

Supply—Health and Welfare

ever, some provinces, such as the province of Nova Scotia, have already allocated all their moneys, which means that as new needs arise in individual communities there is no more federal money to allocate. Requests have recently been made for specific sums to be allocated to these three provinces in particular, but it should be appreciated that if this were done it would hardly appear fair to the other provinces.

Toronto is a special problem where, as was pointed out by the hon. member for York-Humber, there are hospitals such as the one in Riverdale; and certainly the hon. member and his party are doubtless very glad, in a sense, that this was not made an issue in the recent election, although perhaps more attention will be directed toward it now. But because metropolitan Toronto, under the chairmanship of Mr. Gardner went out of the hospital construction field and did not give any grant when the grant was increased in 1958, there has been a lag in Toronto. It would hardly seem fair if the rest of the taxpayers across the country were asked to make up for this lag, which was caused by the metropolitan government of that time.

Really it is a pretty sterile exercise to worry about who is responsible for this or for that, and why it is that we do not have these facilities. It really does not matter why we do not have them; the fact is that we do not have them when we need them. There is no question about the provincial department of health of Ontario facing a grave problem at the moment, because it is not. While the provincial minister of health said that there was a surplus of beds in Ontario, the unfortunate thing is that this surplus was not in the same place that there was a surplus of patients who need those beds, and you just cannot move a bed from North Bay down to Toronto when you need it. The difficulty is the possibility of overbuilding, and overbuilding at a time when building costs are very expensive in certain places.

When you are faced with a situation such as that in respect of the Riverdale hospital, which is constructed in a place where the need for beds has been apparent but you cannot staff it, you only increase the difficulty by following that suggested course. I think my hon. friend knows that my department and the Department of Veterans Affairs are as gravely upset as he about the current situation in Toronto, as well as the situation in certain areas of Nova Scotia. As I said earlier, while I cannot indicate at this time what our answer will be, it does not appear to be of

the order of increasing the dollars for bed grants.

Mr. Scott: I thank the hon. minister for her explanation and I am glad to hear there is some consideration being given to finding a solution to this problem on a long term basis. I think we are all naïve if we feel the health plan and its provisions are going to be implemented in the near future. What concerns me is what are we going to do today to provide short term relief.

I have in mind the hospitals in the Scarborough area in respect of which my doctor friends tell me there are something like 22 children's beds for a population, under 15 years of age, of 90,000, and that if they had a hospital today with 100 beds for children it would be staffed and filled by midnight with only very urgent cases.

It is certainly logically correct to say that some over-all plan has to be developed and facilities have to be provided prior to the implementation of a health scheme, but is the department not prepared to attempt to do something to give some relief in the intervening years? I have mentioned this problem in respect of children, and we are trying in Scarborough to build additions to the hospitals, but the cost is very high. I regret that we cannot look for any assistance from the federal government. Would the government contemplate matching the provincial grant, which I think in Ontario is now about \$5,500 as contrasted with \$3,000 on the part of the federal government? After all, without being too political, we have been promised health insurance for 45 years and are still anxiously awaiting it. I am not suggesting that it will be held up for another 45 years, but there are many problems involved and it will be some time yet before it is implemented. I am sorry to hear that we cannot look for any short run assistance at all from the federal government through the minister's department.

Miss LaMarsh: As I pointed out, such assistance will come through co-operation between the veterans affairs department and the authorities in Toronto. I think one should also bear in mind that the provincial government made an announcement after a discussion with us and without any recriminations against the federal government, because it realized this is its own responsibility, rather than a federal responsibility, for long term low cost loans to individual hospital boards.

My hon. friend is a good enough lawyer to realize that one of the difficulties is that of ascertaining when it is fair to make special