

I also believe that the provincial governments are responsible for their own social policy best suited to their province. They are also responsible for developing policies that will guarantee employment. In areas of high unemployment, government initiative may be the only answer for development and perhaps nationalization of industry should be considered. The federal government should stick to certain limits or it will eventually become so involved in provincial matters as to warrant the presently unjustified criticism it is experiencing with unemployment figures and housing.

I will agree with the hon. member on one point, that where a provincial government has been lax, where it has fallen down on social legislation, has got itself into serious trouble financially or is off base spending the hard earned money of the people, some mechanism should exist to make up for that inadequacy, for the sake of the people. Provincial and federal government are elected to protect the people with the workingman's hard earned money, but each government should shoulder its own responsibilities.

[Translation]

Mr. Charles-Eugène Dionne (Kamouraska): Madam Speaker, I am glad to associate with the sponsor of the bill, because I notice that his intentions are excellent. However, with regard to the administrative complications arising out of the present act. I believe that such a bill would further complicate the calculation of benefits owing to a person on unemployment insurance. The fact that a worker is victim of an accident on his job certainly deserves particular attention, so that he may not lose, on such an account, his right or privilege to benefits to which he may be entitled were he on unemployment insurance.

However, Bill C-236 obviously concerns sections 18 and 21 of the act. And section 18, concerning the qualifying period, is quite complicated. It reads:

The qualifying period of an insured period is the shorter of (a) the period of fifty-two weeks that immediately precedes the commencement of an initial benefit period under subsection (1) of section 20, and (b) the period that begins on the commencement date of an immediately preceding initial benefit period and ends with the end of the week preceding the commencement of an initial benefit period under subsection (1) of section 20.

Sections 22, 24 are just as complicated.

I said earlier in this House, and the hon. member who just spoke also suggested that provisions of the act are contrary to amendments introduced by Bill C-236. I also repeated at every opportunity, especially when I gave my views on the acts involving workers, that the legislation is always worded in and almost unintelligible way, and certainly not readable by the workers. The position taken by the sponsors of the bill is very important. But concerning improvements to the unemployment insurance Act, there should be proposed an amendment explaining clearly that changes proposed should be made part of the act, and be worded to take into account the fact that a worker lost certain benefits he could have been entitled if no accident had happened.

At any rate, the explanations supplied in the bill are pertinent. It is stated that the purpose of the bill is to amend the Unemployment Insurance Act to provide that where an insured person is not working and is receiving total temporary workmen's compensation because of an

Unemployment Insurance Act

industrial accident or illness, there shall be added to his qualifying period. The time spent off work and in receipt of the workmen's compensation.

I support the bill, and take this opportunity to suggest that when in due course the Unemployment Insurance Act is amended, which has long been overdue, undoubtedly because the act is too complicated, and therefore there is uncertainty as to how to amend or improve the various unintelligible parts in the act in order to avoid present complications.

And concerning the complexity involving illness, I will give a few examples. I could state hundreds of them, but I thought it would be in order to bring to this House's attention a few facts that occur in cases of illness, concerning qualifying periods, computations, exclusions. There is no end to the story!

● (1730)

I have here the case of a recipient who submitted a claim for sickness benefits on October 27, 1973. He provided the appropriate medical certificate establishing the duration of his disability to December 20, 1973, when he would be recovered, fit and available. On February 7, 1974, the claimant had not yet received any payments. As his claim had been lost, he had to start all over again. He had to file a new claim, provide new medical certificates, even if he had recovered since December 20, 1973. This happens regularly. It is an example of a bureaucracy paralyzed by a red tape avalanche, and the cost of all this must be paid by the Canadian taxpayers.

I have evidence that certain investigators insisted on obtaining a medical certificate from someone who had had a routine medical check-up. This is really astounding. This badly framed legislation has caused so many complications of all kinds that a great number of sections should be amended in accordance with the role of social legislation, and I hope that when they are, the suggestions of the hon. member will be considered.

I have here another case: On January 14, 1974, the commission advised a claimant that his uneligibility period from November 18 to January 5, 1974 was over. However, in another letter, dated February 7, 1974, he was advised that his uneligibility period applied to the complement and extension phases and that his payments were finished. This is all very complex. How can the poor unemployed man, who had a lot of difficulty during his employment period and who acquired by his contributions a right to payments when he becomes unemployed, understand all this? At certain times, there is pandemonium. Then, it is unavoidable that members of the House suggest solutions to try to ease the effects of an overly complex legislation.

I have here another case, a sickness benefit claim submitted on November 18. After completing the normal formalities, the commission paid the contributor \$280 for four weeks. Then, the problem of medical certificates came up. He provided four of them. The commission advised him on January 24 that he will perhaps obtain another extension if he reports within the time allowed by the commission.

With the bill now under consideration, I am convinced that there would be problems of medical certificates, since the referral physicians who are considered as specialists