Medicare

know why pay for nurses is so high in the United States, but I do know that a nurse trained in Canada can go across the line and increase her pay by anywhere from 20 per cent to 50 per cent. The standard of nurses' training in Canada is probably the highest in the world, but we are not training enough nurses for our own population, and should not be regarded as the nurse training centre for the whole of North America.

This would be the very last area in which I would be willing to economize, the training of our young people in the nursing and in the doctoring, because we cannot provide good medical care for every man, woman and child in Canada if we do not have the necessary plant and tools.

A great deal has been said in this debate about the possibility that we might lose more doctors, but I think we will lose a lot of doctors anyway no matter what we do with this legislation. Medical care schemes have worked very well in most of our provinces, but we still need to spend a lot more money on our medical schools to encourage our young men and women to take up medicine as a profession. Even if we set up new schools now, it will take ten years before the assembly line is working to the necessary capacity.

When we introduce national medicare and apply the present Saskatchewan and Alberta standards to it, there is no doubt but that there will be a tremendous strain on the medical profession. This is not the fault of any one government or any group of governments, but it is our responsibility to provide the necessary plans and plants. We need the physical plant, the hospitals and beds, the research laboratories, and the training of more personnel.

As I said, Mr. Speaker, I am going to vote for this bill because I believe in medical care for all. I can only beg the government to do many of the things which it knows perfectly well have to be done. Let us not bog down in a political bog. The government knows that some of our proposals should have been accepted. I only hope it will take the well meaning advice and suggestions it has received from this side of the house, because our only aim is to give every man, woman and child in Canada a better standard of medical care.

## PROCEEDINGS ON ADJOURNMENT MOTION

SUBJECT MATTER OF QUESTIONS TO BE DEBATED

Mr. Deputy Speaker: Order. It is my duty, pursuant to provisional standing order 39A, to inform the house that the questions to be raised at the time of adjournment tonight are as follows: The hon. member for Sherbrooke (Mr. Allard), Labour relations—withdrawal of the C.N.T.U. from the Canadian Council of Labour Relations; the hon. member for New Westminster (Mr. Mather), Health and Welfare—request for prohibition of cigarette advertising in broadcasting; the hon. member for Springfield (Mr. Schreyer), Agriculture—Request for data respecting retail pricing.

## HEALTH AND WELFARE

MEDICARE—AUTHORIZATION OF CONTRIBU-TIONS TOWARD COST OF INSURED MEDICAL CARE

The house resumed consideration of the motion of Mr. MacEachen for the second reading of Bill No. C-227, to authorize the payment of contributions by Canada toward the cost of insured medical care services incurred by provinces pursuant to provincial medical care insurance plans.

Mr. J. M. Forrestall (Halifax): Mr. Speaker, before beginning my speech I would like to ask whether the government is giving some consideration to an adjournment for the purposes of allowing hon. members to get some substance, some food?

Mr. Pennell: Mr. Speaker, I intend to propose that we suspend proceedings at seven o'clock for the purpose of dining.

Mr. Forrestall: I wish to thank the minister, and on behalf of this side of the house accept his suggestion, and look forward to it.

This bill has been introduced by the Minister of National Health and Welfare (Mr. MacEachen), who comes from an honoured province. It has much to commend it to the people of our province, and to the people in the rest of the provinces. But coming from Nova Scotia I think the minister could well have given a little closer attention to the needs of our province, and of other provinces that find themselves in similar financial positions.

I believe that some form of universal medical care is not only desirable but, indeed, is