

*Medicare*

Therefore, Mr. Speaker, I suggest to the minister that he examine again this particular aspect of the bill. The needs of the patient should be uppermost in his mind, and this particular service to which I have referred should be provided for in the statute. If scientific examination of a person's eye to detect diseases or defects is required, then what excuse can there possibly be for omitting such service from the general category of insurable medical care services? I am sure that this point requires a more general and broader definition so that nobody will be deprived of any services which he or she might need. As I mentioned before, my hon. friend from Moose Mountain went very thoroughly into this question in the course of his speech, and I would repeat his protest. No person desiring and needing the services of a practising optometrist should be denied the opportunity of securing those services.

What I have been trying to say, Mr. Speaker, is that the payment of contributions does not in itself automatically provide medical care for the people of this country. It does not provide more doctors, it does not provide more nurses, it does not provide more hospital beds or nursing assistants: It provides funds.

I repeat my criticism that the provinces should agree on some plan which will carry with it a degree of uniformity. I think that is important, and I hope the minister concurs. The provision of uniform features and the general application of services and benefits throughout the whole country is, in my opinion, most important. This should be done through the regular channels—by training, by education and by the experience which people have gleaned as they progressed through life.

Another reason for delay of this measure is the fact that I do not think the minister or the government have taken into consideration the experiences of other countries which have operated medicare plans for a good many years. I was impressed with the speech of the hon. member for Calgary South (Mr. Ballard) in this chamber, part of which is recorded at page 8638 of *Hansard*. I would contend that failure to take these experiences into consideration is another reason for delay. I contend that the experience which the United Kingdom has had should be studied by the Department of National Health and Welfare. Surely they would benefit from a study of the difficulties which were encountered and which were met.

• (9:40 p.m.)

Paraphrasing the remarks of the hon. member for Calgary South, he produced some rather frightening facts as far as medical care is concerned. For example, we find that doctors have been leaving the United Kingdom at a very alarming rate. Therefore it would seem to me only common sense to examine the reasons they are leaving. If the same reasons might apply to this country, then the application of measures which would correct those reasons would apply. There does not seem to be anything except common sense in that assertion. The hon. member pointed out that medicare has been in effect in England for 20 years, and that the general public there is dissatisfied with the operation of the scheme. Medical doctors continue to emigrate at an alarming rate. The cost has grown by a fantastic 500 per cent, along with deterioration in the calibre of service. Then the hon. member asked the question: Should not the facts give us warning not to follow the same path? There is no answer to that question except one, and that answer is that it should. I am sure the minister thinks he has, because that is what I judge from his gesture. Nevertheless he has not said anything about it; he has not told us anything about the difficulties which have been encountered and what he is doing to prevent the same difficulties occurring in this country.

More than half the doctors now practising in Saskatchewan are non-Canadians. That has never been contradicted. We find many communities in my native province which are unable to secure the services of doctors. The hon. member for Calgary South asked the question: Would our young Canadian doctors continue to emigrate to the United States because of the threat of medicare? What is the minister's answer to that? He has made no answer yet. I suggest he should, and I hope he will before this debate winds up.

Mr. Speaker, the motion before the house is for second reading of the bill, and second reading of any bill has always been considered to constitute acceptance in principle. I would not wish to be considered to be opposed to the principle of the bill. I supported the amendment put forward by the opposition. I felt that those things which were brought to the minister's attention by that amendment were things which he might very properly consider. I felt that the ideas advanced, and advanced ably and well from many quarters of this chamber, were deserving of his consideration. But I do not wish to