship programs in this country, and we now have a crisis that needs to be addressed because of the government's record. Again, we saw nothing to address that issue.

While the government's often accused, rightly, of being mean-spirited in its approach, it has also been incompetent in the decisions and choices it has made. Just witness the problems plaguing CN's safety record since the sale of B.C. Rail, the disaster in the Ministry for Children and Families, soaring surgical wait-lists or their fumbling in the face of our province's crisis in the forest industry.

Taken as a whole, the government's record has resulted in a province where more and more British Columbians have been left behind, when what the government should have been doing as a matter of both economic and social necessity is encouraging everyone to take an active part in the life of our province. Sadly, the government's throne speech commitments, especially its startling commitment to move to two-tiered health care, suggest that the government hasn't learned a thing.

Madam Speaker, we live in an amazing province. With rich resources all around us, including our people, leadership and vision are what the public both expects and deserves from its government. Leadership and vision were missing in this throne speech — were gone — and I believe, and our caucus believes, that the public deserves better.

M. Polak: I am really excited to respond to this throne speech because it does something in politics that I think has been missing for decades, and it continues to be missed time after time when there are important issues going on. I find that the highest level of political debate that I could uncover in British Columbia is, unfortunately, often not in this House, not in council chambers, not in school districts, but at the local Tim Hortons, at the Ethical Addictions coffee shop in Langley or at the Starbucks.

There is a reason why: because in places like that people are allowed to ask the questions that they want. They're allowed to ask questions about: "You know what? I don't understand why the government doesn't do this about health care." People can have a good old discussion about it. Or: "You know what? I don't understand why the government teaches this in the education system. I don't get that."

[1615]

They can ask it without the Leader of the Opposition jumping up, pointing her finger at them and saying: "Aha, you're the one with the secret plan to privatize health care." They can ask that question without that kind of accusation coming back at them. Why? Because these are ordinary British Columbians who live their day looking at things in an honest, ordinary manner that just revolves around making the good argument.

What makes good sense? What we want to talk about here is what makes good sense. Of course, really, the only way you can do that is if you're open to whatever the answers might be. I think that's really a difference. We've had occasion to hear our Premier talk about the fact that there's a difference between the opposition and government, not only in their roles but also in their approaches. I think this throne speech probably does the best job I've ever seen of highlighting that.

What is it that the government's saying? The government is saying: "You know what? When we talk about health care, we're interested in what British Columbians are interested in — what works." We're interested in what works. We are not politically married to

the idea of no public health care, no private health care, only mixed health care, only this model. We want to ask the question, and we're open to whatever the answer might be, so long as it works and it stays within the principles we believe in for health care in this country.

What do we hear from the Leader of the Opposition? We hear: "Yeah, of course. I want to ask the question. I want to talk about.... Oh, but thou shalt not talk about anything to do with private health care. Oh, and by the way, thou shalt not talk about anything that is outside of using absolutely union-contracted employees. But other than that, I'm open to talking about just about anything." Unfortunately, that's not going to get you the right answers. All that's going to get you is more political dogma.

I was fascinated to learn today that along with the long list of usual NDP mantras that I've been keeping, there are a few that spill out now and again like "mean-spirited," "for-profit," "working people." One of my favourites is "average British Columbians." I love that one, because when you talk about undefined terms, that's a real good one. All I've been able to gather in this House is that average British Columbians must not refer to anybody outside of the NDP caucus, because certainly, if you're not part of agreeing with that, you're not average. If you're a B.C. Liberal, you're not an average British Columbian.

I was really surprised today to hear that the word "rhetoric" is now a piece of rhetoric. That's the way it was used today. Instead of getting at the argument and the debate around the questions, we had the Leader of the Opposition saying: "Well, you know, it's time to stop the rhetoric." I think I actually counted about 20 times today when that phrase was used. "It's time to stop the rhetoric. Of course, then I'm going to proceed to go into a lot of rhetoric." It didn't stop her. But it's time to stop the rhetoric. Well, you know what? I think it is time to stop the rhetoric. I think it's time we actually asked the questions.

When it comes to all the things that we need to take care of as a government, as a Legislature in this province — huge issues.... We've got the pine beetle to deal with. We've got child care to deal with. We've got education to deal with. We've got employment programs to deal with, housing programs, the homeless, child poverty, skills training. There's a real reason why thinking of those things would cause us to focus on health care and on asking the important questions around health care. If current trends continue, somewhere in the neighbourhood of the year 2050 or 2060, give or take ten years — you pick — health care is going to take 100 percent of the provincial budget. You know what? If we don't find a way to deliver health care that's sustainable, we're not going to be able to do anything about pine beetle, child care, child poverty, skills training, homelessness. We probably won't even be able to care for our aging seniors and the people most in need when they have a health care problem.

Let's be clear about this. The reason there's a focus on getting a handle on health care, on answering those

tough questions, is precisely because we have to have the ability to deal with all the needs of British Columbians that come before government.

Why can't we talk about these things? Why is it that it's not okay to bring up the scary issues of change in health care? It seems to come down to the opposition not wanting to discuss the issues. They'd rather talk about portraying people in a nasty light.

I read today some of the quotes that pointed to saying that the Premier doesn't like the Canada Health Act. Oh, he really doesn't like the Canada Health Act. In fact, I'm sure he gets up every morning and thinks: "Oh my gosh, that Canada Health Act. I really don't like that." That's preposterous. The Premier doesn't like the Canada Health Act. In fact, he hates it so much he's going to enshrine it in legislation. He's actually going to find out what it means and how we might make it work. Yeah, I'm sure he must really, really dislike that Canada Health Act.

[1620]

It's the same kind of stuff we get when they talk about health care as though suddenly, magically, when there was a B.C. Liberal government, we had issues in health care. Suddenly it was a challenge. You know what? Back when I was about six years old and I had to go to the emergency room and we lived in Surrey, my mother and father took us to Peace Arch Hospital. Why? Because if I was at Surrey Memorial, I'd be waiting for six hours to get in. That wasn't anywhere near a B.C. Liberal government.

We all know that health care is a challenge across Canada, across North America. We all know that health care has been an increasing challenge over the decades, despite governments of all stripes spending millions and billions, and do you know what? We're going to get to be spending trillions of dollars trying to improve it.

Why do we need to go and talk to Sweden? Why do we need to go and talk to other countries with other models? Well, because the only other two countries that do the things we do are Cuba and North Korea — not real open to tourism these days. No, it's because we know it doesn't work.

You know, let's call a spade a spade. If you go to the coffee shop, if you sit and talk to people, they give you the commonsense answer. They say: "If I bust my arm, if I get hit by a car and they wheel me into some place where they're going to fix me up — you know what? — do I care whether or not that doctor, that hospital, that facility is going to make a profit? No. Do I care whether or not this is something that is completely operated within a public system or not? No."

What they care about is that they get fixed up. They care that they get back to work. They care that they're okay and that it's paid for through their medical premiums. That's what they care about. The rest of it, they say: "Hey, figure it out. Make it work. That's your guys' job."

It's not our job to sit here and debate whether or not this side or that side has the more evil intent. It's a throwaway. You say those kinds of things when you

don't want to debate the issues themselves. I mean, some of this stuff is just.... Well, hear it for yourself. Today a quote from the Leader of the Opposition: "Sustainability is a code word for Gordon Campbell and the Liberals to privatize."

Deputy Speaker: Member, just be aware that we don't use formal names in the Legislature.

M. Polak: Oh, I'm sorry. Inadvertent. My apologies.

The Premier. I will adjust the quote: "Sustainability is a code word for the Premier and the Liberals to privatize." Well, if it is a code word, then I'm challenged. I didn't get my decoder ring, and to me, sustainability means the kinds of things I have heard the Leader of the Opposition talk about. The Leader of the Opposition talks about sustainability in almost every other area of government that she wants to talk to us about. What's wrong with talking about sustainability in health care? Why? It comes back to being afraid again — right? If you've already ruled out some of the answers, you can be afraid to ask those questions. If you're the Leader of the Opposition and you have already ruled out those answers, you don't want to ask: what are the fundamental changes we must make to improve our health and to protect our precious public health care system for the long term? You don't want to know the answers, because what if the public comes back or other people come back and say: "Well, we ought to do something that doesn't mesh with your philosophy"?

On this side of the House we say the only part we're tied to is the principles of the Canada Health Act. That's it, and that's pretty basic. But when it comes to who's going to do what, when and where and who they're going hire and contract with, hey, we're open to talking about it. We don't have special interest groups that are going to yank our chain if we don't get the right answer. We don't have a dogma or doctrine that says: "We can't consider this. We can't consider that. Those are ruled out. But other than that, we'll talk about anything." It's a pretty limited view. It's not one that's going to get us the answers we need.

It reminds me a little bit of.... I don't know. I was thinking about the myth-busting show today. You know, you've got the two guys on that come and take whatever myth that happens to be handy. I mean, there was one where they did a really great one about shooting ice bullets. Basically, two special-effects scientific guys go in, and they construct the urban myths that we all hear, the urban legends. This debate that has erupted around the throne speech, I think, involves or needs a little bit of myth-busting — myth-busting in the sense that we have got lots of people in the public who look at this stuff. And when they hear us politicians say it.... I hear it from my daughter, who is 18. They sit in front of the TV and say: "Oh, come on. Oh, come on." That's the reaction.

[1625]

I had that reaction today in question period when the Leader of the Opposition asked the Premier about

user fees in Sweden. Of course, if the Premier wants to go to Sweden, oh, it must be because he's decided that that one little component of user fees is what he wants to do. Come on. I mean, does anybody really believe that? No. That was good theatre for question period, but it still doesn't get us closer to the answers.

There's one really good thing, though, that has come out of the health care questions that have been put forward in the throne speech. And I'll give all credit to the opposition on this. That is that, however reluctantly, they have been drawn into a discussion about health care. I'm really glad about that. I don't necessarily agree with what they're saying, but they're putting forward some ideas and thoughts and saying: "You know what? Here are some things you could do. You could do some things like some specific initiatives to cut down on the wait-lists for knee and hip replacements." Well, great. Good, we've done that. Check. Good, I liked that. We agree on that.

You could do some things about using nurse practitioners. I heard the Leader of the Opposition today on the radio talking about that. Guess what? We've graduated a class of nurse practitioners. They're out there for the first time in British Columbia. This is great. We agree on that too. And you know what? Check. Tick. There, we've done that.

What else should we do? Maybe we should double the number of doctors. I don't know. Do you think we should do that? Well, we have. We've doubled the number of doctors in training. It's incredible.

Maybe we should increase the number of nurse practitioners we're going to be training. We've done that. We are going to do that more. Maybe we should increase the opportunities for people to take medical training around the province so they don't have to go to the lower mainland. Well gosh, we've done that too.

There's a lot of agreement taking place here, but it's going to take us moving off our doctrinal positions on health care. It's going to take us saying: "You know what? Finding the health care that works is more important to me than sticking with my political doctrine." We're ready to do that. We're ready to ask the hard questions.

We're ready to ask them in education too. In education, with the Learning Round Table, we're ready to talk about what happens when you have special needs students who need to be in classrooms but their needs are impacting on the system itself. What happens when you have ESL kids that have special requirements that you're challenged to meet in the classroom? How do you do that in the 21st century?

We're willing to ask those questions. Why? Well, it's same thing as in health care. The people on this side of the House, the government side, are saying: "You know what? We don't want to define the answers for you. We don't want to tell you this is the way you have to do it. We want to find out what works."

What does the other side say? The same kind of thing as in health care. "Well, that's okay. We want to talk about it. Oh yeah, we want to talk about those questions, but as long as you don't go here, as long as

you don't talk about using non-unionized employees for certain aspects of your skilled trades in schools or as long as you don't, maybe, fund independent schools." That's been another one they've been challenged by for a long time. "As long as you don't go here and as long as you don't go there, then we'll have the discussion."

Well, you know what? On the government side we have the guts to say: "We'll go where the public needs us to go. We'll go with what works. We'll go with what builds the best. And we'd better."

In health care and in education.... I think that one of the reasons those two things have been highlighted so much is because they are the two areas where our government, any government, in the next decades is going to be dealing with the most massive, uncontrollable transformation that we've ever seen. It's the kind of train coming down the tracks that will wipe everything out if you don't avoid it. There are two very significant things: one in health and one in education.

In health care — we're all pretty familiar with this — it has to do with the age of the population. One in four will be seniors by the year — what was it? — 2030. That's going to cause absolutely huge change.

In education we have another one that's coming down the tracks, and that's the ratio of students with special needs, atypical kids, who will be in a classroom. When we look at the trends and see the ratio of atypical kids versus typical students in a classroom in the next decade, in the next 20 years, how will you address that if the system remains the same? If your ratio gets high enough, you can't do it by bringing in specialist teachers, unless you want to have ten specialist teachers in one classroom with a group of kids.

You have to think of different models. You have to at least ask the question. You have to say: "In a classroom with 85 percent of the kids ESL, isn't that different than the classroom up the street that maybe has two ESL kids? Shouldn't it be different? Or should all those classes look exactly the same, and should they be churned out by a collective agreement?"

You see, we're open to having the discussion. If the answer comes back that it should all be in a collective agreement and that's the best way you should do it.... We're interested in what's best. We'll do what's best — right?

[1630]

That side.... No. It all needs to be there. Boy, you need to bargain class size; you need to bargain composition. "We're willing to have the discussion as long as that's where the answer sits, as long as the answer comes down to fit with that kind of NDP socialist dogma that should sit around education and health care and all that. Really, as long as we're all equally badly off, that's okay, because we're equal." Well, then they'll have the discussion.

They'll have the discussion, but don't answer the questions the wrong way. You can't be open. Maybe that's the challenge. I mean, if I was to stand here and think.... Well, if I wanted to be really catty and put out a dare — what did we use to say in school? You

double-dog dare somebody? — I guess that would be the dare. You don't meet challenges like this without a lot of courage, without being a stand-up kind of guy, as they used to say.

If we're going to meet these challenges, we all have to be that way. We all have to be willing to stand up and say: "Yeah, okay. I'll take it. I'll stand and listen to the public when they tell me the kind of things we need to do. I'll stand, and I'll listen, even when the answers may not be what I personally like. I'll listen. I'll hear."

Maybe it is a double-dog dare. I'd be fascinated to see the opposition stand up and say: "Okay, you know what? You're on. We'll do the same thing. We're going to stand up here now, and we're going to say that we want what works. When it comes to health care — whether it's public, private, mixed, pink, green, purple, polka-dotted — if it works and if that's the answer to the question, we're with you. We'll do it."

I bet you they won't. I'd be happily surprised if they did, but I bet that you won't see a member of the opposition stand up and say: "Yup, we're there. If private was what worked, darn it, we'll do it." We can. We can say: "If it's public, if it's private.... Whatever it is, if it works, we're ready to do it."

In education, if it means curriculum change; if it means staying the same; if it means more testing, less testing, more teachers, fewer teachers; if it means different kinds of teachers, different kinds of schools, we're open to it. We want to hear it. We want to try things.

I want to hear that from the opposition. That's my dare. That's my challenge. I want to hear it. I want to hear them say: "You know what? The important part here isn't that all teachers follow the BCIF line. The important thing isn't whether or not class sizes are in collective agreements. We're interested in what works, and if we're shown those things aren't the essential elements, that we don't need that to make it work, we have the guts to do it."

On this side we're willing to say that. We're willing to say: "Let's answer the questions with the right answer. Show us it works, and we'll do it." That's the challenge we throw down. That's the challenge that every day gets met in the Tim Hortons coffee shop. I mean, you don't walk in there like we do in the House, and everybody is quiet. I stand up and talk now, or the member for Port Moody-Westwood stood up and spoke for a half-hour, and everybody's for the most part fairly quiet and they listen.

[S. Hammell in the chair.]

It doesn't happen in Tim Hortons. If you're in Tim Hortons and you put forward your idea and Joe Smith across from you doesn't like it, he'll put down his double-double, and he will tell you, and you'd better be ready to defend it. That's the kind of debate that we're all afraid to have.

Tell me what you think. Tell me what works. Let's honestly answer it. Why should we be afraid? And for

God's sake, let's stop throwing out empty attacks like: "Oh, they don't care. Oh, he doesn't like the Canada Health Act." Come on. That's the answer to that: oh, come on. The public doesn't buy that. It's a bunch of nonsense. You walk out, take ten people at random, and ask them if they think that health care is a challenge only in British Columbia and that it's only a challenge since the B.C. Liberals came to power, and you know what? You won't find one that agrees with you. Everybody in B.C. knows that health care is a challenge across Canada. Everybody in B.C. knows that health care has been in a challenging position for decades.

Everybody knows it, so you know what? Let's cut to the chase and call a spade a spade. This is the time when government wants to ask the questions, and we want to hear from the public. The public are ready to rise to the challenge. They're ahead of us. They're already having those conversations.

Do we have the guts to get in there? Do we have the guts to open the door and say: "If it works, we'll do it"? We do. So far I haven't heard that anybody else does, but then that's probably because they're busy arranging their trips to Cuba and North Korea. We'll look forward to what they find out when they get back.

[1635]

That ending, I guess.... There, I get into the joke — right? — the little political rhetoric. I suppose a part of that is what we do here. It's a little bit of the jiving back and forth — the theatre. But there is a part that's really serious about this, and that is that at some point you have to say, "This is it; this is real" — right? This is real. This isn't a dress rehearsal.

The year 2050, the year 2030 are going to be here whether we do something about all these issues or not. So I suppose we can waste our time claiming that one person loves health care more than the other.

I'm reminded of a recurring character on *The Simpsons* cartoon who runs in at this point in every debate and says, "Oh, won't somebody think of the children!" and people laugh. Why? Because it's a throwaway line. We all care about the children; we all care about seniors; we all care about health care; we all care about what's happening with the pine beetle; we all care about employment programs. We all care about all these things. For God's sake, that's why we all ran for election.

Instead of getting down to complaining or attacking people based on whether the Premier likes the Canada Health Act or not or whether the Premier is secretly plotting to implement user fees or, oh my goodness, using code words like "sustainability" to couch privatization plans.... Let's get out of that. That's the: "Oh, come on; get real." Nobody buys that stuff anymore, guys. Instead, let's get on with solving the problems. Let's debate the ideas.

If we're proposing an idea about health care — here is something we're going to do about health care; here's a new act; here's a change we're going to make; here it is, guys — let's debate it on principle. Let's argue the points. Let's have the opposition say: "You know, I've looked at it, and here are the reasons why this won't

work." Governments say, "Well, we've looked at it, and here are the reasons we think it will work," and the public votes, and people discuss, and they debate. Let's not have that go back to, "Oh well, I'd love to support it, but you guys are secretly privatizing. It's a code word," or "I'd love to support you, but you really don't like the Canada Health Act, and by the way, you're mean-spirited, and you really don't speak to average British Columbians because you're out of touch." I mean, you want to cut rhetoric with a knife? That's pretty thick. Let's be open about it.

To finish, Madam Speaker, that's the challenge I lay out. I don't know if there has ever been a double-dog dare in the House, but that's mine. Come out, be stand-up about it, and say: "We are as ready as you are as government to move forward on whatever answers we get, whether they fit with our political dogma or not." That's leadership, that's inspiration, and that's the only way we're going to solve these challenges for our province, and we are going to move forward. That's what we're ready to do. We're ready for you to come along with us. Let's see if you have the guts to do it.

L. Krog: It's always a great honour and a privilege to rise in this House and represent the wonderful voters and citizens of Nanaimo. I've been somewhat distracted of late, so I'm going to employ a sort of shotgun approach today, a method well-recognized by no less a person than the Vice-President of the United States lately.

Nanaimo will have the benefit of the Seniors Games this year.

Hon. R. Thorpe: Have you got the right licence?

L. Krog: My friend the hon. minister asked if I have the right licence. I actually just received my renewal form, and I'm sure the Conservative government, your friends in Ottawa, will take care of that problem and reduce that fee accordingly.

Nanaimo is going to enjoy the benefit this year of the Seniors Games, and I am delighted to welcome seniors from across British Columbia to participate in that.

Since the close of the last session in the fall, I've had an opportunity to meet with community groups, many of whom have the same complaint: that is, that the funding they formerly enjoyed from government has never been restored since this government cut it in its first term, that this government has continued to fail to recognize the pressing and serious social needs of this province and particularly its growing underclass.

[1640]

I attended a fundraiser for the Nanaimo Women's Resources Society last Friday night. The Nanaimo Area Land Trust will be sponsoring a fundraiser this Sunday night. I met recently with the school board of school district 68. The Minister of Education is well aware of this problem. There is a bit of a fight on between Advanced Ed and the K-to-12 program about who's going to fund the career technical training centre in Nanaimo,

which has been a wonderful program, enabling students in high school to make early career choices and to carry on into post-secondary education at Malaspina University, thus enabling them to fill the incredible gap in skilled trades which this government has contributed to by its destruction of the old apprenticeship program.

I will only hope and beg and ask the ministers, who I know are listening intently to every word I'm saying, to ensure that the little squabble between their respective ministries will be settled and that the program will be appropriately funded, so the dozens of parents and dozens of students who require that program and who are already engaged in it will, in fact, see their education through to the end and can participate fully in British Columbia life.

I must say to this House that I was somewhat inspired by the words of the member for Langley, who seems to think, simplistically, that a graduate degree from Tim Hortons university is all one needs to advise the province. Unfortunately, this is not the day of Thomas Jefferson, when we can rely on the common sense and goodwill of the people only.

Thomas Jefferson grew up in an era when it was possible for a well-educated, aristocratic American or Englishman or someone from France to have probably read virtually every book published, to be erudite and skilled in all areas. We live in a much more complex world, and I will be first to suggest it is important to listen to the public, absolutely, and consult with them — something this government didn't do much of in its first term and now seems to have discovered as the new method of governance.

It is important to listen to the public, but it is also important to listen to those experts in society who have devoted their life to learning about things, to understanding, to writing treatises, to doing the kind of study that's necessary to bring about real reform in society. The throne speech is right. We do have enormous problems in health care. Part of it is driven, I would suggest, by a right-wing conspiracy that wants to see privatized health care. And that's part of the process.

Interjections.

L. Krog: That's part of the process. My friends may say no, but it's part of the process.

American-style health care and big business — and it is big business — have supported that concept for years. We have a wonderful public health care system in this country. Most people will say quite candidly that those who have to get into a hospital for serious emergency treatment in this province get first-class, top-rate treatment.

We know that the funding that was put into cancer research and treatment in this province during what my friend the Minister of Health always refers to as the dismal decade has resulted in the best treatment rates for cancer in the country in this province — a record that the NDP is proud of and that this government, if it

had any sense of decency, would congratulate us from time to time for bringing about.

However, the innovations of having a dedicated clinic to do repetitive operations can be done quite simply and quite easily within the public health care system. What surprises me is that after over four years in power, nearly five now, this government hasn't woken up to the fact that it could have brought in those kinds of innovations previously. We don't have to rely on Dr. Day and his clinic.

You can publicly operate, publicly fund and publicly build the same type of facility to provide the same kind of service, which won't see a profit made out of public health care. I would suggest to my friends opposite that that's the kind of health care British Columbians want: a health care delivered at the best cost in the best place, but not-for-profit medicare.

Interjection.

L. Krog: The Minister of Education mentions Jack Layton. Yes, Mr. Layton attended a private health care clinic, which is a publicly operated society, a not-for-profit clinic, some years ago when it was exempted when public health care was brought in, in this country. We would love to attack Mr. Layton, but enough of personalities today. Mr. Layton's not here to defend himself, and I won't mention the Minister of Health again.

That was a wonderful throne speech in terms of its corruption of language. Now, Mr. Palmer — I don't know if he's quite accurate. I did a count myself, and I saw the term "transform" or "transformation" or some variant thereof — not including the title headings of the throne speech, not including the title headings — no less than 19 times.

[1645]

I must tell you, my familiarity with transformation relates back to an earlier era when every little kid had a new Transformer. I guess the Premier's found a new toy for British Columbia. I can imagine the Premier and his staff now in his office playing with the little Transformers, and that's going to fix British Columbia. We're going to transform everything. I think they've been to too many New Age seminars.

Transformation is not going to do it. Hard work is going to do it.

We hear in the throne speech that we're going to go out and consult with British Columbians. We're not going to have another royal commission, though. That, after all, isn't a consultative process. Perhaps I missed something. I thought royal commissions were public processes.

There it is on page 10: "Not through another royal commission, not through another exercise in avoidance designed to produce more of the same, but through real dialogue." We'll get down to Tim Hortons, and we'll have a real dialogue, and that will solve health care in British Columbia. I can barely wait.

Hon. R. Thorpe: What have you got against people at Tim Hortons?

L. Krog: I've got nothing against the people who go to Tim Hortons. I go there myself.

We have had a public process in this province that resulted in the Seaton Commission on health. We had a fabulous commission on health. It gave us a great deal of good information. We had a Royal Commission on Health nationally. We had the Romanow Commission. We've had commissions, and we've had information. We know what the problems are. It is whether we have the will as a society to implement the solutions.

This talk of going abroad and spending taxpayers' money on junkets to Sweden and junkets to Norway or France is not going to solve the problem. What it takes is the political will of this government to do something about it.

Now, what kind of society has been created here in B.C. in the last couple of decades? I can remember a time when we didn't have food banks. I can remember a time when you didn't see homeless people in the streets of Nanaimo. There was a homeless count last year; they did another one. The numbers don't seem to have changed much.

This government talks about "loving families." There it is in the throne speech: "The transformation your government seeks has one purpose in mind: to help all British Columbians make the most of their potential, supported by loving families and safe communities." I have never heard so much hogwash in one speech in my life. How this government can talk about loving families and safe communities — when you look at the mess with the Ministry of Children and Families, when you look at the number of poor living on our streets, when you look at families in British Columbia who live in cars as we speak in this House today and at how this government has failed to provide public housing — is beyond the pale.

Loving families? If you want to have loving families, then support British Columbia's families. Don't keep giving tax breaks to corporations that don't need it or to taxpayers who never asked for it. Talk about increasing social assistance rates or providing decent public housing. Talk about providing social assistance rates that are actually based on the needs of the people who require social assistance, instead of some fictitious figure that comes out of the ministry and bears no relationship to the reality of the cost of living in British Columbia today.

We have seen poverty increase. We have seen a growing underclass.

Now, my friends opposite will say: "This rising tide will lift all boats." I heard it last session from several of the hon. members. They're quite right. A rising tide will lift all boats, in its simplest sense. But when you are clinging to the wreckage of your life, the inevitability is that you will drown. When you turn to this government in the darkest moments of your days — when you have to swallow your pride and ask for social assistance — instead of being given a life preserver, this government, through its ministry, will say to you: "Sorry. Come back in three weeks. Come back in three weeks." It is not a response to the poor of this province

to say, "Wait some more," when they've already come begging to the government's door.

[1650]

I would have thought — in this throne speech, given the experiences we have seen in this province in the last few years — that this government could have found it in its heart, perhaps, at least to eliminate the three-week waiting period. But I didn't hear that. We have, instead, more promises of privatization and, frankly, more promises of poverty.

It appears — and the Attorney General has already spoken publicly about this — that we're going to move towards community courts. You know something? It's a very good idea. It's a very good idea. I don't think you'll find a member on this side of the House who won't support community courts.

If we think, as legislators in this House, enjoying the privileges of this office, that we are going to make a difference by simply having community courts without having decent housing, without having decent treatment programs and all the ancillary services necessary to make community courts work, then this document will be nothing more than what the member for Langley kept referring to throughout her remarks. It will be nothing more than rhetoric, and rhetoric is not going to solve the growing problem.

We know our courts are often filled with repeat offenders whose problems are medical. They are not criminal. We've known that for a long time. Again, I say to this government: you've had four and a half years, nearly five. Why didn't you do something about it earlier? Was it so difficult to figure out what Provincial Court judges — who are on the front lines of this, who see it in their courtrooms day after day — have said to you? Was it so difficult to figure it out? I don't think so.

I had experience in this House once before, from '91 to '96. I represented a different constituency, and you can argue that that might account for the difference, but in those days the biggest single source of complaints in my constituency office was the WCB. I can tell you now that in my constituency office in Nanaimo, which is right downtown and looks across the road at the Salvation Army.... I can tell you what the biggest source of complaints is. It's the Ministry of Employment and Income Assistance.

The people who come into my office tell stories that would make a person with even the coldest heart weep. We can stand in this House, and we can pretend that this brilliant economy — this booming economy which the government takes full credit for — is such a great thing that perhaps we'll just ignore all those people. They can slip off that wreckage and disappear off the radar screen.

They're off the radar screen already. They're in the streets. Many of them are not collecting assistance. They die. We don't know how many commit suicide. We don't know what happens to them. They are the forgotten, and it is shameless. It is absolutely shameless that this government, in the budget last fall, gave another corporate tax break instead of devoting its money to the people who need it most in our society.

If I have to listen to any more Christian psychobabble from any member of the government side about a caring society, about building a better British Columbia, all I can say is sorry, it doesn't cut it. It doesn't cut it in the real world. The real world out there is on the streets of Nanaimo. It's on the streets of Nanaimo. It's in the streets of Vancouver. It's the downtown east side. It's in the streets of Prince George. It's in the streets of Kelowna.

They are our fellow citizens. We have a responsibility to them, and it's time that this government lived up to its obligation not to simply champion the interests of those who have, but to actually, finally, look after the interests of those who don't. That's what I wanted to see in the throne speech. That's what I had hoped to hear.

I wanted to hear an admission that perhaps you had failed somehow as a government. You talk about the four challenges, and in that regard, four key challenges are evident. The need to improve child and family services — thank you for that admission. The need to combat substance abuse and crime — if you do something with community courts and you provide the ancillary services, good on you. The need to forge a new relationship with first nations — long overdue.

[1655]

The need to provide new options for housing. What are new options for housing? We know what the needs for housing are. We have people who need assisted living. We have families who need decent housing. We have those who need a leg up, an opportunity to climb out of poverty. We need all kinds of things in this province, and I just don't see this government delivering. I don't see the kind of commitment that one would expect.

It is so fundamentally important that it happen here, too, because the private sector is not going to solve the issue of poverty in our society. There is no money to be made out of someone who is on the streets and addicted unless you are a criminal entrepreneur. The only way it is going to get solved is through the collective will of people through government. We are the last option. The people who occupy the seats in this Legislature are the last option. Those members of this House who sit around the cabinet table are the last option.

I would like to see this government actually do something quite dramatic, do something out of character. Reverse one of your corporate tax breaks. Increase assistance rates. Announce an ambitious program for public housing. Announce a program that's multifaceted, that enables people to purchase their own residences over time. There are lots of innovative methods available out there. There are lots of studies that have been done. We had a wonderful forum on housing in Nanaimo just the other week, attended by many of the local politicians. Do something dramatic and important. Surprise British Columbia. Step out of character.

I heard today how we on this side should step out of character, how we should be prepared to come along. Well, I suggest that perhaps this government come along with us on a few issues. Perhaps the friendly atmosphere that I saw develop in this House

last fall will lead to some cooperation and some sense, if you will, of a willingness to acknowledge that you haven't done everything right, that we didn't do everything right when we enjoyed sitting on your side of the House. Surely the pressing problems that we see day after day deserve our attention, our care and our solutions.

That's what I wanted to see in the throne speech. I didn't want to see talk about trips abroad; I wanted to see a government that was committed to something other than transformation.

Now that's a phrase that I must say did give me some trouble. I was so troubled that I actually took occasion to open up a rather aging dictionary the other night. Transformative change: "to change the form or appearance." That's one definition. I guess what I'm saying is: are we just going to change the appearance, or are we going to do something about the form? Is this all another sideshow? Is this a new shell game? Is this like a facelift which, you know, picks up the appearance but doesn't do a heck of a lot for the aging body still encapsulated in the skin?

It's also used to describe something that changes character or nature radically. You know, change is good. We don't argue with change on this side of the House. Heck, it was our party that pushed for the public health care system that you folks seem to want to reform. It was our party that pushed for public pensions and EI and all the things that make this country a great place to live.

Interjections.

L. Krog: It was change. It was change.

But you know, there is change, and then there is change. It was the Reform Party that so corrupted the wonderful word "reform." I mean, it wasn't reform; it was: "Let's go back to the 19th century, and let's pretend that we will keep the world this nice, orderly place it once was." There was a hierarchy.

Hundreds of years before that there was a nice hierarchy, and society was quite stable. We called it feudalism. I guess what's troubling me is that my sense is that there are those at the bottom in this province today who have as much hope of getting out from under as the peasants did in a feudal system, because what are we talking about doing? We haven't raised assistance rates in years. The best thing we have got going for us is the Olympic Games. Oh, and by the way, there appears to be a small cost overrun of about \$110 million so far, according to estimates.

[1700]

Interjection.

L. Krog: Not true, the minister says. Well, I...

Interjection.

L. Krog: And another minister says it's completely within budget. Well, I guess it is within budget. I guess

Mr. Furlong was asking for the \$110 million just because he wanted a bigger banner.

C. Evans: That's what transformative means.

L. Krog: My friend says that's what transformative means. Now I've got it. I think I've figured it out. I'm always grateful to the member for Nelson-Creston for his wit and wisdom and clear insight into these problems.

It isn't enough to give us the games. This is not Rome. You can't ignore the problems that really exist in our society. If I was 18 years old with a serious drug problem on Vancouver Island, if I was living in the city of Nanaimo.... There is this limited number of beds available for detox, and there's even a very limited number of beds available to get treatment. So I say to the Attorney General: in view of the throne speech, when you've got this community court going, when you've got this juvenile there, what are you going to do with them? Where are they going to go? Are judges going to continue to make orders for treatment, and there are no facilities to send them to? Will that be the new transformation? Will this be the empty rhetoric of the throne speech again?

Do something important. Don't break any more promises. You know what? Build those long-term care beds. That will help the health care system and make the job of the Minister of Health a lot easier. He won't have people filling acute care beds when they could be in long-term care beds. Help our young people who are, in the words of drug and alcohol counsellors, self-medicating. Help them. Actually help them. Do something useful. Help them get out from under the scourge of drug abuse.

Please don't suggest that minimum penalties are going to solve these problems. They are not going to solve the problems. I've said in this House before that there was a time in England when there were 300 crimes you could be hung for, including stealing bread. That didn't stop people from stealing bread. Heavy penalties are not going to stop people. Criminologists will tell you it's about the last thing anyone thinks about when they're committing a crime. It's particularly the last thing anyone is going to be thinking about if they're a drug addict.

That's what should have been in the throne speech — all of those things, hon. Speaker. So I say to the government: thank you for the throne speech. Fulfil some of your promises that you made the last time around, though, and then I will accept that perhaps there is some credibility to what I see as frankly the disappointing and empty words of another throne speech.

In my constituency we are moving in a sense towards a new colonialism, always seeing our logs disappearing. Island Phoenix, which was one of the most up-to-date mills on Vancouver Island, is shutting down. It will be gone in March. It's 100-plus good union jobs, which put money in the pockets of all the small businesses in Nanaimo.

I know that many of the members opposite enjoy close relations with the new Conservative government

in Ottawa. One member over there shakes his head, and I'm sure that's quite true. We know that you enjoy good relationships with the new government in Ottawa. So why don't you get Mr. Emerson — that most distinguished flyer, a man who can transform very quickly — to actually slap some kind of tariff on raw logs? I can tell you that the east coast of Vancouver Island was the E&N land grant. The timber companies — and I don't fault them for doing it — are flogging those logs off there day after day after day. They're not getting milled in British Columbia. They are being sent down to the United States. They are employing American workers, paying American taxes instead of us enjoying the benefit of our own resources here in British Columbia.

[1705]

So exercise your new relationship. Exercise your ability to talk Ottawa. I mean, you were supposed to be able to talk to Ottawa previously, when they were Liberals — at least Liberals in name, anyway — so let's do something about that. Do something that will actually help my constituency. Get the community courts going. Have the facilities in place to support the people who come through them. Stop the export of raw logs. Help the economy in my community. Get the people off the streets of Nanaimo who have no place to live. Build some decent public housing. Use a multi-pronged approach. But get on with it, because I'm not prepared to sit in this House quietly for another three and a half years while those people I described earlier as clinging to the wreckage slip off.

It just isn't a game I'm prepared to play, and if it requires incivility and if it angers some of the members opposite, then I say let your conscience be your guide, hon. members. Let your conscience be your guide. You preside over a budget of \$30 billion-plus. It's about time some of it got down to those British Columbians who need it most.

R. Hawes: It is a pleasure to rise and respond to the throne speech, but before I begin my remarks, I want to speak to what I thought I just heard a few moments ago, and I hope I didn't. If I didn't, and if I have what the hon. member for Nanaimo said wrong, I would apologize. But I thought I heard you use the term "Christian psychobabble." I found that so highly offensive, if indeed that's the term you used, and of course, *Hansard* will reflect what you said.

I would hope that if that is the term you used, every single member of this Legislature will repudiate that term, because it is so insulting to those of us who have faith in a greater being. It is completely offensive. I hope, I sincerely hope, hon. member, that that is not the term you used, that I have it wrong. I will issue you a profound apology if I heard wrong. Otherwise, I would really hope you would issue an apology to those of the Christian faith and, in fact, all faiths throughout this province. That is not the kind of language that I think is parliamentary or should be used here.

Having said that, I will also refer to the right-wing conspiracy, which the hon. member referred to — that somehow there's this sneaking privatization of health

care that's actually a right-wing conspiracy. I can almost see the grassy knoll. It's incredible that this right-wing conspiracy has been allowed to happen and actually commenced in the '90s with the privatization that came on under the previous government, I suppose.

I'm not going to really speak about what the member for Nanaimo had to say other than the references to the Tim Hortons university. I'll mention that too.

The member for Langley spoke about common sense, the kind of common sense that you hear in coffee shops all over this province, and you know, she's right. So often we in here get bound up in rhetoric that, really, is so divorced from common sense. Governments — both this province, all provinces, all levels of government — frequently come out with policies that are so devoid of common sense, so divorced from what moms and pops all over are thinking and believing that it defies description.

I think what the member for Langley was trying to say is that listening to people in coffee shops could help us a lot — listening to the common folk, as I think you like to talk about, the average British Columbian. I think listening to what they have to say is actually a good thing, and I think that's what the member was referring to. To denigrate, then, the kind of discussion that takes place in coffee shops, the average-families-over-the-dinner-table discussion, I think real does a disservice to the average family, to the average person in this province.

[1710]

I'm so pleased that our government is going to embark on that kind of a listening procedure, is going to now talk about health care in a way that it hasn't been talked about and is going to pull back the veil.

We've had a two-tiered health care system in this country for a long time. It's a terrible thing to say that. Everybody points fingers and says: "You're building a two-tiered health care system." The fact is that it exists today. No one knows better than Jack Layton, the leader of the NDP national party. No one knows better than him that we have a two-tiered system and that when you need attention, you can go to a private clinic; that you can get care if you wish to write a cheque for it; or that you can sometimes pay for it on your medicare card in a private, non-publicly operated setting. He knows that. He avails himself of that kind of service. I don't think it's bad.

I think it's wonderful. I think it's really, really an accomplishment. I would really congratulate the Minister of Health and the Premier for being prepared, I think, to courageously go out and engage in a discussion. I think that for the first time in my lifetime we're really going to talk about what's happening in health care and why it is that we are near the top in spending per capita in the world and we have results that are ranked as 30th in the world.

Why would we want to carry on doing what we're doing, spending what we're spending, to be 30th? I don't get it. Frankly, obviously, as a government we don't get it. So we're going to find out why it is that we're 30th. What is it that other places are doing that

rank them ahead of us, and what can we learn from them to make us better? Man, what a novel, novel approach — something that, in fact, the people sitting in Tim Hortons and in the coffee shops around this province and at kitchen tables around this province have wondered for a long time — which addresses, I think, what's just common sense.

In the throne speech.... I'll refer to what the Leader of the Opposition had to say a little bit. She talked about the lack of vision, and she talked about rhetoric. She went on and on about her interpretation of what the throne speech meant this time and how the previous throne speeches have meant very little.

I just want to go back to last year's throne speech where it laid out five great goals. I think it's the responsibility of a government, especially in a throne speech, to say: "These are the general goals. This is the direction we want to move in." I can't think of anything more noble than to say: "This is a ten-year plan. This is where we want to move to, and we want to lay it out. Then through our ministry service plans, we want to lay out how we're going to get there year after year, and we're going to measure progress towards those goals."

I think that's a great system. It's called planning. It's something that was completely missing throughout the 1990s. We as a government believe that to really accomplish your goals, you should plan. That's what we're engaged in.

I want to just touch on — and this is all through the throne speech.... It's been mentioned. What have we accomplished in health care over the last four years? We have a fair Pharmacare system that's recognized throughout Canada as number one. We have much, much better coverage than other provinces, particularly some of the maritime provinces.

We have increased dialysis stations throughout this province by up to 60 percent. If you are a person that has renal disease, you're in need of dialysis and you've had to travel — particularly from the Fraser Valley, where I live — to St. Paul's Hospital three times a week, I can tell you that it is very, very time-consuming. It is taxing. Now those folks are able to get their dialysis in the Fraser Valley without that travel time, and that's because we have expended a considerable effort in increasing dialysis stations and recognizing the problems that people with renal disease have.

We've increased MRI machines by 90 percent and added eight new CT scanners around the province to try to reduce some wait times and to make some investments that were completely lacking throughout the '90s.

[1715]

We've taken the ambulance service and made sure there are defibrillators in every ambulance and that the paramedics have had increased training. We've doubled the seats for doctors in universities throughout this province.

This is interesting, but I'll go to this in just a minute. They just handed me a note here about a new poll that's in.

We've increased nurse training spaces by 62 percent, and that's in the throne speech. Nurse practitioners are now being trained. There's been a 35-percent increase in hip replacement and 65 percent in knees. The Vancouver General Hospital tower now has 459 beds after sitting empty for ten years under the NDP government. That facility sat completely empty while we tried to heat an empty building. Millions and millions of dollars' worth of investment with an empty building — now filled with 459 beds. The new academic ambulatory care centre will be open this year in Vancouver. Surrey Memorial Hospital is being modernized and expanded, and — for me and my constituents — Abbotsford regional hospital and cancer centre.

I sat in the local government through the decade of the '90s, where we fought to get that new hospital underway. We had promise after promise after broken promise. There was sod-turning after sod-turning, and that's where it ended. I don't know how many shovels were purchased by the previous government to turn the sod, with no hospital, no plans for a hospital. When we took office we said that we were going to build a hospital in Abbotsford, because where I live, the people in the Fraser Valley need a hospital and they need a cancer centre. That is now so close to completion; it will be finished and operational in 2008.

It's amazing to see the progress and the speed with which it's going up. It's being built with partners who are from the private sector. And guess what. The private sector partner who's constructing the hospital is actually married to the project for the next 33 years. It's amazing to consider that if there's something that goes wrong with that construction, the cost of fixing it, the maintenance on that building lies with the company that built it, our partner.

I keep thinking about the last building that I saw in my riding constructed the way the NDP would construct — completely public. Tendered out, of course, to various companies that built.... Well, I don't think they were building for charity. They were companies that were in business for a profit. I'm thinking about Heritage Park High School constructed under the previous public sector method of constructing schools. Within six to eight months of the completion of construction there was a major leak in the roof over the stage and the theatre. It was \$50,000 to repair it, and the contractor said: "Not my fault; not my fault. I built according to specs. It would be the architect." The architect said: "No, not me. It's the engineer; the inspection." The fingers went around and around and around until.... Who paid for it? You and I paid for it; the taxpayer paid for it; the school board paid for it. Who else would pay for it? You know — the public sector.

The new Abbotsford hospital will require that contractor to maintain that building for 33 years after they build it. And if he tries to cut a corner during construction, it will just cost him more in the maintenance but it won't cost us. This is a marvellous innovation. The Auditor General has reviewed the process and found it to be completely acceptable. He's given it a clean bill of health. The Abbotsford regional hospital and cancer

centre built as a P3 is an example of how government can partner with free enterprise, make things happen for the betterment of all British Columbians.

Yes, there's profit involved. What a heinous thing. What a horrible word "profit" is. We should all run with fear and terror when we hear anyone mention profit, because everyone knows that anyone who's in business to make a profit must be greedy and grasping and provide bad service, or are only in it for themselves. How ridiculous; how utterly ridiculous.

[1720]

The World Health Organization has said that we are 30th in results for health care. As the member for Langley said, why is it that we would be afraid to go out and ask why we are 30th? Why are we spending all this money and not achieving the kinds of successes that other countries that are spending less per capita enjoy? What's the problem here? The Leader of the Opposition says, "Gee, they've got user fees in Sweden, so you must be going to put those in," or: "You know, they've something else in another country. That must be your plan."

This is all the fearmongering. Let's not look under the covers. Let's not examine anything. Let's just carry on with the status quo and the just-spend-more-money mentality that's really put us where we are.

We have a health care system that's not sustainable. We cannot continue what we're doing in light of our aging population and where we know we're going to be financially, carrying on the way we are, within just a relatively few years. Health care won't be here for our kids if we don't make some fundamental changes and make them quickly. I think that we can make those changes. We have said that we're going to honour the five principles of the Canada Health Act.

The Leader of the Opposition makes light of, or pooh-poohs, sustainability — the concept of sustainability. Well, I watched through the 1990s. I wouldn't call it a budgeting process. I come from a banking background. I would not call what I saw with the handling of the province's finances throughout the 1990s as anything to do with planning, looking at sustainability.

It was simply: we could always get more money by just taxing more — right? Just increase taxes, especially to those who are successful. Let's just attack the people who are making....The big corporations — yeah, let's get them. And once they've all gone, we'll start attacking the next round of big corporations, who are just slightly smaller than the ones who've already left, until we've driven them all out. They were leaving, and they were going to Alberta, and now they're coming back. With them come jobs, prosperity and an economy that's built in a sustainable fashion. Gee, that word again: "sustainable."

If we don't change what we're doing in health care, we are going to go broke. We will not have enough money. We can't tax enough from our citizens to pay for what's coming unless we change what we're doing. That means we're not sustainable. We should be seeking sustainability.

I really look forward to a dialogue after we gather the information that's out there around the world, and we begin to discuss with British Columbians what information is out there, what can happen if we look under the covers, if we stop lying to ourselves. That's kind of what we're doing. We're kind of kidding ourselves when we say we don't want a two-tier health system. It's been with us for a long time. Why don't we just recognize that and get on with building a health care system that works for all of us?

Yes, in the throne speech it does say that if someone needs an operation or a procedure, they really aren't going to ask who owns the bed that they're in, in the hospital as long as they're getting the procedure and it's paid for with their medicare card. Why would they ask? Why would they ask who cooks the meals or who cleans the floors? Why would they ask those questions, providing that the service is there for them? And we're making sure that it is.

[H. Bloy in the chair.]

I'm quite proud of the approach we're taking in health care. I'm proud of the progress we've made. It's been wonderful progress. It's going to continue, but it's going to continue now with transformation, a word that the member for Nanaimo seems to have some fear of. But when what you're doing isn't working, and you have to change to something that does work or you want to look at changing to something that does work, I would call that a transformation. I don't know. I'm not afraid of the word.

Crystal meth is a problem in communities all over this province. Where I live, it's a huge problem. In the Fraser Valley there have been more and more and more of our kids getting sucked into that culture, getting pulled into the use of that drug, that insidious drug that has destroyed so many lives, has killed kids all over this province.

[1725]

We have no way of really knowing how many deaths crystal meth has caused, because coroner's reports will say that someone was killed perhaps in a car accident or from a fall, when really the whole cause of that was crystal meth. It's not recorded that way, so we have no real way of knowing how many deaths could truly be attributed to that drug.

But as it says in the throne speech, the focus on crystal meth is going to heighten and we are going to look at tougher penalties for traffickers. The member for Nanaimo did talk about how there's no point in giving tough sentences to drug addicts. I would concur with that, but the guys who are making crystal meth, the manufacturers, generally speaking are not addicts. This is big business, and those people are — I call them — murderers. The kids who are dying out there are dying because these people are producing a poison. They know it's a poison. They are willingly.... In fact, they are disguising it to try and suck more people into its use, so how can you not defend tougher sentences for those killers? They are not drug addicts. They are predators that need to be removed from our society.

The immediate extradition of foreign traffickers. Who could argue when you see people coming into this country and they begin selling drugs on the streets of our cities immediately that they get here. And so often if they are deported, they're back — within days they seem to be back. We need to get a lot tougher on that. If people are coming to our country and they are going to commit crimes, frankly, I think they should be sent home.

We have an immigration policy that's really necessary to build a strong, multicultural, diverse society. We need to build it with people who all share common values, and that's honesty and integrity and respect for the law. I think that if criminals are coming into this country, they should not be allowed to stay. Again, this is the Tim Hortons commonsense approach that I think you'll hear moms and pops all over this province support in huge numbers.

CKNW poll just in: do you support the B.C. government's pending review of the health care system? Eighty-two percent say yes. As they say here: Tim Hortons knows best. Well, I guess they do, you know. These are the folks that I listened to. These are the folks that elected me to represent them and to stand here and try to capture their view and try to pass their view on through government.

Unlike the member for Nanaimo, who thinks that the Tim Hortons approach — the commonsense approach, the listening-to-moms-and-pops approach — is foolish, I think on this side of the House we understand what has built this province. It's people all over the province that we all have to pay attention to and listen to, and we are. I'm quite proud of that approach.

I just want to close by reiterating in my own words the five great goals that we have laid out. We want to be the best-educated and the most literate province in this country. We want to have the best social infrastructure with the best supports for those who need them, for those with disabilities and for those who need help. We want the best environment, the cleanest air and the best water in this country. We want to create more jobs than anywhere else, and we want to do it now, and we are doing it. We want the fittest population in the country by the year 2010, and we're working towards that through all kinds of initiatives taking place through our Health Ministry and other ministries, and we are working to achieve that.

[1730]

Those goals were laid out last year in our throne speech. All of the initiatives that the government is taking are aimed at achieving those great goals, and nowhere will we lose sight of those goals. They are the overarching goals that we aspire to achieve. As we move forward with our planning processes and as we go about building a better province, those goals will always be uppermost. We will always strive to achieve them because they are the right thing to do, and I don't think that the opposition making fun or ridiculing what we plan to do really does a service to the people of this province, to the moms and pops who I know all agree with those goals.

Mr. Speaker, it's been a pleasure to be able to respond to the throne speech. I look forward to hearing the comments of my colleagues, and I hope some more sensible comments from some of those that are in opposition. I think secretly many of them would like to join us, because I know they share the same objectives.

Point of Privilege

Hon. G. Abbott: I rise as Government House Leader, deputy House Leader here, to reserve my right to raise a matter of privilege in relation to comments made by the member for Nanaimo earlier this afternoon.

Deputy Speaker: So noted.

Debate Continued

R. Fleming: I appreciate being able to respond at this later part of the afternoon to some of the elements of the throne speech from yesterday. I think I'll just say right off the bat that I enjoy Tim Hortons. I campaigned there during the election, and I will use no.... I will try and refrain from any further references to Tim Hortons, timbits or any other such products for the remainder of my remarks.

I think, on first glance, that many British Columbians — not just members of the opposition on this side of the House — were genuinely surprised to hear yesterday the intention of the government that for the remainder of its mandate it will further pursue the privatization of health care services in British Columbia. We heard yesterday.... I understand that throne speeches — of course, government communications really of all types — always necessarily emphasize the positive.

They are a rhetorical exercise, in large part, in that the facts are most enthusiastically and positively reported. There were many references to positive things going on in the economy, and I think anyone would readily admit that in their communities there are some wonderful things flowing from the world commodity prices, the rebound in certain markets that affect British Columbia — not just British Columbia, but many jurisdictions throughout the world economy — the growth in the construction industry, for example, and the employment that that's fuelling. It's quite appropriate and right for those things that are happening in our communities to be reported in the throne speech.

Of course, the sober facts, the more boring facts which I will borrow, with apologies, from the Auditor General in his recent review of the government's finances, show some other things that are of concern to us too. The fact is that British Columbia, in comparison with other western provinces and with Ontario, experienced moderate inflation. Its unemployment rates were higher than those jurisdictions, and more worryingly, its GDP per capita was lower than all but one of those provinces. So there are some structural things in our economy that need fixing and that require solutions from the government. I think you've heard the interest

of the opposition in offering some of those solutions as well — this member included.

Yesterday we heard a promise of bold new dialogue. It was followed by a description of the government's goal that such a dialogue contains an already foregone conclusion. The government has made up its mind in its conversation with British Columbians about health care, because the conclusions of this dialogue are already in the text of yesterday's speech.

[1735]

They are also seen in the actions of this government over the last four years. The throne speech basically restates the goals of accelerating and championing more private health care delivery in B.C. — simple fact. The government's already expressed its confidence, before it goes to talk to British Columbians, that for-profit medicine is the cure-all for the existing problems and the emerging challenges in B.C. health care. I think British Columbians have rightly and cynically received the phrase "transformative change" — coming soon to a health region near you from the people that brought you the rethermalized boiled egg.

This is a government that has already gone further and faster than any other in Canada in terms of outsourcing and privatizing its health care system, and the results are clear. They were widely discussed in the provincial election only ten months ago. The government that now supposedly wants dialogue didn't listen then.

What did voters talk about to candidates — to candidates of all parties, quite frankly — on the subject of health care? They talked about overcrowded emergency wards. They talked about the shortage of long-term care beds in their communities. They talked about the poor food and the falling standards of cleanliness. Those were the issues that voters wanted to discuss, and after five years in office, we're now being asked to believe that there's a new urgency in tackling some of the recurring, very well-studied problems in our province's health care system.

Lately we've even been hearing a tone of complacency as the government takes full credit for some of the rankings contained in a report from the Conference Board of Canada — but of course, ignoring the very poor satisfaction ratings given by British Columbians of their health care system in that very report. This report concluded, in part, that B.C. has the best health care outcomes per expenditure of the ten provinces. It's not the first time that this organization has made that conclusion. It did before, during the bad 1990s, that much-maligned decade.

But with all the frustrations in health care today, including the basic ability for one to register themselves, their family and newborn infants — what have you — with the Medical Services Plan in a timely fashion, this government couldn't wait a single day before it launched its press releases declaring itself to be great health care managers on the basis of that report.

Lost in the news releases, as well, on the Conference Board report is that it is in fact based on data from Statistics Canada from 2002. I don't need to remind the

members opposite, I don't think, that it's now 2006. What we do know today is that after five years of Liberal administration, wait-lists for key surgeries, ER services and nearly every meaningful interface that ordinary members of the public need from their health care system have grown longer.

I'm going to leave aside the question of why the Premier and the Health Minister will travel to Sweden, Norway, France and the U.K. I think that was asked earlier in the day and will be asked by others, but I would urge them to extensively tour British Columbians' health regions to see the state of our health facilities firsthand before they go, if they can.

Earlier this year the Leader of the Opposition and our Health and seniors health critics did exactly that. I've seen hallway medicine practised here as a matter of routine in our hospitals — just ten minutes from these buildings. I hope that the minister and the Premier, when they travel to the United Kingdom, will meet with treasury officials and that they'll meet with Partnerships U.K. officials to learn why that country has abandoned completely any planned projects for P3 hospitals.

I hope that when they go to Sweden, they look at how doctors and physicians are paid. Ninety percent are on salary, and they do not have, as part of their health care system's culture, the fee-for-service model that we have. We must make a comparison that's accurate and look for solutions in every part of the system, not with our preconceived conclusions before we go.

[1740]

Before he goes abroad, I would like the Minister of Health, if he could, to visit the Royal Jubilee Hospital in my community just to see the problems that are occurring in acute care and emergency services, and to see the causal link that anyone who works in that system will tell him is related to the underfunding and, speaking politically here, the broken promises to expand seniors long-term care beds.

Of the 909 acute care beds in this region, on any given day 15 percent of these beds are being blocked from patients by seniors who wait upwards of 100 days, at a cost of approximately \$1,500 per day per individual in hospital, to be placed in a public long-term care facility. That is the kind of management that is going on. That is the kind of train wreck that is happening in certain service areas of our health care system.

The results of five years of cuts to home support services, the reduction of long-term care beds in my community are here to be seen. The solutions for providing dignity for seniors, for efficiently allocating health care resources are here, as well, at home.

By 2005, B.C. was supposed to have 5,000 net new long-term care beds built over the four years of the new era. While that time is, of course, now stale-dated, in my region we live with the results of that broken promise. Instead of new spaces for our seniors to live in, we're coping, in fact, with a net decrease in long-term care beds in this region, and this story is repeated across our province.

The throne speech outlined the government's four-square support for the five defining principles of the

Canada Health Act, but just two paragraphs later it states that the provision of a universal, accessible, comprehensive, portable and publicly administered system "remains largely undefined." So as soon as it makes an assertion, it equivocates on those principles that have stood us well for 40 years.

In other words, the government has served notice to British Columbians that it questions the relevancy of the principles that form the foundation of the very act itself. If actions speak louder than words, then perhaps the past eight months of the Copeman clinic scenario, the admitted violation of the Canada Health Act principles on universality and barriers created by the user fees, which are a necessary part of this new upper-tier part of the health care system that this government is enabling, come to mind.

[Mr. Speaker in the chair.]

I move to another part of the throne speech now, dealing with housing, because there were some references there.

As I heard the Lieutenant-Governor make the speech, I was encouraged by the content I was hearing. I was especially encouraged that the word "ground-breaking" was used, but unfortunately, by the end of that section of the speech it was clear that the new housing policy that was being outlined by the government will not lead to any groundbreakings at all. Instead, it will direct government taxpayer dollars to private landlords for existing housing stock.

Instead of the construction of new affordable housing for low-income families, at-risk populations or other groups that are facing the housing crisis in B.C., this government has announced a bold new housing program — wait for it — a rental supplement program. Back to the future, as one of my other colleagues already mentioned.

That rental supplement program — ask anyone in the housing industry — is not going to work in the lower mainland, where less than 1 percent of the housing stock is vacant now, or in the capital region here, where there's a less-than-0.5-percent vacancy rate. There is simply a shortage of affordable rental housing — period — and not a surplus excess of rental housing out there to which a program like that can engage.

In the continuum of housing initiatives that are needed to address housing challenges in our community, rental supplements may well have their place, and they may well work in communities where the vacancy rate is significantly different than where most people live in the province.

But in a market like this, where there's been virtually no new rental housing construction over the past two decades, even with the incentive of great interest rates, even with other advantages — sometimes free land — we don't see that.

[1745]

We don't see rental housing being built. We see plenty of market strata condominiums. We see market duplexes, detached houses. Those are being built. But

none of those are within reach of families living on incomes of \$45,000, even \$60,000, annually or less.

It's just a simple fact that the slow, cautious investors that were active in building rental apartments in the 1960s and the 1970s and '80s are no longer interested in something that cannot provide them with a return on investment. There are not the pension funds and other kinds interested in this real estate portfolio out there developing rental housing, so it will not lead to groundbreaking, as the euphemism was described, for this program.

What we need to do is retain our existing rental stock, which is being converted at an incredible rate. We need Homes B.C. back. We need rent-to-own programs, as one of my colleagues mentioned earlier. We need to dramatically increase investment in affordable housing if we want an inclusive, prosperous province. Canada is near the bottom of the 32-member OECD countries in terms of its housing investment.

Just a comment on trades because there was, again, a very fleeting reference to the skills challenge that our province faces, and this is a national problem. It's particularly acute in B.C. because we've chosen to deal with it in an unfortunate way.

The fact is that today Alberta graduates twice as many apprentices per year as British Columbia. I have statistics on provincial certificates being issued that are reported by the new Industry Training Authority. In 2000 we issued close to 2,900 provincial certificates; today less than 1,500. Alberta graduates twice as many apprentices as we do, yet their population is 75 percent of this province's. You know, in the mid-1990s Alberta was in British Columbia to study us to remodel its apprenticeship program that was based on the ITAC system, which has since been disbanded.

In my community is Camosun College. We have waitlists for electrical and other trades programs. But they can't increase the amount of seats because there is no more funding. In fact, for every year that this government has been in office, there has been \$30 million less funding per year for trade and apprenticeship programs.

You talk to the college administrators, and they would be happy to add an afternoon or evening learning cycle and graduate more people. They can't do it. The government isn't supporting any initiatives in that direction. There's a cost to losing ground on graduating skilled trades, and it's a cost on lost investment.

In Victoria in the condominium sector we have investors leaving now because they can't secure the labour to build the projects that they have had approved and rezoned by the council.

Comments on crystal meth. I am very pleased. I don't disagree with many of the words that the government has uttered in response to many of the community initiatives to tackle crystal meth in our province. I agree with the government sentiment, contained in this speech, that prevention and education are extremely important to try and prevent young kids who are in school or kids on the street from trying and risking addiction to crystal meth. I agree with the ideas I've heard around justice reforms, around traffickers.

I would like to have heard more about treatment. In my part of the world, on the south Island here, there are only five beds — period — dealing with treatment services for those that are already addicted. There are something like 3,000 IV drug users in this community, and we don't even have a handle on how many use crystal meth in this community yet. We don't have an accurate count. We have estimates.

Why is B.C. one of the only western jurisdictions now in the United States and Canada where the ingredients of crystal meth are not required to be behind drugstore counters? Everyone else has moved. This government has not. The federal government, to its credit, has enforced against large-batch distributors of the ingredients of crystal meth. That has broken up some of the labs, I think, in this province, police and law enforcement will tell you. But there are many people who buy very easily the ingredients to crystal meth at drugstores and manufacture it in our communities. This government should support legislation that's been introduced in other jurisdictions in that regard.

[1750]

Finally, I would like to say in summary that I think the throne speech, while surprising many people in terms of its sworn direction to move B.C. yet again to radically pursue privatization of health care, also contains a number of disappointments. It's disappointing, of course, that the government is interpreting its mandate as another licence to radically restructure health care, but the missed opportunities, I think, are the source of the real disappointment: the missed opportunity to invest in real innovation in health care; the missed opportunity to do something about the skills shortage that is costing our economy; the missed opportunity to invest in our workforce, in our youth, to keep our economy performing; a chance to go further on community safety — to follow the lead of London Drugs on the ingredients of crystal meth, for example. Where would the objection be, from what they already voluntarily comply with, to make their competitors do the same thing? There wouldn't be one.

On housing programs. Again, after a five-year hiatus, I and others wanted to see that this government, with its surplus that it has been boasting about, would bring back an affordable family housing program; would build again; would address programs for families with incomes who need the help and, also, for the hard-to-house, the mentally ill, those recovering from addictions and street-entrenched youth and adults. Those are people that need housing programs desperately in our communities, where homelessness has become a growing problem over the last four years in particular.

I think the greatest disappointment is that there was a chance here to announce that the government was going to share the benefits of a growing economy, that it was going to resolve that this province has the lowest incidence of child poverty. But that is not part of the vision. For that I think this throne speech provides a disappointment, not just to the opposition but to

many British Columbians who are disappointed to hear that the government is pursuing radical privatization of health care services and missing an opportunity to share the benefits of a better economy.

Hon. Speaker, I move that we adjourn debate.

R. Fleming moved adjournment of debate.

Motion approved.

Point of Privilege

(continued)

L. Krog: I rise on a point of personal privilege. I made remarks earlier today in this House which I would have to acknowledge were clearly intemperate. I have offended members of this House, and I wish to

make a formal apology on the record to the members of this House for my remarks.

Mr. Speaker: Thank you, member.

Hon. G. Abbott: I thank the member for his comments, and I move the House do now adjourn.

Hon. G. Abbott moved adjournment of the House.

Motion approved.

Mr. Speaker: This House stands adjourned until 10 a.m. tomorrow morning.

The House adjourned at 5:53 p.m.

HANSARD SERVICES

Director
Anthony Dambrauskas

Acting Production Manager
Robert Sutherland

Assistant Production Manager
Jill Ainsley

Editorial Supervisors
Janet Brazier, Christine Ewart

Galley Editor
Heather Bright

Technical Operations Officers
Pamela Holmes, Emily Jacques

Research
Jaime Apolonio, Mike Beninger
Dan Kerr, Cristy McLennan
Sarah Wiebe

Editors
Shannon Ash, Laurel Bernard, Andrew Costa,
Heather Gleboff, Margaret Gracie, Jane Grainger, Iris Gray,
Linda Guy, Bill Hrick, Paula Lee, Elizabeth Levinson,
Marg MacQuarrie, Constance Maskery, Jill Milkert, Lind Miller,
Lou Mitchell, Karol Morris, Melissa Nelson, Dorothy Pearson,
Erik Pedersen, Janet Pink, Melanie Platz, Robin Rohrmoser,
Robyn Swanson, Camilla Turner, Heather Warren,
Arlene Wells, Tara Wells

Published by British Columbia Hansard Services, and printed under the authority of the Speaker by the Queen's Printer, Victoria. Rates: single issue, \$2.85; per calendar year, mailed daily, \$298. GST extra. Agent: Crown Publications Inc., 521 Fort St., Victoria, B.C. V8W 1E7. Telephone: (250) 386-4636. Fax: 386-0221.

www.leg.bc.ca

Hansard Services publishes transcripts both in print and on the Internet.
Chamber debates are broadcast on television and webcast on the Internet.