

## S.O. 21

Recently two more Saskatchewan re-treads, Messer and Shoyama, responded to a call to further NDP policy at yet another level. This war is too important to rely on generals from the left wing, and hiring halls for re-treaded socialists. Heaven knows there is an abundance of expertise out there waiting to be tapped, men and women with sound marketplace experience in agriculture and industry.

The rates of pay for the Chairman and the Commissioners are far too generous in the light of the Government's six and five program. The Government's generosity has placed a favoured few well above the poverty line. The per diem rates are distasteful, disgraceful, and obscene. My disgust is best expressed in the words of the Bard of Dromore:

Big Mac, Big Mac, Canadians have had their fill,  
You've got your arm too far into the till!

**Some Hon. Members:** Oh, oh!

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## MEDICAL CARE

## DOCTOR-PATIENT RELATIONSHIP

**Mr. Stanley Hudecki (Parliamentary Secretary to Minister of National Defence):** Madam Speaker, I share the concern of Dr. C. B. Mueller, a professor of surgery at McMaster University, and other physicians who have contacted me, that the measures currently contained in the "Canada Health Discussion Paper" would place the physician in the role of an employee of the state, that is, a civil servant, thereby distorting to a degree the traditional doctor-patient relationship. This relationship is a very special covenant. In the framework of an employer and employee contact, the patient is the employer and the physician the employee. In this single specific relationship the physician has no other obligation than to care for his patient. When the physician is employed by an agency, or by the Government, this special relationship between patient and physician is blurred.

If the employer is either the federal or a provincial Government, the physician will be unable to carry out his responsibilities to the patient and the patient alone, without considering other influences or directions laid down by the Government of the day. In such situations, despite his or her best intentions to the contrary, the doctor would experience difficulties with the time-honoured precept that the physician's first concern should be the good of the patient.

In my opinion the right to "opt out" of Ontario's model medicare creates an essential freedom for the medical profession and must be retained. In this way the doctor's primary responsibility to the patient rather than to the state will not be breached. I do not advocate "opting out", but I believe that it does provide a safety mechanism through which physicians—

**Madam Speaker:** Order. Order, please. The Hon. Member for Grey-Simcoe (Mr. Mitges).

## HAZARDOUS PRODUCTS

## UREA FORMALDEHYDE FOAM INSULATION—IMPACT ON TAX BASE OF MUNICIPALITIES

**Mr. Gus Mitges (Grey-Simcoe):** Madam Speaker, home owners who insulated their homes with urea formaldehyde foam all across Canada have applied for and received assessment reductions averaging 20 per cent to 25 per cent to reflect the adverse effect of urea formaldehyde foam insulation on the market value of their properties. In small communities, particularly, this has had the effect of reducing the tax base to the extent of about two mills or more, because their main and sometimes only source of revenue is realty taxes.

Since it was in fact CMHC which approved UFFI for home insulation in the first place, as a safe and non-hazardous product, it is only fair to state that the federal Government should be assuming some responsibility for financial assistance to those municipalities. As well, the Government should issue a statement setting out the Government's long-term policies with respect to urea formaldehyde so that municipalities may have some idea of the long-term effect of these value reductions on their tax base.

The Minister of Public Works (Mr. LeBlanc) has been made aware of this important problem, and it is my hope that he will discuss this with his colleague, the Minister of Finance (Mr. Lalonde), and that a favourable solution will be reached and reflected in the next budget.

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## ENERGY

## EXPORTATION OF LIGHT CRUDE OIL

**Mr. Jim Fulton (Skeena):** Madam Speaker, in 1972 the then Minister of Energy, Joe Green, said that Canada had 932 years of natural gas and 390 years of crude oil supplies. Less than six months after that statement, Canada began importing large quantities of crude oil, something which continues to this day. The oil industry, and certain political groups, have cruelly misled Canadians to believe that energy exports, particularly of light crude oil, are in our nation's interest. The Liberal Government of today, Madam Speaker, claims that additional light crude exports of 40,000 or more barrels per day are all right by it. This, added to the export of 200,000 barrels per day of heavy crude, makes a sham of the proposed "energy self-sufficiency" by 1990.

Canadian consumers paid out \$3.16 billion in 1980-81 under the Oil Import Compensation Program, which is nothing more than a tax on consumers, drives up Canada's adverse balance of payments, and pours additional millions into the coffers of the multinational oil barons.

The Public Accounts Committee of this House, and the Auditor General, raised this matter last year, and the "iron-clad" Minister of Energy promised to take actions to improve the domestic market for domestic crude and thus lower the level of imports. As a result of inaction, western oil has been