

Supply—Health and Welfare

dams on the Arrow lake, and that makes some difference. During the 19 years I have been in this house I have always found the officials of every branch of this department willing to give every consideration to any problem brought to their attention, and to carry out inquiries and give explanations that were necessary.

May I state that I wholeheartedly support the remarks that have been made by previous speakers representing this party in the debate on these estimates, particularly in respect of the Canada pension plan and the report of the royal commission on health services. There is no need for me to repeat what has been so well said by previous speakers, except to emphasize my complete endorsement of their stand on these particular issues.

However, I do wish to bring to the attention of the minister one omission that has been brought to my attention in respect of the report of the royal commission on health services. This omission has been drawn to my attention by representatives of organizations in my constituency as well as by various other individuals. There are apparently no recommendations in that report in relation to continuing care facilities for older persons. I have discussed this question with the minister and with a number of individuals who are very interested in this situation. Women's organizations are particularly interested in this subject, and the problem is of great concern to small communities because of the direct association with the need for satisfactory after-care facilities and nursing homes.

I am not going to take the time of the house to make extended representations, though I had intended to speak at some length on this subject, but I can draw the attention of the minister and hon. members of this house to the general feeling that exists in my constituency, at least, by quoting from an editorial which appeared in the *Trail Daily Times* of August 14, 1964 under the heading "Aid for Continuing Care". Mr. Chairman, this newspaper strongly supports the Progressive Conservative party and takes a great deal of pleasure in ribbing the hon. member for Kootenay West whenever it has the opportunity. However, I agree with what is said in this editorial on this subject, and I should like to quote it. It states:

The report of the dominion royal commission on health services, commonly known as the Hall royal commission report, has a deficiency that is of serious local consequence.

It omits to provide for dominion participation in what are known as "continuing care facilities," in other words, nursing home type establishments.

This absence has jeopardized Rotary club plans to construct and operate such an institution as a sort of adjunct to the Trail-Tadanac hospital.

This would also apply to other hospitals. The editorial then continues as follows:

Months ago, health minister Eric Martin rejected a private enterprise proposal to build and operate a nursing home in Glenmerry. He came out strongly in support of the Rotary project because, he said, the Hall royal commission could be expected to recommend dominion participation in such public projects. The availability of dominion operating funds would enable the provincial government to place nursing homes on a per diem basis, similar to that obtaining in hospitals, thus effecting important economies for patients of modest resources.

This week, Mr. Martin sent the *Times* a copy of the text of representations the B.C. government has made to Ottawa in connection with the Hall report, and in it he says this:

"British Columbia deplors the fact that the report's recommendations do not encompass the field of continuing care for persons suffering from protracted illness and who require nursing care and periodic medical care over a long period of time.

Just as the provision of facilities and services for the care and treatment of persons who are acutely ill is of vital importance, and the development of convalescent and rehabilitative programs is also of great value, so too is the provision of long term care of major importance and worthy of being an integral part of any universal health services program.

Therefore...British Columbia urges the government of Canada to include under the provisions of the Hospital Insurance and Diagnostic Services Act coverage for those persons receiving care in approved continuing care facilities."

I support that article in principle, although I must say that in view of the fact the government of British Columbia is about to loan the province of Quebec \$100 million I cannot see how it can be short of funds to do this work in the immediate future.

Over a period of nearly 20 years I have had the pleasure of being either the president or a director of a community hospital, and as a result of that experience I know of the need for these facilities. Certain limited facilities are provided, but they are far too costly for many older persons. Just prior to my return to Ottawa I was speaking with a lady who told me of a friend of hers who had gone into a nursing home which charged \$350 to \$400 per month. She had stayed there until she had exhausted the \$8,000 she had in the bank, which represented her life's savings. Then, of course, she had to leave the nursing home to be cared for by another friend who was willing to look after her on the basis of some assistance from her old age security.

There is a great need in this respect, and I do urge the minister to give some consideration to the situation. I understand consideration is being given by a number of