

Medical Care Act

inces such as Ontario which have premiums, the provincial governments may be tempted to increase the premiums. Again that would discriminate against low income earners.

Those are some of the possible repercussions if the bill passes. I suggest that we do not have to pass the bill and that there are other ways of cutting costs. There are alternatives to the method proposed in this bill. I know that the Parliamentary Secretary to the Minister of National Health and Welfare (Mr. Kaplan) is quite anxious to find out what other ways we can go about cutting costs.

I refer the parliamentary secretary and his minister to a publication of their own department. It is entitled "A New Perspective on the Health of Canadians". In that study there are some very important recommendations with regard to improving health standards across Canada, and in the long run to make it less expensive. The key theme of that report is to emphasize and to promote preventive medicine. Here is where the federal government could provide leadership and, in co-operation with the provinces, design plans to promote preventive medicine, which would go a long way down the road to reducing the cost.

I ask, in light of that report, where is the leadership of the government in this field? It is sadly lacking, and I think immediately of the regulations of the federal and provincial ministers of environment. Government standards at both levels are very lax.

Where is the leadership of the government in preventing mercury poisoning, which is taking place among the Indian people of Grassy Lake Narrows in northern Ontario? The mercury poisoning is coming from a pulp and paper mill which has been allowed to poison the waters and the fish which the people of that reserve depend on for their livelihood.

Where is federal and provincial government leadership in Ontario and Quebec in preventing asbestosis, where miners for generations have faced this health hazard, faced early death and forced their families on to welfare because of the lack of compensatory programs? Where is the leadership of the federal and provincial governments for miners in uranium mines such as the one in a community near mine, Elliot Lake, where it has been demonstrated that because of poor environmental regulations miners are suffering from silicosis?

Where have regulations with regard to clean air been for the coke oven workers in the Algoma Steel Corporation in my community, Sault Ste. Marie, where workers have met early death because governments have failed to force companies to provide proper environmental working conditions? Governments in those areas have let companies get away with poisoning workers. Constantly they have been given reprieves and delays with regard to cleaning up the air and water. I think that is a very sad indictment of the government and of how serious it is about providing preventive medicine in terms of promoting adequate environmental standards.

There should also be some leadership from the government and from provincial governments in promoting preventive medicine, and I think immediately of denticare programs to help children at early ages. This would be a saving in the long run in adult life. We could have proper courses in nutrition in schools, and much more information should be made available to parents as well.

[Mr. Symes.]

Previously I have talked about long term preventive medicine, but in the immediate term we could set up local community service centres to provide social and health services at a much lower cost than at our general hospitals. I note that the province of Quebec has used this system quite widely and has promoted these facilities, which are much less expensive than the facilities provided at hospitals. Indeed in my own community of Sault Ste. Marie the steelworkers there, with other interested citizens, have set up a group health centre which provides excellent service to the people of Sault Ste. Marie at a reduced cost. This kind of health care community clinic could be expanded throughout the country and would go a long way toward cutting costs.

One of the main things which could and should be done—it may require an initial outlay in cost but will certainly result in savings in a few years—would be to set up out-patient clinics, chronic care units and nursing homes to get patients out of very expensive hospital beds. I mentioned earlier that the cost of keeping chronic patients is \$200 per day in a regular hospital. That cost could be brought down to about \$52 per day in a chronic care unit.

For example, the administrator at St. Luke's Hospital in Montreal pointed out recently that 105 of the 704 beds in that hospital are taken up by the chronically ill, who wait on the average five months before they are transferred out of that hospital. At the same time the waiting list of people to get into that hospital averages about 3,000. If we had the kind of out-patient facilities throughout Canada I have been speaking about, we would go a long way toward reducing health care costs.

Another thing we could be doing is making better use of paramedics. There are many examples of where doctors can delegate some of their responsibilities to paramedics. These people can be trained at less cost than doctors, paid less than doctors, and can do much of the work, so that our high salaried doctors do not have to perform it. I think these are some concrete examples and propositions which would prove very effective in reducing health care costs. These would be much more effective and equitable than the measures proposed in Bill C-68. What is at stake really is the continuation of a fine health care system throughout Canada.

● (2150)

I say this bill is a backward step. It is going to weaken, if not destroy in the long run, a principle which was fought for, for so long and so hard by members of my party and by many other concerned Canadians. I think all Canadians must register their protests to the government so that it cannot back out of its commitment to provide half the cost of medicare. That was a solemn commitment made to the provinces. If we are going to maintain a healthy federalism the government cannot back down from that promise. If we are going to try to promote equality of service throughout Canada we must have a national medicare scheme. It is important that this bill not be passed because that would be the first step in the ultimate reduction of health standards and health care across the country.

For these reasons I cannot support the bill, Mr. Speaker. I hope the government will seriously consider some of the alternative proposals that I have made to reduce health