

estimated cost of treatment services, for one thing, in the Whitehorse area in the Yukon.

Dr. CRAWFORD: Well, I can only speak for the treatment services, and I cannot tell you the detailed cost of the treatment service for the Yukon, for the simple fact that it is not a sub-district. The Yukon is part of the Vancouver district for administrative purposes, and the cost of treatment activity up there is absorbed in the Vancouver operation.

However, representations have been made, as you know, that something more was required in the Yukon, and that with respect to treatment services considerably more was required. I think there is a place here for something more than we have. But how much more?

One difficulty is, first of all, the fact that by numbers, the patients that we handle up there do not create a patient load of much more than two or three at any one time, whether they are in the Yukon, or in Vancouver, or in Edmonton. But the main difficulty, as has been explained to me, is that there is poor communication between the extremity in Whitehorse and the central authorities, be they in Edmonton or in Vancouver. This is doubtless true.

I therefore propose to engage the services of a doctor in Whitehorse to act as a treatment service representative. He will be the administrative medical officer at the new hospital which is going up there. I have his agreement to act in this way; I have the unofficial agreement of his employers, the Department of National Health and Welfare; and I expect any day now to have the official agreement of the Department of National Health and Welfare to appoint him as the D.V.A. medical representative in Whitehorse.

This will be followed by a briefing session in which we will bring him up to date on veterans treatment regulations and the rights of various groups of veterans for treatment.

I anticipate that this appointment—the appointment of Dr. McKinnon—will greatly facilitate treatment arrangements, since there will be a man in Whitehorse who will be my representative there.

He can arrange for treatment either locally in Whitehorse in the new hospital under the doctor-of-choice plan, or make the necessary arrangements for transfer of the veteran to Vancouver or Edmonton as the case may be, doing what is most convenient, and knowing that the patient will be met, received and handled expeditiously when he arrives.

I think this relatively simple manoeuvre will have a beneficial effect on the treatment situation in Whitehorse. But it will not do very much, I admit, for the man who is out in the creeks. I do not have any idea how we could provide a really 100 per cent adequate coverage for the Yukon as a whole. I think we can establish a treatment authority in Whitehorse which will go a long way to solve the problem up there.

Mr. SPEAKMAN: I have travelled by airlift, both with service and civilian aircraft, and it is not the best means of travel for patients, particularly a seriously ill patient, I can assure you.

I shall go back to the deputy minister now. That takes care of the treatment service; but will the doctor who is going to be at the head of the hospital have the time to take care of other veterans problems, apart from treatment? I mean Veterans' Land Act cases, and War Veteran Allowance cases?

Mr. LALONDE: I understand that there is a Veterans' Land Act representative who is responsible for the Yukon. But whether they have a representative in Whitehorse or elsewhere, I do not know. You will never eliminate the travelling that a veteran, living in the Yukon, outside of Whitehorse, will still have to do to get in touch with our chap.

Otherwise our employee is going to have to travel to the Yukon to meet veterans; whether the welfare officer travels out from Edmonton or Vancouver