

Federal-Provincial Fiscal Arrangements Act

program. The Minister of Justice said the other day that that was Gauthier legislation. He has no memory. I voted against the 6-and 5-program because it affected the pensions of public servants in my riding. He calls that Gauthier legislation. He does not know what he is talking about. Of course, he does not usually read his documents anyway so I do not take too much exception to it. I see you are—

The Acting Speaker (Mr. Paproski): I regret that the Hon. Member's time has expired. I have given him a few extra seconds.

Mr. Bob Corbett (Fundy—Royal): Mr. Speaker, I appreciate this opportunity of speaking on Bill C-96. I listened with a great deal of interest to the comments by the Hon. Member for Ottawa—Vanier (Mr. Gauthier), and it is absolutely ludicrous for a Member on that side of the House, representing the Party he represents, to talk about consultation with the provinces. The history of his Party is well-known. It was a history of confrontation rather than consultation. To suggest that this Government has not consulted with provincial Ministers of Health and Education is not only wrong, it is blatantly ridiculous. This Government has established a history of consultation with the provinces virtually unheard of over the past 23 years. It would be wrong for this House to be left with the distasteful opinions that that Hon. Member attempts to leave.

The fact of the matter is that this country has been burdened with a totally unacceptable deficit. We are in this situation now because of deficits we inherited from previous Governments represented by the kind of Member who just spoke. The deficit must be addressed. As distasteful as some of these programs are, we must assume our responsibility as legislators and move forward to improve the situation for the benefit of all Canadians. Instead of listening to destructive criticism, why can we not ask for and expect constructive criticism for a change? I ask: How do we go about improving the system? Unfortunately, time does not allow me or any other Member to cover the entire waterfront regarding the ramifications and implications of this Bill. I will have to restrict my remarks to the health care sector.

There is no question that over the next few years health care costs in this country are going to increase substantially and significantly. Today more than 6 per cent of the population over the age of 65 are in nursing homes or health care centres for the physically or mentally infirm. We expect that by the year 2000 that number will have doubled. All nursing homes have waiting lists and the system is overloaded. Hospital beds are filled with geriatric care patients to the detriment of people who are waiting to be admitted for surgery or other problems and ailments. Those beds should be made available to the system—

Ms. Mitchell: How are you solving the problem by cutting back the money?

Mr. Corbett: Perhaps the Hon. Member would like an opportunity later on to get up and speak. In the meantime she might be a little bit less destructive and listen to some constructive criticism for a change.

The problem is that we are not utilizing available funding in the proper fashion. We have not been doing so for some number of years. We have to better utilize the available funds.

There is a philosophy promulgated by Members opposite that anything done by the private sector in the health delivery system is bad. It is morally wrong and people would suffer from such an intrusion by the private sector. I for one have no quarrel with the fact that the Government must be there to set standards, policies and procedures. It must ensure that they are strictly and acceptably adhered to. However, we have to put all these things in perspective.

There are several jurisdictions, particularly in the U.S., where the private sector does contribute very constructively to the health care system. I for one believe that nursing care for an aging population is one area where the private sector could very effectively operate. Nursing homes are predictable. The needs of residents are predictable. Costing in that segment of health care is predictable. Staffing is generally stable and constant. The private sector is well-suited to the nursing home field, and in certain jurisdictions nursing homes thrive and their resident care is number one. Government funding for any such facility has to be a major factor, of course. So it should be. Less than 10 per cent of the people now in nursing homes are paying their own way. Government pays by far the largest share.

In the free world it is the private sector which is recognized as being the most capable and suitable instrument to manage enterprise. When given the opportunity to work, free enterprise does. That is not to say that Government does not or should not have the responsibility for input to a system where substantial amounts of public funds are being used. Management should recognize that the responsibility of Government to the taxpayer must be adhered to, that the Government has the right to act on behalf of taxpayers. On the other hand, Government should recognize the capabilities and effectiveness of private management and its ability to manage. I have no doubt that a proper relationship between Government and business in the health care sector of this nation could save the taxpayers of this nation literally millions of dollars annually with absolutely no sacrifice in the standard of care for residents. My suggestion is to improve productivity by reducing labour costs. We can realistically address constructive facilities. We can reduce our debt burdens and administrative costs both in the private sector, the delivery system, and in the government bureaucracy.

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The key to improving our system and utilizing our dollars more effectively in the health care delivery system is improved management. The result, in my opinion, would be of mutual