

*Supply—Veterans Affairs*

the results of our experience so far, and I replied that the period had been quite short. I should like to say again what I stated the day the announcement was made.

We are taking the first year to work this out as best we can. We are under no illusions, because we realize that it is a difficult problem; consequently I do not want to pin the department down too closely at this time as to charges and other factors. We realize that an attempt must be made to solve the problem sooner or later, and we would prefer to do it quietly, while there are comparatively few beds available, rather than let it move to a point after four, five or six years when there might be quite a number.

Hon. members will understand that when the hospital construction program was entered upon, arrangements had to be made for the peak load, coming normally in mid-winter, as well as the valley load in mid-summer, which we are approaching now. That means if the peak load has been provided for there are quite long periods during a year, even in normal times, when there are a number of beds vacant. It is now our intention to take advantage of the interim gaps to experiment as to how our federal D.V.A. hospitals may best be used in order to play their part in the hospitalization program of the country. Coming down to cases, this will give an indication of what is moving forward in the very short period that we have been trying it out. There has been a steady increase in the number of patients in this category, which we call 12-D to distinguish it from others. The number in class 12-D in D.V.A. hospitals rose from fifteen on April 11 of this year to sixty-five on May 30. Approximately 175 patients have been treated and discharged under this classification during April and May. As an example, one district has treated and discharged thirty-four patients, the total cost being \$3,109, all of which except \$86.20, has been paid or guaranteed to the department. Other districts have either had a similar or better experience. I have certain data with regard to the districts of Toronto and Montreal.

**Mr. Blair:** What is the rate per day charged in these hospitals for non-pensionable veterans?

**Mr. Gregg:** For veterans coming within this class?

**Mr. Blair:** Yes.

**Mr. Gregg:** If I may I will answer that later, because I do not want to give my hon. friend the wrong answer.

**Mr. Gillis:** I should like the minister to explain something about the point raised by

[Mr. Gregg.]

the hon. member for Lanark. A non-pensioned veteran may have a service disability entitling him to treatment, but he is not pensioned for it. I have had several of these cases recently where the veteran has paid his own transportation to the hospital and has entered on the assumption that he was at least going to get free treatment. After being there for a month he received a bill from the department at the rate of \$9 a day. In most cases the veteran could have received the same treatment at a local hospital in his own community and at a much lower rate. He entered the D.V.A. hospital on the assumption that he was to get free treatment.

I should like to know when the rate of \$9 a day was fixed, and under what regulation. In the case of a veteran such as the one I have mentioned, one who enters the hospital, has no money and is not able to take work, is there any provision under which the hospital bill may be waived after investigation? I should like to know how and when the rate of \$9 was arrived at.

**Mr. Gregg:** The situation referred to by my hon. friend may have existed before in the case of a veteran pensionable for one disability who had to go to hospital for another, which, according to the doctors, is a post-war disability and one in respect to which he is not eligible for pension or treatment. Now, however, such a man would come under the new arrangement for his non-pensionable disability. In other words, if he held Blue Cross insurance, or if he was paying it out of his own pocket, it would come under the new 12-D rate, which is not as high as the \$9 per day in vogue before.

**Mr. Blackmore:** Mr. Chairman, last night just before eleven o'clock I pointed out that there was a serious matter I wished to bring to the attention of the committee under this item. I should like to do now what I said I was going to do.

The matter which I desire to bring to the attention of the committee is one pertaining to what was known as the McCann commission. Members who entered the house as a result of the last election will not be familiar with that remarkable commission. In case they desire to look into the matter they will find it interesting to turn to pages 6232 to 6238 of *Hansard* for June 30, 1948. There they will find the speech I delivered in which I pointed out there were some things concerning the McCann commission that apparently were completely out of order, things which ought to be looked after before we could consider the matter as finished business.

There was an eminent pensions advocate in western Canada by the name of Walter H.