Medicare

while in Saskatchewan, to try to get one. You may be successful if you happen to know where a doctor is, provided he is not in the operating room or out somewhere on another call.

Do you not think that in Saskatchewan there are people who cannot obtain the services of a doctor? Let me tell you that there are such people in many areas. Let me put on record again that in Saskatchewan we have one doctor for approximately every 1,100 people. In the province of Ontario there is one doctor for every 776 people. In Newfoundland there is one doctor for every 2,400, and approximately one for every 1,300 people in the home province of the minister. That is a really shocking situation.

Does the minister honestly think that by bringing in medicare there will suddenly somehow be instant doctors? That is apparently what the minister wants. He is going to hand out a medicare package. All you have to do is add a little water to it and suddenly you will have an instant doctor who will look after your every health need. I wish that the solution were that simple.

The minister should pay heed to what has happened in Great Britain in respect of its national health service scheme. Doctors there, by the way, are also allowed to practise outside the act if they so wish. I think the words I quoted earlier of the minister of health of the United Kingdom point up very seriously and very strongly the failure of the medical profession as well as the government to see that there was a sufficient number of doctors available before that plan was brought into being.

I plead with the minister not to put political expediency ahead of common sense. Do not make the mistakes that were made in Britain. We have heard about pilot plans, and they are worth while, but surely we have had enough pilot plans now to show us where the mistakes were made. Let us try not to make the same mistakes again. That is all I am asking.

To be quite frank in answering the minister's question, let me say that I believe firmly in the principle of prepaid medical care and, for the minister's information, I shall vote for the bill. I will do so hoping that something will be done to take care of these obvious areas of lack and neglect. Perhaps during the committee stage we will be able to squeeze in a few amendments. Remembering what was said about Barkis, I hope the minister "is willin" to accept these amendments. I am sure he will realize the necessity of them if

while in Saskatchewan, to try to get one. You he considers what has happened in other may be successful if you happen to know places.

As I pointed out earlier, our University Hospital no longer has complete specialist training in the department of obstetrics and gynecology because of the lack of facilities and staff. If that is the type of situation the minister wants he is moving in the right direction, but I think he is doing a disservice to the people of Canada. If he does not pay heed to the voice of the Hall Commission report, the voice of the Woods Gundy report, the voice of the Canadian Association of Medical Colleges and, for that matter, the voice of the Canadian Medical Association, he will be making a mistake. You can no more lead a horse to water and make him drink than you can take a doctor and make him practise medicine. Yes, I have said it before, quoting the hon. member for Burnaby-Coquitlam, but I say it again.

If the minister will do something in respect of this bill to provide for those things that we in this party have been asking for, I am sure he will remove most of the objections of those of my colleagues who still feel some measure of fear as to what this bill may accomplish. It is up to the minister to do that and not up to us. We have made suggestions and we will continue to make them, but it is on the minister that the whole burden will fall. When this bill becomes law the results will be on the minister's head. I would much rather that he be bloodied now but unbowed with his head held high. He may not be able to hold his head high if he does not take account of the serious deficiencies that exist in Canada today.

[Translation]

Mr. Maurice Allard (Sherbrooke): Mr. Speaker, last Thursday night and Friday, during the debate on the amendment moved by the Progressive Conservative party, I expressed my views on the federal medicare legislation.

• (5:40 p.m.)

Today, on second reading of Bill C-227, I want to add a few thoughts after having heard other speakers, and especially after having noticed the complete silence of the federal ministers from Quebec, when this legislation does great injustice to my province which has decided, and rightly so, not to participate in it.

To my knowledge, only one minister, the Minister of Manpower and Immigration (Mr. Marchand), commented not in this house but during a radio program on the French network of the C.B.C., between 9.15 and 9.30