

Now the cost of educating 825 foreign doctors, if we undertook it, again using the \$135,000 cost of producing a doctor, would come to \$112,377,000. I am using rough figures, but even if there are errors of approximation of anywhere from 3 per cent to 5 per cent in the over-all total, will the hon. member say that the comparison is unjustified? Let him come up with a speech to criticize this in principle.

● (2110)

Having received 2,397 doctors into Canadian society in 1975 at a total cost of \$212 million to Canadians, surely hon. members will realize that our net cost for the provision of continuing medically trained personnel—and by that I mean physicians—is not quite halved, but at a rough estimate is cut back by something over 40 per cent.

The minister has said that we must place a curb on the number of doctors coming into this country, and in fact the Minister of Manpower and Immigration (Mr. Andras) says that any doctor coming into the country must have that manpower form 1234. A bell is rung with an offer of employment, unless of course the doctor has sufficient funds, perhaps \$100,000 or \$125,000 in capital.

Mr. MacFarlane: How do you get that?

Mr. Lambert (Edmonton West): The hon. member for Hamilton Mountain (Mr. MacFarlane) asks how I get that. I get it from direct letters, and if he wants I will show him the letters from the ministry showing that doctors coming to Canada now must have an offer of employment which is approved by Manpower.

An hon. Member: That is the same with everyone else.

Mr. Lambert (Edmonton West): Why?

An hon. Member: Why should they be special?

Mr. Lambert (Edmonton West): Who is going to hire the doctor for the small town in northern Alberta or for the small towns of the rural areas in Ontario? Not the government.

An hon. Member: The provinces.

Mr. Lambert (Edmonton West): Oh, is that what the hon. member thinks? Is that going to provide doctors from out of the country, from the United States, doctors trained at Trinity, Dublin, or one of the great teaching hospitals of London, or some of the Chinese doctors who are, frankly, more capable with one hand tied behind their backs than many Canadian trained doctors?

Mr. Parent: My seatmate is a doctor.

Mr. Lambert (Edmonton West): I could take him out and introduce him to some of my friends.

Mr. Parent: If he ever operates on you, you've had it.

Mr. Lambert (Edmonton West): I hope I will never have to defend the hon. member for St. Catharines (Mr. Parent) in a traffic case. He is very eloquent from his seat.

Mr. Pelletier: Oh, oh!

Medical Care Act

Mr. Lambert (Edmonton West): I wish the hon. member for Sherbrooke (Mr. Pelletier) would talk to some of his eminent friends from the medical faculty of the University of Sherbrooke, a good medical school.

Mr. Pelletier: I have, and that was the best part of your speech.

Mr. Lambert (Edmonton West): The hon. member has only parochial knowledge. They will not dispute my general conclusions, but I will say that on the basis of the restrictions on immigration with regard to medical graduates from the United States, Great Britain, Ireland, India, the Philippines, and Hong Kong, we are depriving many if not most of the rural areas of Canada of medical services.

Mr. Guay (St. Boniface): The vice premier of Alberta would not do that. Dr. Horner wouldn't do it. You are wrong, and you know it.

Mr. Lambert (Edmonton West): He is not in medical practice. He has nothing to do with this. I am simply saying that I do not care whether the decision was made by the Minister of National Health and Welfare or the provincial ministers of health, and when some of my contemporaries in the city of Edmonton, who are specialists enjoying fat cat practices in the hospitals, say that we should put a curb on the immigration of doctors, I must say that my language becomes very violent. I then offer to take them out and show them where and how that is wrong, and a number of them reasonably take a different attitude.

Because that was the main point of my speech I should like to hear the hon. member who is a physician tell me that I am wrong, that the CMA, the department of health and the department of education—

Mr. Philbrook: Mr. Speaker—

Mr. Lambert (Edmonton West): If the hon. member has something to say against me, let him make a speech.

Mr. Philbrook: Mr. Speaker, I wonder if the hon. member realizes that I have already made my speech. If he attended the house a little more regularly, he would realize that.

While I am on my feet, I wonder if the hon. member would permit a question.

Mr. Lambert (Edmonton West): I will take it at the end. There are many opportunities for the hon. member to make more speeches with regard to this bill, and I invite him to do so, on this particular point.

I asked the minister the other day whether he would have his officials take into consultation not only opposite numbers of bureaucrats and others with regard to the control or the re-examination of health delivery costs, and I asked him to take in not just doctors—particularly not the doctors who put people in hospitals, because it seems to me that that is too easy—but that when it comes to controlling costs in hospitals and appropriate supervision, medical superintendents, administrators and particularly supervising nurses should be called in so that they can say when patients should be discharged.

Mr. Guay (St. Boniface): Hear, hear! That is the point.