

*Supply—Health and Welfare*

I say that many patients lying in hospitals on Fridays could be sent home if there were other patients coming in for necessary surgery; but since the staffs of the hospitals—I refer particularly to nursing staffs—are reduced at the week ends, surgeons do not like to operate on Fridays, and patients who might go home on Friday are told "Well, Sunday afternoon will be a nice time because your family will be free. Your husband can come and look after you," or if it is a man they say his wife can come for him. In this way these patients are convalescent from Friday afternoon to Sunday evening and the hospital collects the normal day's rate from the provincial authority because the bed is being occupied, but it is not being occupied to the greatest possible advantage.

If we were paying day premium rates of pay and the hospitals had full staffs seven days a week, including Saturdays, Sundays and holidays, I am confident the admitting committees of the hospitals would clear out of the hospitals on Fridays many people who remain in them as convalescents; surgeons would be able to operate on Saturdays, Sundays and holidays, and you would get 25 per cent more production out of the hospitals without increasing your capital grants or increasing the size of the hospitals.

I have to pay a little tribute here—and I have to say "little" because I am a Liberal—to Hon. Matthew Dymond, the minister of health for the province of Ontario who, since we are both Presbyterians, is a very good friend of mine. Some years ago he told me about a hospital in Ontario wanting a tremendous grant for a great big addition. Its management said it was overcrowded; if it did not get a big addition all hell would break loose, and there would be disease and epidemics in the town. Dr. Dymond, who was a practising physician in the town of Port Perry and the city of Oshawa, listened to their argument for increasing the number of operating suites in the hospital, and he told them "Before I can give any answer to your request I would like you to supply me with a schedule of your operations in the surgical suites."

This hospital had four surgeries, and when he got the timetables of the operations performed in those suites over the previous two or three years he discovered something he had already suspected, that they were operating from seven o'clock in the morning until about one o'clock in the afternoon, and the only operations that went on in the four

surgeries in the afternoons and evenings, and on Sundays and holidays, were emergencies.

Dr. Matthew Dymond said to these people who wanted to increase the number of their surgeries and the size of their hospital, "Why don't you operate more in the afternoons?" The doctor who replied said, "You can't operate in the afternoon. You operate in the morning because the patient has been well rested, the diet has been looked after, and his stomach is clear." Dr. Dymond then said, "If you had an automobile collision and eight people required emergency surgery at four o'clock in the afternoon, surely you would not schedule their operations for the next morning? If you can operate on emergency cases no matter at what hour they occur, why can't you operate on ordinary civilian patients in the afternoons?" As a result of his definite stand on this matter the hospital in question rescheduled its surgical suites, and he found that with that rescheduling he could give it a grant of one quarter of what it wanted to increase the number of its beds. But they got no grant to increase the size of their surgical suites.

I tell that story to show that hospital facilities could be used to a greater extent if more thought were given to the conduct of hospital affairs. I say again that if we had day premium rates of pay in hospitals, the effective capacity of our present institutions could be increased by 25 per cent.

No doubt we will hear a lot of talk about the provincial by-election yesterday in Riverdale, Ontario. I hope I am not out of order when I point out that the government of the province is Conservative. It appears from the early returns that the New Democratic party has won the riding, with the Liberal candidate second and the Conservative third. I make this statement as a resident of metropolitan Toronto, that the biggest influence in that by-election was the half empty Riverdale hospital which stands right in the middle of the riding.

Here is a hospital with more than 808 beds. Some 450 of them are empty, and they have been empty for more than a year, due to the lack of nursing staff. Officials in Toronto have gone to Great Britain; they have spent a good deal of money and effort to recruit staff there. But because of the rates of pay now prevailing in Canada they have not been able to attract sufficient nurses from Britain to staff that hospital. The rates of pay offered by the province are not sufficient to attract married nurses to return to hospital work, and many of the nurses who staff our institutions today are married women. As a result this hospital