

Supply—Health and Welfare

stands half empty, though it is possibly the most modern hospital in the Dominion of Canada today.

This, to me, indicates some weakness in hospital administration by the departments—and when I use the plural I am referring to both the federal and the provincial governments—with regard to the method of payment for nursing services. It seems odd to me this government, of which I am a supporter, is able to pay one third of the cost of day premium rates of pay for such employees as engineering and mechanical workers, and can pay shift differential rates to hospital staffs under the jurisdiction of the Department of Veterans Affairs, while declining to pay such rates to nurses directly under the control of the Department of National Health and Welfare.

The Department of Veterans Affairs has hospitals in all ten provinces, in which shift differentials are being paid. This is a wonderful example. Hospital staffs are well aware what is going on in these institutions. They are aware what is going on in Quebec, where these differentials have been paid for 15 years, as well as of the situation in Saskatchewan where they are also being paid. I would strongly urge the minister, who I know takes a great and intelligent interest in the work of her department, to consider seriously in the course of the spending of these estimates, an arrangement to provide for shift differential rates of pay and day premium rates of pay for all hospital personnel under her direct supervision. This would be an example to all those responsible for the administration of hospitals in those seven provinces whose governments do not admit that payment on this basis is the modern, 1964 approach to the labour question of today.

It is fortunate that the minister is a qualified lawyer in her own right. There is a small problem which I have discussed privately with officials of the government and of the Department of National Health and Welfare, and I think it is one which should be brought out on the national scene, if the radio and the press will publicize it. It has to do with the fact that government payments, such as old age pensions, cannot be attached by those to whom a recipient may owe money. I would not recommend that any great change should be made in this regard. I believe that people receiving what they call pension cheques, old age assistance cheques, should be protected. If they were not protected as they are at present I am sure many unscrupulous organizations would deprive them of their funds in a hurry.

[Mr. Cowan.]

However, workers in the hospital field come across a ridiculous situation. Among those who enter hospitals as patients are many over 70 years of age who we know are in receipt of old age assistance allowances. They are maintained at government expense because they do not have the benefit of a hospitalization plan and because their children refuse to pay expenses incurred by the hospitals in which their parents are lying.

There are times when I wonder whether I am fortunate to be engaged in hospital work on a voluntary basis, I become so incensed at some of the things which occur. On the other hand, of course, there are rewards; for instance, the kindness you see extended by hospital employees to the patients who come through the doors. But I know nothing which upsets me more than the unwillingness of many children, some of them in high places, to pay for the hospitalization of their parents, particularly when they are over 70 years of age. I know hospitals in Ontario which are caring for patients over 70 years of age who do not have the benefit of hospitalization plans, and when they ask the children if they will get their parents to sign over the old age pension cheques to help pay for the hospitalization costs, those children laugh in their faces. I would point out again that these cheques for \$75 a month cannot be attached by legal action, or diverted in any way. The families get the money and spent it as they like.

The minister is, I know, deeply interested in every aspect of the work of her department. As I say, she takes an intelligent interest in its administration. In addition she is a lawyer in her own right. I would ask her now, on behalf of the hospitals of Ontario, to exercise her undoubted talent and ability in seeking to have some change made so as to deal with the situation I have described. When one government department makes a payment to a recipient who is entitled to it, surely another government department should be able to secure that money in order to defray an expense incurred by a recipient lying in a government paid hospital bed.

On the whole I have nothing but commendation for the minister and for the department, but these are thoughts which in my opinion should be brought forward. In conclusion I repeat my suggestion that the minister give serious consideration to instituting a system of shift differential rates of pay and day premium rates of pay in order to ease the shortage of hospital beds, especially by