

He said: Mr. Speaker, I welcome the opportunity to debate one of my motions for the production of papers No. 8, not merely because of the particular issue which is related to the concern over the effect on veterans involved but, more importantly, to emphasize the ridiculous situation that results when I am told that the material requested, referring to correspondence, minutes of meetings, telegrams, contracts and/or agreements between the federal government and the province of Ontario having to do with the transfer of Westminster hospital in London cannot be released because of ongoing discussions between the two governments.

● (1700)

The reason I request these papers is to try to prevent a recurrence of the failure of the Department of Veterans Affairs to project and plan for the needs of entitled veterans which is becoming more and more obvious as a result of the concern expressed by veterans and veterans groups after hospitals have already been transferred. I can only ask why I am being denied my right on behalf of veterans who have submitted their appeal to myself, my party and the minister, to have this information. The commitment by the minister or his predecessors has not been completely fulfilled. This commitment was made under cabinet decision on December 5, 1963, entitled "Medical treatment for veterans". It relates as follows:

A) That the Department of Veterans Affairs be authorized to withdraw gradually from the operations of departmental hospitals, as opportunities arose to do so under conditions acceptable, and to turn these hospitals over to the operation of non-federal agencies for the benefit of the total community.

B) The conditions acceptable to the department in making such a transfer of operational control would generally require:

- 1) A guarantee of unconditional priority use of beds, either in the hospitals which were transferred or, in other suitable hospitals, for the treatment of service-incurred disabilities.
- 2) Assurance of the existence in the community of adequate hospital resources to absorb the workload created by war veterans allowance recipients, and
- 3) The requirement of satisfactory arrangements for the protection of the employment and pension status of civil servants now employed in veterans hospitals.

According to my records, there are 11 veterans' hospitals in Canada. Of these, five have been already transferred. I can only presume that the others are in the process of negotiation. But certainly it is obvious, through information I can receive from everyone else but the department involved, that Westminster is presently under negotiation for transfer. This brings me to the point of my motion: why am I refused the documents in my attempts to ensure by doing so that the mistakes in the past, as evidenced by the complaints being received over transfers, can be corrected by debate in this House? Why, indeed, am I refused freedom of information which is supposed to be of so much concern in this House of Commons? Why, indeed, is there so much secrecy involved if indeed, the minister feels that he is fulfilling his obligation to the Canadian veteran? I think he should look at some of the facts concerning those veterans who are involved.

The priority requirement at present is to provide adequate chronic and domiciliary beds for veterans. In almost all cases

### *Westminster Hospital*

since the transfers this commitment has not been fulfilled to its fullest extent. Visits to a few of the hospitals by myself and some of my colleagues have borne this out. We have brought the matter to the attention of the minister. Let me make clear that we do not object to the policy of transfer. We recognize the reasons for the transfer. It is becoming increasingly difficult to maintain qualified personnel because as veterans grow older their need for care has shifted from acute to the extended care. But despite the best intentions of the minister, who I must admit is trying to correct the inadequate projections by his predecessors, it is becoming more and more obvious that the department has not been able to make practical arrangements for the required bed space for veterans' needs where hospitals have been turned over to the civilian authority.

The situation will become worse as World War II veterans reach the 70 and 80-year bracket over the next 20 years. This emphasizes the projected need for domiciliary care beds. I will deal with other hospital transfers at a later date. Referring to the Westminster Hospital alone, it is very obvious that the authorities of the hospital brought to the attention of the minister back in 1975 their concerns, because they are closer to hand and are more aware of what is going on in respect of their endeavours to care for the veterans in that hospital in London, Ontario. Let me read from a brief that was submitted in February 1975. It states:

For the past two years negotiations have been continuing between the Department of Veterans Affairs, the provincial government of Ontario and the London health planning board, for the transfer of Westminster Hospital to provincial control. The Federation of British Canadian Veterans are very concerned when policy of the federal government in any way affects the health and welfare of our aged . . .

Various ministers of veterans affairs have stated time and again, that it is essential that the veterans' hospitals be turned over to local authorities, in order to maintain the high standard of treatment they have become accustomed to. The federation would be inclined to agree with this, in so far as active treatment is concerned, but not at the expense of the chronic, psychiatric and domiciliary care patients . . .

At this time—

That was in 1975, a year and a half ago.

—the Federation of British Canadian Veterans are more concerned with the future of the chronic, psychiatric and domiciliary care patients now in Westminster than with the proposed turnover.

Copies of this brief were presented to the veterans affairs committee at that time. The brief continues:

We have stated previously that our concern at this time was not the actual turnover of the hospital to municipal authorities but the future welfare of the chronic, psychiatric and domiciliary care patients. In order that we may further clarify the points in our resolution, we must first be assured that the members of the committee are aware of the lay-out of Westminster Hospital.

Since negotiations began between the Department of Veterans Affairs, the provincial government and the local health planning board, many reports have been publicized in the local press, the majority of which revealed little or nothing of the plans of either body, yet there was one very disturbing report, this calling for the transfer of the chronic, psychiatric and domiciliary care patients to the confines of Victoria Hospital. We, the Federation of British Canadian Veterans of Canada must take a definite stand against any such proposals . . .

The Federation of British Canadian Veterans of Canada, after 30 years of dedication to serving our veterans, sincerely believe that here is a great opportunity for the federal government to set aside this little corner of this great land of ours as a memorial to all those courageous citizens, who during the many years of conflict gave their lives that we might live in freedom and peace.