



# The Yukon Legislative Assembly

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Debates & Proceedings

**Thursday, February 26, 1976**

Speaker: The Honourable Donald Taylor



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Thursday, February 26, 1976

Thursday, February 27th, 1976

(Mr. Speaker reads Daily Prayer)

**Mr. Speaker:** Madam Clerk, is there quorum present?

**Madam Clerk:** There is, Mr. Speaker

**Mr. Speaker:** I will now call the House to order.

ROUTINE PROCEDURES

DAILY ROUTINE

**Mr. Speaker:** Are there any documents or correspondence for tabling this morning? The Honourable Member from Whitehorse West.

**Hon. Mrs. Whyard:** I have for tabling this morning, the Commission's Order, Mine Safety Ordinance, Asbestos Health Protection Regulations.

**Mr. Speaker:** Are there any further documents or correspondence for tabling this morning? Are there any reports of committees? Introduction of Bills? Are there any Notices of Motion or Resolution? The Honourable Member from Whitehorse South Centre.

**Mr. Hibberd:** Mr. Chairman, I would like to give Notice of Motion, seconded by the Honourable Member from Whitehorse Riverdale regarding psychiatric facilities available in the Territory.

**Mr. Speaker:** Are there any further Notices of Motion or Resolution? The Honourable Member from Whitehorse South Centre.

**Mr. Hibberd:** Mr. Speaker, I would like to give Notice of Motion, seconded by the Honourable Member from Whitehorse Riverdale, regarding the evacuation of mentally ill patients from the Territory.

**Mr. Speaker:** Are there any further Notices of Motion or Resolution? Would the Deputy Speaker kindly assume the Chair.

Mr. Hibberd assumes the Chair.

**Mr. Speaker:** The Honourable Member from Watson Lake.

**Hon. Mr. Taylor:** Mr. Speaker, this morning, I would like to give Notice of Motion, seconded by the Honourable Member from Whitehorse Riverdale, that whereas the Yukon Legislative Assembly recognizes that the Honourable Judd Buchanan, Minister of Indian and Northern Affairs, is currently considering the appointment of a new Commissioner for the Yukon. And whereas concern is being expressed that the custom of appointing a resident Yukoner, followed by the Minister in the past should be continued. Therefore be it resolved that the Yukon Legislative Assembly in Session assembled requests that the Minister for Indian and Northern Affairs, should recommend to the governor in council, the appointment of a person who is a resident of the Yukon Territory to be the next commissioner of the Territory.

**Some Members:** Hear, Hear, Applause.

Mr. Taylor resumes chair

**Mr. Speaker:** Are there any further Notices of Motion or Resolution? Are there any Notices of Motion for the Production of Papers?

We will then proceed under Orders of the Day to the Question Period.

ORDERS OF THE DAY

QUESTION PERIOD

**Mr. Speaker:** Have you any questions? The Honourable Member from Ogilvie?

**Ms. Millard:** Mr. Speaker, yesterday there was a reply to one of my questions, but the question was misunderstood. I wonder if it's possible to repeat the gist of that question again in this session?

**Mr. Speaker:** If the Member feels that she has not received sufficient information to her question, I think the Chair would permit the restating or the re-asking of the question.

*Question re: Art work in new Territorial Building*

**Ms. Millard:** Thank you very much, Mr. Speaker. The question was in reference to the reply which I received January 7th, '76 to another question, and it is contained in the bottom part of that section C, where it states, "Money spent to date was \$24,000.00". This is concerning the art work in the



new Territorial Government building.

It says also, "Tenders were not called but 20 artists in Yukon and B.C. were invited by letter to present proposals". My question was, what percentage of those artists were Yukon people, and is it possible for us to have their names?

**Mr. Speaker:** And who is this question directed to?

**Ms. Millard:** Mr. Speaker, to Mr. Commissioner.

**Mr. Speaker:** Mr. Commissioner?

**Mr. Commissioner:** Mr. Speaker, I want to take this under a little bit of advisement. I don't know about the propriety of the latter part of that question. I don't know what professional restrictions that may be on something of this nature, I don't know. As far as the government itself is concerned, there is no restrictions, Mr. Speaker, but I would want to look into the propriety of answering the second part of that question.

The first part of it, I don't think there's any difficulty with it.

**Mr. Speaker:** The Honourable Member from Hootalinqua?

*Question re: Contracts re mosquito control*

**Mr. Fleming:** Yes, Mr. Speaker, I have a question for Mr. Commissioner.

In our ongoing mosquito program, I am just wondering as to ways of letting the contracts. Are the contracts let by the acre, or are they let as plane flying time?

**Mr. Speaker:** Mr. Commissioner?

**Mr. Commissioner:** Well, Mr. Speaker, I am going to defer the second part of the question to the Member of Ex. Com. for Local Government, under whose Department these contracts are let, but the contracts in themselves, Mr. Speaker, are let subject to the contract regulations and the contract policies of the Government of the Yukon Territory that are in the regulation books and in the policy manuals. There is no deviation from that.

Now, as far as the balance of the question is concerned, I wonder if I could defer that to Mr. McKinnon, please.

**Mr. Speaker:** The Honourable Member from Whitehorse North Centre?

**Hon. Mr. McKinnon:** Mr. Speaker, I would be prepared to table the contract before the House.

**Mr. Speaker:** The Honourable Member from Whitehorse Riverdale?

*Question re: Federal advisory committee members*

**Mr. Lengerke:** Yes, Mr. Speaker, question for the Commissioner. He may want to take it as a written question.

Mr. Commissioner, could you tell me who are the current or present members on the Federal Advisory Committee on Northern Development? I understand the Y.T.G. also have a representative on that Committee, is that correct?

**Mr. Speaker:** Mr. Commissioner?

**Mr. Lengerke:** Two questions there.

**Mr. Commissioner:** Mr. Speaker, I wonder if the Honourable Member would be good enough to privately advise me, you know, of actually this Committee. The Name that he is using, I have never heard of the Committee.

**Mr. Speaker:** The Honourable Member from Whitehorse Riverdale?

**Mr. Lengerke:** Supplementary to that, the reference to that Committee was made in the Commissioner's paper to us on Goals for Northern Development, so this is why I was wondering if he could advise me on who those people were, but I'll certainly take it up --

**Mr. Commissioner:** If the Member would do that, while we'll get a look at it. There's approximately nine jillion committees, maybe I have missed one of the names, Mr. Speaker.

**Hon. Mr. McKinnon:** Well, Mr. Speaker, on a point of privilege, it is obvious the Commissioner doesn't write his own speeches any longer.

**Mr. Commissioner:** Mr. Speaker, thank goodness for that.

**Mr. Speaker:** Are there any further questions this morning?

The Honourable Member from Klondike?

*Question re: Canadian products in kindergarten*

**Mr. Berger:** I have a question to the Minister of Education. In light of the recent debate we had on education, the suggestion was made that kindergarten should take over the role of the tutoring program, my question is when is the Department of Education coming up with Canadian made material, because at the present time, most of the forms and material available to kindergarten, and a lot of other instruction in schools is made in the United States.

**Mr. Speaker:** The Honourable Member from Whitehorse Porter Creek.

**Hon. Mr. Lang:** Mr. Speaker, I think this goes for all facets of life and not just in education. As far as modifications to curriculum and this type of thing, as you know, because of the smallness of our depart-



ment and our government for that matter and the population and all the various ramifications, we are on a B.C. curriculum and we attempt to follow it fairly closely. I think that if you will recall the Honourable Member from Kluane raised the question in regards to curriculum changes and the financial implications behind those curriculum changes. I said that we were policing these changes as best as we know how so we don't get extra costs to the Territory that are not warranted.

In regards to the remedial tutoring program and the kindergarten program, I said that the kindergarten program was not actually replacing the remedial tutoring in the context that the remedial tutoring is now in. The kindergarten is supposedly taking care of the weaknesses that were found three years ago in the grades three to grade seven. I hope that I have answered the question.

*Question re: Consumer Protection Ordinance*

**Mr. Speaker:** The Honourable Member from Ogilvie.

**Ms. Millard:** Mr. Speaker, I have a question for any member of the Legislative Committee.

Many months ago this Assembly passed a Motion which reads that it is the opinion of this House, that the Consumers Protection Ordinance should be repealed and replaced by a more workable and enforceable ordinance. My question is what is the progress on this Motion?

**Mr. Speaker:** The Honourable Member from Whitehorse North Centre.

**Hon. Mr. McKinnon:** Mr. Speaker, I think that I answered at that time that it wasn't the priority of government until a program of civil legal aid came into being, because all we were doing was just pretending that there was an enforceable ordinance when there was nobody to enforce it at all. Certainly I said at that time it was the duty of this House to make sure legislation that we have presently on the statute books is enforceable before we try to pretend to the people of the Yukon, that just because we readjust or rethink or rewrite an ordinance that then overnight it happens to be effective. Because that just is trying to fool the public, it isn't a point in fact.

**Mr. Speaker:** The Honourable Member from Ogilvie.

**Ms. Millard:** Mr. Speaker a supplementary to that then. Since we have now passed the Civil Legal Aid Ordinance, when can we anticipate the Legislative Committee looking into this ordinance?

**Hon. Mr. McKinnon:** Mr. Speaker, we have not passed the vote for the program of the Civil Legal Aid until this budget is passed and even then Mr. Speaker the legislative programming committee with the myriad of legislation that we all have at our

desks, are not giving up priority item because it is an effective consumer protection legislation with an enforcing body, and we'd like to give that ordinance a chance to work with the enforcing body for a period of time to see whether we really need a change in the ordinance with the enforcing structure added to this government.

**Mr. Speaker:** The Honourable Member from Hootalinqua.

*Question re: Teslin school*

**Mr. Fleming:** Yes, Mr. Speaker. I have a question for the Minister of Education, regarding the Teslin School and regarding the couple of little disputes we had a couple days. I'm wondering, as I was down the other night, and I did see the pottery wheel and the other equipment there and they have tried to partition off the kindergarten room for some equipment that is already is there. More equipment to come down to the Teslin school such as a bandsaw and a few of these articles.

**Mr. Speaker:** The Honourable Member from Whitehorse Porter Creek.

**Hon. Mr. Lang:** Mr. Speaker, if I could take that under advisement. I have to check into that.

**Mr. Speaker:** The Honourable Member from Kluane.

*Question re: Manpower expansion*

**Mrs. Watson:** Yes, Mr. Speaker, I have a question for the Commissioner.

We note the expansion of a manpower premises on the first floor. My question is will there be an accompanying expansion of manpower services and personnel in the Yukon and if so in what form or area and in what numbers and positions?

**Mr. Speaker:** This is a written question?

**Mr. Speaker:** Mr. Commissioner.

**Mr. Commissioner:** Mr. Speaker, I would want the opportunity to bring forward a written answer to the Honourable Member's question on this.

**Mr. Speaker:** The Honourable Member from Pelly River?

*Question re: Cyanide Poisoning:*

**Mr. McCall:** Thank you, Mr. Speaker, I'm sure as the Honourable Member is aware, the reasons for the closing of the concentrator have to do with the concentration of cyanide that has a potential for polluting the waterways in the Pelly River Valley. I'm in no position to advise at this time, precisely the time



element or the time that will be required to bring these down to acceptable levels, but I was advised yesterday that the necessary equipment and the protective measures or the anti-pollution measures that are required, were underway. I would be quite prepared to determine what kind of a time element that conceivably could be involved, Mr. Speaker.

**Mr. Speaker:** Have you any further questions? We will then proceed to Public Bills.

#### PUBLIC BILLS

**Mr. Speaker:** May I have your pleasure? The Honourable Member from Whitehorse North Centre?

#### *Bill No. 8, First Reading*

**Hon. Mr. McKinnon:** Mr. Speaker, I move, seconded by the Honourable Member from Whitehorse West, that Bill Number 8 be now read a first time.

**Mr. Speaker:** It has been moved by the Honourable Member from Whitehorse North Centre, seconded by the Honourable Member from Whitehorse West, that Bill Number 8 be now read a first time. Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare the Motion carried.

#### *(Motion Carried)*

**Mr. Speaker:** When shall the Bill be read for the second time?

#### *Bill No. 8, Second Reading*

**Hon. Mr. McKinnon:** Now, Mr. Speaker. I move, seconded by the Honourable Member from Whitehorse West, that Bill Number 8, entitled "Public Service Commission Ordinance" be now read a second time.

**Mr. Speaker:** It has been moved by the Honourable Member from Whitehorse North Centre, seconded by the Honourable Member from Whitehorse West, that Bill Number 8 be now read for a second time. Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare that the Motion is carried.

#### *(Motion Carried)*

**5Mr. Speaker:** We shall proceed with Motions, which I inadvertently missed this morning.

#### *Motion Number 7*

**Mr. Speaker:** The first Motion is Motion number 7, moved by the Honourable Member from Pelly River, seconded by the Honourable Member from Whitehorse Riverdale, that Commissioner James Smith request the Underwriters' Association of Canada to explain the reasons why certain insurance companies doing business within the Territory, have refused to insure residents in the Territory, or companies doing business within the Territory, for fire, casualty and other risks, and to explain and justify the severe increases in rates which have been imposed in respect of fire and casualty and motor vehicle insurance business in the Territory, and prepare a Sessional Paper on the matter for this House as soon as possible after he has received replies from the Association.

The Honourable Member from Pelly River?

**Mr. McCall:** Thank you, Mr. Speaker. The concern I have as to this Motion, on a number of occasions has been brought to my attention, that some of the residents in the Yukon have been refused insurance for a number of reasons.

This also is having an effect on some of our industry. The situation, as far as our insurance on motor vehicles, the increase in percentages are going up at a very, very alarming rate, whether you are involved in accidents or not, whether you have had claims or not, there seems to be no control what so ever by the insurance companies on what they charge as to premiums per year.

So in this Motion, Mr. Speaker, I'm asking Mr. Commissioner if he would investigate this particular situation.

**Mr. Speaker:** The Honourable Member from Whitehorse Riverdale?

**Mr. Lengerke:** Yes, Mr. Speaker, in seconding the Motion, I too, have certainly been confronted by many residents and their concerns about the insurance situation in the Territory. I would hope that the Motion will lead to some answers that you know possibly we are lacking in some of the enforcement legislation that we require in this Territory. Possibly we are lacking in supplying certain data to the insurance companies. Maybe we are lacking in making a good hard pitch in fact to have some of these rates reduced, and I think this is really the intent behind the Motion, we just want to get information.

**Mr. Speaker:** The Honourable Member from Whitehorse South Centre?

**Mr. Hibberd:** Yes, Mr. Speaker. Speaking to this Motion, it might be worthwhile to consider in obtaining this information, if a corollary could be found as



to what has happened in British Columbia regarding I.C.B.C. and the problems they have been confronted there on.

**Mr. Speaker:** The Honourable Member from Whitehorse North Centre?

**Hon. Mr. McKinnon:** Mr. Speaker, I know that this is one of your pet topics too, and as you are in the Chair, I'll try and make the House aware of battles that we have gone on together with the Underwriters' Association on various insurance underwriters in the Yukon over the many years that we've sat together in this House.

And we haven't won one, not one, and there's no way that I'm not going to support this Motion, you know. As the Commissioner said, you keep doing battle and keep fighting. We asked the same question years ago, you know, why the insurance rates, why the special 25 percent surcharge in Yukon, and of course we came back, it's because you don't have the fire fighting facilities and the sprinkler facilities and the fire prevention programs in the Yukon that they do in other places.

We have spent millions, and I tell you millions and millions of dollars of the taxpayers of the Yukon's money in sprinkler systems, in fire fighting equipment, in all the communities of the Yukon, and if anybody has seen a reduction in their insurance over all the millions of dollars that the government has spent, they would be the first ones to tell me so, and what was the answer from the insurance underwriters? Well, we know that you have these facilities now, so your costs haven't risen disproportionately in the Yukon as to other areas in Canada any longer.

I don't think, and I believe this, Mr. Chairman, that the local insurance agents are to blame, because they are almost embarrassed when they phone you to tell you what you are going to be met with in your insurance increases over the next year. For years in the Yukon, it was standard policy that if you had a summer cabin, that you could have a rider on your home insurance policy to cover the contents of that cabin, so that you didn't start from scratch if something happened and you had a fire. This year, the insurance companies in Canada have decided, why should that rider be allowed to residents of Canada or to the Yukon? Certainly, it would be much more profitable to have to have an insurance policy on a second home or a summer cottage also.

That's exactly what every Yukon resident who has a cabin or a summer residence or a place away from Whitehorse is faced with now, that you have a double insurance policy at half the cost again of your insurance policy on your home in Whitehorse or whatever area you happen to live in, so that you can have a few thousand dollars on the contents of your cabin or your summer home.

Mr. Speaker, rip-off, you'd better believe it. We have talked about this on so many occasions before this table, and that's exactly what's happening. What choice do you have, and if you believe that this is happening, and you say well, let's go into the government insurance racket, and we all know that we

would face that type of involvement of a small government, particularly in the Yukon, with great trepidation, looking at the lack of success of some of these programs where there is a much bigger source of revenue to draw on.

So, Mr. Speaker, in this instance, I know and you know that we are in between the devil and the deep blue sea, and we can go once again with these types of Motion. I am going to be very interested to see the Sessional Paper that Mr. Commissioner brings back. Because if he hasn't met with any more success in dealing with the Underwriters' Association of Canada, and those insurance monopolies that gouge the people of the Yukon, then I can tell you that we'll have as much success with this Motion as we have had in the past. It's pretty minimal, and it's pretty darn discouraging, considering the millions of dollars of taxpayers' money that we have put in to establishing some of the best fire fighting prevention programs and some of the best equipment that any small communities have anywhere in Canada, and I daresay anywhere in the world, and of course our corresponding insurance decreases just did not come about, are not coming about, and are increasing yearly upon the taxpayers of the Yukon Territory.

Thank you, Mr. Speaker.

**Mr. Speaker:** The Honourable Member from Hootalinqua?

**Mr. Fleming:** Yes, Mr. Speaker, I'm afraid I'm going to have to support this Motion to maybe just get a little look at something the insurance companies might be doing, because for years, and I have had to agree with the Honourable Member from North Centre exactly, and I am wondering about the little token that was given to some of the young people in B.C., and I'm wondering if it might spread to this country, into our insurance companies here, although I doubt it, even though it is a small token to the people, the young people that don't have accidents, because they are being ripped off, there is no question, at \$600.00 a year for - to drive a car for insurance is an absolute rip-off, there is no question of that even in these times.

I don't class them as the Underwriters' Association of Canada, I class them as the Underwriters' Association Mafia of Canada.

**Mr. Speaker:** Is there any further debate? The Honourable Member from Pelly River?

**Mr. McCall:** Thank you, Mr. Speaker.

I would just like to leave one example that I'm concerned with before the question is called on the Motion. There's a situation in Faro where we have approximately 48 brand new mobile wide homes, double wides I should say and single wides.

There isn't one particular individual can get household insurance of any one of those trailers.

**Mr. Speaker:** Are you prepared for the question?

**Some Members:** Question.



**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare that the motion is carried.

*(Motion Carried)*

*Motion Number 8*

**Mr. Speaker:** Motion Number 8, moved by the Honourable Member from Klondike, seconded by the Honourable Member from Ogilvie, that is the opinion of this House, that the Yukon should be under one rate structure so real equalization on electrical rates in the Yukon could be possible. The Honourable Member from Klondike.

**Mr. Berger:** Mr. Speaker. I was wondering if somebody would be willing to make a motion to move this motion into Committee of the Whole?

**Mr. Speaker:** The Honourable Member from Whitehorse South Centre.

**Mr. Hibberd:** I would move that Motion Number 8 be moved to Committee of the Whole for further discussion.

**Hon. Mr. Lang:** I second that.

**Mr. Speaker:** It has been moved by the Honourable Member from Whitehorse South Centre, seconded by the Honourable Member from Whitehorse Porter Creek, that motion 8 be referred to Committee of the Whole.

Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare the motion carried.

*(Motion Carried)*

*Motion Number 9*

**Mr. Speaker:** Next motion is Motion Number 9, moved by the Honourable Member from Kluane, seconded by the Honourable Member from Whitehorse Riverdale, that Sessional Papers 1 to 4 inclusive be moved into Committee of the Whole for discussion. Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare the motion is carried.

*(Motion Carried)*  
*Motion Number 10*

**Mr. Speaker:** Motion Number 10. Moved by the Honourable Member from Whitehorse Riverdale seconded by the Honourable Member from Kluane.

Be it resolved that in recognizing a desire by most citizens and educators to strengthen the basic skills primary education program and in recognizing that the Remedial Tutoring Program was partly initiated to supplement an education program that may not have been truly indicative of Northern needs and aspirations, it is recommended that the Government of the Yukon Territory set basic skill standards for students in the elementary grades and organize a program for its achievement, and further, pending the establishment of such a program continue co-operation with the Yukon Association for Children with Learning Disabilities in the Remedial Tutoring Program by providing the administrative and supervisory services of the Supervisor of Special Education as required by the program.

Be it further resolved that the Minister of Education explore the possibilities and implement as soon as economically feasible, a program to strengthen the utilization of Yukon teachers, be they Indian or otherwise in Yukon schools and kindergarten programs.

And further encourage by whatever means deemed practical in co-operation with other interested agencies and organizations more consistent participation by all children at the kindergarten and elementary level.

The Honourable Member from Whitehorse Riverdale.

**Mr. Leneerke:** Thank you, Mr. Speaker. In presenting Motion Number 10, certainly I must thank the Honourable Members, the Members from Whitehorse South Centre and Kluane for helping formulate the motion and for their encouragement in putting it forward.

Certainly I believe the Motion expresses, quite well, the results of the discussions that we had in this House the other day. The return to the basic skills, the strengthening of the kindergarten program and certainly the priority item of utilizing Yukon teachers, Yukon oriented teachers in our schools.

Also the Motion does take up the offer, the very generous offer, the offer that certainly made by the Council for Yukon Indians, and they are to be complemented for try to find the funding for this program.

I just feel that it's an encompassing Motion and it will lead to possibly a strengthening of a Remedial Tutoring Program, maybe not in that context, but certainly in the overall education system. Thank you.

**Mr. Speaker:** The Honourable Member from Kluane.



**Mrs. Watson:** Mr. Speaker. I think this is one of the most important motions that likely will come before this House this Session, and I think it's rather a historic motion. I don't think ever before in the history of the Councils, or the Assemblies that sat in these Chambers, did the elected representatives of people, give some basic policy guideline directions for the educational system in the Yukon Territory.

I think we really are proving that we are going to be responsible to the people that elect us. We not only have to see that there are funds available, but we have to give some direction in the manner in which we want our schools conducted and the priorities that we would like to see in our schools.

Fortunately and unfortunately, the Remedial Tutor Program became an issue and I think this brought the question of the deficiencies that have sort of crept into the school system, have brought it to the floor and made us face reality.

The first part of the Motion where we are setting basic skill standards for students in the elementary grades, and organize a program for its achievement, I hope very much the next time we sit that the Minister of Education will be able to give us a progress report on the direction that this is going.

I realize there may be - there will be expenditure with this, we have to recognize that, but I don't think it is going to be large expenditure. I think it will be quite surprising that we can do with the amount of money that will be required.

I'm also very happy that the Council of Yukon Indians, Yukon Association of Non-Status Indians and the Yukon Native Brotherhood, are prepared to endeavour to try to find the funding so that we can continue for at least another year, the tutor remedial program. I'm sure that the administrative arm of this government will co-operate in the operation of this program by continuing to provide the supervisory services of their person in special education.

Again, we are all looking for more Yukon people participating at the teaching level in our school system. It was very interesting, some of the statistics that were brought back as a result of the questions I asked, and the civil service appointments for the past year in the Yukon Territory, local hires, 292, Outside hires, 35. In teachers, local hires, 20, outside hires, 51. So I think that in itself is quite significant. We better, as a government, make sure that somehow or other we can bring in a teacher training program in the Yukon Territory, so that we can have more Yukon people that we can hire, particularly at the primary and elementary grades in our school system. I'm sure this is the only way we are ever going to be able to bring the native people into the instructional area as qualified teachers, this is one way we will be able to do it, into our school system.

It's also interesting in the statistics, that relocation costs for outside hires, \$170,000.00 it cost the Government of the Territory, and I'm sure most of that money was spent on the teachers that were brought in from the outside. So not only would we be putting Yukon people into our schools, Yukon trained people into our schools, we would also be saving the government money just in the relocation costs alone

and in the housing that's required.

I'm very happy also with the last paragraph in this Motion, where we are advising the Department of Education that we feel that they should go ahead with - in whatever means they find necessary, and with whatever agencies they have to work with, to try to strengthen the participation, to get the children who are not going to kindergarten, who need kindergarten, to go to kindergarten, and also to try to cut down on the number of children who are absent on a day-to-day basis, for whatever reasons there are from attendance at school. And this too is significant, that we are saying go ahead, see what you can do.

I think we must also or I think we are implying in this Motion, that if the Department of Education feels that they need something more - something stronger than policy directives in bringing about this participation at the kindergarten level, that it may be that we in this House may have to consider the compulsory nature of attendance at Kindergarten, and we are saying to the Department, you look at other means, but remember, we are interested in this too, and we will be prepared to entertain other actions that you may think are necessary.

I think this is one of the most important Motions of this session, and I would hope very much that we can get unanimous support for the Motion.

Thank you, Mr. Speaker.

**Mr. Speaker:** The Honourable Member from Ogilvie?

**Ms. Millard:** Yes, Mr. Speaker, I would like to rise in support of this Motion in principle. There are two areas that rather bother me, the first one being, it is recommended that the Government of the Yukon Territory set basic skill standards for students in the elementary grades, and organize a program for its achievement. The other is that the Minister of Education explores the possibilities and implement as soon as economically feasible, a program to strengthen the utilization of Yukon teachers.

I can only support this Motion with the understanding that the Minister will investigate all possibilities of carrying on the present tutor program, or implementing a new program along those same lines. I just wanted to make it public that those are the reasons why I am supporting the Motion.

**Mr. Speaker:** The Honourable Member from Whitehorse North Centre?

**Hon. Mr. McKinnon:** Mr. Speaker, I rise in support of the Motion. I'm of the opinion that the second resolution should be the first part of the Motion, because I consider it to be the most important part and the key to the problem we are facing at this time.

By accepting the concept of remedial tutoring, we are accepting that there is a very real program in the Yukon school system. I would like to deal with the causes of why we are facing that problem, and to me, the key to the solution of those causes are in the



second resolution of the Motion.

I would like to read into the record, certain comments which appear in the "Barriers to Education" booklet that all members of the Assembly have, because I think it articulates far better than I ever could, the things that I have been trying to say around this table for so many years, and Mr. Speaker, if I just could read several of the paragraphs from the booklet into the record.

Mr. Speaker, "the role of a teacher in a native community, or a community where native people comprise a significant proportion of the population, is far different and more difficult than that of other teachers. Yet predominantly such teachers are culturally ignorant of the past and present of the community in which they work; they are usually altogether undertrained for their type of work, they need special skills and special training.

Courses in inter-cultural education should be taken by those who teach native children. In some cases, training in a native language and the teaching of English as a second language is needed. Help should be available for teachers in adapting curriculum and teaching methods to the local needs. Incentive should be established for teachers to take training in native culture and sociology. Teachers with such training and experience should be given preference in hiring for native communities.

It is also important that teachers spend several weeks prior to teaching in a new community becoming familiar with the area, its people and its problems. While teaching there, they should make a determined effort to become more understanding of the ways of communication within the community. The desires and concerns of the people and the ways in which "things are done".

To attract teachers with such abilities and qualifications, and to retain better teachers for longer periods, there is often a need for better working conditions. Such teachers need more opportunities and encouragement to pursue professional training.

Most appropriate, however, would be to have qualified and trained native people, who are bilingual and bicultural, teaching native students. Such people who have an intimate understanding of native culture, attitudes, way of life and language, are better able to create a learning environment suited to the interests and needs of native children. For this to become a reality, there is an urgent need for recruitment of and teacher training opportunities for native people."

Mr. Speaker, I can only echo a hearty Amen to those paragraphs that I have just read into the House record.

I am rising in support of the principle that the Minister of Education enunciated in the post-secondary education study that is presently being funded in this budget year by the Government of the Yukon Territory. This is exactly what we are attempting to do, to get at the cause of the problem that we all recognize, and all realize around this table.

Mr. Speaker, until we terminate the change in the teaching staff, from year to year, throughout the

total Yukon, and until we have a stability of Yukon teachers, and a pool of Yukon teachers that we can depend on, we are not going to attack the causes that we all know are in the Yukon, and we are not going to come to any solution to them. And it's so obvious that we get a professional, that we pay a higher salary than any other jurisdiction in Canada for, to articulate special needs and programs which all of us who have lived in the the Yukon for any length of time know are there, and two years later, where is he? Gone to further his academic and professional and educational career. It happens over and over and over, and just compare that with the few students that we have graduated into the Yukon educational system, and the benefits that they are giving to all students in the Yukon, in comparison to this massive wheel that turns on and on and on, and the turn-over year after year after year, before the people even know what the Yukon is all about, what the cultural differences in the Yukon are all about, and what the people and the children of the Yukon are all about.

Mr. Speaker, we just have to get into a program of discriminatory post-secondary grants, where people, be they native Yukoners or other Yukoners, are given every opportunity on a silver platter to pursue their educational career along the teaching profession and come back to teach Yukon children.

Mr. Speaker, it's been articulated over and over and over gain that this is the problem around this table. It's been articulated over and over again by the native organizations in the Yukon that this is the problem. The total community of the Yukon, the professional educators, the people of the Yukon, the Indian people of the Yukon, we all know what the problem is and it's time to start - to stop dealing with just the symptoms of it, which we all can see through the remedial tutor programming, but start putting our money at the area where we know can cure the cause of this problem.

And if it has to be the Yukon's money, that 250 grand or whatever it is, is going to go in a program of Yukon teacher training to get to the cause of the problem, rather than the Yukon money going into the remedial tutor program, as long as I have any say at all of where the taxpayers' money of the Yukon is going to be spent.

Mr. Speaker, I think that we're getting it. I think that the total members of the total community of the Yukon are willing to see money spent in this area now, because they realize that if we don't spend the money in this area, that this problem is going to be before this Table, year after year after year as it already has been for a hundred years of the Yukon's history. It's time that we took the time and the ability and spent the money to get to the root cause of the problem and I think that is what we are attempting to do in the budget. I think this is what this Motion articulates and I just say that I would like to see the second resolution, as a member of number one priority in the educational field in the Yukon Territory at this time, Mr. Speaker. Thank you, very much.

**Mr. Speaker:** The Honourable Member from Whitehorse South Centre.



**Mr. Hibberd:** Mr. Speaker, I would also like to rise in support of this motion. And I think that most of the things that I had to say have already been well enunciated by the speakers proceeding me. It, perhaps is note worthy, that when this Motion was being drawn up, the Department of Education was in full concurrence with this Motion and assisted us in every way in drawing up the Motion. They have this same interest at heart as well. They do deserve credit for that as well.

I think that it is important to point out that the Remedial Tutor Program does fill a role that is unique that cannot be fulfilled at this stage of the evolution of the educational system. It bridges the gap between the former educational and Department of Education and the family dispute gap is often a large one. The remedial tutor is often one who is able to bridge that gap, bring the child into the formal educational system. It therefore remains a unique role at this stage of development.

Thank you Mr. Speaker.

**Mr. Speaker:** The Honourable Member from Whitehorse Riverdale.

**Hon. Mr. Lang:** Mr. Chairman, I would like to say a few things before the debate is closed.

**Mr. Speaker:** I wonder if the Honourable Member would bow to the — Mr. Lengerke: Yes.

**Mr. Speaker:** The Honourable Member from Porter Creek.

**Hon. Mr. Lang:** Thank you, Mr. Speaker. I welcome the support that the Department of Education has, quite obviously, from around this Table, from what the speakers have said before I stood up. I'm sure that the department will seriously consider this motion in every aspect that is taken down in the Motion itself. I'd also like to commend the members around the Table for the objectivity of the debate the other day in dealing with the Remedial Tutoring. I would also like to say at this time once again that I welcome the support that the Council of Yukon Indians has offered to the Yukon Territorial Government at this time of financial restraints. I think that they should be applauded for this, and as I said the other day, I said that it is one of the few times, in my opinion, my personal opinion, that I could honestly say that they are fulfilling their role for society and I hope this will carry on.

I think what Mr. McKinnon had to say about the post secondary study, I think this is the key to the future for the educational system in the Yukon. I'm hopefully anticipating favourable results from the forth coming study. And as soon as that's done, we'll take it upon ourselves and proceed accordingly and hopefully we will have a report to put before this House, say in the November Session.

**Mr. Speaker:** The Honourable Member from Klondike.

**Mr. Berger:** Mr. Speaker, I haven't got too much to say, principally I'm in full agreement with the Motion. But from what has been said in the last few moments. I have my doubts about that post secondary education would solve some of the problems in the Yukon. I think what should be spelled out in looking at this Motion. I'm missing something and I think I've found it. I think that the Motion doesn't say with the full co-operation of the teachers association. I think they have a major input to make in any new aspects of education to come up. I think this should be spelled out in the whole thing because I don't really think that when we say that we want discipline, we want this, the teachers want it also. I haven't heard anybody saying that the teachers were really consulted in the thing. And I know as a fact, in other dealings with government matters, such as these, that I'm not consulted either and other people are not consulted either. I think this should be spelled out that any programs should be in full co-operation with the Y.T.A.

**Mr. Speaker:** The Honourable Member from Whitehorse Riverdale.

**Mr. Lengerke:** Mr. Speaker, just some concluding remarks. I realize that probably I'll repeat some of the things that have been said around the Table, but I would certainly like to register my thoughts about this Motion as mover of it.

We are different in the North. We are different in Yukon. I think that from a Motion supporting a program that probably was not thought to be significant, we now have a motion that calls for the Minister to recognize and implement measures, not common to the South. We have a motion that calls for action to take an in depth look at our system. We have a motion that calls for a response to a teacher requirement for the Yukon, for all our people. We have a motion that will, hopefully, allow a program now in existence to continue, but hopefully some day will lead to its elimination, as it will not be required.

We have a motion that I think can lead to a truly Yukon solution.

**Mr. Speaker:** Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare the motion is carried.

*(Motion Carried)*

**Mr. Speaker:** May I have your further pleasure at this time? The Honourable Member from Pelly River.

**Mr. McCall:** I move that Mr. Speaker do now leave the Chair, and the House resolve into Commit-



tee of the Whole, for the purpose of considering Sessional Papers, Motions and Bills.

**Mr. Lengerke:** I second that.

**Mr. Speaker:** It has been moved by the Honourable Member from Pelly River, seconded by the Honourable Member from Whitehorse Riverdale, that Mr. Speaker do now leave the Chair and the House resolve into Committee of the Whole for the purpose of discussing Bills, Sessional Papers and Motions. Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Mr. Speaker:** I shall declare that the motion is carried.

*(Motion Carried)*

#### COMMITTEE OF THE WHOLE

**Mr. Chairman:** I shall call this committee to order and declare a brief recess.

*(Recess)*

**Mr. Chairman:** I now call this Committee to order. We will continue with the discussion of Bill Number 2. We are at present on page 41, Establishment number 502 was under discussion at the time of recess yesterday. General Health Services.

Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, yesterday when we were discussing some aspects of this vote, I gave the House my assurance that I would bring back a detailed definition of each of these stations and centres and hospitals, but in the meantime I could give you a little explanation, which might help simplify these references.

Health centres and health stations are located in settlements where the population is too small to support the service of a full time doctor. These health centres and stations provide examination facilities for doctors from one of the more populated centres who hold regular clinics at the various locations.

Where it is determined that a test or procedure beyond the capability of the examination centre is required, arrangement for the use of more sophisticated facilities are made.

A public health nurse is resident at the health centre. In addition to holding regular clinics, well baby clinics and so on, she acts as an extension of the doctor services by relaying information so that the physician is able to determine a suitable treatment to be carried out by the nurse, or in more serious cases, if transfer to hospital or other treatment centre is necessary.

Now, health stations are simply a clinic building of some type, a cabin or a trailer or whatever, and they are not staffed full time, but they are used for

health services provided by a visiting nurse or by a lay dispenser in the community or by the visit of a doctor or a dentist.

This may help some of the members in their difficulty.

**Mr. Chairman:** Thank you, Mrs. Whyard. My apologies to the witnesss for failing to recognize them. We have Mr. Miller and Mr. Williams with us again today as witnesses.

Mr. Berger?

**Mr. Berger:** Thank you, Mr. Chairman. Further to what the Minister of Health and Wefare just stated, will she be forthcoming with any further information on this particular subject, because I am still confused with what goes on in Dawson, particularly.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Yes, Mr. Chairman. This is known as interim volunteer service. We have asked the Regional Director for definitions of each of these facilities, and the answers will be forthcoming.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, yesterday when we were discussing hospitals, there are still a lot of questions that I have to ask, and Im goig to feel rather stupid on the budget review hospital type of thing, and I'm sure that many, many people don't exactly understand what we are talking about when we say budget review hospital.

But before I go into that, I'd like to recall what some of the Honourable Members, particularly from Dawson City, said yesterday about the hospital facilities that are there at Dawson. If I recall correctly, they said that there would be more people -- this was a reaction to when I asked for utilization rates, statistics on utilization, there would be more people staying in the hospital if there were more nurses on staff.

Now, my question is, you have a resident doctor. If a resident doctor feels that a person in Dawson needs to be hospitalized, that they don't need specialist care or anything, that the facilities are there at Dawson, don't they admit them or recommend that they be admitted into the hospital, and if there isn't 24 hour service, doesn't Northern Health then provide that service on a 24 hour basis, so that the people can be admitted into the hospital?

**Mr. Chairman:** Mr. Berger?

**Mr. Berger:** In answer to this, yes we do have a doctor. We do have nurses, and as I said yesterday, sometimes we only have two nurses on staff. I know of cases where one nurse had to work 48 hours continuously around the clock just to keep a patient there. I don't think you can ask anybody, no doctor, no nurse, or I don't care who it is, to do this type of work on a continuous basis for 48 hours, even 24



hours, I think, it's too much.

Well this is the reason I am asking the question of the Minister of Health and Welfare, what classification do we actually have in Dawson? When this new place was built, we were promised five nurses, and it's dwindling away. Like I said, statistics will show that Dawson is not occupying their hospital facility enough, but the reason for this is because you cannot ask the nurses to stay there forever and look after patients, so the doctor is forced to ship the patient to Whitehorse, after only being in there for maybe 24 hours, or sometimes only --instead of admitting him to Dawson, he has to ship him right out because he hasn't got the staff to look after the patient.

This is the whole problem, and this is why I am saying again, statistics will come up with the wrong picture of the hospital facilities in Dawson.

**Mr. Chairman:** Mr. Whyard?

**Mrs. Watson:** I would like the Minister of Health to answer.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, I have now been provided with answers to the questions from yesterday. If you would like me to take a moment, this may help clarify, and then we can go on with this particular point, if that's agreeable.?

**Mr. Chairman:** Yes.

**Hon. Mrs. Whyard:** These are the definitions of health facilities from the federal Health and Welfare Regional Directors office.

A hospital is a facility operated for the medical, surgical and obstetrical care of in-patients and out-patients.

A cottage hospital is a facility of up to 12 beds, operated for the medical and obstetrical care, and sometimes the surgical care of in-patients, and for the care of out-patients.

A cottage hospital is staffed to provide on-going care on a 24 hour a day basis.

A nursing station is a field unit, staffed by one or more nurses and subsidiary staff, organized to carry out a public health program, out-patient treatment and short term in-patient care. Normally it has 2 to 12 beds, and serves an isolated community of 100 to 1,000 persons where there is no other medical facilities.

A health centre is a unit which is staffed by one or more full time nurses and possibly some auxiliary staff, from which a public health program is administered, and health and preventive medical activities are carried on.

A health station is a field unit in a small building or trailer, where a visiting nurse or doctor may obtain shelter while rendering medical, surgical, obstetrical and preventive services, and where, in case of emergency, a patient may be accommodated overnight until evacuation to a nursing station or

hospital can be arranged.

**Mr. Chairman,** I have answers to two other questions, if you would like them at this time?

**Mr. Chairman:** Yes, Mrs. Whyard.

**Hon. Mrs. Whyard:** The question regarding hospital occupancy rates, averaged over the 12 months of 1975, hospital occupancy rates for adults and children were: Whitehorse General Hospital, 50.2 percent. Watson Lake, 26.8 percent. Faro, 27.1 percent. Mayo, 15.6 percent. Mr. Chairman, there is no figure here for Dawson, which leads me to the assumption that it is not assessed as a hospital for these services.

The answer to another question regarding the number of mentally ill being treated. In 1975, the regional psychiatrist saw 188 patients. Of these, 115 were seen on an out-patient basis, 73 were seen as in-patients. One patient was committed and referred outside.

There are 11 Yukon residents in hospitals for the care of mentally ill persons outside of the Yukon Territory.

**Mr. Chairman,** I would like to add that the Regional Supervisor is with us today in the gallery. If you feel that his presence here would be useful to members, I'm sure that Mr. Avison would be happy to cooperate.

**Mr. Chairman:** I think in view of some of the questions that are being discussed at this time, his presence would be worthwhile. Is this Committee's concurrence?

**Some Members:** Agreed.

**Mr. Chairman:** Mr. Avison?

For the record, we now have with us, Mr. Richard Avison, Regional Director, Northern Health Services.

**Hon. Mrs. Whyard:** Mr. Chairman?

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** I think the point that we are having difficulty with, as Mr. Avison will recognize, having been with us the last few moments, is how you define the operation at Dawson. Is it a hospital? Is it a nursing station? What should the residents of Dawson expect there in the way of medical care?

**Mr. Avison:** The definitions, which you were just reading out, are definitions based upon the array of facilities that Medical Services Branch has across Canada, and so I'm wanting to draw attention to the fact that they are a standard kind of definition.

In the terms of those definitions which are, as I say, used across Canada, and noting that the staffing of the facility is included in that, when asked what, in terms of those definitions the facility at Dawson is, the answer is it fits the definition of a nursing station. It is designed to provide, as indicated, certain out-



patient and considerable preventive care, and to provide short-term in-patient care. It's designed that way on purpose, on the philosophy that where long-term care or specialist care is required, that that care can be better provided either at the Whitehorse General Hospital, or occasionally upon referral, to a large hospital outside.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** It might be of some help, I'll reread the definition of a nursing station. A field unit staffed by one or more nurses and subsidiary staff, organized to carry out a public health program, out-patient treatment and short-term in-patient care. Normally it has 2 to 12 beds, and serves an isolated community of 100 to 1,000 persons, where there is no other medical facility.

Now, that definition certainly applies to Dawson. It would qualify, and "Father Judge Memorial Hospital", in quotes, would also be classified under this definition.

My question, Mr. Chairman, is a field unit staffed by one or more nurses and subsidiary staff. My information at the moment is, that there are three nurses on duty at that facility, one of whom is required to carry out the public health program in the community.

The question obviously is, how can two nurses operate an in-patient facility?

**Mr. Chairman:** Mr. Avison?

**Mr. Avison:** Okay, certainly you usually have three available. My answer is that in this kind of facility, the nurses in tens of nursing stations across the north of Canada are doing exactly that, and they there are some periods when there isn't any in-patients in the facility.

There are normal deliveries, for instance, where the mother comes in and may stay for three or four days after the delivery, and these stations are, in terms of nursing, professional nursing staff, are staffed frequently by two nurses.

It's somewhat different from the hospital basis where the nurse is right, well within the call button, and almost within sight of the patient at all times. In a nursing station kind of operation, it's appropriate that the staff, when they don't have any acutely ill patient right there, that the staff rests and so on, but this is a nursing station operation.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, because Dawson is not included in the breakdown for hospital occupancy rates, I don't have a figure before me, of the occupancy rate at Dawson. Would that be available, Mr. Chairman?

**Mr. Avison:** Yes, I believe I have it here. Point 1 percent - seven point one percent.

**Hon. Mrs. Whyard:** And that's for the year '75?

**Mr. Avison:** That's correct.

**Hon. Mrs. Whyard:** '74-75.

**Mr. Avison:** The calendar year.

**Hon. Mrs. Whyard:** '75, thank you.

**Mr. Chairman:** Mr. Avison, the Father Judge Memorial Nursing Centre, is this expected to cover Clinton Creek as well? I notice it's not listed here under the stations.

**Mr. Avison:** I have a bit of difficulty with the question, but clearly Clinton Creek is in the catchment area for which the Father Judge Memorial Hospital provides care.

**Mr. Chairman:** Would that not then exceed the 1,000 population limit that is in the description of such a centre?

**Mr. Avison:** I imagine if you added the total population of Clinton Creek to Dawson, you would be well over the 1,000, but as it's pointed out here, there is the hospital in Clinton Creek, so it's not appropriate to make that kind of addition. It doesn't say that some patients from Clinton Creek don't come to Dawson when they choose to.

**Mr. Chairman:** Mr. Berger?

**Mr. Berger:** I would also like to point out to the witness that in Dawson, there's a very fluctuating population. In Dawson, I don't know if he's aware of it, but in the summer time reaches a population height, I would say, of roughly 1,200 people, just tourist people concerned with the tourist industry. There's mining people working in the area, in placer mining, and also prospecting activities going on. Plus Clinton Creek, I would say the population in the Dawson area alone would utilize the facilities, or has to utilize the facilities, if we say it roughly reaches about 15 to 1,600 people.

I think it's unfair to the nursing staff in Dawson, and to the doctor in Dawson, to ask them to provide the same facilities, services in Dawson in the summer time that they have to do in the winter time. I realize that the Northern Health Service has a problem of hiring, recruiting staff for Dawson, but it's because of the conditions they are asked to work under. I was wondering if there is anything in the way of planning to overcome those conditions?

**Mr. Avison:** I would like to make a point and then answer specifically your question. The increased summer population in Dawson was recognized last summer and will be in the future, by adding one nurse to the usual complement for summers. There's no plans at the moment to make changes beyond that.

**Mr. Chairman:** Mrs. Watson?



**Mrs. Watson:** Yes, Mr. Chairman. Now, let's look at Clinton Creek Cottage Hospital. Now, is this again a nursing station, and it's just wrongly named?

**Mr. Miller:** Mr. Chairman, I think the Clinton Creek situation can be properly described as, basically a company operated health facility. Just this last year for the first time, Y.H.I.S. has recognized it as a health facility in which they are prepared to purchase patient days. Basically what we are demonstrating here in the Appendix A-21, is that we anticipate the payment of 100 patient days at the Clinton Creek facility.

**Hon. Mrs. Whyard:** Mr. Chairman?

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** A hundred patient days at Clinton Creek would work out to what occupancy rate? Can we do that off the top of our heads?

**Mr. Miller:** I'm sorry, Mr. Chairman, I have no idea how many beds are at the Clinton Creek facility, because it's company operated.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** Mr. Chairman, I'm wondering if our witness can give me some idea if Northern Health Services is going to be looking into the situation in Dawson City, particularly since adding another nurse in the summer really only brings the complement in the summer up to the normal complement of three, because there are always holidays in the summer time, particularly since the public health nurse is married to a teacher who can only go on holidays in the summer.

So in actuality when you come down to it, the actual operation in Dawson is not being looked after, although it may sound nice to add another nurse. Has any discussion taken place with the people who are actually in the working situation in Dawson? Is there any possibility of increasing the nursing staff any more? Is there any possibility of even changing the name so that the residents in Dawson don't expect hospital services.

It was quite a political hassle when the new nursing station came in and everyone realized it was a nursing station, so some bright soul in Ottawa, I guess decided to call it a hospital just to appease the people in Dawson, when actually we all know it's a nursing station, but being called a hospital we expect certain services. The poor nurses in Dawson now are working on 24 hour shifts, there's a 140, I think, odd hours a week for each nurse that has to be covered in her own time. They have only just lately put in a telephone recording system, so at least they can leave the nursing station and go and curl or get away from the place for a while, and they have to come back and check that every two hours to make sure everything is okay.

**Mr. Chairman:** Ms. Millard, I wish you would

question the witness rather than enter into debate.

**Ms. Millard:** I'm sorry, we have had a lot of input from Dawson of this, and we really would like to convey it to the witness.

Perhaps then if he could answer those many questions about is there any investigation into the actual staffing of the -- the nursing staffing in Dawson, and is there any possibility of changing the name?

**Mr. Avison:** We have certainly had discussions, both here and in Whitehorse, with regional office people, talking to the nurse in charge in Dawson about the staffing, and we deep the staffing level of that facility, as we do the staffing level of all facilities under review from month to month.

I really don't have any comment about considering the possibility of changing the name. I'm not personally informed of the thinking that took place a few years back, when the facility got their name, Father Judge Memorial Hospital.

So I don't have any comment there.

**Mr. Chairman:** Mr. Taylor:

**Mr. Taylor:** Yes, Mr. Chairman. I did want to rise some time ago and comment on the remarks that were made with respect of populations in areas and the means by which Northern Health Service assess the need for a medical facility in a community. I just want to make a point that I think has already been made. Just because you've got 800 people in a community doesn't mean that that's all the people that you've got to look after. You could be looking after 3000 people, not withstanding there's only eight in the community. Perhaps I outlined that the other day, as to how you arrive at these figures.

I was concerned yesterday though out of the House, I was sitting in the Gallery and I heard the Honourable Member from Klondike, voice a grievance in respect of the availability of medicines at these nursing stations. I believe the only reply that I heard around the Table was that Northern Health had curtailed, somewhat, the program of dispensing medicines. I'd like to hear a little more on that. Just before I sit down to hear that reply, Mr. Chairman, it occurs to me that in places, such as Dawson, there must be registered nurses around the community who, perhaps, are sufficiently updated that they could do some chores in the nursing station at least, that could be brought in as part time or casual help. I know in Watson in the case of the Watson Lake nursing station this is done fairly frequently. Is this not a possible solution although it be a "band-aid solution", should this not be considered in order to make the facility more available to the people of Dawson? Perhaps I could have the answers to those two questions, Mr. Chairman?

**Mr. Avison:** On the first one, I'm surprised because I know nothing of that. The curtailment of dispensing of medications.

**Mr. Chairman:** Perhaps Mr. Avison, I could



clarify that I don't think Mr. Taylor is quite accurate in what was stated yesterday.

There had been alteration of the drug services provided. The alteration might have been a curtailment in some areas, but curtailment was not what was discussed yesterday. It was an alternation of the drug service now.

**Mr. Avison:** There is certainly no general thoughts in that direction. I might just say, the stations operated by Northern Health facilities try to keep their involvement in dispensing medications to an absolute minimum. I believe with good reason, that it's really better that the pharmacist who in the Yukon, I appreciate are located in Whitehorse, that the pharmacist be the ones who dispense medication, prescription medication. And generally, not the nurses.

Excuse me, your second question.

Yes, some employment is offered to part time staff, particularly registered nurses in the community and this way of providing the service has been used in Dawson in the past year or so. I would say generally the current staffing of the Northern Health facilities, is not dictated by inability to recruit nurses, whether full time or part time. So that I think it is not a correct assumption to say that the facilities are staffed at their present level because nurses aren't available. That's generally not so.

**Mr. Chairman:** Just a supplementary, Mr. Taylor.

**Hon. Mr. Taylor:** Mr. Chairman, just one question in the case of Dawson. We have determined that there is in fact a resident doctor and would not it seem logical, that not withstanding that there is no pharmacist in Dawson, that the pharmacists are all in Whitehorse, that with a doctor issuing prescriptions for patients, that there should be no problem in having medicine dispensed in Dawson.

**Mr. Avison:** Certainly a doctor can dispense medicines and many choose to do so. I would observe that it's really no more specific work of a doctor to take up this pharmacist role than it is a nurse, you know, things work better if qualified staff work within their own speciality, as a generalization.

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mr. Whyard:** Mr. Chairman, I'm not quite happy yet with the utilization of the facility at Dawson.

I think the crunch question here is, if there were more nurses on staff, would there be higher bed rate utilization? Would this be economically more feasible than flying patients to Whitehorse, which has a higher occupancy rate. I don't have the answers to this question, I don't think anybody in this House has the answers at the moment. Perhaps it's worth a little in depth research with the opinion of the local practitioner and the nurses and the health services administrator together to come up with some kind of an answer on this one, because it is of great concern

to me, to see that facility being operated at the utmost capacity.

Otherwise the cost, if you want to talk in terms of dollars and cents here, are absolutely ridiculous, based on a per patient day rate.

**Mr. Chairman:** Mr. Lengerke?

**Mr. Lengerke:** Thank you, Mr. Chairman. I just want to say to the Honourable Minister, I am glad you raised that point, because that was going to be my question.

I have been sitting here listening to this, and I am concerned that people in Dawson have the proper services. I sort of go back in time and I remember I was living in a very small community where we needed a hospital, so we went out and lobbied for the thing, and we put together one heck of a lot of evidence that we required it.

We said, we were able to present evidence on financial hardships because of the fact that we had to fly people in and out. We found out that the health situation was really deteriorating, and certainly the doctor that we had, and we were very fortunate as is Dawson, to have a doctor there, and he was doing some pretty good lobbying through the medical profession, and really made it known. I would hope, because a lot of us are not familiar around this table with the situation in Dawson, I would like to see the Minister's office just flooded with requests from the people at Dawson, supporting evidence, because really and truly if there is a case, as the Honourable Member from Klondike has said, by all means, they should have some staffing there, we should make it known to Northern Health that we want this thing operating as a hospital, not a nursing station. I would hope that we would get that kind of reaction from that community.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** Thank you, Mr. Chairman. I would like to go back to the dispensing and just one question of our witness.

Apparently the rules for dispensing drugs in Dawson indicate that the nursing station can only give out a three days supply. I understand that they are not actually in the habit of giving out only a three days' supply, because if they do, the patient comes back again after three days because the mail is so slow, that there is no way that they can do that.

Is there any way that the nursing station can legally, and still go along with your policy -- in other words, are you going to be changing the policy so that it fits into the actual reality of the mail system from Dawson to Whitehorse?

**Mr. Avison:** Well, we gave particular consideration to this a few months ago, and came to the conclusion that it's well to stick to that as a guideline, and made clear at the same time, that our concern is the concern of the nursing staff and the patient, was to see the essential medication provided.

So, while that's a good statement of the guideline,



certainly it's well established that it can be applied in a flexible way

On frequent occasions, the drug order is phoned from the nursing station to the pharmacist in Whitehorse, and it's quite possible, with the existing communication, both bus and air, to get drugs through to Dawson in three days.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Yes, I have a question for Mr. Avison. It's quite obvious that Northern Health has decided to draw quite a line between their public health services and their active treatment services, just by looking at your classification and also by the services that are provided.

Now, this is quite understandable in a community such as Whitehorse, but I have often wondered, for example take Dawson, you've got a Dawson health centre, and you've got a Dawson, now we see a nursing station, the same thing with Faro, the same thing with Watson Lake, and I often wonder whether it is economically realistic to have that hard a line between the two. There is some interim - there is some treatment being done through public health, through the health centres in the other communities.

Now, you know you have got one here and you've got a sum of money, that's for public health, that's for treatment, and there is an inter-relationship, maybe that's where you should be looking, at some of these aspects of the services that you are providing.

**Mr. Avison:** We look very frequently at the inter-relationship. One of the realities is, that if you put a real effort on preventive work, you actually are working more effectively to increase the level of health of the population.

Now, if you have no separation whatsoever, the tendency is for the focus to be on treatment, because people tend to be concerned with what ails them, not with the real severe illnesses that are down the pipe which can be prevented by, for instance, immunization or good well baby care or whatever.

So we attempt, as far as it is possible, within a small facility, and within overall budgetary constraints, we attempt to keep a division so that an appropriate emphasis may be placed on public health.

Now, I don't think the division is inordinately large. In a number, in most locations, the public health function is, in fact, one nurse, usually or often with a diploma in public health, her salary is identified with the public health function. She may have a room or two or three right within the facility designated for those functions.

And we on a fairly standard costing basis make the costing distinction, but I would suggest that that kind of distinction is necessary and not overly emphasised.

**Mr. Chairman:** Mrs. Watson:

**Mrs. Watson:** Well just pursue it a little, get a little further, but you are then duplicating a service in these communities, such as Faro, Watson Lake, be-

cause the health centres are doing the treatment work. They are right now. They're doing some treatment work, a great deal of it is. I can understand your concern about public health, but here we are, in some instances, even duplication of an existing physical plant and yet you're sort of not giving the hospital care that these people in these communities would want you to give.

I often think when you look at your health centres where you've got a public health nurse, if you put a couple of beds in there, I'm sure you could keep a patient a couple of days. Really, you're not that different from the nursing station.

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman, I think we are imposing upon Mr. Avison at this stage. We asked him in for a specific area and we've covered it. If the other members are satisfied that we've cleared the definitions of these facilities.

**Mr. Chairman:** I was just going to mention it myself, Mrs. Whyard. Are there any further questions for the witness?

Mr. Berger.

**Mr. Berger:** Yes, Mr. Chairman. I have one concerning dispensing the drugs and want enlightenment on the name of the Father Judge Memorial Hospital. Maybe we should cover this last one first. Father Judge, I think it is, I hope everybody is aware of it, was a Catholic priest who cared for sick people in the Gold Rush Period, and he died because of it. He worked around the clock, 24 hours, 48 hours and so forth, 72 hours. He became weak and he contracted TB, I believe, and he died of it of the results of it. Because of his weakness he contracted the sickness, I hope it's not the intention of Northern Health Service to come up with the same thing again, by leaving the staff that low, so that the nurses have to work under those conditions.

The other thing is to go back to the medical dispensers, I don't know if the witness is aware of the additional costs inflicted on the patients in Dawson, and in the outlying areas. At present time, as the Honourable Member from Ogilvie has said, the hospital dispenses three days of drugs. The orders are flown out and the pharmacy down here dispenses the drugs, and again we are imposing on third parties to take them to the bus station or to take them to the airlines -

**Mr. Chairman:** Mr. Berger, I hate to interrupt you, but if you wish to continue this debate, you can do so after the witness is excused. You are not questioning the witness.

**Mr. Berger:** My question is if he realizes the additional costs imposed on the people. This is my question, Mr. Chairman.

**Mr. Chairman:** He has already answered that question, Mr. Berger. Mr. Taylor.



**Mr. Berger:** Not to my knowledge.

**Hon. Mr. Taylor:** Mr. Chairman, with respect I don't think the Honourable Member has an answer, but it is an interesting question, that's one that I was very concerned about as well. Perhaps we might still find an answer.

Mine refers to the Watson Lake Nursing Station. And my question is simply this that if the Government of the Yukon Territory, continue to prosecute, our doctor who will be operating, or operates out of this facility, and if he is no doubt, as a result incarcerated again, will the Northern Health Service bring us a doctor for the community to maintain the hospital in his absence, for how ever long he may be incarcerated, if that should occur.

**Mr. Avison:** Northern Health Service will once again have done on previous occasions, attempt to provide an acceptable, a good level medical coverage in Watson Lake.

We are fortunate in there being a doctor resident in Cassiar to be in an even better position than, for instance, six months or a year ago, in coping with that responsibility, and without guaranteeing a doctor being present full time in Watson Lake. I would say that I would expect our response would be the same as it has been in the past to providing that medical care.

**Mr. Chairman:** Thank you, Mr. Avison. Are there any further questions for the witness? Thank you, Mr. Avison.

Committee will now recess until 13:30 hours.

(RECESS)

**Mr. Chairman:** I call this committee to order. We are still involved with discussion of establishment 502. In the meantime, Mr. Lang, do you have some information for us.

**Hon. Mr. Lang:** Yes, I do, Mr. Chairman. The questions that were asked of my vote here the last couple of days, I've got all the information and I will have the Clerk distribute them.

**Mr. Chairman:** Thank you, Mr. Lang. Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman, I would like to say a word before we get on any further in the health votes, on behalf of Mr. Avison who appeared before us this morning, voluntarily. I think that it needs to be pointed out for the record, he is not a Territorial Public Servant, he is a Federal Public Servant. I am making these remarks of my own volition, Mr. Chairman.

He was brought in to answer questions on a specific vote, he got pounded with a whole lot of other material. I would just like to point out that this man is not the policy maker for Federal Health and Welfare. He is an administrator who carries out the policies of that federal government department in

this region. I know at times he works under difficulties as we all do.

I have nothing more to say on that subject, except that, the only way we can ever be in control of our own policy making, not just administration of policy, is to accept the transfer of responsibility for all the health services in the Yukon. It's going to cost us a lot of money, but at least then we will be in control. Thank you, Mr. Chairman.

**Mr. Chairman:** Thank you, Mrs. Whyard. I think that's what the Chair was trying to do this morning to limit the debate to direct questions of the witness at that time.

Mr. Fleming.

**Mr. Fleming:** Yes, Mr. Chairman, I have just I don't want to hold up the debate or anything, I'm not even debating. I'm wondering about the Carcross Health Station and the Teslin Health Station, as you know I asked the question the other day about the Teslin Health Station being up. I see that Carcross Health Station, is it only a change of \$354.00, but I'm wondering why that change, when everything else is going up, are we not going to go over there quite so many times, or just why would that be less money now than it would be estimated the year before?

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman, as the Honourable Member knows the Carcross Health Station is not manned, at least there is not a nurse in residence there, she comes from Teslin. The costs in that station, they are mainly for maintenance and heating, and the part time services of the the Health worker available in the area. It could mean that the part time person did not work as many hours, or it could mean that the winter was mild and they didn't use as much fuel oil. It is a very small amount considered over the annual total.

**Mrs. Watson:** Mr. Chairman, maybe I should have asked this of Mr. Avison, when he was in, the general health services manpower summary on Appendix A-20, there is such a discrepancy between '75 '76 and '76 - '77 I think we need, there probably are some simple answers to it, but I think we should have some explanation on that, from the manpower down from 62 to 35.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** This is part of the process of becoming budget review hospitals. The graduate nurses here, level two, one, cookhouse, maids, janitor maintenance, are personnel in those hospitals which are being transferred to our budget review. In effect, you are not having fewer people throughout the health facility, but they are transferred from one section to another in our budget.

**Mr. Chairman:** Mrs. Watson?



**Mrs. Watson:** One more thing. That then does explain the decline in the total dollars for general health services. Some of these salaries are taken and going to be charged to the operation of the hospital.

Getting back to the nursing stations, the health centres and this type of thing, I brought it up when we doing the supplementary on the Beaver Creek Health Station, and Beaver Creek, of course, was between 250, more than 250 miles from Whitehorse and I pointed out at that time, when the heat went out, you know the whole thing froze up, the medicine froze and everything, I wonder, really, whether Northern Health should look at some of these, rather than hire people to take care or make sure that the fire is going and so on and so forth, why don't they man them with a public health nurse.

Now, Beaver Creek with this distance from Whitehorse, a small population in the winter, but in the summer time quite a different situation. At the present time the Health nurse from Destruction Bay covers the area, several times a month. There is the additional cost of driving and transportation. Then there is the necessity of a medical evacuation immediately, almost, because there is no nurse, or doctor available. If you looked at the whole picture, wouldn't it be more economical, almost, to man this station with a full time public Health nurse?

I know we don't set the priorities, but I also know that we can recommend to Northern Health that they do, in fact, establish a proper health centre in certain area. That is the only way we got the one -- there wasn't one at Pelly River when I came in here, we strongly recommended it.

I think that this House can make some recommendations. I would like to recommend that looking at the whole economics of the Beaver Creek situation, ambulance costs and everything, as far as the Government of the Territory is concerned, wouldn't we be better off to have that manned and then we would be giving these people a little bit better service, too.

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman, I did have some additional information in reply to the Honourable Member's earlier question about the situation at Beaver Creek. If you would like me to introduce it now?

**Mr. Chairman:** Yes, please.

**Hon. Mrs. Whyard:** The question concerns the hours of work for lay dispensers and community aides. Guidelines on the hours of work are being established in most areas of health services and management where staff are employed on a part time basis. Such guidelines are essential to provide equitable amount of service in the various communities of the Yukon, in relation to the numbers of persons served and the health needs of the population in each community.

In relation to Beaver Creek, a special and successful effort was made in the spring of '75 to over-

come the difficulties associated with employing, on a part time basis, a person who already had full time employment with another federal department. This has worked out well and it is clear that there has been no deterioration in the quality of health service provided recently in Beaver Creek.

My information, in addition to that, regarding Beaver Creek, is that the lay dispenser is available for two hours per day, during the week, at the health station. I would have to go back for more figures to answer the Honourable Member's more recent question regarding a comparison of costs for bringing patients into the Whitehorse General Hospital or having a full time nurse there. I don't have that information available.

While I'm on my feet, Mr. Chairman, the Honourable Member also referred to health stations freezing up and I have more information on that from the Regional Administrator.

Throughout the Yukon we have five health stations at which there is no full time salaried staff. There has been particular difficulty this winter in keeping these stations in useable condition for holding periodic clinics as four of the five have been frozen up at one time or another. The Beaver Creek Station is among the four the froze, and it should be emphasized that the community aide in Beaver Creek is not responsible for that freeze up.

Medical service Yukon Region attempts to have each station heated with a reliable furnace. But sometimes the furnaces switch off and are not discovered soon enough to prevent the freeze up and damage to pipes and water pumps.

The Regional Director says that they attempt to prevent this by asking people in the community to keep an eye on the unit and they are also looking into the possibility of installing a signal light, so that surveillance will be easier next winter.

**Mr. Chairman:** Mrs. Watson.

**Mrs. Watson:** Mr. Chairman, the easiest way is to have Yukon take over the health services where we do have Yukon employees, the maintenance staff at Beaver Creek and these places could then take care of the furnaces. Right?

**Hon. Mrs. Whyard:** Mr. Chairman, I've already made suggestions to the Regional Director in that direction.

No, Mr. Chairman, I mean the actually physical maintenance and supervision of the property.

**Mr. Chairman:** Are we clear? Mr. Berger.

**Mr. Berger:** Thank you, Mr. Chairman. I want to go back to Dawson again. Mr. Chairman cut me off and said it wasn't the proper time to ask the question.

**Mr. Chairman:** Now it is, Mrs. Berger.

**Mr. Berger:** Thank you. I still say in Dawson or in a lot of other outlying areas, people get short



changed real heavily, because of somebody's decision making of deciding no longer to dispense with medicines in the hospital, except on a three day basis, and then they have the people have to ship it in.

There's also another matter in this particular case. The increase in the cost of the thing. People have to pay for the transportation of the thing, of the medicines supplied. The other thing that came to my attention is that apparently -- who's holding it I do not know, maybe Mr. Chairman knows better than I do, but they've done away with the chronical list. Some people are on chronical lists who have been on there, other people are no longer, can get on that list.

It especially effects old people. Where they come up with a chronical illness, where they require a lot of medication for it. This is the type of thing I wanted to bring to the attention of the House. I personally feel that it is high time that we look under some sort of coverage on Yukon Health Medicare Plan. I think this is the only way out, something to cover people in whole Territory to give them equalized service on this particular matter.

**Mr. Chairman:** Mr. Berger, I think you raised a very pertinent point at this time. And it would have been pertinent perhaps for the Director of Northern Health Services to hear this. The problem of the chronic disease list has undergone considerable metamorphosis in the last year or so. As you probably know this list was originally designed for people suffering from chronical illnesses, would have drugs available to them, that they would not be responsible for paying.

It became apparent in the last year, that the Federal Government was no longer interested in paying for the costs of the various illnesses for which these drugs were listed. As a result of which, the list was split in two.

One list was merely listing chronic diseases which is another form of bureaucracy to keep track of what's going on. But in no way did they accept responsibility for the payment of the drugs for people suffering from these illnesses.

As a result the second list became a considerably more narrowed list. And the people eligible for drug payments on this list, was considerably smaller. But unfortunately, in the application of the new list, in transition from the old one, some people, with the same illnesses, were still covered as they had been before people who developed the same illness, at a later date had to pay their own drugs. There is no satisfactory explanation, this has been delived into many times by the medical fraternity here, the Yukon Medical Association. They have been unable to come up with a satisfactory answer from the federal health authorities.

There just simply is no answer, is an arbitrary decision that has been made. It is out of the hands of the medical fraternity. It is very difficult to understand why one illness is put on one list and not on another list. We just simply don't know it. I think it probably was becoming a fairly heavy financial burden to bear, because the list was enlarging and was

including many major illnesses. I think they just decided that it was time that they would no longer cover these expenditures.

The original intention of this drug list, had been to supply services to people in the Territory that were available in the Provinces on a different basis, for instance, CARS would supply facilities to people suffering from rheumatism, this was not available here. Therefore it was covered under this code. That was simply thrown out the window. No explanation given.

**Mr. Berger.**

**Mr. Berger:** I appreciate the remarks of Mr. Chairman, but the thing is that if he can't understand it, how can I understand and anybody else can understand it. The thing is what I think is more so important for this House to take a serious look at this matter, because it affects a lot of people in the territory. I would suggest to the House to start looking at the coverage, our Medicare coverage assistant plan of some sort.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** We do through our Social Welfare Branch subsidize the cost of drugs to people in need. If you are discussing those, who have now been taken off the chronic list and who are not in need, that I think is the section that the Honourable Member from Klondike is referring to. We do pay for drugs for those who are in need.

I think, at this point, we need some professional submissions from those who are closely connected with such lists.

I have referred earlier to the close co-operation we have enjoyed with the Yukon Medical Association. If they felt that it was important enough to sit down and revise the list in the direction in which the Yukon should be going, we would receive this with great interest.

**Mr. Chairman:** Thank you, Mrs. Whyard. I think the list is actually not those that are in need. It was simply a list of people suffering from a specific illness, whether they were in need or not and were covered by it. As I stated before, there was no consultation involved with the Yukon Medical Association, this was entirely and arbitrary decision and that is why there is not answer forthcoming on how the list was drawn up. I think that Mr. Berger's remarks are appropriate because it was done in such an arbitrary fashion, it is perhaps opportune for the territorial government to have a good look at this and get a hold of what is going on.

**Hon. Mrs. Whyard:** Mr. Chairman are you asking Executive Committee Member responsible for Health to look at that list of drugs and recognize whether or not they should be added, amended or deleted?

I need professional advise on this and I will have to get it through my department.

**Mr. Chairman:** I think Mr. Berger was asking



what was going on. I am merely re-interpreting his question that this list is no longer the same list that it was, it is not under your jurisdiction, but we don't know what is going on.

The citizens of the territory have been subject to an arbitrary decision and Mr. Berger's representation is what has happened.

**Hon. Mrs. Whyard:** Mr. Chairman, I don't wish to prolong this minor point of discussion but I think I have made it fairly clear that the Honourable Member shouldn't have to be the one to propose amendment of that list. This is something that the Yukon Medical profession should be leading the direction. I would think it would fall within their profession competence.

**Mr. Chairman:** Profession competence might be involved but they have made representation to the people who were in control of that list and just got no satisfactory answer.

**Hon. Mrs. Whyard:** Thank you, Mr. Chairman.

**Mr. Chairman:** Mr. Berger.

**Mr. Berger:** May I ask once more on this subject, actually what I am suggesting is for the Honourable Minister to take a real serious look at the possibility of governing medicine under the Yukon Hospital Insurance Plan.

I cannot blame the Honourable Member because she wasn't present, but the last Council reduced the coverage fees on the hospital insurance plan and I think it was the biggest mistake ever made. I think that at that time it would have been the opportune moment to cover medicine under this particular plan, would maybe even putting an addition burden on the taxpayers. Now it looks like a matter of raising the fees again.

I think, if it is necessary, it should be done and I think there should be a serious look taken of this particular thing.

**Mr. Chairman:** Establishment 502, are we clear?

**Some Member:** Clear.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** My last question of the Northern Health. Will the Northern Health people be moving into the Territorial Building when we move into the new offices?

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, you have the landlord sitting beside you. My information is that there is an office reserved for the Chief Medical Officer of Health for the Yukon in the Department of Health, Welfare and Rehabilitation.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, I have another question. They seem to be growing what is the next location within the community that they will be moving into? For example, we have some of them over here, some of them over at the hospital.

**Hon. Mrs. Whyard:** Mr. Chairman the last time I saw any information on their plans it was to the effect that some of their office space would be moved into a new building at the corner of 4th and Main, and others would be consolidated in the Health Manor over in the Hospital road.

**Mr. Chairman:** Clear?

**Some Members:** Clear.

**Mr. Chairman:** Subsidized travel, medical necessity, \$130,000.00. Ms. Millard?

**Ms. Millard:** Mr. Chairman, I am anxiously awaiting the Minister of Health, Welfare and Rehabilitations answer to the question that I asked earlier in the session, which is referring to Motion Number 14 from last session, where we passed a motion to look into the policy of mileage paid to travellers for medical reasons with a view of varying the rates paid to travellers.

At that time there was a question of how many people are involved in the coverage.

**Hon. Mrs. Whyard:** Yes, Mr. Chairman, I have it here. If I can find it.

From April 1st, 1975 to February 15th, 1976, 292 people received subsidized travel payments. They travelled 108,681 miles at a total cost of \$19,868.10.

**Mr. Chairman:** Ms. Millard:

**Ms. Millard:** My further question then, is of the Minister, has some thought been given to raising the ten cent a mile rate or has this been rejected?

**Hon. Mrs. Whyard:** Mr. Chairman, some thought has certainly been given to it, and I brought in figures earlier which showed how much additional mileage rates would amount to. It has not been, no increase has been included in this budget, as you can see, Mr. Chairman. I really don't know what other information is required. It's a matter of finding the money if we increase the payment. It's a matter of deciding whether that amount of money can be spent better elsewhere.

In answer to the Honourable Member's question there has been no decision made.

**Mr. Chairman:** Ms. Millard:

**Ms. Millard:** Well, Mr. Chairman, if I would ask the minister if some thought can be given to this idea between now and the next budget so we can anticipate an answer by then.

**Mr. Chairman:** I think that the Minister indi-



cated Ms. Millard, that thought already had been given to it.

**Ms. Millard:** Well, Mr. Chairman, possibly we could have a negative or a positive?

**Hon. Mrs. Whyard:** Mr. Chairman, I promise to give positive thought -

**Mr. Chairman:** Mr. McKinnon.

**Hon. Mr. McKinnon:** Mr. Chairman, I've been involved in the subsidized travel for both inside and outside the territory and in the formation of both programs and getting them accepted by this Assembly.

I think all members have made the point at this time that perhaps the medical travel subsidization within the Territory, is not quite as well known by the public of the Territory, as it should be at this time.

The executive committee's thoughts on the matter were if this were in fact the case, we would like to have several years of knowing what the actual costs were going to be, with the full utilization of this program within the Territory.

As you see just as a normal increase with the increase in population and the added expense of sending people outside on CP Air, that we're going from 118,454 to 130,000 this year. This takes into account the increased fares by plane and also what we think are going to be greater demands upon the medical travel subsidization through greater knowledge of the monies available within the Territory.

What we're saying is we'd like to see how close we are on this \$130,000, during this fiscal year, before examining whether we should be raising the subsidies for travel within the Territory, in next year's budget. We agree with you that we don't think there has been enough publicity and enough people are knowledgeable of the help already there. And we really would like to get a year with this knowledge under our belts before we look into the increase in subsidization.

I might add that one of the ways that we were able to get pretty much just a simple majority in this House at one time to get this inside the Territory travel treatment, was of keeping this to a minimum costs as far as budget dollars were. Perhaps the thinking is not the same at this Assembly as was at the time we were trying to fight this through this Assembly.

**Mr. Chairman:** Ms. Millard.

**Ms. Millard:** Well I think we have been through the cost to the individual, this must be the third time, I still would like to make a further plea for the poor individual who has to go from Dawson to Whitehorse, Watson Lake to Whitehorse, for treatment, rather than going out side where he would get full coverage of his travel allowance. Everything is paid, if you have to go and see a specialist, if you have to come to Whitehorse to see that same specialist inside the

Territory, you have to pay more for it, because you happen to live in Dawson, because you only get ten cents a mile. Where if you get a flight ticket you never pay a percentage on the flight ticket, the whole ticket is paid.

I think that ten cents a mile is just not reflecting the realistic thing that is happening in the Yukon. A \$1.20 a gallon of gasoline at Stewart Crossing, ten cents a mile just doesn't cover that cost.

I'd like to make a final plea to the finance committee then that they really consider what's happening. Perhaps even, by over the next few months, bring in cost estimates from people who have actually taken those trips and how much its cost them in reality.

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman, such information would be very valuable and I would appreciate the Honourable Member making some effort in that direction. While we're on this vote I would like to point out, that we send outside an average of 45 to 50 patients from the Yukon, per month for medical treatment. This costs us an average of about \$15,000.00 per month and when you have emergencies, Mr. Chairman, the cost can be considerably higher than normal air fare.

We had one very recently a med-evac trip which cost us \$6,000.00 because of a special charter of aircraft. We're very happy that we are in a position to be able to do this.

**Mr. Chairman:** It was a very rough trip too, Mrs. Whyard.

**Hon. Mr. McKinnon:** Mr. Chairman I don't think we should leave this with the indication that the total costs are paid if you happen to have need of a specialist outside. All you're getting is the plane ticket to either Edmonton or Vancouver. You have costs to another centre where the treatment has to be, say Winnipeg, or some other place, then you pay the difference in the portion of that cost. The disruption of the total family for the period that the family is broken up is also a cost on the individual. The cost of hotels, the cost of babysitting, all this is on the individual. It's just that, you know, when all this is crashing down upon your shoulders, it's nice to know that a portion of the cost, part of the ticket to somewhere is being picked up by government, but it no where near picks up the total cost of what is happening to that family when an medical emergency does come about. And it is one of the areas, because I was one of the prime movers in the medical evacuation plan, both inside and outside the Territory, that I wouldn't mind if dollars were available to the Territory, that more could be done on this type of program than a lot of other programs that I see being initiated before this Assembly.

**Mr. Chairman:** Mrs. Watson.

**Mrs. Watson:** Mr. Speaker, I am going to speak



in defence of the program, all aspects of it, even to the ten cents a mile. I may make myself unpopular, that's fine, that's happened before.

I think that this is one of the better programs that we have. It is emergency evacuation and regardless whether you need a special aircraft or whatever it is, the government does cover the cost. And these are the types of costs that can put people into debit for years and years. It's nice to know every individual in the Territory has this kind of insurance backing them up, that if they do face a great medical emergency, that the government will pick up the transportation costs of it and that is the major portion of it, when you medical costs and your hospitalization are covered, your transportation here in the Yukon is a big major part of it.

So I think for every individual, regardless of where you live in the Territory, that's a big thing.

The ten cents a mile, while it does not cover your complete expenses into Whitehorse by any means, what it is meant to do, I think, is to cover the costs of the gasoline. Let's face it, you're not going to drive into Whitehorse only to go to the doctor. You're probably going to do other things. You're going to utilize your car for your own personal business. If you go by bus or if you go by aircraft, they pick up the ticket.

Now, the Minister has said I think that it would cost somewhere like \$8,000.00 or something like that, to increase the benefits. It would be very nice to increase the benefits. But if I had to make a choice, and I think if my constituents had to make a choice, of raising the \$8,000.00 or receiving the ten cents per mile, I'm quite sure they would opt with the ten cents per mile. I'm fairly positive, I feel quite confident in that area.

There is only one thing that does concern me and that does bring up question, when people have to come into town. I believe that Northern Health, when Indian Status, Indian people are referred into town to a doctor, they are paid twenty-five cents a mile, I believe. Transportation. There is that difference and that does cause some questions.

I think if you asked your constituents, do you want us to look for ways of raising \$8,000.00 or \$10,000.00 or do you want to accept ten cents a mile, I think they'd say, we'll stick with the ten cents.

**Mr. Chairman:** Ms. Millard.

**Ms. Millard:** Mr. Chairman, just on the subject of costs, since we're there. The Minister has given us the costs of this year, I presume, for nearly a full year, \$10,868.00 and the costs she gave us on February the 19th at 17 cents a mile, are \$13,600.00. So that really the raise would be about \$3,000. if we raised the mileage from 10 cents to 17 cents a mile which is a little more reasonable, if we can go by the figures she gave us.

I want to emphasize again that people who are coming into town for medical reasons, certainly they go and buy some groceries at Super Valu because it's cheaper. We live in Dawson and it costs 25 per cent more to buy groceries up there than it does down here. So why not? But it also means that a lot of peo-

ple have taken time off their jobs to come down here. How do you make those costs relative? People take time off their jobs, they have to hire babysitters for the time that they come to Whitehorse.

The costs to them, in the overall picture, is more than the benefits that they get from coming to Whitehorse. They pay for their hotel, which is costing more and more all the time and if we institute a hotel tax, we're going to be dishing that out too.

People that come in from outlying areas seem to be punished all the time for having to live in an outlying area. I don't believe you can equivocate the cost of an emergency evacuation to an outside hospital if you're in a car accident, to the cost of a person who simply has to come for a regular treatment to Whitehorse on a chronic illness which is now not even being, the medicine not even being paid for. There is just no equivalent, morally or financially, you can't equivocate those two things, emergencies aren't even being considered in what I'm talking about.

I would suggest that there would probably be a lot fewer people using that service, if there was better service in the community. A lot of these people come down ambulatory, they are sitting on the bus and they're going into out-patients at Whitehorse and they're still having to pay their costs. So if there was better services in the outlying areas, those costs wouldn't be included in here either. I still feel 10 cents a mile, I would certainly like to see some reply to this. Seventeen cents a mile being \$13,600.00 when so far it seems just over \$10,000.00. Whether it's matter of \$3,000.00, we're spending more of the taxpayers money arguing about it today, and over the last three or four times I have brought it up, than the \$3,000.00 it would cost to bring it up to 17 cents a mile.

**Hon. Mr. McKinnon:** Mr. Chairman, why are we arguing. All it takes is an opinion of council by resolution in the morning and we argue the majority are for it, it goes in the Executive Committee and then you can say, those dirty guys they didn't allow it. It's so simple.

That's what I used to do, when we wanted to raise the money an opinion of council people stood up and had their say and it doesn't matter whether it was for it or didn't and raise the taxes somewhere. To bring in the benefits.

**Mr. Chairman:** Ms. Millard.

**Ms. Millard:** Well, Mr. Chairman, we passed a Motion, and I was told at that time that we couldn't put any money matters into it and that's why the -- it wasn't discussed how much it should be raised. The motion reads, Motion Number 14, I'm sorry I don't have the exact date, but it was in the last Session, moved by myself and seconded by the Member from Klondike that it is the opinion of this House that the Minister of Health, Welfare and Rehabilitation look into the policy of mileage paid to travellers for medical reasons, with a view to varying, I was even told I couldn't put raising, but varying, the rates paid to the travellers.

Now if I have to make another motion I will do



so, but I thought one motion on one subject is probably enough.

**Mr. Chairman:** Ms. Millard, I think that's exactly what Mr. McKinnon was telling you. You can now go back to your constituents and say that they didn't listen to you.

**Ms. Millard:** I sure can.

**Hon. Mr. McKinnon:** Mr. Chairman with respect, the Minister was asked to look into it. She has the facts, figures, statistics, there is nothing wrong with any member at any Session using what the Minister and what the government has provided to make a specific motion into exactly what those cost figures are, what they would like to see and how they would like that money raised. That's exactly what every member has the ability to do now with the information that has been provided by the government

**Mr. Chairman:** I would merely like to add that in my medical practice that does span a considerable number of years now, I have never ever encountered such a generous scheme as I have seen both inside the Territory and transportation outside the Territory. It's a wonderful scheme, I have never heard of anything like this in the rest of Canada.

**Hon. Mr. McKinnon:** Thanks for a little credit once in awhile.

**Mr. Chairman:** It's a great scheme, they just don't know that it exists. Are we clear?

**Some Members:** Clear.

**Mr. Chairman:** Alcoholism and drug abuse \$208,766.00. Mr. Taylor.

**Hon. Mr. Taylor:** Yes, Mr. Chairman. I would assume that a large part of this increase is between salaries and wages and in advertising and public promotion. Can we just have a brief explanation of just what's going on in the advertising and public promotion sector?

**Mr. Chairrnan:** Ms. Millard.

**Ms. Millard:** Well Mr. Chairman, we're failing in our mission if it hasn't got through to the Honourable Member yet. I thought we were surrounded by it in every media.

The program is well underway and we gave a complete presentation to the Honourable Members at the last Session, when we introduced the new educational and promotional proposals. I'm happy to say that they are now being carried out and we were heartened by the co-operation of every member of this House and their support when we presented the Sessional Paper on the program.

I really don't know what kind of a break down the Honourable Member would like. We are proceeding full steam ahead with our alcoholism counselling

service. We are trying to respond to requests from communities for assistance in that area. We have a very strong advertising and P.R. program, I thought, at present. We are going to expand that.

One of the items that might interest the members is the making of a special film in the Yukon on the problems of alcoholism, which will be shown throughout the Yukon. We have lined up some competent people who are going to do that for us, very cheaply we hope. Mr. Chairman.

**Mr. Chairman:** Thank you, Mrs. Whyard, Mr. Taylor.

**Hon. Mr. Taylor:** Well that then answers my question. This is then advertising such as this Yukon check point thing and the little coasters that I see, they've issued for the lounges, I don't know if anybody's used them, but I've seen them. Okay, that answers my question.

**Mr. Chairman:** Mrs. Watson.

**Mrs. Watson:** My question Mr. Chairman, is regarding the grant and I assume that grant is to the Crossroads. I wonder if the Honourable Member has details on how they give the grant, whether they give an outright grant and have an accountability from the organization or whether you give it on a per diem basis or how do you handle it with Crossroads?

**Hon. Mrs. Whyard:** Mr. Chairman, there is a specific formula which has been arrived at in consultation between the Crossroads administrators and our Department. If you would like a copy of the actual financial arrangement, this can be provided.

**Mr. Chairman:** Thank you Mrs. Whyard, Mr. Taylor.

**Hon. Mr. Taylor:** One final comment. The Honourable Member from Whitehorse North Centre provided me with one of these promotional deals, which indicates to me, it says nobody like a drunk especially a Yukon driver. One could only conclude from this, that all Yukon drivers are drunks. Is that correct, Mr. chairman?

**Mr. Chairman:** I refuse to acknowledge to be an authority on this Mr. Taylor.

**Hon. Mr. Taylor:** That's what it says, all Yukon drivers are drunks.

**Hon. Mrs. Whyard:** I can only remind the Honourable Member that the way most Yukoners drive, it's hard to tell.

(LAUGHTER)

**Mr. Chairman:** Mrs. Whyard, I'm not sure whether you can supply me with this information but I am curious to know what the trend has been as far as drug abuse in the Territory on a continuing basis



over the last several years. Has there been a changing pattern that you are aware of?

**Hon. Mrs. Whyard:** Mr. Chairman I have nothing more recent on that than the replies that were given to this House by the administrator of drug and alcohol services at the last Session when he was asked a question concerning drug use and abuse.

As I remember at the time, while I would have to consult the votes and proceedings, his report was fairly reassuring and I didn't see any specific increases in users in the Yukon.

**Mr. Chairman:** Yes, I think that was only a partial report Mrs. Whyard, that's why I was wondering if there was anything more?

Mr. Fleming?

**Mr. Fleming:** Mr. Chairman, Mrs. Whyard said that she was hopefully having a film made on reducing alcoholism, and I am just wondering, she did say the price would be quite low or something to this effect, but, I'm wondering -- I would like to know just about what the price would be for this type of film, because I have never seen films that were very low, and I know there has been many, many, many, many, many films made on drunk abuse now that can be had and has been had. I don't know as they could improve on what happens to a person that is in this state, because I don't think there is any difference in a drunk in 1946 than there is in a drunk in 1976.

I know in the army and many other places, they did go to great extent to getting these films, and they are available, and I'm just wondering if it's worth while spending money now to make another film that's going to tell us exactly the same thing again.

**Hon. Mrs. Whyard:** Mr. Chairman? I can't tell you what's in the film or how much it's specifically going to cost. I can only say that we have received the co-operation of the National Film Board in this project, and I don't know whether the figures are available at this moment. They are only at the tentative script writing stage.

There has been one member of the film crew in the Yukon, looking at the local situation and background, which should be stressed, and she has visited a number of the outlying communities, not just Whitehorse, so that the entire picture will be a Yukon cross-section, not just the big city bright light bars.

I am sure the members are concerned about duplication of material, but I am convinced that the administrator of this program would not have seen the need for this material if it was already available, and we are using everything that's available.

**Mr. Chairman:** Are we clear? Mr. McCall?

**Mr. McCall:** I was just wondering if this film that is going to be made subject to censorship.

**Hon. Mrs. Whyard:** Mr. chairman, I thought the Honourable Member was going to ask if he could star

in it.

**Mr. Chairman:** Then indeed it would be subject to censorship, Mrs. Whyard.

**Mr. McCall:** I take exception to that, Mr. Chairman.

**Mr. Chairman:** Are we clear? Detoxication centre, \$90,000.00. perhaps Mrs. Whyard could give us a portrayal of the -- it seems the detoxication centre has just opened.

**Hon. Mrs. Whyard:** Yes, I was going to report to the Committee, Mr. Chairman, that the detoxication centre opened yesterday, Wednesday, February 25th, and we had yesterday four referrals seeking admission, and the purpose is to admit slowly, and we are expecting that we will reach full capacity by the first of next week, that is 10 residents.

Are you interested in the guidelines for referral to the detox centre, or am I wasting your time?

**Mr. Chairman:** I am, Mrs. Whyard.

**Hon. Mrs. Whyard:** The question who will be admitted? Any person who is intoxicated, both men and women, and teenagers if they come voluntarily. The rules are that the detox centre will not keep anyone against their will. People being admitted should be brought to the front door, that's where the admitting processing area is.

Approximately 50 per cent of our beds are reserved for referrals from the R.C.M.P., 25 per cent for referrals from the hospital and doctors, and 25 per cent others. The guidelines, in case you are wondering whether the person should go to the Detox Centre or not, anyone you judge has questionable medical problems or injuries should be taken to the hospital for an assessment before being brought to the Detox Centre.

Anyone who has passed out and will not regain consciousness, should also be taken to the hospital before bringing them to the centre, and it would be appreciated if you would phone the Detox Centre before bringing the person for admittance, so that preparations can be made.

I don't know why I am reading this for Rendezvous weekend, Mr. Chairman. We have now full staff. I don't think I need to introduce that into the record. There is a co-ordinator, and there are four recovery attendants, who will be staffing the Detox Centre about the clock, and I'm happy to report that at least one of those is a Yukon native, who has now been trained for this work.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Yes, I see that the Detox Centre, the employees will be Y.T.G. employees.

**Hon. Mr. Whyard:** Yes, Mr. Chairman.

**Mrs. Watson:** Is there any cost sharing proce-



dure, cost sharing arrangements that we can make with Northern Health, or under the Canada Assistance Plan or something like this, for this type of treatment centre.

**Hon. Mrs. Whyard:** Yes, Mr. Chairman, as I think we recall, originally there was supposed to be a direct cost sharing agreement for the Detox Centre, and after our plans got approved and were underway, the Federal Government pulled out of that particular phase, and a decision was made by the government of the Yukon that they would proceed anyway with the Detox Centre.

However, we have not given up on attempts to have the costs shared with the federal government. There are also facilities being made available to us through Northern Health Services to cover part of our operations at the Detox Centre.

Mr. Miller, would you like to expand on that?

**Mr. Miller:** Well, Mr. Chairman, I thought maybe I could clarify something. There is in fact cost recovery for certain parts of this and it is on a per diem rate. It is charged back to YHIS and will be recovered through our claim on Canada with YHIS. So there, is, at least, a partial sharing of the cost.

**Mr. chairman:** Mr. Taylor?

**Hon. Mr. Taylor:** Yes, Mr. Chairman, I simply wanted to ask if the detoxation centre is also used to accommodate people who are having problems with drugs as well as alcohol?

**Hon. Mrs. Whyard:** Yes, Mr. Chairman, it is for both.

**Hon. Mr. Taylor:** Good.

**Mr. Chairman:** Mrs. Whyard, I wonder if you could give a brief resume of the training the background training of the people who are employed by the detoxication centre?

**Hon. Mrs. Whyard:** Yes, Mr. Chairman, I don't have an outline of the course that they receive, but we brought in a specialist in this field to train the people that we had hired as recovery attendants and counsellors. They had a course, which lasted, I believe, for two weeks here prior to going on duty.

Also the co-ordinator at the centre is a graduate nurse and has had some specific experience in this field.

**Mr. Chairman:** Are we clear?

**Some Members:** Clear.

**Mr. Chairman:** Yukon Hospital Insurance Service, \$4,484,776.00. I refer you to appendix 21, Mrs. Watson?

**Mrs. Watson:** We have quite an increase in this, naturally we expected it because it is going to be

budget review I guess. Not budget review so much as the fact that the per diem rate has gone up for in-patient services.

I wonder is the witnesses could tell us what the per diem rate will be and how it will be determined this year for in-patient services?

**Hon. Mrs. Whyard:** You are the witness, Mr. Miller.

**Mr. Miller:** Mr. Chairman, the basic methodology used in calculating these rates is each hospital will prepare a budget prior to the beginning of the year. They will estimate the number of patient days that they will have in the hospital during that year which will, one divided by the other, give you a per diem rate. At the end of the year there is an accounting to reflect the actual cost versus the revenue that they have collected on the per diem rate basis and that final payment is then made.

**Mrs. Watson:** By whom?

**Mr. Miller:** By YHIS or by the hospital, if we have overpaid. It works both ways.

The cost per patient day in Whitehorse General Hospital is estimated to be \$127.00 per patient day.

**Mr. Chairman:** This method of calculation is a new method that has been undertaken, Mr. Miller?

**Mr. Miller:** That is the method that is undertaken on the budget review basis, that is correct.

**Mrs. Watson:** Four million, two hundred and fifteen some thousand dollars will be used to pay for in-patient services during the year at the rate of \$127.00, right?

Will any of that money be used to pay a final payment, if there is more needed to cover the additional costs in the operation of the hospital?

**Mr. Miller:** Mr. Chairman, the four million, two hundred and fourteen thousand covers all in-patient services. The total operating costs, for example, of the Whitehorse General Hospital is estimated to be 2.6 million dollars. That is the budget they are operating on and we expect them to live within that budget.

Now, if for some reason beyond their control they can't, you know, increased patient days or whatever, included in that estimate are all of the fixed costs, so all you should have is the variable costs. Variables should relate to the number of patient days that you have. There should be enough flexibility to cover the total cost within the 2.6 assuming you are within the patient days.

**Mr. Chairman:** Then Mr. Miller are we back to encouraging patients to stay in the hospital longer?

**Mr. Miller:** Well I would certainly hope not, Mr. Chairman.



**Mr. Chairman:** We're at a problem. I see a per diem rate for outside hospitals calculated at \$130.00, that's rather optimistic, isn't it?

**Mr. Miller:** I think optimistic that it's going to be that low. You're probably correct, Mr. Chairman, but that -- when we were putting this budget together, that was the best information we could get at the time.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, do they use historical paths too for determining, and the utilization rate for determining the per patient day cost?

For example, in the Mayo General Hospital, you've got -- you know what your basic operating costs are, \$195,000.00, right, and you know what your percentage utilization is, right? Your per patient costs would be very high then, would they not, for patient day costs, if your utilization, and it is fairly low at Mayo.

**Mr. Miller:** That's correct, Mr. Chairman, and you know, that's part of the costs we have to bear. Mayo, incidentally, has been on a budget review basis and they were the only hospital in the Territory that's been on a budget review basis since the days when we ran it.

**Mrs. Watson:** What is the per patient day proposal cost for this year?

**Mr. Miller:** I'm sorry, Mr. Chairman, I don't have that figure available.

**Mrs. Watson:** Mr. Chairman, would he have them for any of the hospitals, for example, Watson Lake? I'm -- what I'm trying to do is get some idea that utilization of the facilities certainly does affect the per patient day cost, when your costs are constant?

**Mr. Miller:** I don't have that information readily at hand. We could bring in the estimated per patient day.

**Mrs. Watson:** It would be interesting.

**Mr. Miller:** We will bring that forward.

**Mr. Chairman:** Perhaps I could ask the Minister what is covered by insured out-patient services, and what proportion of the out-patient services is covered by insurance, and what is paid by the patient themselves?

**Hon. Mrs. Whyard:** Mr. Chairman, I'm walking on thin ice here. As it's explained to me, persons who utilize the out-patient services at Whitehorse General Hospital during a time when there is a medical clinic open and doctors available elsewhere, are charged a straight service charge of I believe it's \$3.60 for their treatment in that out-patient.

If they appear at hours when there are no medical practitioners available elsewhere, that's an insured service, and it is hoped that most of the people who appear there are there for emergency treatment, and not the type of person who say I have had this cough for two weeks and it's bothering me tonight.

I'm on thin ice frankly, Mr. Chairman. I don't know what the terms and conditions are for out-patients. I think a great deal of this is left to the interpretation of the person on duty.

**Mr. Chairman:** Yes, and I also think it does bring in the component of emergency service if an injury has occurred within 24 hours, they are covered by insurance and it is not --

**Hon. Mrs. Whyard:** Yes, if it's an emergency, yes.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, I also think under out-patients, there are some very definite regulations, are there not, for the types of services that are covered as an out-patient cost, regardless of when they are given? I think that this is very definite.

**Mr. Chairman:** Yes, that is true, Mrs. Watson.

Each patient is, their fee is calculated, what is paid for and what is not, on an individual basis.

**Mrs. Watson:** Type of service.

**Mr. Chairman:** Type of service, yes.  
**Mrs. Watson?**

**Mrs. Watson:** One more thing that I would like to ask any of the witnesses that are here today, the four million dollars is quite a considerable increase from what we had in last year -- it's double what we had in last year's budget, it was \$2,147,000.00.

Now, this is just put in our forecast, and is there any cost sharing with the federal government on this, or does it just become part of our budget requirements?

**Mr. Miller:** Mr. Chairman, we have arranged with the federal government for a recovery outside of the agreement, to bring the budget review hospital basis.

You will notice, if you look on page 109, you will find Yukon Hospital Insurance Service recoveries, it's 3,665,000.00 -- I'm sorry, \$3,665,000.00. So you have your normal recovery under your Y.H.I.S. cost sharing scheme, in addition the federal government have put up the difference of roughly two million dollars in the current year. In subsequent years, that will come into the deficit grant calculations.

**Mrs. Watson:** But it won't be as much, it won't have to be.

**Mr. Miller:** It will probably be higher, because



costs keep going up.

**Mr. Chairman:** Isn't that the purpose of this, Mr. Miller, to identify the actual budgetary costs of running the Hospital Insurance Services in the Yukon versus what used to be the Northern Territory?

**Mr. Miller:** That's correct, Mr. Chairman.

**Mr. Chairman:** Mr. Commissioner?

**Mr. Commissioner:** I would like to also bring to your attention that this is likewise designed to stop an indirect subsidy going to a lot of other agencies of government, who by virtue of their arrangements with National Health, have been paying the same identifiable rates as what the Yukon Territorial Government has been paying, so you know it's a double barrelled situation.

**Mr. Chairman:** Are we clear? Well I have some hesitation in passing four and a half million dollars over Mrs. Watson's head without further comment.

**Mrs. Watson:** Mr. Chairman, I was just trying to get an explanation of what the Commissioner said, and I'm sure that I was very fortunate, I got an explanation, and I'm sure the rest of the members didn't quite realize what the Commissioner was saying, and I wonder whether you could explain it, or the witness would.

**Mr. Miller:** Mr. Chairman, when the Territorial Government was paying the Whitehorse General Hospital \$60.00 a day, that was the accepted rate, set by this government in consultation with Northern Health. That same rate was paid to National Health, if you like, by B.C. Health Care Insurance, or B.C. Hospitalization, if there was a B.C. resident in the Yukon and needed our hospital service.

The same rate was paid by Workmen's Compensation for those types of thing, by the R.C.M.P. who pay for all of their own hospital costs, so in effect, National Health has been subsidizing these other areas, and that will no longer apply.

**Mr. Chairman:** Then we are clear on 515?

**Some Members:** Yes.

**Mr. Chairman:** I would declare a brief recess.

(RECESS)

**Mr. Chairman:** I now call Committee to order.  
Yukon Health Care Insurance Plan, \$1,745,653.00.  
Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, I had several questions and I bet the book's not here, however, \$1,591,725.00, I assume that is for the insured services. I assume that does not include the 10 percent that has been negotiated with the Yukon Medical Association re the increase for their fees for the ser-

vices that they provide?

**Hon. Mrs. Whyard:** Mr. Chairman, the Honourable Member is quite right. That figure includes a 3.2 percent based on the increase in population, but it does not include the Y.M.A. contract, and while I am up, Mr. Chairman, I would like to ask members to make a correction. There is a typing error there in vote 525.

It should read, the fourth line down, "insured services" not hospitalization.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** And then we go to the professional special services, and I assume that's the computer service outside.

Now, is that an estimation, \$80,000.00, have you had notification from them what there would be an increased cost in that service?

**Mr. Miller:** Mr. Chairman, we are anticipating a slight increase in their costs. The latest estimates that we have now received, which is just in the last week or two, is that it will cost us roughly \$90,000.00, instead of the 80 as voted.

That's correct, Mr. Chairman, this is our contract with C. U. & C. in Vancouver, who provide the computer service for us, and their fees are based on a percentage of the in-patient - or the insured service cost.

**Mrs. Watson:** Mr. Chairman, then we could easily be looking at another \$160,000.00 to \$200,000.00 additional money required for establishment 525?

**Mr. Miller:** Yes, Mr. Chairman. That would be a fair estimation of the cost, the increased cost.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** We've had some indications from the Federal Government that they want to restructure the cost sharing for medical services with the provinces, or we just had it I think on a political basis almost from the federal government. Has there been any correspondence, or has there been any information from the conferences that we haven't attended or haven't been asked to attend, that there would be a different structure for the health care schemes and Ottawa in the cost sharing arrangements?

**Mr. Miller:** Mr. Chairman, I think the notice that was given by the Federal Government related almost entirely to the hospital service, not to Medicare type services. The last I saw on this particular matter, they were negotiating actively with the provinces, and they have not come to any conclusion.

The reason the notice was given is that there is a requirement in the agreement to give three years' notice prior to any change, so they gave notice of a change, a proposed change, and they are now in the active negotiations stage.



**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** That is for the hospitalization schemes, and Mr. Miller has said yes, now that could affect our cost sharing under Y.H.I.S., so would it be possible that we would be looking at additional costs for Y.H.I.S. this year that we would have to bear?

**Mr. Miller:** No, Mr. Chairman, this change will come about three years after the announcement, which would be 1978 - 79 at the earliest.

**Mrs. Watson:** Thank you, Mr. Chairman.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** I'm sorry to be asking so many questions. How many registered participants do we have now in the Yukon Health Care Insurance Plan, how many registered?

**Hon. Mrs. Whyard:** Mr. Chairman, we have an average number of what, 23.4 for the hospital insurance plan, and 22.7 for Medicare.

And as the Honourable Member is well aware, this is where we get caught by the short hairs in our dealings with the Federal Government, who insist on basing all their per capita agreements on their census statistics, not ours, and in every department we feel this.

**Mr. Chairman:** Mr. Fleming?

**Mr. Fleming:** Yes, Mr. Chairman, I may be a little dumb but I'm confused. Twenty-two per cent of what?

**Mr. Miller:** Mr. Chairman, we are talking about 22,700 people.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** I'll ask either witness. If a person is a resident of the Yukon, they are not registered under the Health Care Scheme, they go for medical attention, medical services from a doctor, the doctor cannot refuse to give the medical service, who pays the doctor for the service he has rendered?

**Hon. Mrs. Whyard:** Mr. Chairman, if I were a doctor, I would inquire whether the patient had registered under the scheme. There are forms available, it's a very simple matter to fill them out.

I'm not going to stand here and argue who didn't get paid for treating what patient in this House.

**Mrs. Watson:** Well this is a problem, I think.

**Mr. Chairman:** With the Minister's permission, perhaps I could shed some light on the problem.

As the Ordinance is now in force, a Yukon resident is covered for medical services, whether they are registered or not. The Ordinance reads that way, in practice that is not the case.

There are many areas where Yukon residents, even people born in the Yukon, receive medical services and just simply are not paid. Sometimes their premiums are paid by other agencies, such as welfare patients, but even under this instance the welfare recipient is required to fill out a form, thereby permitting their premiums to be paid by welfare. If they don't fill out that form, the doctor is not paid, even though they are on welfare.

Old age pensioners, a similar situation. Their premiums are supposed to be paid and therefore they are automatically covered, if they are not registered, the doctor is not paid. I'm sure my practice is no different than other doctors in the Territory, I have files full of bills that - of Yukon residents that are just simply not paying, because they are not registered, and I think it is the onus of the government, not only to see that they are registered, but to live up to their responsibilities under the Ordinance which states that the Yukon resident is covered and the doctor is therefore paid for his services.

The doctor does have the opportunity to charge a Yukon resident, any fee, whatsoever, even though he knows that he is not going to be paid under the medical plan. He has no alternative, and yet he, of course, renders the service.

Mr. Fleming?

**Mr. Fleming:** Mr. Chairman, I would like to ask the Minister as to what occurs with some of these people that don't pay their Medicare and that are away behind, and what instrument does the government have as to where they take these people, and have they ever taken one to court or otherwise, to make them pay the back payments that are due at the office of your insurance plan?

**Hon. Mrs. Whyard:** Mr. Chairman, I would have to take that question under advisement. I don't know how many people have been pursued.

**Mr. Chairman:** Perhaps the Minister of Local Government would have a better idea as he has been pursued, or Mr. Taylor?

Mr. Fleming?

**Mr. Fleming:** Yes, supplementary. My question actually was what instrument do they have to do it? I know already that there's a lot of them not paid, but how do they go about collecting, and I haven't heard anybody or any way that they have collected any yet, that have been behind.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, it seems very strange. We have 22,700 under Medicare, and under Y.H.I.S. we have 23,400. There's 700, a discrepancy of 700 residents right there, isn't there?

**Mr. Chairman:** Home treatment, Mrs. Watson.

**Mr. Miller:** Mr. Chairman, these are estimates that are prepared by various branches of Statistics Canada, and are accepted by various branches of Na-



tional Health and Welfare, and we have fought this battle for four years. We are now running our own numbers out on the computer, we are trying to find some relationship between the number of people that we have registered under Y.H.C.I.P. and the numbers that Canad keeps coming up with. And the first real test of this will come about following the census in June of this year. That will be the first time that we will be able to see whether there is any correlation between the number of people registered under Y.H.C.I.P. and the census taken at that time.

Hopefully if there is a correlation, then National Health will maybe start believing the numbers we are coming up with. If there isn't we are back to square one.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, I realize there's more to the question than that answer. I was happy to see that we are not the only ones in this position. I don't know how many of the Honourable Members last night saw on Anik C.B.C. television, a plea in the Northwest Territories from their Department of Health, for people to register for Medicare. It was made very clear there that it is the responsibility of the citizen to provide himself with his registration for that plan, and that unless they do, and unless they keep their change of address notified and up-to-date and their accounts up-to-date, they can find themselves in trouble.

**Mr. Chairman:** Mr. Lang?

**Hon. Mr. Lang:** In reference to the question that was asked by the Honourable Member from Hootalinqua, I'm kind of curious just what does happen if the person is registered for the plan but doesn't pay? Do you garnishee them or do they, after three months do they lose the benefits of the plan, or what occurs?

What I mean is, if a person he registers fine, but he doesn't pay, what happens?

**Mr. Chairman:** I think two things can happen. One, it is up to the Department to pursue it in terms of prosecution, but on the other hand, the problems that I just raised as far as the medical bills are concerned the problem still exist the bills are not getting paid.

**Hon. Mr. Lang:** Mr. Chairman, if I'm a patient and I go to you and you treat me, I'm a member of the Medicare plan, registered, but I haven't paid my premiums, you would still get paid, would you not?

**Mr. Chairman:** According to the Ordinance, yes, practically no.

**Hon. Mr. Lang:** No? That's confusing.

**Mr. Chairman:** It certainly is confusing, Mr. Lang.

**Hon. Mrs. Whyard:** Mr. Chairman, in all fairness, I must add that that is not the only reason doctors don't get paid. Every claim that's put in for payment goes through a referee and is assessed as to whether it is a fair and legal and just claim on our service, and if it isn't for other reasons, the doctor also doesn't get paid.

The fact that you are registered or have paid your payments is not the primary reason for most of these claims being turned down.

**Mr. Chairman:** Mrs. Whyard, I must take issue with that. I think that the plan is very fairly administered, if I think the number of claims that are turned down is quite small, and I think the adjudicators of the plan are very fair towards the doctors in this way, but it still remains the major factor of our not being paid is the failure of the person to be enrolled in the plan.

Ms. Millard?

**Ms. Millard:** Yes, I was going to ask, repeat the question which was asked twice by our Member from Hootalinqua and hasn't been answered, but is now answered, about - or partially answered, about what happens when somebody doesn't pay.

I presume this is through our inspection services, because I think that came up once before, that it's looked into through inspection services and prosecuted with them conducting the affairs, as far as I understand.

But I would like to go into further on the other side of the fence, and see what is the responsibility of the administration in this mess, which is all I can call Medicare, because there are many things that can be done that aren't being obviously considered. For instance, myself, I would like to pay my whole year's Medicare at once and have it over with and have some kind of receipt back saying that's fine. I have yet to receive a receipt from Medicare saying that I've paid anything, except for my little coupon booklet which I pay about five or six payments ahead, and I always have to keep it posted on my wall so I remember how far I have gone, because I don't have a receipt or anything else.

The last time I did that, I ended up at the end of the booklet, so I couldn't make any further payments, so I wrote and asked for a booklet and I got the reply that there weren't any. Now I don't even remember when my payment comes due, but I'll look it up when I go back home and I hope by that time there will be other booklets so I can make another payment, because I really want to make those payments. I would really like to make them all at once if I could, and I'm sure there are other people in this Territory who have the same problem with it, and many many problems other than just making the payments that have come to my attention, and I would really like to have some indication that some day there's going to be an investigation, even just a superficial one, into what really happens to the poor individual who is paying for this service, is being threatened with prosecution if they don't pay for it, and what sort of services are they actually getting



from the administration end of it?

**Hon. Mrs. Whyard:** Mr. Chairman?

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** I can satisfy some of the Honourable Member's demands. Over the last three years, there have been six prosecutions carried out by our inspectors under the Yukon Health Care Insurance Plan.

What they do when they find out that someone who is not registered - when they find out someone who is not registered, is give them the option of joining the plan and paying the premiums or of facing prosecution in court, and the general custom, Mr. Chairman, has been that the people are joining the plan and paying their premiums, that is why there have been so few prosecutions in court.

I think when you look at figures, hospitalization and medicare covering 22, 23,000 people, the number of complaints we hear aired is pretty small in comparison. I'm not here to defend the members of the staff who process all these papers, but as an outsider and a newcomer to this field, I don't think their batting average is that bad, Mr. Chairman.

**Mr. Chairman:** I agree, Mrs. Whyard.

**Mr. Fleming?**

**Mr. Fleming:** Yes, Mr. Chairman, I have to agree with the Minister in many respects, because the program myself I think is a good program.

I am merely interested, and I'm a little concerned as to what I see every day, and it's not some things that are so important maybe to some people, but I see prosecutions, you say there is six. But I haven't asked the question, possibly six of those may be only four people, because maybe one has been prosecuted twice or three times or so. It's a strange thing, and as a person who has been prosecuted once myself, due to Medicare, but not proven guilty, I was not guilty, in fact, and I'm wondering as to why I never see a case of somebody that is more or less unknown, and yet I see one or two cases being brought to court all the time, I know.

And if the Honourable Minister can prove me wrong, possibly through statistics again, okay, but I feel there are quite a number of people that are not paid up in the Medicare system, and I think these are some of the ones you should get. I'm merely throwing this out as something I think we should look into very carefully and see that they do pay up, and they can be prosecuted the same as people I know are prosecuted because I think they are well known, in other words.

It's easy to get hold of a person that is well known, or a person that stands up and says I don't care for the program or anything like this, but it don't seem like they get right out in the field and get the people that are really abusing maybe the program. This is my point.

**Hon. Mrs. Whyard:** Mr. Chairman, I appreciate the Honourable Member's comments, and I would ask for his assistance in our search for these people who are not registered, and who are opting out of their responsibility in the costs of this plan and burdening the rest of us. We would be very happy to have your assistance in seeking out these people who are not abiding by the law and we have inspectors who are around Teslin way pretty often.

**Mr. Fleming:** Yes, Mr. Chairman, you will get my assistance.

**Mr. Chairman:** Mr. Taylor?

**Hon. Mr. Taylor:** Mr. Chairman, I was quite concerned when I learned that the doctors were not being paid in some instances where they have treated a patient who was not registered under the Medicare program, and I don't think that one should be really let go.

I think that there should be some policy established, because when a certain gentleman in the House that sat before this one went around the Yukon selling this whole program, that was a very firm understanding of the program, that everybody in the Yukon, irrespective of whether or not they were in fact registered, was covered by the plan, and it was agreed that barring the referee throwing something out that the doctors would be paid, and it was the responsibility then of the government to go out and collect the premiums.

As a matter of fact, there is a policy established, but that was the understanding that it was sold to this legislature on.

Now, if this is not the case, I don't think we should just brush over it, and I think we should come to some agreement or give some instruction, firm instruction to the administration. I presume that Mr. Chairman has a pecuniary interest in this affair, and so he wouldn't perhaps be able to do it, but I think some further consideration should be given to this question, because there is no use of anybody providing these services and not being paid for it. It just seems so unfair, and so I would like to hear some more on that.

Now, there is another question that perhaps I have a pecuniary interest in, and that's this business about fines. I believe I donated about \$500.00 to the treasury of the Government of the Yukon Territory in being fined for not registering, as have two other members, or one other member at least of this House, and what I am concerned about now is the prosecutions taking place upon Dr. Wigby in Watson Lake.

Now, I would like to know if it is still the intention of the administration, the Department of Health and Welfare, or whoever levies this charge, if it's their intention to pursue the charging of Dr. Wigby in the future?

**Mrs. Watson:** Why not?

**Mr. Chairman:** If I may interpose for a moment



with reference to Mr. Taylor's remarks, I do think that the Department is aware of the problem that I posed this afternoon, and I do think that the Minister has made considerable efforts to alleviate these problems, and I did not bring them up merely to criticize the Minister, because I know she is trying to correct the programs.

In addition, I would like to add that I think this Medicare program is an excellent one. It is one of the best in Canada and we should be proud of it, so my own small interests should not be considered a major criticism of a very good program.

**Hon. Mrs. Whyard:** Thank you. Mr. Chairman?

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, regarding the question from the Honourable Member from Watson Lake, I cannot comment on a matter that is before a court. I can only comment in a general way, and that is that we are expected to enforce the laws that we pass here in this House, and that is one of them.

There was another comment I wished to make, and it's probably ill advised, but I will make it anyway, and that is that regarding the earlier remarks about whether or not a doctor gets paid for a registered or non-registered patient, if it's going to help get every Yukoner registered, I think we should let this belief become widespread, that the doctor is not going to get paid unless you go in and fill out the form.

Up until the now, the understanding has been that whether or not you were registered, your doctor got paid, so maybe if we try it in reverse, and your patients have your welfare at heart, we will proceed a little more rapidly in the registration attempts.

**Mr. Chairman:** I think under those terms of reference, I think I'll apply for an Ex. Com job.

**Mrs. Watson?** Sorry, Mrs. Watson, perhaps Mr. Taylor has a supplementary.

**Hon. Mr. Taylor:** Just for clarification then, the Honourable Minister has indicated that she does not wish to discuss a matter and properly so, that is before the courts, so I can assume that then he is being prosecuted again. Is that correct?

**Hon. Mrs. Whyard:** Mr. Chairman?

**Mr. Chairman:** We can't discuss it, Mr. Taylor, I think we had better leave it at that.

Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, one reason why I brought this whole question up was to stress to the Members of the House, the seriousness and various spin-offs and ramifications if people don't register and don't pay their premiums under our Medicare scheme, and for too many years in this House, it has been a joke, and Members of the House have even flaunted it, and that is the only reason why I brought

it up.

This is serious, because if people don't register, don't pay their premiums, somebody else is paying it for them, be it the doctor or the rest of the people who are paying their premiums, and I don't feel sorry for anyone who's being prosecuted for not registering or for not making an endeavour to keep their premiums paid up.

There are methods whereby, if people cannot afford to pay their premiums, there are routes that you can go through our government, that you can get assistance to make your premium payments.

The Member from Ogilvie's complaint about not knowing exactly what her Medicare payments, the amount of them, there is a little problem there, but the government does not go to a billing procedure for the Health Care Scheme, and for very obvious reasons. They are trying to keep the administrative costs down.

Now, they have - they endeavoured when the Medicare scheme was brought in, to not let the administrative costs be more than 6 per cent of the costs of Medicare.

Now, if we go into a billing procedure, so that at the end of every month, or quarterly, people will receive a bill, we know we are going to have to hire extra staff and we are going to have to add on to the costs of our Medicare services, so we are leaving it to the individual persons to try and determine it themselves, and I do think it's important to register, and I do think it's important to pay.

And I would support the government, in the prosecution after fair warning, with lots of notices to people, and I don't care whether they are a doctor or a custodial worker, or what their race or their religion, that's their decision.

**Hon. Mr. Taylor:** Or Chamberlist.

**Mr. Chairman:** Mr. Fleming.

**Mr. Fleming:** Yes, Mr. Chairman. I must agree with the member from Kluane although I do a little affront as to the more or less that we should be prosecuted for something. I just merely wish to defend myself in a small way by saying, at the time I refused, medicare was not then in force, that was my reason. As it was proven by the Court, it was okay, I didn't have to pay a fine, it didn't cost me anything, and rightfully so.

However, what I was rising to say was, I felt that maybe there was a better way of registering, of seeing that everybody was registered in the Yukon. Possibly by going back through the election papers to find all the people that were in the Yukon. I think that the minister will probably answer me in the affirmative but I would ask her, have they done this. I believe they did at one time, to do this to try and find everybody, because I have been looking into this situation.

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman I can't tell you



about scrutinizing the voters list if that's what you mean, but I know that the people in our administrative office use every kind of directory available to them and every kind of listing available to them, trying to check people who have moved without change of address or who may have left the country. It takes hours and hours to track down one name. I'm sure that they use everything available to them.

**Mr. Chairman:** Yes, I do think they make good effort to follow that up. But perhaps one other area that they could follow it up is that they have someone that is not registered for the plan and they get a doctors bill, why don't they go after them at that stage?

**Hon. Mrs. Whyard:** Mr. Chairman, why doesn't the doctor ask them to register?

**Mr. Chairman:** The doctor does. The doctor can't force them, he can merely ask them to register.

**Hon. Mrs. Whyard:** So can we.

**Mr. Chairman:** No, you can prosecute. Clear?

**Some Members:** Clear.

**Mr. Chairman:** Medical Profession Ordinance \$1.00. Administration welfare \$808,850.00. Mr. Taylor

**Hon. Mr. Taylor:** Mr. Chairman, I had a problem brought to my attention this afternoon respecting old age pensioners. It was brought to my attention that many of our pensioners are having a great deal of difficulty with increased power rates. The case in question that I was made aware of today, is a pensioner and his wife who are receiving power bills that they just can't cope with out of their pension. I don't imagine the supplement is sufficient to cope with this. I'm wondering if the administration have given, or would give any consideration to this question of the utility costs that some of these pensioners are facing and what if anything can be done to offer assistance to them.

**Mr. Chairman:** Mrs. Whyard.

**Hon. Mrs. Whyard:** Mr. Chairman, if the pensioners you are referring to, the Honourable Member is referring to, are being assisted through our social welfare branch. Their case worker, their social worker would be looking at their expenses on a regular basis and whenever any one factor of their living costs rises above the expected level, an adjustment is made in the amount which is allowed for that. If they are not receiving any assistance from Social Welfare, perhaps they should investigate that source.

**Mr. Chairman:** Mr. Taylor.

**Hon. Mr. Taylor:** Well, Mr. Chairman, then I can conclude that it is possible in such circumstances to go to welfare and perhaps receive some supplementary benefit which would help overcome the higher utility costs that they are now experiencing. What's happening is their old age pension cheques just can't cope with the high costs more particularly here in the Yukon today, and I think it is a matter of concern.

**Hon. Mrs. Whyard:** Mr. Chairman, I wouldn't like to leave the impression that they could go to the Social Welfare Branch for assistance with one particular bill per month. They would be given a complete assessment and interview, and their case would then be treated individually for their overall income and their overall expenses and worked out by their own special workers.

**Mr. Chairman:** Mr. Taylor.

**Hon. Mr. Taylor:** Is there any possibility that perhaps this matter could be looked at in terms of the rate equalization or subsidization program, the electric program? For old age pensioners.

**Hon. Mrs. Whyard:** Well, Mr. Chairman, the Honourable Member is certainly free to pursue that. I think that the City of Whitehorse has already moved in that direction in the field of public utilities. And so has a certain television station, Mr. Chairman.

**Hon. Mr. McKinnon:** and the Homeowners Grant is another one.

**Hon. Mr. Taylor:** Mr. Chairman, what I am asking would the administration pursue this and look into this and see what they can come up with. I think it's a pretty valid point and if our oldtimers are having a bit of a problem, I think it behooves us to help them in anyway we can, or any reasonable way we can.

**Mr. Chairman:** Perhaps Mr. Taylor you could find some other route to make representation to the government.

**Hon. Mr. Taylor:** Well Mr. Chairman, with all due respect this is the route, this is the public forum, these are the estimates and this is the place and time to do it.

**Mr. Chairman:** No, I mean in terms of making a motion, Mr. Taylor. Mr. Lang.

**Hon. Mr. Lang:** Mr. Chairman, I hope the Honourable Members have looked at the Homeowners Grant scheme that's being proposed. It would certainly alleviate this problem in some areas.

**Mr. Chairman:** Thank you, Mr. Lang. I am surprised that members with socialist backing have not yet mentioned it, because I'm sure it was part of many members election platforms i.e. has there been any consideration given to Pharmacare for the aged?

**Mr. Chairman:** Mr. McCall?



**Mr. McCall:** Mr. Chairman, I would have to check that on my last material in my election campaign.

**Mr. Chairman:** You don't remember what your campaign promises were, Mr. McCall?

**Mr. McCall:** Mr. Chairman, I know that wasn't one of them.

**Mr. Chairman:** Mr. McKinnon?

**Hon. Mr. McKinnon:** Mr. Chairman, there is a very serious point that was raised here, and this is particularly dealing with people who are over 65 now and on pension, and on a fixed pension and they are having all kinds of problems in meeting the escalation of costs, particularly in the north, and there's many private companies and municipal governments and senior governments that have looked in all various areas of being able to help these people who they realize that their fixed pension is really being depleted by the escalator factor.

Last year, the Municipality of the City of Whitehorse forgave the \$15.00 a month on water and sewage collection to old age pensioners, a company which I happened to represent prior to being on Executive Committee gave special rates on their services to people who were over 65.

You will notice that certain food stores and banks are now entering into this area. One of the strongest arguments for the Homeowner Grant was people who were in my office and who owned their own home and were watching the taxes go year after year, up year after year after year, and were not willing, because they were so Yukon independent, to go down to the hall even though I tried to bring them, drag them down to the Minister of Social Welfare, and say you have got a legitimate complaint, and you could get assistance under supplementary benefits. They said that's what we don't want, we just want something because we are over 65, and it was this kind of feeling that gave us part of the reasons why we went into such a program which wasn't a welfare type application, as a Homeowners' Grant program.

So there are people that are looking at these subjects and looking at them all the time, and much much better and much more considerate than it has ever been in the past in the Yukon Territory. I don't think anybody can deny that.

In the field of Pharmacare, we have a problem, because this is another one of those areas where we originally entered into the government on basic Medicare on a 50 50 percent cost sharing split with the Federal Government. Now it appears that the federal government are going to withdraw that 50 50 cost sharing split - yes, yes, and probably the provinces and the Territories are going to be stuck with the total cost of Medicare.

Now, if a province wants to do anything over and above the minimum benefits on the Medicare scheme such as Pharmacare, that has to be funded 100 percent by provincial or territorial type taxation, and I'm telling you that in 1975 in the Yukon Territory, it

is not the time to be looking to increased benefits under the Medicare program, because the taxpayer just can't afford it at this time.

Maybe there is an argument that for people over 65, Pharmacare should be part of where the taxes of this government goes. I think that's another argument.

I just want to make the point that more is being looked into, and more is being done by all levels of both public and private enterprise, to the older people in the Yukon Territory than ever before, in at least the 20 years that I have been around the Yukon, Mr. Chairman.

**Mr. Chairman:** Thank you, Mr. McKinnon, but I gather that Pharmacare for the aged is not under consideration by your department?

Ms. Millard?

**Ms. Millard:** Mr. Chairman, for a chairman who insists on keeping on the subject, I was going to bring up Medicare for -- Pharmacare for elderly% %

**Mr. Chairman:** I'm sorry, Ms. Millard.

**Ms. Millard:** -- people under another establishment, namely social assistance, but because there is now -- there is a problem in Dawson, if I might bring it up just now because we are on the subject of Pharmacare. There are people who have been receiving the Territorial Supplementary Allowance and have also been on the medical list, and apparently when they started receiving the supplementary allowance, they were taken off the medical list, and apparently the difference in cost did not cover the extra cost particularly in drugs that they are having to pay now, so that they are actually further behind by having to go on the Territory Supplementary Allowance.

So I thought that perhaps the Minister might be able to look into that through Dawson. I don't know, of course the names, and she would have to investigate through the health facility there. Anyway, back to 530, I have a couple of questions. One is in the Manpower, People Power section at the back here, and under 530, Administration, I wonder if we could have a definition of the difference between welfare worker and social service worker, and this is a question I asked again last year, is there any possibility of investigating the chances of using case aids, rather than professional social workers, particularly in some of the field offices where -- or in addition to the social worker, or a lot of times a social worker isn't available, say as in Mayo there wasn't a social worker for some months, and yet a case aid could have been put in there working under the supervision of a social worker who may be within the area somewhere.

And the other question I have is that travel seems to have been increased tremendously, almost three times. Is there some reason for that?

**Mr. Chairman:** Mrs. Whyard?



**Hon. Mrs. Whyard:** Mr. Chairman, I don't know if I caught them all, but on the subject of the social service worker in our man years list here in 530, that is a new classification which is designed to bring people in at the working level, not necessarily a Master's degree.

Someone who is in the field and can be used for a number of purposes, not just as a social worker, case worker, a professional. The idea when this was reclassified was that we would be getting some people in who would work not just in the field of social welfare, but also in perhaps probation, combining forces, so that the title "Social Service Worker" could mean any of these services. I think that's about as clear as I can make that one.

On the subject of travel costs, it costs more to go anywhere these days, Mr. Chairman. Despite the number of people who go, even if it were exactly the same number of trips this year as last year, the cost would have increased.

Now, Mr. Miller has more on it.

**Mr. Miller:** Mr. Chairman, the basic reason for the increase, if you look under rental of machinery and office equipment, you will find a decrease of some 20 odd thousand dollars. It's the costs of operating the pool cars or the departmental vehicles is being put in its proper place in this year's budget, which is travel and relocation, so that's the primary reason.

**Mr. Chairman:** Ms. Millard, I might just mention to you that as far as your consideration of when establishments involving administration are under consideration, there is considerable latitude allowed in the debate.

**Ms. Millard:** Thank you, Mr. Chairman, for that information. I'll remember it and I'll bring up more latitude next time also.

My question to the Minister was not really answered. I asked the difference between a welfare worker and a social service worker, and was there any indication in the Department that they will be considering hiring more social service workers, welfare workers, case aids, whatever we want to call them, simply because of budgetary concerns?

**Hon. Mrs. Whyard:** Mr. Chairman, the man years are shown. We are not hiring more, simply because of budgetary restrictions.

**Ms. Millard:** Mr. Chairman, it's not for this budget. I read, I can see that there is no increase this year. I'm asking, is there any possibility of an increase, thought given to an increase in the future for budgetary reasons, and simply because a professional social worker shouldn't be spending time on things like straightforward social assistance.

That's a much better analysis of what they are doing, if they can, you know, supervise rather than do the -- yet I know of social workers who have spent half a day, for instance, delivering pay cheques when the mail strike was on. Certainly a case aid could do

that. This was the question I asked last year, that -- would there be in the offing in the next -- is there an overriding policy of any sort in the welfare Department, I'm beginning to wonder, towards anything? I'm asking if it's towards reducing the budget by hiring more case aids? I can see that there aren't any more case aids here this year.

**Mr. Chairman:** Am I to consider that a rhetorical question, Ms. Millard?

**Mr. Taylor?**

**Hon. Mr. Taylor:** Mr. Chairman, I have a Motion to move. Perhaps I'll wait until we get down to social assistance in respect of the subject I last raised.

**Mr. Chairman:** Do you wish to answer Ms. Millard?

**Hon. Mrs. Whyard:** I would like very much to answer Ms. Millard, if I could figure out what the question is, Mr. Chairman. I think part of it was, is there any policy at all in the Social Welfare Branch? I have a large manual here which outlines some of it.

Certainly, Mr. Chairman, wherever there is an opportunity to use staff who are qualified to do the job they are hired to do, we take it. If we are required to have a professional person in that capacity, we hire them. If we are not required to have any more than office experience, that's what we look for.

I'm sorry, Mr. Chairman, I can't delineate any further than that.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, I notice that in your Manpower summary, you are doing some shuffling around of positions. For example, instead of social workers 1, 13 employees last year, you are now hiring 10 social workers 2. Is there a plan behind this or is it the only way you were able to staff some of the positions you wanted to staff?

**Hon. Mrs. Whyard:** Mr. Chairman, I have to admit that I don't know what the plan was when those people were hired. I just know that we have reclassified a number of positions in the Social Welfare Branch, so that we can handle a number of new responsibilities, in a large number of fields such as geriatric care.

We have, for example, reclassified one position to now call it a geriatric supervisor, because we have a whole new program in that area. I'm afraid I would have to go back and get the requirements for each position, unless Mr. Miller can assist?

**Mr. Miller:** Mr. Chairman, during the course of the last negotiations, there were certain departments where there were class -- certain classes of employees who were effectively negotiated at a higher level. This is one of them.

**Mrs. Watson:** Yes, but Mr. Chairman, that is the



reason, that is the reason, and you know, it would certainly bring up the question, you're not hiring 13 social workers one, you're hiring 10 social workers two, and it's a very plausible answer.

**Hon. Mrs. Whyard:** And I'm grateful for it, Mr. Chairman.

**Mr. Chairman:** Mr. Legerke?

**Mr. Lengerke:** Mr. Chairman, that was to be my question and I really wanted to know the difference between the social worker 1 and 2, and I was hoping that with that -- those figures there, that it meant possibly an upgrading and utilization of people with already some experience in the Yukon, and I thank you for the answers already put.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** Mr. Chairman, I will take one last attack at this question that I can't seem to get across, although I am speaking English.

Is there any thought in the future to hiring more case aids, social workers, whatever they are, case aids I call them, in the future, is there any thought of hiring more in proportion to the number of social workers?

**Mr. McCall:** The next mail strike.

**Mr. Chairman:** Mrs Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, you know, that remark about the mail strike is not funny. At the time of the mail strike, we had a number of people who were very concerned about not receiving their subsistence cheques and the money they needed to live on. Our social workers did go and deliver them by hand because these matters are confidential, and we do not just allow anybody to run around handing out welfare assistance cheques, and I'm very proud of the attitude that's taken towards preserving confidentiality in that branch.

As for case aid workers, I think that we are constantly reassessing the type of person required to do the type of job in our branch, and whenever possible, we will inaugurate this type of worker..

**Mr. Chairman:** Are we clear on establishment 530? Child welfare services \$711,000. Ms. Millard.

**Ms. Millard:** Well Mr. Chairman, I notice that in our revised estimate from the supplementaries, that \$670,000.00 from '75-'76 should actually read \$575,000.00. So that there has been quite an increase from the \$575 which is the revised amount from the last supplementaries in this establishment. I'm wondering if the reason we are given then under child welfare figures was for the reduction in cost was for provision for better services to the family and so on.

Is it anticipated that more money is going to be spent in this area by a change in policy or is this going to discontinue, some indication where there's

this increase, whether or not it had to be reduced last year?

**Mr. Chairman:** I think the Minister is having difficulty in understanding the question.

**Ms. Millard:** Understanding the question yes. Mr. Chairman if we could have an explanation of the difference in costs between last year and this year?

**Mr. Chairman:** 1Mr. Miller.

**Mr. Miller:** Mr. Chairman, the estimate is based on an estimated number of children in care times the annual cost of maintaining the child in care. Now there are two factors that can influence this. There is an annual review of the rates that are paid to foster parents, the rates that are paid in our group homes. The history of this is a normal increase each year, it's tied to inflation. There's a formula that develops that. The other variable then is the children in care. In preparing this estimate, we have made some assumptions, I think that you are all aware the number of children in care, has been declining. We are not sure just how far that is going to decline, the Department is on an active program to attempt to bring that down by using more family welfare type services, more counselling the homes.

In fact we may be a little high in our estimate here but it's too early to know.

**Mr. Chairman:** Mr. Lengerke.

**Mr. Lengerke:** Mr. Chairman, may the Honourable Minister can help me out with this one. Just how many children are under the care of the director of welfare, child welfare? I realize this might be a difficult question because maybe there's different variations to it, there are some under direct care, others in foster homes and the rest of it. Could you some kind of an idea there?

**Hon. Mrs. Whyard:** Mr. Chairman. The figures at the end of this year showed that we had a total in all our foster homes, not foster homes, group homes only I'm sorry, Mr. Chairman, I thought the member was asking for the number of children in care.

**Mr. Chairman:** Yes, I think it would have to be included. It's the total you want, isn't it? Mr. Lengerke?

**Mr. Lengerke:** Yes. Mr. Chairman, there's a split on that, that's what I would like to know. That's why I said I hope she could help me out, because I might have got the definitions all wrong.

**Mr. Chairman:** I think that it's appropriate that your question is answered now.

**Mr. Lengerke:** Thank you.

**Hon. Mrs. Whyard:** Mr. Chairman. The number of children in our group homes and other homes was



66. We had 222 children in care. This gets pretty complicated because this also includes children whose families are in care. But I can bring you in a simple total of every, I know that the case load runs around 450, Mr. Chairman. If you want a break down, I'd be happy to bring it.

**Mr. Chairman:** Is that satisfactory Mr. Lengerke?

**Mr. Lengerke:** Yes.

**Mr. Chairman:** Ms. Millard.

**Ms. Millard:** Perhaps on those statistics also, if the Minister could give us the number of registered Indians in that list?

**Mr. Chairman:** Are you asking Ms. Millard, that the Minister brings the figures forward at some later date?

**Ms. Millard:** I beg your pardon, I didn't hear you.

**Mr. Chairman:** Are you asking the Minister to bring these figures forward at some later date?

**Ms. Millard:** I thought that that was what was agreed upon?

**Mr. Chairman:** No, Mr. Lengerke was satisfied with what he was given.

**Ms. Millard:** Oh well then I wonder if the Minister could do that then, is to bring us a list of all the children in care and if there is, it is kept, the statistics are kept on the Indian Status ones because the money is charged to Indian Affairs. That's my interest. If that's possible we could have that list?

**Hon. Mrs. Whyard:** Mr. Chairman, may I clarify? The Honourable Member wants to know the figures for all Indian, registered Indian children in our care.

**Mr. Chairman:** I think she wants to know what Mr. Lengerke was after as well as that. She wants to know the total number in care.

**Hon. Mrs. Whyard:** Yes, Mr. Chairman, I'll bring that in.

**Mr. Chairman:** Are we clear?

**Some Members:** Clear.

**Mr. Chairman:** Social Assistance, \$639,000.00. Mr. Taylor?

**Hon. Mr. Taylor:** Mr. Chairman, in keeping with the remarks I made and the concern expressed in respect of the old timers and those recipients of Old Age Pensions and the hardships that they were hav-

ing in relation to electrical power bills, I would like to propose a Motion at this time, seconded by Mr. Fleming, that the administration investigate the possibility of offering some form of assistance to recipients of old age pensions in relation to electrical power bills.

And it may be possible that this could be done through the electrical rate equalization program, perhaps the Minister could find some other ways of dealing with this question. I feel very strongly it should be at least investigated, and maybe perhaps the administration may, in their wisdom, find some way of offering assistance to these pensioners who are having real problems.

**Mr. Chairman:** Moved by Mr. Taylor, seconded by Mr. Fleming, that the administration investigate the possibility of offering some form of assistance to recipients of old age pensions in relation to electrical power bills.

**Mr. Fleming?**

**Mr. Fleming:** Yes, Mr. Chairman, in seconding this Motion, I did so because I feel that we, in the Territory, as anywhere else in Canada, cannot do enough for our aged, no matter what the costs, and somehow or other I don't feel this would be a large thing to possibly help in some small way, if the government can possibly find that direction to go.

I think that with the price of gasoline escalating, the price on hotel rooms going up as these people come to town from the outlying areas and so forth and so on, that the old age pension is definitely not adequate today for the aged. I would say in the Yukon would be worse than any other area in Canada.

I was also going to bring up the matter of medicines, but at this time I'm here to second that Motion.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, I can see why the Honourable Member is concerned about this matter, and I should perhaps have pointed out to all members earlier that this government felt the same concern as far back as 1972, when the Yukon brought in a guaranteed minimum income supplement, the very first of its kind in Canada. It's in the form of a minimum subsistence level under Schedule "C" of the Social Assistance regulations, and it is for, Mr. Chairman, persons who are in receipt of both the federal old age security pension and the guaranteed income supplement, or who are under pensionable age, but who by reasons of age, chronic illness or disease, physical or mental disability or other form of impairment or incapacity, are considered to be permanent exclusions from the labour force.

The Commissioner and his staff, at that time, really made history in the social welfare field by implementing this territorial supplementary allowance, which is specifically to try to ameliorate the differences in the costs of living here, from the higher costs in the Yukon, over comparable costs outside.



This payment has continued over the years, and it may not seem very large to some of the people who are employed in the Yukon, but to people on - who are on pensions, it makes all the difference for matters such as increases in your fuel bill and all the other increases which come along.

I think that when you are considering any such advice to the administration, it's only fair to realize that we are already providing a supplementary allowance in the Territory for such persons as the Honourable Member has mentioned today.

**Mr. Chairman:** Thank you, Mrs. Whyard. Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, I certainly hate to have to vote on the Motion the way that Motion is stated at the present time. I would like to see copies of it made and passed around, you know, I think the Honourable - the Minister made some very good points. There is this supplementary allowance, territorial supplementary allowance, I think it was increased this year.

While we realize there are increases in the costs of living, there are other routes you can go through social assistance. Now, my recollection of the Motion just says that people who are eligible for old age pension - well, you know, you get people who are eligible for old age pensions that have got half a million dollars in the bank. So let's be a little careful, and you know, if they need assistance, maybe they don't need it for electricity, they need it for something else, and what we are doing is we are defining it to help them just with electricity - because of the high electrical costs.

So I would certainly have to have a look at that Motion before I was able to support it.

**Mr. Chairman:** Perhaps we should have a brief recess before we consider the Motion. Mr. Taylor, do you want to speak first?

**Hon. Mr. Taylor:** Yes, I just wanted to say before a recess, the Motion asks that the administration investigate it, it doesn't instruct them to do anything. If they find that it's impractical, fine, and if the Honourable Member from Kluane can't get that into her tree, there is something very, very stupid. All the Motion says is would the administration investigate the problems that the old timers of the Territory are having.

**Mrs. Watson:** Mr. Chairman, that is one of the most rotten, cheap, political motions you can bring in. It's misleading to people, you'll go home and say oh yes, we asked the administration to investigate it, and that's what I don't like about it.

**Mr. Chairman:** I declare a brief recess 30 seconds ago.

(RECESS)

**Mr. Chairman:** I now call this Committee to Order. Mrs. Watson.

**Mrs. Watson:** I have a couple of questions for the Minister.

**Mr. Chairman:** Is this to do with the Motion, Mrs. Watson?

**Mrs. Watson:** No, it doesn't Mr. Chairman.

**Mr. Chairman:** The Motion is still under consideration.

**Mrs. Watson:** Thank you.

**Mr. Chairman:** To the question?

**Hon. Mr. Taylor:** Perhaps the Motion could be read from the Chair, Mr. Chairman?

**Mr. Chairman:** It will be Mr. Berger.

**Mr. Berger:** Mr. Chairman, I would like to propose an amendment to this thing, like on the end to electrical power bills and medicines.

**Mr. Chairman:** Secunder? Mr. Lang.

**Hon. Mr. Lang:** Mr. Chairman. I rise Mr. Chairman, in almost utter amazement. I've heard one person, the mover of the motion questioned the validity of the Homeowner Grants Scheme, here just the other day. The secunder said burn the Hotel Motel Tax Ordinance. I've heard today, and I would say we probably increased this budget in vote by approximately five million dollars already, and the day hasn't hit five o'clock yet. I'm really, all I can say is that I have to utter my amazement. Unless maybe some of the members have the belief that there is a duplicating machine up at the end of the hall here, and we just crank this money out. I'd like to clarify this for them that if somebody is getting something and they're not paying for it, somebody else is paying for it. It is a very real thing. I couldn't vote against this Motion, Mr. Speaker, I think that maybe it would be time to investigate. I certainly do hope that the Honourable Member from Watson Lake and the Honourable Member from Hootalinqua remember this day when we are considering the Homeowners Grant Scheme.

**Mr. Chairman:** Mr. Berger.

**Mr. Berger:** I fully appreciate the remarks from the Honourable Member from Porter Creek. We were told by the Honourable Member from Whitehorse North Centre, try it. I think this is all what we are doing. We are trying it. That's all.

**Mr. Chairman:** Mr. Fleming.

**Mr. Fleming:** Yes, Mr. Chairman. I'd like the actual explanation as to how we increased the budget



today by five million dollars or whatever?

**Mr. Chairman:** I think we should confine our remarks to the amendment to the Motion. Mr. Taylor.

**Hon. Mr. Taylor:** Yes, Mr. Chairman. I simply wanted to say that my concern was with power bills. If it's possible, all this motion is really doing is asking, giving direction to the administration to investigate it. It doesn't force them into doing anything more than investigating it.

It's my hope that upon their investigation they may determine a way to give some assistance in power rates to the oldtimes. I don't think it's going to amount to that great amount of money. As I understand we have over a million dollars in our electric rate equalization fund. I think out of a million dollars in recognition of the difficulties that the pioneers or that the oldtimers are having, it shouldn't be difficult to find a way of assisting them.

**Mr. Chairman:** Are you ready for the question to the amendment?

**Hon. Mr. McKinnon:** Mr. Chairman, if I can find a seconder, I think I would like at this time to move an amendment to the amendment of this Motion, that is before Committee at this time.

I would move, Mr. Chairman, that all words substituted: continue to investigate and initiate programs offering assistance to recipients of old age pension. So that the Motion would now read, would then read moved that the administration continue to investigate and initiate programs offering assistance to recipients of old pension. If I could have a seconder for that Motion, I would explain my reasons why I would like to see that amendment to the amendment passed, Mr. Chairman.

**Mr. Lengerke:** I second it.

**Hon. Mr. McKinnon:** Thank you very much Mr. Chairman. Speaking to the amendment, on the amendment to the motion, I think that we shouldn't try to narrow this down only to one or two specific fields. This government has a philosophy, it has a policy and it will continue that philosophy and policy of attempting to aid the elderly people in the Yukon in any way possible. If that happens to be valid way of using the tax dollars which is agreed by this Assembly, is that for over 65, that Pharmacare be introduced then there will be no hesitation for the government to bring in that type of legislation, if the dollars can be raised, or if we can see our way clear in the budget to do so.

In the field of the electric rate equalization if that's one of the ways we should be investigating. We are prepared to look into that angle too.

We think that there are hundreds, I shouldn't say hundreds, but many ways of assistance, some of them have already been initiated by the government, and more will in the future. So I think why try narrowing it down, all of us know the concern that all have towards this group of people. Let's continue to

look at all the avenues open to us to aid the elderly people in the Yukon and let's have this as a statement of philosophy, because it is the philosophy and policy of this government, Mr. Chairman.

**Mr. Chairman:** Mr. Lengerke?

**Mr. Lengerke:** Thank you, Mr. Chairman, in seconding that Motion, and the reason why I was quick to second it, is because of the fact that around this table today we recognize that we do have many programs that are second to none in many of the other jurisdictions, and I would hope that we would really try to better utilize some of those programs.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Mr. Chairman, the amendment expresses in more general terms, although again the amendment says "old age pensions", and it's across the board. Anyone who receives an old age pension. I think a lot of the modern thinking, and particularly the thinking that was expressed at the political conference last weekend, was that maybe we shouldn't be looking at the universality of all of these schemes. Maybe we should be looking at schemes that assist people who do need assistance and not just across the board. If you get an old age pension, you get gas for 50 cents, or this type of thing.

I think that governments nowadays are going to have to look at this type of thing because their expenditures are getting so high. If we want to assist people, the elderly who have a need for assistance, I would support it very much. People who are on the old age pension get the income supplement and still are having problems meeting the commitments just for basic living.

By all means, but to make it Universal, I just can't agree with that.

**Mr. Chairman:** We have a little bit of a procedural difficulty. The second amendment is in conflict with the first amendment, and if it is the wish of Committee, and with the consent of the mover and seconder of the first amendment, if they would withdraw their amendment, we would be able to vote on the second amendment.

**Mr. Berger:** Mr. Chairman, I am just too happy to withdraw this amendment. My intention was to widen the intent of the first Motion we have in front of us, and I think the Honourable Member from Whitehorse North Centre did it much better than I could.

**Mr. Chairman:** Fine, are you in agreement, Ms. Millard?

**Ms. Millard:** Agreed.

**Some Members:** Agreed.

**Mr. Chairman:** Are you ready for the question?



**Mrs. Watson:** Mr. Chairman, then I would like to move an amendment to the amendment.

**Mr. Chairman:** Mrs. Watson?

**Hon. Mrs. Whyard:** Mr. Chairman, I would like to give fair warning to all members of this Committee that if the amendment, which the Honourable Member on my left proposed, is adopted by this Committee of the Whole, I shall interpret that as a resounding vote of confidence in my Department.

**Mr. Chairman:** I will read the Motion as amended. Moved that the administration continue to investigate and initiate programs offering assistance to recipients of old age pension.

**Hon. Mr. Lang:** Could you read that once again, Mr. Chairman?

**Mr. Chairman:** I hope I can. It was moved by Mr. McKinnon, seconded by Mr. Lengerke, that the administration continue to investigate and initiate programs offering assistance to recipients of old age pensions.

Are you ready for the question?

**Some Members:** Question.

**Mrs. Watson:** When do I propose my amendment?

**Mr. Chairman:** I'm sorry, I asked again, Mrs. Watson, I guess you didn't hear me, but I asked again and you didn't -

**Mrs. Watson:** Well the procedural expert here told me that - I had to wait.

**Mr. McCall:** Mr. Chairman, I would like to move that Mr. Speaker resume the chair to figure this one out.

**Mr. Chairman:** No, I don't think that's necessary.

Mr. Taylor?

**Hon. Mr. Taylor:** Mr. Chairman, what is going on at this moment is you are voting on an amendment to a Motion proposed by myself and Mr. Fleming. You are now putting the question on that amendment. If that should carry, then it is still open for further amendment following the question being carried on that, and if that is not done, then a Motion is called on the main Motion as amended.

**Mr. Chairman:** Yes, that is my understanding.

**Hon. Mr. Taylor:** Or question is called.

**Mr. Chairman:** Thank you, Mr. Taylor. Are you ready for the question?

**Some Members:** Question.

**Mr. Chairman:** Are you in favour?

**Some Members:** Agreed.

**Mr. Chairman:** Contrary?

**Mrs. Watson:** I don't know what I should do.

**Mr. Chairman:** The amendment is now carried.

*(MOTION CARRIED)*

**Mr. Chairman:** We now have before us, the Motion as amended.

**Mrs. Watson:** I would just like to add recipients of old age pensions and income supplements.

**Mr. Chairman:** Secunder?

**Mrs. Watson:** Recipients of old age pension and in need. Now, income supplement ties it down because you have to prove to be in need to receive the income supplement.

**Mr. Chairman:** Your amendment is "and income supplement"?

**Mrs. Watson:** Right.

**Mr. Chairman:** Do we have a seconder?

**Ms. Millard:** I second that, Mr. Chairman.

**Mr. Chairman:** It has been moved by Mrs. Watson, seconded by Ms. Millard, that the Motion as amended read "That the administration continue to investigate and initiate programs offering assistance to recipients of old age pension and income supplement".

**Mr. Chairman:** Are you ready for the question?

**Some Members:** Question.

**Mr. Chairman:** Are you agreed?

**Some Members:** Agreed.

**Mr. Chairman:** Contrary?

*The Motion is carried.*

*Motion carried.*

**Mr. Chairman:** We now have before us the original motion, as amended.

It was moved by Mr. Taylor, seconded by Mr. Fleming that the administration continue to investigate and initiate programs offering assistance to recipients of Old Age Pension and Income Supplement.

**Some Members:** Question.



**Mr. Chairman:** Are you in favour?

**Some Members:** Agreed.

**Mr. Chairman:** Contrary?  
The motion, as amended, is carried.

*MOTION CARRIED.*

**Mr. Chairman:** We are still discussing Establishment 532, Social Assistance. Mrs. Watson I believe you had further questions?

**Mrs. Watson:** Yes, Mr. Chairman, because the Department of Indian Affairs carries on their own social assistance and welfare programs for Status Indians, I would like to ask the Honourable Minister whether there is a noticeable duplication of services, particularly counselling services and this type of thing, within families and within communities in the Yukon Territory because you have two jurisdictions carrying out the same function?

**Hon. Mrs. Whyard:** Mr. Chairman, Yes there is a certain amount of duplication. Our concern in this area, resulted in a meeting some months ago with opposite numbers in the Department of Indian Affairs here in the Yukon, not in the area of counselling, but in duplication of services to the native people of the Yukon generally.

I was very pleased with the spirit of co-operation evident at that meeting where we actually had staff members from our Social Welfare Branch sitting down at the same table with the welfare officers of Indian Affairs, Yukon Region, clearing a few channels. We made considerable progress at that meeting, Mr. Chairman. There are assurances that both sides are going to work much more closely together in some areas, particularly those pertaining to children in residences.

We are hopeful that this can be applied to all areas of duplication in coming months.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** That remark of the Minister interests me and brings up other questions than what I had originally.

**Hon. Mrs. Whyard:** I am sorry.

**Ms. Millard:** I am sorry too. Maybe if I spoke in French the Minister could understand me better.

I'll try to make it as clear as possible. My last trip to make it as clear as possible. My last trip to Old Crow, the Indian Affairs Department was also up there, and they were offering the Band Council a budget of, I believe, it was 35 or \$45,000.00. I think it was \$35,000.00 to carry on their welfare work in Old Crow. The Band Council, in other words, would be hiring someone to have a welfare worker right there in the community in the band office, supply Indian Affairs' Assistance.

I'm wondering if the Territorial Government is

going to be using this service at all, is there going to be any connection with the Territorial Service, because there are also white people in Old Crow, who live the same life as the Indian status people in Old Crow, but have always been treated differently, particularly in the welfare field.

Now this gap is widening even more, since there will be a resident welfare worker from Indian Affairs living in Old Crow and supplying social assistance, and the trips from Dawson to Old Crow by the social worker of the Territorial Government is once very three months. There is such a wide gap in the service, that I am wondering if the Territorial Government - or the Department would be willing to have the Indian Affairs worker in Old Crow take over some of the assistance problems that are in Old Crow, by - the problem of white status people in Old Crow who are not covered under Indian Affairs' assistance.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, I have had no opportunity to hear of this situation or look at the policy involved. I don't know of any other instance where the Territorial Government would use a federal officer to look after white people in the Yukon.

Mr. Chairman, I'll have to get some direction on this from the branch.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** Thank you, that's good to know that there's some communication between the two departments, because, when I was a social worker, I had an awful lot of difficulty between the individual person in Old Crow still has difficulty. They have difficulty even defining who's Indian and who's white up there, let alone the differences in services which have been rendered all over the Territory to the two different races.

I have two questions, budgetary questions: One is the professional and special services has been reduced from 55 to 45,000. What are the professional and special services, and why have they been reduced; and the second one is what are utility supplies and services, and why has that been increased?

**Mr. Miller:** Mr. Chairman, the professional and special services relates primarily to the medical attention that is provided to welfare recipients, that is not covered under Y.H.I.S. or Y.H.C.I.P., and would include premiums, if we were paying premiums on behalf of welfare recipients.

The utility supplies and services is the cost of this government of utility bills, wood, et cetera, borne on behalf of welfare recipients, or social assistance recipients.

**Ms. Millard:** Yes, Mr. Chairman, I have a third budgetary question, which is the same as the one under 531. I notice that having revised it after the supplementals, there was actually a reduction, but,



in this budget, there is again an increase. Is there a difference in policy, or anticipation of more social assistance being issued this year than last?

**Mr. Miller:** Mr. Chairman, the explanation is much the same as it was under Child Welfare, Social Assistance rates are reviewed annually, and they are tied to the consumer price index, so they automatically go up in relation to the C.P.I., so you have that factor of an increased cost per case, if you like. Again, the other variable is the number of cases that you have. In this case we are projecting a slight increase, which has been the pattern over the past few years.

**Mr. Chairman:** Mr. Lengerke?

**Mr. Lengerke:** Probably my question will confuse the situation more. The Honourable Minister maybe could tell me how is an application originated in this, and how is it processed? Can you give me an idea, or is this, and how is it processed? Can you give me an idea, or is this all done by a bulk agreement? I'm really square one on this, and --

**Hon. Mrs. Whyard:** Mr. Chairman, an application for social assistance?

**Mr. Lengerke:** Yes, how do we arrive at - how is this figure arrived at? Is it based on so many applications or what, that's what I want to know.

**Hon. Mrs. Whyard:** Oh, Mr. Chairman, you mean the actual physical procedure? Someone who needs assistance applies for it at one of our offices in any of the settlements or here in Whitehorse, and there the details of their needs are taken down and assessed by a qualified staff member who works on their problem, and works out a solution to it, we hope. And every one of those applications is an individual case, and nearly all of them have different problems and different costs and different needs. I can't give you a general classification for it.

**Mr. Lengerke:** That's fine, Mr. Chairman, as I say, I don't intend to be an expert in this, and I was just kind of curious as to what the mechanics were in this. Thank you.

It wasn't a trick question or anything.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** Mr. Chairman, I would like to --

**Hon. Mrs. Whyard:** I would just like to warn the Honourable Member that you know, you learn a great deal in these processes, and one of them is, that if you know you are going to be unemployed, get your application in for unemployment insurance, otherwise you are going to have to wait four weeks and we will have you on our doorstep.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** I would just like to ask the Minister if the Welfare Appeal Board has been used over the past year?

**Hon. Mrs. Whyard:** Mr. Chairman, as far as I know, there hasn't been any applications for a hearing.

**Ms. Millard:** Just a supplementary to that, Mr. Chairman, I wonder if the Minister could give us some idea of why she feels - I mean, if she has any idea why this might be, why it's not being used, because I know that there are often complaints about welfare. Why isn't it being used? Does she have any concept of that?

**Hon. Mrs. Whyard:** Mr. Chairman, I can only make the obvious conclusion, that, you know, if somebody had a case and a good argument, the machinery is there for it to be heard.

**Mr. Chairman:** Mr. Taylor?

**Hon. Mr. Taylor:** Yes, Mr. Chairman, I believe it's still the policy of the administration in giving out welfare or social assistance, particularly to travellers on the highway and this type of thing, or people who have got themselves into problems, and it's also the policy of the administration to attempt to recover at sometime, the monies or the equivalent of the aid given.

Has it been in the past season, have we been getting these recoveries to any great extent?

**Mr. Miller:** Mr. Chairman, if the Honourable Member is referring to the transient individual who gets into the Yukon, and we provide him with a ticket out or a loaf of bread until he can get out, there's very little attempt at getting recoveries at that.

People who have applied for U.I.C. and haven't got it, and then get welfare in the meantime, that recovery is made without any problem. We were having problems with that in the initial phases of that particular thing, but the dollars that we're talking about in regard to these transient individuals, if I can call them that, who we assist to get out of the Territory, are so minimal, and the cost of trying to recover it would be so high, I don't think it's worth our effort.

**Mr. Chairman:** Mr. Taylor?

**Hon. Mr. Taylor:** Mr. Chairman, I'm thinking of the people coming into the Territory, say perhaps going to Alaska, perhaps coming into the Yukon to look for work, and for one reason or another perhaps their vehicle breaks down or something, and they have no money to carry on. They go to welfare, and receive some assistance, and I was under the understanding that they received that on the condition that they would at some point repay it, but is it then the policy to get them a bus ticket and get them as quickly as possible into another province, like for instance British Columbia, so they can go on their welfare rolls, and not our, or just what are we doing?



**Mr. Miller:** Well, Mr. Chairman, the condition normally exists that they arrive in the Yukon, normally from the south because they can't come in from the Alaska side normally with little or no capability of getting through the Territory.

We limit the assistance to - depending upon how they are travelling, but normally just to the border either way, and certainly we, you know, tell them that they should repay it, but if they don't, there's no way to collect it. Normally, it's a very minor 5, 10 dollar bill to get them a few groceries until they get through.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** We are very fortunate to be able to make use of the facilities at Mary House for people who require one or two nights assistance. We are grateful for and we reimburse Mary House for that, but it is a minimal amount, and I don't know what we would do without it.

**Mr. Chairman:** Mr. Berger?

**Mr. Berger:** Yes, Mr. Chairman. All I have is a request from the last years budget session, I requested a breakdown on figures on payments made under Social Assistance to transients people, the employable unemployed in all different communities. Would it be possible to get this breakdown this year?

**Hon. Mrs. Whyard:** Mr. Chairman it is here somewhere, I won't take the time now, I will bring it in.

**Mr. Chairman:** Clear?

**SomeMembers:** Clear.

**Mr. Chairman:** Day care, \$50,000.00.

**Mr. Miller:** Mr. Chairman, I wonder before the questions start on that if we could correct an error in the vote wording? That should stop at, "to provide day care individual subsidies to families in need." It should stop at the end of "families in need." The last line and a half should be deleted.

**Mr. Chairman:** Ms. Millard?

**Ms. Millard:** Mr. Chairman, I thought that this was provided under the Canada Assistance Plan, isn't it? I understand that. I thought that was being provided, last year also. There was some assistance to people with children -- how come it is not shown in the budget?

**Mr. Miller:** Mr. Chairman, that was included last year under social service agencies, which is the next establishment.

**Mr. Chairman:** Mrs. Whyard?

**Hon. Mrs. Whyard:** Mr. Chairman, if I could am-

plify, there is an additional amount in this years budget because we had hoped to reach an agreement with the Yukon Child Care Association to provide a subsidized program, which is cost shareable under C.A.P. to parents whose total family income was below the ceiling imposed by the federal health authorities for such a subsidy. I might say that I had quite a struggle to keep these dollars in tact during Financial Advisory Committee in Ex Com discussions and I did.

However, we are still awaiting agreement from the Yukon Child Care Association that they will accept that figure and that they would in fact, accept the subsidy, which in my opinion, would be of considerable benefit to middle income families. They are the only ones who would benefit. There is a cut off point. It is the only fair way to do it Mr. Chairman, because it is a sliding scale, dependant upon the income and the subsidy goes down with the height of the income level.

That is why there are some dollars in there, Mr. Chairman. I am still hoping, because I know that there are a large number of working parents who could use that subsidy. My colleagues here, will, I think, substantiate my statement that I really fought for them bucks.

If they are not used for that purpose they go back into general revenue. That is it, we have lost the ball game.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** May I ask the Minister where is the cut off point, what income is the cut off point where you will provide assistance?

**Hon. Mrs. Whyard:** Mr. Chairman the question is where is the income cutoff point where C.A.P. will share the subsidy for assistance?

Their cut off point for total family income, that means, if there are two working parents, both their pay cheques, is \$1,080 per month. That is a net income figure, Mr. Chairman, and this is the point that is very difficult to get across. There are deductions that can be made, allowable deductions, which, in effect, mean that the total all in family income, the cut off point would be something like \$17,000.00 a year, total family income.

The reason that I have fought for that figure, which we have not got final approval on yet, from Ottawa, is that is the cut off point considered reasonable for C.M.H.C. northern mortgages. I think if one federal department accepts that figure, another one should. We should have some kind of common cost figure here, cost of living, for Yukoners which is accepted by all federal departments, when you go after a cost sharing plan, instead of each one of them assessing you on a minimum which doesn't apply to northern, realistic northern costs, roughly a thousand a month, Mr. Chairman is the total family income.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** To what amount are you going to



subsidize the day care assistance thing if a family is making approximately a thousand dollars per month and the cost at the day care centre is possibly two hundred dollars a month for their children, how much of that, how are you going to subsidize? This is how are you going to -- how many dollars would you be subsidizing with?

**Hon. Mrs. Whyard:** Mr. Chairman, there is a chart showing the sliding scale working out the dollars and cents, depending upon the number of children in the family and the income. I could bring the member a copy of that chart, otherwise it gets very involved.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** Here we go though. \$50,000.00 and you are just prepared to subsidize people who are staying in the one day care centre, or that the day care centre is operated in Whitehorse, am I correct?

**Hon Mrs. Whyard:** No, Mr. Chairman, no. That is why I fought for the extra dollars. Actually this entry here, our day care pilot project in Watson Lake, was correct when it was first planned. We had hoped to demonstrate that this subsidy plan would work in the Yukon in a pilot project when the Watson Lake day care project first got organized. Unfortunately it hasn't materialized and there has been no application for that subsidy for Watson Lake, so we haven't been able to demonstrate it in the pilot project.

It is for day care anywhere in the Yukon, not just Whitehorse.

**Mr. Watson:** Is it for day care in a private home?

**Hon. Mrs. Whyard:** Mr. Chairman, we are looking now at the interpretation of day care centre as other provinces are using it. The latest literature on the subject is very encouraging because surveys done in Ontario, in the Ottawa region, for example, show that a private home looking after up to five extra children, per day, for full day care, is qualified to accept this kind of subsidy money.

We would like very much to look in that direction.

**Mr. Chairman:** Mrs. Watson?

**Mrs. Watson:** What if the private home is your own and you choose to stay home and take care of your own children?

**A member:** Tough.

**Mrs. Watson:** Oh come on. Come on. No way.

**Mr. Chairman:** I think there might be further discussion on this so I will entertain a motion.

**Mr. McCall:** Mr. Chairman I would move that Mr. Speaker now resume the Chair.

**Mr. Berger:** I second that.

**Mr. Chairman:** It has been moved by Mr. McCall, seconded by Mr. Berger that Mr. Speaker do now resume the Chair.

Are you ready for the question?

**Some Members:** Question?

**Mr. Chairman:** Are you in favour?

**Some Members:** Agreed.

**Mr. Chairman:** The motion is carried.

*Motion Carried*

*Mr. Speaker Resumes the Chair*

**Mr. Speaker:** I will now call the House to Order. May we have a reprot form the Chairman of Committees?

**Mr. Hibberd:** Yes, Mr. Speaker. Committee convened at 11:00 a.m. to discuss Bills, Sessional Papers, Motion and Reports.

Mr. Miller and Mr. Williams were in attendance as witness as Committee resumed its discussion of Bill Number 2.

It was agreed that Mr. Avison, Regional Director of Northern Health Services join Committee at this point as a witness.

Following further debate Mr. Avison was excused and Committee recessed until 13:30 hours.

Committee resumed discussion of Bill Number 2 with Mr. Miller and Mr. Williams in attendance.

It was moved by Mr. Taylor, seconded by Mr. Fleming and carried as amended that the Administration continue to investigate and initiate programs offering assistance to recipients of old age pensions and income supplement. This motion carried.

I can report further progress on Bill Number 2.

It was moved by Mr. McCall, seconded by Mr. Berger that Mr. Speaker do now resume the chair and this motion carried.

**Mr. Speaker:** You have heard the report of the Chairman of Committees, are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I believe at this time the Honourable Member from Whitehorse noth Centre wishes to speak.

**Hon. Mr. McKinnon:** Mr. speaker I would ask the unanimous consent of the House that Standing Order 41 be suspended for the purpose of reverting to Daily Routine in order to introduce a Public Bill.

**Mr. Speaker:** Is there a seconder?

**Hon. Mr. Lang:** I will second that Mr. Speaker.



**Mr. Speaker:** It has been moved by the Honourable Member from Whitehorse North Centre, seconded by the Honourable Member from Whitehorse Porter Creek that Standing Order Number 41 be suspended in order to revert to Daily Routine for the purpose of introducing Public Bill.

Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** Are there any contrary?  
I shall declare that the motion is carried.

*Motion Carried.*

*Daily Routine*

*Bill Number 15 Introduced*

**Mr. Speaker:** The Honourable Member from Whitehorse North Centre?

**Hon. Mr. McKinnon:** Mr. Speaker I beg leave to move, seconded by the Honourable Member from Porter Creek for leave to introduce Bill Number 15, an Ordinance to amend the Taxation Ordinance.

**Mr. Speaker:** It has been moved by the Honourable Member from Whitehorse North Centre, seconded by the Honourable Member from Whitehorse Porter Creek for leave to introduce Bill Number 15, entitled, An Ordinance to Amend the Taxation Ordinance.

Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare the motion carried and leave is granted.

*Motion Carried*

**Mr. Speaker:** May I have your futher pleasure at this time:

The Honourable Member from Whitehorse Riverdale.

**Mr. Lengerke:** Mr. Speaker I move that we now call it five o'clock.

**Ms. Millard** I will second that motion.

**Mr. Speaker:** It has been moved by the Honourable Member from Whitehorse Riverdale, seconded by the Honourable Member from Ogilvie, that we do now call it five o'clock. Are you prepared for the question?

**Some Members:** Question.

**Mr. Speaker:** Are you agreed?

**Some Members:** Agreed.

**Mr. Speaker:** I shall declare that the motion is carried.

*Motion Carried.*

**Mr. Speaker:** This House now stand adjourned until 10:00 a.m. Monday next.

*Adjourned*



Dear Mr. [Name]

I am writing to you regarding the [Topic]

As you are aware, the [Topic]

is a matter of great importance to us.

I am sure that you will understand the

importance of this matter and the need for

prompt action.

I am sure that you will be able to

assist us in this regard.

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I am sure that you will be able to

assist us in this regard.

Yours faithfully,

[Signature]

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