

JOURNALS
OF THE LEGISLATIVE ASSEMBLY
OF THE PROVINCE OF BRITISH COLUMBIA

SECOND SESSION 1973

Thursday, September 13, 1973

THREE O'CLOCK P.M.

This being the first day of the third meeting of the Thirtieth Parliament or Legislative Assembly of the Province of British Columbia for the dispatch of business, pursuant to a Proclamation of the Honourable JOHN L. FARRIS, Administrator of the Province, dated the 31st day of July 1973, the members took their seats.

Prayers by the Rev. *George Searcy*, B.C., B.D.

The Honourable WALTER S. OWEN, Q.C., LL.D., Lieutenant-Governor of the Province, having entered the House, took his seat on the Throne, and was pleased to deliver the following gracious Speech:

Mr. Speaker and Members of the Legislative Assembly:

Although I officiated at the closing of the Spring Session of the Legislative Assembly, this is the first time that I have had occasion as Lieutenant-Governor to address you on the opening day. I express the earnest hope that the wise counsel of my Ministers, and the support of Legislature, will result in continued progress and development for our Province during my term of office.

I desire to express at this time, on your behalf and on that of all British Columbia, our gratitude to my predecessor, Colonel the Honourable John R. Nicholson, for his unselfish and devoted service to the people of our Province.

Last May I was pleased to administer the Oaths of Office to the Honourable Graham Richard Lea, Minister of Highways; the Honourable Gary Vernon Lauk, Minister of Industrial Development, Trade, and Commerce; the Honourable Jack Radford, Minister of Recreation and Conservation; the Honourable Lorne Nicolson, Member of the Executive Council Without Portfolio; and to the Honourable Phyllis Florence Young, Member of the Executive Council Without Portfolio.

During the past year our Province welcomed a number of distinguished visitors. I note that in April the Right Honourable E. G. Whitlam, Prime Minister of Australia, was in Vancouver, and was welcomed to the Province by the Honourable the Premier. On June 23 and June 24, Mrs. Indira Gandhi, Prime Minister of India, visited Vancouver and Victoria and was a guest at Government House. In August the Right Honourable Lord Mais, the Lord Mayor of London, and the

Lady Mais, spent several days in the Province as guests of the Provincial Government and they were most impressed with our scenery and the warmth of the welcome extended to them by all with whom they came into contact. We were also honoured on August 13 with a visit to Victoria by the Right Honourable Norman E. Kirk, Prime Minister of New Zealand, and Mrs. Kirk.

It is my pleasure to welcome, among others, to the Assembly this afternoon two distinguished citizens of British Columbia, Chief and Mrs. William Matthews of the Haida nation of the Queen Charlotte Islands.

In August, British Columbia hosted, in New Westminster and Burnaby, the Second Canada Summer Games. Thousands of athletes from all the provinces and the Territories competed and the Games were an outstanding success. I am pleased to observe that our own Province did remarkably well in the Games and were declared the winners.

The death occurred on July 25, 1973, of the Right Honourable Louis Stephen St. Laurent. Mr. St. Laurent served as Prime Minister of Canada from November 15, 1948, until June 21, 1957. We all remember the distinguished service that he rendered to Canada and mourn his passing.

William James Asselstine, who was a former Minister of Mines, Minister of Trade and Industry, and Minister of Labour, died on August 21, 1973. Mr. Asselstine was elected from the Atlin Electoral District and served the Province well.

Last June the Honourable William Andrew Cecil Bennett resigned as Member for the South Okanagan Electoral District in the Legislative Assembly. Mr. Bennett served the Province for many years as a Member of the Legislative Assembly and for 20 years as Premier of the Province. At this time I would like to pay a special tribute to Mr. Bennett for the great contributions he made to this Province, and to wish him well.

At the by-election held last week, William Richards Bennett was elected to represent the South Okanagan Electoral District. I extend best wishes to the newly elected member who will take his place shortly in the House.

The past few months since I prorogued the House on April 18 last have been eventful, but no single action of my Government will have more importance than its participation in the Western Opportunities Conference in Calgary last July. This meeting of First Ministers of Canada and the Western Provinces was significant, not only for the precedent that was set, but for the clear and unmistakable start to a new role in Confederation for the West. Canada, the West, and our Province in particular, should feel proud of the role my Ministers played in that Conference and we are confident that this new stance, this new togetherness, augurs well for our nation. Supporting this new thrust I am pleased to praise formally a number of British Columbians who have made significant donations of land to the Crown. These actions from these pioneer families speak highly of their love for the Province, and as we see this return of the land to the people, my Government is hopeful that this will become a practice and other British Columbians will emulate this selfless action and increase our natural heritage through our growing parks system. I am therefore pleased to express our gratitude to John and Caroline Bergenham, Mrs. R. W. Starratt, Truman Dagnus Locheed, Clifford A. and Dorothy A. Gorby, Henry Gordon Ruckle, Mrs. Margaret Jane Pearse, and an anonymous donor who gave several acres of land near Hope.

Recently, my Government has seen fit to raise the Mincome level of the Province, to make provision for a programme of free prescription drugs for the elderly, and to extend the benefits of an income guarantee to many of our citizens

between 60 and 65. We trust that these unprecedented moves will be recognized by our sister provinces and Canada and that our Social Security and Health programmes will be fully supported.

In Ottawa last May, my Premier addressing his first Federal-Provincial Conference forecast my Government's concern and interest by directing all Canadians' attention to these Social Security and Health problems. Whatever may have been the inadequacies of the past, my Government desires to bring a new direction for British Columbia inside the Canadian Confederation and looks forward to open lines of communication with the Federal Government and provincial governments to ensure the co-operation and understanding which is necessary to meet the challenges of the day. In many cases these can best be met without undue regard to hard and fast jurisdictional lines so as to develop and execute national and provincial goals and policies designed to build a better Canada and provide a more meaningful life for all Canadians. Two of these national programmes which require a joint commitment by both levels of Government and a high degree of Federal-Provincial co-operation are the Social Security System in Canada and Health Care.

Since the close of the Second Session many of the Standing Committees of the House have been very active and the results of their labours will be before you shortly. I am confident that their work and advice, based on a real dialogue with our citizens, will provide an excellent base for legislative action.

In this Session you will be asked to direct your attention firstly to the urgent problems of agriculture and labour. My Government has undertaken considerable study and evaluation of this Province's agriculture industry. The very real problems of world food shortages and rising food costs, coupled with high investment costs and low farm income, are most apparent, and positive measures must be taken to strengthen and expand this vital food industry. The significance of the British Columbia agriculture and food industry to the ever-changing economy of this Province cannot be overlooked, and action must be prompt to ease the problems involved.

Therefore, you will be asked to consider legislation designed to rationalize credit systems of primary agriculture, and to encourage secondary and tertiary agriculture industries.

The Government intends to join with producers to minimize the effect of price fluctuation at the market place, and to provide means of achieving some stabilization of farm income.

New measures will be introduced which will provide for debt protection for the family farm under certain distress circumstances, due to natural calamities such as adverse weather. More control over the possible introduction and spread of infectious and contagious animal diseases will be considered.

These measures and others are to be presented for your consideration for the specific intent of providing incentive and encouragement to the agriculture industry of this Province.

You will be asked to consider a new Labour Code for British Columbia which will establish an improved framework for collective bargaining and dispute settlement. Industrial relations is essentially a term descriptive of human relations in the work environment. Healthy co-operative human relationships cannot be built on punitive concepts, distrust, or an unyielding bureaucracy, and remain compatible with a free society.

The Legislation, combining many statutes, will offer a variety of positive aids to collective bargaining which will be conciliatory in nature. Similarly, more

effective machinery will be established to ensure that settlement of disputes will occur in a just and expeditious manner, free from disruption to the economy. Completely new concepts are to be put forward in an effort to improve the industrial relations climate in the Province.

The Legislation will also recognize the sanctity of individual religious beliefs. A spirit of co-operation will be required by all those dedicated to free collective bargaining to match this new thrust and the Legislation will contain a real and positive challenge to all sectors of our community to see these objectives attained.

As my predecessor said on the occasion of the opening of the Second Session of the 30th Parliament in January, we are mindful of the high level of expectations that our citizens have from governments across the nation. To meet these expectations various announcements of Government plans have been made since that time. Accordingly, in two important fields, namely Consumer Affairs and Housing, you will be asked to consider departmental Acts and powers during these next few weeks. In addition, there will be an extensive legislative programme from the Department of Mines, and further amendments to both the *Public Schools Act* and the *Municipal Act*. Pension legislation will again be offered for amendment to provide improved benefits for widows of superannuants. The Public Service Labour Relations Bill introduced in the last Session will be brought forward again for your consideration.

These Bills, together with others that will be forthcoming, reflect the growing complexities and burdens of Government in these challenging times. Your advice will be required more frequently as predicted last January. Your work, together with the important work of the Standing Committees of the House, must produce the solutions to ease the pressures and problems that our citizens have and, as well, must ensure that the voices of all our citizens are heard loud and clear through their legislators.

The keen awareness and desire of all our people to protect our Province when and wherever environmental damage may occur is a continuing and pressing force on all our endeavours. The public's growing understanding of the importance of ecological matters demands that the fullest investigation and dialogue take place well before any proposed event. Accordingly, the Government has made plans to commence a full dialogue on energy sources. At the end of this year a seminar will start this dialogue and my Government has ensured that in this first event all points of view on nuclear power are represented. The Government has invited Professor Hannes Alfvén, Royal Institute of Technology, Department of Plasma Physics, Stockholm, Sweden; J. L. Gray, President, Atomic Energy of Canada Ltd., Ottawa; and Dr. John Gofman, Cardiodynamics, Vida Medical Systems, Dublin, California, to attend this seminar on nuclear power—its advantages, dangers, costs, and alternate sources of energy. All citizens will have access to these meetings. It is my Government's hope that this process will be the beginning of a new method of ensuring and facilitating citizen participation.

Mr. Speaker and Honourable Members, I leave you now. I pray that Divine guidance will attend your labours.

His Honour the Lieutenant-Governor was then pleased to retire.

The Speaker reported that, to prevent mistakes, he had obtained a copy of His Honour's Speech.

On the motion of the Hon. *A. B. Macdonald*, Bill (No. 1) intituled *Married Persons Equality Act* was introduced, read a first time, and *Ordered* to be placed on the Orders of the Day for second reading at the next sitting after today.

Mr. *Chabot* moved adjournment of the House to discuss a matter of urgent public importance relating to the British Columbia Railway.

Mr. Speaker stated that Standing Order 35, pursuant to which the honourable member sought leave to move adjournment of the House, contemplated an ordinary daily routine of business, but that on opening day the House was engaged in *pro forma* matters only.

Mr. Speaker further stated that an opportunity to discuss the matter raised by the Honourable Member for Columbia River would be available shortly, namely during the debate on the Speech from the Throne.

On the motion of the Hon. *David Barrett*, it was *Ordered*—

That the Speech of His Honour the Lieutenant-Governor be taken into consideration at the next sitting of the House, and that this Order have precedence over all other business, except introduction of Bills, until disposed of.

On the motion of the Hon. *Ernest Hall*, it was *Ordered*—

That the Votes and Proceedings of this House be printed, being first perused by Mr. Speaker, and that he do appoint the printing thereof, and that no person but such as he shall appoint do presume to print the same.

On the motion of the Hon. *David Barrett*, it was *Ordered*—

That the Select Standing Committees of this House as provided in Standing Order 68 (1) be appointed for the present Session, which said Committees shall severally be empowered to examine and inquire into all such matters and things as shall be referred to them by this House, and to report from time to time their observations and opinions thereon, with power to send for persons, papers, and records, and that a Special Committee be appointed to prepare and report with all convenient speed lists of members to compose the Select Standing Committees of this House under Standing Order 68 (1), said Committee to be composed of the Hon. *A. B. Macdonald*, the Hon. *R. M. Strachan*, and Messrs. *Dent*, *Richter*, and *D. A. Anderson*; provided that the members of the Standing Committees

- (1) on Agriculture;
- (2) on Forestry and Fisheries;
- (3) on Municipal Matters; and
- (4) on Social Welfare and Education

be named after the said Committees appointed at the last Session shall have severally made their respective reports to the House.

On the motion of Mrs. *D. Webster*, it was *Ordered*—

That *Hartley Douglas Dent*, Member for Skeena Electoral District, be appointed Deputy Speaker for this Session of the Legislative Assembly.

By leave of the House, on the motion of the Hon. *David Barrett*, the Rules were suspended and it was *Ordered*—

That Report No. 9 of the Select Standing Committee on Standing Orders and Private Bills, adopted by this House on February 27, 1973, relating to Oral Questions be adopted by this House for the present Session.

By leave of the House, on the motion of the Hon. *David Barrett*, the Rules were suspended and it was *Ordered*—

That on each Monday, Tuesday, Wednesday, and Thursday of this Session there will be two distinct sittings on each day: One from 2 p.m. to 6 p.m. and one from 8 p.m. until 11 p.m., and on each Friday there will be one sitting from 10 a.m. until 1 p.m., unless otherwise ordered.

The Hon. *David Barrett* (Minister of Finance) presented the following:

Abridged Public Accounts of British Columbia for the fiscal year ended March 31, 1973.

Report on Engineering Methods and Contract Administration, British Columbia Railway, August 1973.

A Review of Financial Reporting and Control Practices of the British Columbia Railway, August 1973.

Report on the Status of Management Controls and Organization, British Columbia Railway, June 1973.

Resolved, That the House, at its rising, do stand adjourned until 10 o'clock a.m. tomorrow.

And then the House adjourned at 3.46 p.m.

Friday, September 14, 1973

TEN O'CLOCK A.M.

Prayers by the Rev. *H. M. Hunter*.

Mr. *Chabot* moved adjournment of the House to discuss a matter of urgent public importance relating to the British Columbia Railway.

Mr. Speaker referred to the Journals of the House, 1969, at page 19, wherein Mr. Speaker *Murray* stated that “. . . the urgency motion has been refused when an ordinary parliamentary opportunity will occur shortly, permitting the question to be debated.”

Mr. Speaker expressed his opinion that as the House was presently engaged in the Throne debate, which debate had priority over all other business (except introduction of Bills), the opportunity to debate the matter already existed.

Mr. *G. H. Anderson* moved, seconded by Ms. *Sanford*—

That the following Address be presented to His Honour the Lieutenant-Governor:

“We, Her Majesty’s most dutiful and loyal subjects, the Legislative Assembly of British Columbia, in Session assembled, beg leave to thank Your Honour for the gracious Speech which Your Honour has addressed to us at the opening of the present Session.”

A debate arose.

On the motion of Mr. *Chabot*, the debate was adjourned to the next sitting of the House.

Resolved, That the House, at its rising, do stand adjourned until 2 o’clock p.m. on Monday next.

And then the House adjourned at 10.48 a.m.

Monday, September 17, 1973

TWO O’CLOCK P.M.

Prayers by the Rev. *W. J. Hill*.

By leave of the House, the Hon. *W. S. King* (Minister of Labour) made a statement relative to the settlement of the strike on the British Columbia Railway.

The Hon. *D. G. Cocke* presented to Mr. Speaker a Message from His Honour the Lieutenant-Governor, which read as follows:

WALTER S. OWEN
Lieutenant-Governor

The Lieutenant-Governor transmits herewith Bill (No. 2) intituled *An Act to Amend the Medical Grant Act*, and recommends the same to the Legislative Assembly.

Government House,
September 14, 1973

By leave of the House, Bill introduced and read a first time.
Second reading at the next sitting after today.

Order called for “Oral Questions by Members.”

Pursuant to Order, the House resumed the adjourned debate on the Address in reply to the Speech of His Honour the Lieutenant-Governor at the opening of the Session.

The debate continued.

On the motion of the Hon. *W. S. King*, the debate was adjourned to the next sitting of the House.

The Hon. *D. G. Cocke* (Minister of Health Services and Hospital Insurance) presented The Overall Medical Services Plan of British Columbia financial statements as at March 31, 1973.

By leave of the House, the Hon. *David Barrett* (Premier) presented the Report of the Comptroller-General to the Treasury Board on the effectiveness of the internal accounting procedures relating to costs and budgeting at British Columbia Hydro and Power Authority, February 1973.

Resolved, That the House, at its rising, do stand adjourned until 2 o'clock p.m. tomorrow.

And then the House adjourned at 5.31 p.m.

Tuesday, September 18, 1973

TWO O'CLOCK P.M.

Prayers by the Rev. *G. Smith*.

The Hon. *D. G. Cocke* presented to Mr. Speaker a Message from His Honour the Lieutenant-Governor, which read as follows:

WALTER S. OWEN
Lieutenant-Governor

The Lieutenant-Governor transmits herewith Bill (No. 10) intituled *An Act to Amend An Act Respecting Medical Services*, and recommends the same to the Legislative Assembly.

Government House,
September 17, 1973

By leave of the House, Bill introduced and read a first time.
Second reading at the next sitting after today.

Order called for "Oral Questions by Members."

Pursuant to Order, the House resumed the adjourned debate on the Address in reply to the Speech of His Honour the Lieutenant-Governor at the opening of the Session.

The debate continued.

On the motion of Mr. *Lewis*, the debate was adjourned to the next sitting of the House.

Resolved, That the House, at its rising, do stand adjourned until 2 o'clock p.m. tomorrow.

Ms. *Brown* presented the Final Report of the Select Standing Committee on Social Welfare and Education, as follows:

REPORT

LEGISLATIVE COMMITTEE ROOM,

September 18, 1973

MR. SPEAKER:

Your Select Standing Committee on Social Welfare and Education begs leave to report as follows:

The Standing Committee on Social Welfare and Education was called together on May 8 to study:

1. The present system of delivery of home care and related health services in this Province as follows:

- (a) To ascertain the relationship of reduced acute-care hospitalization and home care; and
- (b) To ascertain the relationship of need for extended care or special care where home care is provided.

2. Home care with a view to co-ordinating activities of the voluntary sector, the Health Department, and activities of the Department of Rehabilitation and Social Improvement.

3. Consider financing of all levels of home care.

4. Complete, as may be deemed necessary, the consideration of any matters referred to the said Committee during the present session of the Legislative Assembly.

The Committee sat a total of 14 days, from May 8 to 31, 1973. It visited eight towns and heard 150 presentations and briefs. As a result of these hearings the Committee has established that a properly integrated home care service can bring about the more orderly use of hospital beds at all levels of care. The key to the success of any programme, however, lies in the concept of "proper integration." No one programme or indeed number of programmes developed in isolation will achieve the desired goals. Consequently, "proper integration" must include co-ordination of all services, equitable coverage for all levels of care, expanded health care facilities, the training and the better use of available as well as additional personnel, in the delivery of the service.

This report has been divided into the five sections which represent the areas in which this Committee has decided to make its major recommendations. In addition, the Committee recognized that certain presentations made were outside its venue, accepted these presentations, and would like to submit some additional recommendations for the consideration of this House.

The five major recommendations are:

1. Home care programmes should be developed, particularly in the urban areas of British Columbia so that patients who can be treated efficiently at home will not be admitted to acute care hospitals unnecessarily and so that patients in acute care hospitals can be discharged sooner to complete treatment at home.

2. The provision of intermediate care must be given highest priority by the Provincial Government.

3. The *per diem* coverage of all patients in acute care, extended care, or intermediate care (regardless of whether they are in an institution or at home) should be equitable.* As well, patients treated at home should not be penalized and the necessary professional care of nurses, physiotherapists, technicians, and doctors, together with drugs and appliances, must be provided at the same cost to the patient as would apply if the patient were in an acute care hospital.

4. The Government should provide a pilot cost-free training programme for those students in medical, paramedical, and related fields, who upon graduation would be willing to accept assignments to one of the under- or unserved areas of the Province.

5. The proper and continued co-ordination of all health education and human resource services must be undertaken.

HOME CARE

Throughout the hearings of the Health Committee one prominent gap in the existing scope of hospital facilities was mentioned again and again in every community visited. That gap is the lack of appropriate facilities for the provision of intermediate care and the lack of any Provincial Government financial assistance to the patients receiving intermediate care, unless they are in receipt of social assistance.

Until recent years it was traditional that almost all patients requiring any type of hospital care were admitted and treated in an acute general hospital, so called. The patient remained there from the onset of the acute illness through all phases including convalescence. With the tremendous increase in the costs of building and operating acute care hospitals, it has become clear that in order to make efficient and economical use of such expensive facilities and in order to utilize taxpayers' dollars wisely, only patients in need of acute care should be treated there. When the truly acute phase of the illness has passed, the patients should be treated in some other appropriate facility where the care provided and the costs of that care are commensurate with the need of the patient.

With this realization has come the clearer awareness that patients suffer from differing levels or intensities of illness which, accordingly, require differing levels or intensities of care, in differing types of hospital. In brief, the challenge to planners of health services is to provide the appropriate level of care required by the patient, in the appropriate type of hospital or facility for the appropriate length of time, no more, no less.

As a result of this concept differing levels of care have been defined as follows:

Definitions

- A. *Acute care*—For patients requiring continuous physician and professional nursing care in an environment providing special diagnostic and treatment facilities.
- B. *Activation and rehabilitation*—For patients who can benefit from a planned and intensive programme or physical rehabilitation.
- C. *Extended care*—For patients requiring prolonged skilled nursing service 24 hours a day.
- D. *Intermediate care*—For patients requiring 24-hour-a-day personal care but not 24-hour-a-day skilled nursing service.

* Equitable—characterized by equity and fairness (as refined by The Shorter Oxford English Dictionary, Oxford: The Clarendon Press, 1936).

- E. *Boarding home*—For individuals requiring a protected environment without any medical services other than those usually provided for the general population.

It can well be argued that the levels of care as defined are artificial and that the condition of patients cannot be placed into such clearcut compartments. *This kind of bureaucratic approach, however, has been forced upon provincial governments for the very powerful reason that the Federal Government shares the costs of acute and extended care fifty-fifty with the provincial governments.* In order to decide the cases in which the costs will be shared by the Federal Government, some kind of classification and definition (however imperfect), of the care needed, has to be used. The resulting injustice which exists today is that patients receiving acute care or extended care pay \$1 per day (the remainder *per diem* cost ranging from \$20 to \$75 is paid by B.C. Hospital Insurance Service from tax-collected dollars). Patients requiring intermediate care receive no financial assistance whatever from the B.C. Hospital Insurance Service, unless they are in receipt of Social Assistance, in which case the Department of Human Resources pays the cost. The patient in the middle income group is severely penalized by having to pay the total cost, ranging from \$400 per month upwards.

At every town where hearings were held, it was made abundantly clear that there is a shortage of facilities for the provision of intermediate care and that very few patients can afford, for any length of time, to pay the costs involved of several hundred dollars per month. Time and time again the inequitable financing arrangements which now exist to favour the acute or extended care patients as compared to the intermediate care patients were emphasized. The outstanding inequity lies in the fact that the wealthy and the welfare recipient can receive the kind of care they require without serious financial difficulty, but patients in the middle income group requiring intermediate care are compelled to use up their life's savings. Spouses are often compelled to sell the family home to meet the cost of the required care.

The Committee was unanimous in its opinion that such an inequitable situation must end and that of all the proposals for improved health services to be brought forward by the Committee, the recommendations regarding intermediate care must be given the highest priority by the Provincial Government.

The Committee learned of the importance of locating different levels of care reasonably close to one another and where possible in the same building complex, since patients, as their condition changes, require to move from one facility to another. More specifically, this means that facilities should be located close to one another and in the ideal situation, the complex should provide a combination of self-care accommodation with some minimal supervision, intermediate care and extended care, the total complex being located in a fairly central part of the community, with proximity to shops, services, bus routes, and recreational facilities. This kind of desirable complex is exemplified by the project presently being developed in Penticton. When the patient proceeds with the passage of time to require a greater degree of care and supervision he or she can move from one facility to another within that complex, but still retain the companionship and support of friends living nearby. Easy access of friends and relatives to the elderly is a most important human consideration in the planning of appropriate facilities for *all* our senior citizens whether or not they require some measure of nursing care.

Where nonprofit organizations take initiatives by building intermediate care facilities, great care should be taken to prevent unreasonably high debt charges as was demonstrated very clearly to the Committee in the example of the Tom Uphill Home in Fernie.

Nursing Homes

Nursing homes require priority consideration. It is clear to the Committee from its hearings that the patient who has no choice but to seek care in a nursing home is a victim of discrimination in comparison to the patient receiving care in an acute care or extended care hospital. Not only is the financial burden severe, but in general (there are exceptions) these institutions are not accredited by any supervisory body as to the standard of care provided.

The ratio of R.N.'s to patients is less than that in acute and extended care hospitals, while non-R.N. staff are generally less well trained and have less experience. This is because, in general, the minimum wage only is paid to the nursing aides, a fact which in turn leads to a frequent turnover in staff in these nursing homes. The frequent turnover of staff has a severe effect on the elderly who not only need and depend upon the support of familiar faces, but also require continuity and consistency in the pattern of their care.

A nursing home programme has been in effect in Alberta for several years, which provides high-quality care and financial assistance to patients to meet the costs. Several citizens appearing before the Committee commented upon and praised the obvious merits of the Alberta Nursing Home Programme. Its operation by nonprofit organizations within a regionalized setting will be mentioned in the recommendations of this Committee.

In the field of *intermediate care* it is difficult to measure the existing amount of unmet need, or to project the steadily increasing need which results from an ever increasing survival of the elderly citizens, due to medical and scientific advances.

Some existing data is on record, however, and some estimates can be projected for the additional annual cost to the Provincial Government, if intermediate care coverage were to be provided (*see Appendix I*).

A flaw in trying to calculate costs, relates to the unmet need in our Province today. During Committee hearings it became clear many persons really requiring some measure of nursing care in an intermediate care facility, are presently being looked after in various residential facilities and boarding homes, usually because these elderly persons cannot afford the cost of a nursing home. They really do need the level of nursing care and supervision provided in a nursing home. If Government insurance coverage were made available for intermediate care, there would undoubtedly emerge a number of elderly persons, who require that level of care but are presently subsisting as best they can, in other types of accommodation where their general level of care does not meet their needs. The number probably equals the number presently receiving intermediate care in the nursing homes and private hospitals in the Province, that is 1,200. It is impossible, however, to define this figure accurately, but some such approximate figure should be considered when attempting to calculate the cost of providing intermediate care for all citizens who genuinely require it. Useful data could be obtained from the experience of the Alberta Nursing Home Programme.

Present Methods of Financing

The Committee heard various comments around the Province regarding the present method of financing extended care, in which the patient pays \$1 per day, when the actual cost averages \$21 per day.

Extended care provides for all the essential needs of the patient, with the exception of personal expenses such as clothes, toothpaste, shampoos, telephone calls, reading materials, and the like. The essentials such as food, shelter, heat, light, drugs, nursing, and medical care are provided for \$1 per day. This certainly would seem to give the extended care patient a great financial advantage, for example, over an elderly husband and wife, trying to meet all their needs on \$400 per month, while living in their own home and paying all the bills for food, shelter, heat, and light.

Some persons appearing before the Committee felt that the \$1 per day charge to the patient for extended care could be increased without hardship to the patient. However, the Committee is aware that this would apply only where the patient and spouse (or dependent) each receive \$200 per month. If extended care patients in this category were to pay a larger fraction of the actual cost of their care, this increased contribution would be available to finance the cost of providing intermediate care coverage in nursing homes.

In attempting to bring about fair equitable financing of all levels of hospital care, the Provincial Government should also review the present patient contribution per day for acute care.

Recommendations

1. The Provincial Government should provide financial coverage for intermediate care presently being provided in nursing homes and private hospitals.

2. The Alberta Nursing Home Programme, having been in successful operation for several years, should be studied closely. Members of the Select Standing Committee should visit Alberta, and with the ready co-operation of the Alberta Government, assess the programme as a basic model for a similar programme in British Columbia.

3. Hospital care facilities should not be operated for private financial gain. To this end, the Provincial Government in co-operation with nonprofit bodies should be responsible for the provision of intermediate care facilities. The capital costs could be provided on the same formula as exists for acute and extended care units, namely Provincial Government pays 60 per cent and local sources 40 per cent.

These facilities could be operated on the same basis as existing acute and extended care facilities, by local boards of management composed of some members elected locally and some appointed by local bodies and municipalities.

These facilities would come under the same system on inspection and supervision of standards as acute and extended care hospitals.

Planning and integration of such facilities for each region should be under the direction of regional hospital boards, since planning and creation of such facilities is but an integral part of the effective planning and creation of *all* the required hospital facilities for each region.

Coverage

The whole purpose of hospital insurance is to ensure that high-quality care is available to all who need it, and that no patient shall suffer financial hardship as a result.

The Committee proposes that extended care and intermediate care coverage be made available to qualifying patients at an equitable cost per day to the patient.

Home-care Services

Nursing and medical care provided in the home setting is an integral part of the total range of services which should be available to patients in our present society. Home care represents but one level of care in the total number of levels of care, as already defined.

It is an important level of care for two specific reasons. One, it is often the most appropriate place for the treatment, inasmuch that the patient is most contented and most comfortable in his or her own home and thus is most likely to respond well and secondly, in attempting to spend the health care dollar in the most judicious and economical fashion, if we make home care available it means that either the patient may avoid the disrupting and expensive experience of being admitted to hospital, or once in hospital may be able to be discharged sooner than otherwise, thus making the acute care bed available for another patient who really needs it.

In recent years patients have been led to believe that they can only be treated properly and efficiently within the confines of an acute care hospital. This is true only if they are acutely ill, but all illnesses are not acute and acute illnesses in the course of treatment becomes less acute and later convalescent, at which times it becomes reasonable and economically sound to treat the patient in the home, provided the appropriate nursing, medical, and paramedical support services are made available to the patient and family. As stated earlier, *modern health care programmes must provide the appropriate level of care, in the appropriate facility, for the appropriate length of time.*

When it becomes appropriate for the patient to leave the acute care hospital, acute care no longer being needed, the patient should not be penalized financially by receiving the subacute or convalescent care in the home. It is not equitable if the patient, paying \$1 per day in the hospital, is faced with the cost of nursing, physiotherapist, and paramedical services amounting to about \$25 per day in the home.

Present pilot programmes providing home care in certain parts of British Columbia have proved conclusively that patients can be discharged earlier from acute hospitals if the appropriate nursing, medical, and paramedical services are made available in the home.

The deficiency of the pilot programmes is that they *apply only to patients who are leaving hospital.* The programmes do not apply to patients who really do not need to be admitted to hospital if the required home care services were available to them in the first place.

Evidence provided to the committee in its hearings in several centres, made it very clear that if home care services were available two worth-while results would follow. One, many patients who might otherwise be admitted to an acute care bed would be treated comfortably, efficiently at home and secondly, patients who really did require an acute care bed could be discharged sooner to complete their treatment at home.

Both of these results are entirely contingent upon the necessary nursing, medical, and paramedical services being made available in the home, *at no financial penalty to the patient,* compared to the patient's expense while in hospital.

It was made clear to the committee repeatedly that the existing situation in which the hospital patient pays \$1 per day for total care, does not encourage, in fact discourages, the patient from completing treatment at home where the cost of nursing, physiotherapy, and medications may be at least \$25 per day. This figure is well below the daily cost of acute care, which in the cities of Vancouver and Victoria is now around \$75 per day.

In rural areas where the personnel required to provide the skilled home services may have to travel long distances, the net cost, if the registered nurse, the physiotherapist, the family physician, and homemaker are all involved, may well exceed the daily cost of care in the acute hospital. Experience shows that in such rural areas it would not only be more difficult to provide the required personnel, but the cost, depending on the range of home services required, might exceed the cost of acute hospital care.

In the urban areas, however, an integrated home care programme would undoubtedly enable more patients to be treated effectively and comfortably in their homes. These costs of home care must be met by Government financing in the same way that the patient's costs while in the acute care hospital are covered.

If home care programmes are adopted widely, one important consequence to the acute hospitals must be recognized. Patients when they are no longer acutely ill would be discharged to home care. Consequently, all or almost all of the patients in the acute care hospital would indeed be acutely ill and would require a great deal of care from nurses and paramedical personnel. There would thus be a need to increase the number of trained personnel, nurses, technicians, physiotherapists, and related professionals to cope with the needs of the patients, all of whom would be in the acute phase of their illness. *This would clearly result in an increase in the cost of operating acute care hospitals.* However, such hospitals are the most expensive to build and the most expensive to equip, but if all the patients in acute care hospitals were in fact acutely ill then this would represent the most efficient use of such expensive facilities and equipment. Furthermore, communities would not proceed as they have done in the past to construct more and more acute care facilities when the real need is to expand home care programmes as well as provide facilities for other levels of care such as intermediate and extended care.

And so while the cost of acute care would increase, the over-all per patient cost of providing the total range of levels of care would decrease. Most important of all, patients would be receiving the appropriate length of time, which must be the goal of all modern health care planning.

Recommendations

1. Home care programmes should be developed, particularly in the urban areas of British Columbia so that patients who can be treated efficiently at home will not be admitted to acute care hospitals unnecessarily and so that patients in acute care hospitals can be discharged sooner to complete treatment at home.

2. Patients treated at home must not be penalized financially. The necessary professional care of nurses, physiotherapists, technicians, and doctors, together with drugs and appliances, must be provided at the same cost to the patient as would apply if the patient were in an acute care hospital.

EQUITABLE COVERAGE

Persons on extended care in private hospitals or nursing homes (who are not receiving welfare) are responsible for the entire cost themselves. This is also true for patients requiring intermediate care, sent home after surgery, or having recovered sufficiently to leave hospital but still in need of daily nursing care. Private hospital costs can be prohibitive, but so can ancillary costs of home care. They may include any or all of the following—nursing, homemaker service, occupational,

speech, or physiotherapy, dietary counselling, meals-on-wheels. It may also include self-financing of dressings, supplies, and drugs, otherwise obtainable in the hospital.

It has been pointed out over and over that the use of acute care beds for intermediate and extended care is one of the things that tends to increase the cost of health services. However, it has alternately been suggested by doctors and paramedics that the exclusive use of acute care beds for acute care alone would not necessarily decrease the cost of the service, but it would release more acute beds for the purpose for which they are intended.

The cost of service of acute care patients is at its peak during the first three or four days, after which time it drops sharply. Thus, if the stay in acute care beds is shortened, it will mean more intensive usage by acute care patients, thus increasing the daily cost of these beds.

Recommendations

1. Where the patient does not require an acute care bed, but most attend the hospital for tests and (or) treatment, e.g., laboratory, X-ray, E.C.G., physiotherapy, etc., this level of care could be accommodated in a hotel or motel type unit, with the costs of such accommodation being borne by BCHIS.

2. That the *per diem* premium of all patients in acute care, extended care, or intermediate care (regardless of whether in an institution or at home) be made equitable.

3. That annual check-ups be included under medicare.

4. That ambulance costs should be equalized throughout the Province, regardless of distance; and that ambulance service between hospitals be paid for under BCHIS.

CO-ORDINATION OF SERVICES

The members of the Committee accept the fact that much of medicine is related to social needs. Yet everywhere that we travelled we found a proliferation and duplication of services, each operating with very little regard for, and in many instances very little knowledge of, each other or the clients whom they were serving. We found the liaison between the health services and the Department of Human Resources in all areas, although improving, to be at best fragile and tenuous, and as a consequence it was not unusual to find some persons being over-served while others received no services at all. In all instances it seemed that the level of paramedical or social service which a patient received was directly related to the patient's or to his or her doctor's knowledge of and ability to use existing resources. In the large urban centres where duplication of services was the most acute, this factor did not work in the best interest of the patient, but indeed the greater fragmentation resulted in more people falling between the cracks of services offered. Many of these "cracks" are being identified by LIP groups in the community, but their uncertain funding serves only to aggravate rather than improve the situation which they are attempting to alleviate, e.g., community transportation services, King Edward Project.

Recommendations

1. That there should be the co-ordination of social and health services on a local, regional, and Provincial basis. And, that integration of services should be undertaken in those instances where there is clear evidence of duplication. Services requiring mutual co-ordination include: Homemaker service, meals-on-wheels,

physiotherapy, occupational therapy, LIP and other volunteer services to the aged and handicapped, dental services, nutritional counselling services, hospital equipment loan, drug subsidy, and transportation.

2. That attempts be made to standardize the training and provision of all medical, paramedical, and related services on a Province-wide basis.

3. That a co-ordinator be attached to all hospitals whose responsibility it would be to design a co-ordinated plan of services for each patient leaving the hospital.

Homemaker Services

The Committee witnessed great discrepancies in the levels of organization, training, pay, and care offered by homemaker services throughout the Province. It recognized that the quality and calibre of the service offered was determined by the degree of co-operation maintained by the doctors, social workers, and their respective departments with the homemaker director as well as on the source and degree of funding which the service received. The Committee was very impressed by the variety of types of work which homemakers were being called upon to do—ranging from mother's helper to practical nurse and mental health aide. The Committee was also made aware that although there was Government financial aid for low-income families needing this service, that this aid was not extended to middle-income families even in those instances where this support would mean the difference between having the service or not. All the members of the Committee acknowledge that homemaker service is an indispensable component of any successful home care programme and would like to recommend:

1. Standardization of training for all homemakers—based on a curriculum designed on a continuum ranging from minimum training for those homemakers acting primarily as mother's helpers to maximum training for those homemakers administering basic nursing care. All homemakers should be registered, their training and experience taken into account, and their salaries adjusted accordingly.

2. In a case where the services of the homemaker are required such costs should be accepted as part of the medical treatment plan and consequently should receive coverage under BCHIS.

Services to the Physically Handicapped

Handicapped persons find that personal disabilities incur a great financial and emotional drain on their families as well as on themselves. It is the feeling of the Committee that society at large must share to a greater extent in the support and development of these children and adults. It therefore recommends that in providing home care, the Government take into consideration the delivery of (a) drugs and appliances (braces for children, etc.) and (b) vacation and transportation costs, in whole or in part, as part of its responsibility.

Recognizing that there are many handicapped persons who cannot live at home the Committee also recommends the development of greatly expanded residential and hospital facilities to meet the growing needs in this area.

LICENSING OF HOME CARE FACILITIES

In the interest of brevity, this segment of the report shall be submitted in outline form. It will list several observations first, then several improvements, and finally the conclusive recommendation of the Committee.

Observations

1. There is an urgent need for licensed homes for home care facilities.
2. The need is apparent in every facet of medical care but is most obvious in the field of care for the retarded and the mentally disturbed.
3. Private homes are available.
4. It is more desirable to place the convalescent patient into a "home" atmosphere than to place him in an institutionalized atmosphere.
5. Very few homes operate as a single-placement or one-patient home.
6. Some homes (noninstitutional) are enrolling as many as nine patients.
7. Licence procedures are taking as long as three years to complete.
8. A few homes are operating on interim permits.
9. Present licensing prerequisites are creating institutions out of otherwise desirable homes.
10. Some homes, otherwise ideal, do not qualify for licensing because of prohibitive cost of conforming to the code in areas such as: (a) window size, (b) exit lights, (c) extra doorways, (d) stair widths, (e) extra bathroom facilities, and (f) fire gongs.
11. Private homes, normally accommodating a family of seven or eight members are deemed inadequate for home care if more than two patients wish to receive care at that location.
12. Licence procedures require reports from several different officials, e.g., public health, fire inspector, electrical inspector, building inspector, human resources, municipal zoning, etc. Some of these officials reside in distant areas and co-ordination is a severe problem.
13. A home for four persons is judged by the same criteria as a residence for 300.
14. There is presently no provision under BCHIS for compensation for this level of care.
15. There is a lack of information on the receiving family.

Recommendations

1. A faster, more efficient system of licensing needs to be developed.
2. In determining suitability of a home, equal attention should be given to the suitability of the receiving family as well as to the facility itself.
3. Since the *per diem* operating expense of a licensed home care facility can work a hardship on smaller homes, the method of payments should be reviewed.
4. The *per diem* rate should be provided through the Health Department, preferably under the BCHIS.
5. Each home should enrol *only* as many patients as the facility or the family can endure, whichever is the lesser number.
6. Determining of the suitability should be accomplished by one or two persons, preferably an inspector of community services in conjunction with the local representative of the Human Resources Department.
7. Permits should be issued at the time of inspection or within a few days in order to help area representatives with their heavy load of referrals.
8. Prevailing local conditions should be considered in determining suitability of a family.

In conclusion, it is the consensus of this Committee that home care can and will provide a much needed level of medical care, and that home care will free 5 per cent to 10 per cent of the acute care beds presently being occupied by the patients who could better be cared for in a designated home.

Further, it is agreed that the licensing procedure for designating home care units needs proper revision. The present back-log of licence applications needs to be processed forthwith.

Finally, the committee would suggest that great consideration be given to placing home care under the financial responsibility of the BCHIS.

Pooling and Lending of Hospital Equipment and Drugs

The purpose of the hospital lending equipment would be the promoting of even better and faster patient care back in the home. Continuity, familiarity, a positive and congenial home atmosphere are crucial for healing.

To ease this transition from hospital to home, the hospital could ensure that its patients, when released, have the same essential medications, drugs, and equipment in their home until healed.

Hospitals' outpatient services are central to a community and already enjoy community recognition and support. A good deal of this is volunteer support through the Red Cross, Cancer Society, CARS, hospital societies, etc.

Recommendations

1. Existing hospital equipment needed for home care should be augmented, and a manager hired to keep inventory and co-ordinate a lending service in all hospital districts (the Prince George and other large hospitals already have a central supply depot that promotes the control, repair, and movement of equipment between hospital departments). Homes, private resthomes/hospitals, and nursing homes within a hospital district should be eligible for this equipment lending service. A small fee or deposit by the patient could be included as part of the service—but the fee should not hinder the home care option. If BCHIS could underwrite the capital costs, especially for the permanently handicapped—then parents of children with polio, cerebral palsy, and other handicaps could be relieved of the burden of canvassing for braces, shoes, and other equipment. There should be Federal cost-sharing of such a hospital centred and initiated home care equipment lending scheme.

2. Hospital districts should be more involved in pooling and sharing ambulance services as well as other types of service transportation which would be of value to handicapped, OAP, and low-income groups in the community.

3. The hospital pharmacy should become more vital in the home care service. The British Columbia Purchasing Commission could make bulk purchases of generic drugs and keep a master "drug bank" in Victoria, Vancouver, and Prince George. The Hospital Pharmacy could then be in a position to resupply dressings and drugs to authorized patients.

4. The practice of cancer patients receiving dressings from the Cancer Society stations in most hospitals should be continued and encouraged.

Conclusion

The Committee recognizes that the implementing of a wise comprehensive home care service in this Province will take time and will necessitate the expenditure of large sums of money. It also recognizes that the most fundamental barrier to this implementation lies in the present Federal and Provincial cost-sharing system. It accepts that the real responsibility of the Province is to design and supervise the delivery of a total health care service, and accepts that it is often impossible to do so satisfactorily because of the present funding system. Therefore, the Committee

recommends that a first step in the delivery of a comprehensive home care service be the review and restructuring of the present Federal/Provincial cost-sharing formula.

All of which is respectfully submitted.

ROSEMARY BROWN, *Chairperson*

APPENDIX I

As of December 31, 1972, there were 2,979 patients in private hospitals and nursing homes. For ease of calculation a round figure of 3,000 will be assumed. Government studies show that the condition of approximately 60 per cent of these patients qualified them for care in an extended care hospital, if such extended care beds were available, i.e., 1,800 patients. At present, 305 extended care beds are under construction, 948 are being planned. The average daily cost of care in an extended care hospital is \$21. Thus, the projected annual cost of care for those 1,800 patients now in private hospitals, but qualified for extended care coverage would be: $1,800 \times 365 \times \$21 = \$13,797,000$.

However, 42 per cent of these patients are presently on welfare, with the Provincial Government paying \$11.95 per day to the private hospitals for their care, i.e., 42% of $1,800 \times 365 \times \$11.95 = \$3,311,280$.

Hence the *net* increase in annual costs of providing extended care coverage to these 1,800 patients will be: $\$13,797,000 - \$3,311,280 = \$10,485,720$. This is the sum the Government is committed to, once the required extended care beds are built.

Of the 1,200 patients in private hospitals who do *not* qualify for extended care coverage approximately 42 per cent (504) are on welfare. The present annual cost to the Government is, therefore, $504 \times 365 \times \$11.95 = \$2,207,502$.

If *ALL* intermediate care patients were covered at the rate of \$11.95 per day, the additional annual cost to Government would be for 696 patients ($1,200 - 504$), i.e., $696 \times 365 \times \$11.95 = \$3,048,480$.

One serious flaw in these calculations lies in the fact that \$11.95 is not a realistic figure for the daily cost of intermediate care, if good quality care is to be provided. This present minimal figure encourages the employment of low-paid poorly trained staff, resulting in a low standard of care.

The average daily cost of extended care is \$21 and while the intensity of care required by intermediate care patients is less than for extended care, it is doubtful if good quality intermediate care can be provided for \$11.95 per day.

PROJECTED PROVINCIAL GOVERNMENT COSTS OF INTERMEDIATE CARE

	<i>At \$11.95</i>	<i>At \$15</i>
For patients now paying privately.....	\$3,048,480	\$3,810,600
For probable 1,200 persons who might qualify.....	\$5,256,000	\$6,570,000
Total	\$8,304,480	\$10,380,600

Thus, in round figures, the increased costs which would be incurred by providing intermediate care coverage would approximate \$10,000,000 per year.

As of July 30, 1973, the number of extended care beds available in the Province totals 3,029.

If the contribution by the patient were raised from \$1 per day to \$3 or \$5 per day, certain additional sums of money would be available for the financing of intermediate care.

PATIENT CONTRIBUTIONS FROM EXTENDED CARE BEDS, ANNUALLY

Present contribution at \$1 per day.....	$3,029 \times 365 \times \$1 =$	\$1,105,585
Projected contribution at \$3 per day.....	$3,029 \times 365 \times \$3 =$	\$3,316,755
	<i>Projected Increase of Contributions =</i>	<i>\$2,211,170</i>
Projected contribution at \$5 per day.....	$3,029 \times 365 \times \$5 =$	\$5,527,925
	<i>Projected Increase of Contribution =</i>	<i>\$4,422,340</i>

If the probable total number of intermediate care patients also paid \$5 per day, their contribution would total:

$$1,896 \times 365 \times \$5 = \$3,460,200$$

Therefore, if extended care and intermediate care patients paid \$5 per day, the annual sum of money contributed by these patients would be:

$$\$4,422,340 + \$3,460,200 = \$7,882,540$$

One-half of this (\$3,941,270) would be offset revenue since Federal contributions of 50 per cent are calculated AFTER patient contributions have been deducted from total costs.

The NET increase in cost to the Provincial Government would be:

$$\$10,380,600 - \$3,941,270 = \$6,439,330$$

APPENDIX II

Pilot projects in home care are being experimented with in Vancouver and Victoria. Home care appears to be used to a greater extent than ever before and looked upon with favour as a suitable alternative to hospital care (whether private or public). Doctors and nurses seem to agree that most patients, under normal circumstances, are happier and recover more rapidly at home.

In Victoria, 50 per cent of all surgery is done on a day care basis.

Home care for diabetic is now being used in Victoria and through Lions Gate Hospital in North Vancouver.

Simon Fraser Health Unit (Vancouver) has worked on a pilot project of home care. This home care project is restricted to patients who can save hospital days. Time limits set for home care are equivalent to the approximate number of hospital days that would be saved. Extension of time for care can be given on recommendation of the doctor or co-ordinating nurse. Seven hundred and fifty-four (754) patients have participated in the programme over a six-month period; the cost average approximately \$9.86 *per diem* (Hansard—Vancouver Hearing p. 16). Compared to this the cost of an acute care bed in Royal Columbian Hospital was quoted between \$71 and \$75 *per diem*. The services for the home care project include nursing, homemaker, meals-on-wheels, physiotherapy, drugs, dressings, transportation. All patients receive these services as needed, but not all were needed by each patient.

It was suggested that a programme of this type could reduce pressure on hospital beds by as much as 10 to 20 per cent.

This type of programme could be expanded to take people before they are admitted to hospital. This is particularly applicable to extended care patients not requiring intensive treatment and wishing to remain in their own homes.

If home care were underwritten and the volume increased, the programme of ancillary service teams would have to be stepped up. It is fair to say that if home care were provided to give quality intermediate care, there would necessarily be a financial outlay. It would be unjust if it were to be borne by the family involved.

APPENDIX III

Members of the Standing Committee on Social Welfare and Education—Ms. Rosemary Brown, Chairperson; Mr. Peter Rolston, Secretary; Mr. Emery Barnes; Mr. Colin Gabelmann; Hon. Gary Lauk; Mrs. Daisy Webster; Hon. Dennis Cocke; Hon. Eileen Dailly; Hon. Norman Levi; Mrs. Pat Jordan; Mr. Robert McClelland; Mr. Harvey Schroeder; Mr. David Brousson; and Mr. G. Scott Wallace.

APPENDIX IV

The Standing Committee on Social Welfare and Education would like to acknowledge receipt of the following briefs and heartily thank all those individuals who helped to make the tour such a success.

PRINCE GEORGE

Cariboo Memorial Hospital, Williams Lake; G. R. Baker Memorial Hospital, Quesnel; Home Care Delivery Systems, Prince George and District Hospital Society; Northern Interior Health Unit, Facility for Handicapped Children, Home Care Projects, Meals on Wheels, Nursing Care Programme; 100-Mile House District Hospital; Mrs. Janet Wilson.

KELOWNA

Advice Service Kelowna, Committee of the Central Okanagan Social Planning; Boarding Home Management; Community Services, Meals on Wheels; Co-operative Community Services, Penticton and District Health and Welfare Association; Curriculum Model for Family Life Education, South Okanagan Health Unit; Family Life Education in Kelowna; Geriatric Care, South Okanagan Union Board of Health; Home Care Pilot Project, Kamloops; Homemakers Service Association of the Kootenays, Mrs. P. Orton; Intermediate Care Demonstration Project,

Kelowna; Intermediate Care Facilities in the Vernon Area, Registered Nurses' Association of B.C.; Kelowna Homemaker Service; Kootenay Society for Handicapped Children; Mental Health Centre, A. I. Holmes; Mental Health Centre, Model for Family Life Education in Kelowna, Dr. Barnes; Penticton Regional Hospital; Penticton and District Retirement Service; Penticton and District Health and Welfare Association; Project Integration; Royal Inland Hospital, Utilization Team Report; South Okanagan Health Unit, Annual Report; South Okanagan Nursing Care Programme; South Okanagan Health Unit Licensing of Community Care Facilities; Stillwaters Private Hospital, Kelowna; The Community Resources Model vs. The Medical Resources Centre Model, Department of Human Resources.

CRANBROOK

Creston Valley Homemaker Services; East Kootenay Health Unit; Home Care, Cranbrook Homemaker Service; Kimberley and District Homemakers Society.

ABBOTSFORD

Boarding Home Care, Maple Ridge Mental Health Centre; Boarding Home Programme, Mental Health Branch; Central Fraser Valley Homemaker Service Society; Community Health Needs Inventory, Chilliwack Medical Society; Community Services, Matsqui and District of Abbotsford; Home Care and Related Health Services, Mr. A. E. Bingham, Department of Human Resources; Home Care and Related Health Services, Maple Ridge Hospital Association; "Home Care," Chilliwack Community Services; Introduction of the Integrated Complex, Mennonite Benevolent Society; Maple Ridge-Pitt Meadows Homemakers Service; Matsqui-Sumas-Abbotsford General Hospital; Meals on Wheels, Ms. C. P. Bell; Medical Staff, Mission Memorial Hospital; MSA Community Services, Mission Community Services, Volunteer Bureau's Home Care Programme; Mount Cheam Senior Citizens Association; Proposal for a Home Aide Programme Utilizing the Presently Existing Homemaker Service Programme, Central Fraser Valley Mental Health Centre; Public Health Nurses of Central Fraser Valley Health Unit; Public Health Nurses of the Upper Fraser Valley Health Unit; Upper and Central Fraser Valley Health Units; Upper Fraser Valley Health Unit Annual Report; Volunteer Instruction Programme.

VANCOUVER

Adult Day Care Centre, North Shore; A. R. Edwards, Priest of St. Catherine's Anglican Church Council, Port Coquitlam; Association of B.C. Homemaker Services; Association of Physiotherapists and Massage Practitioners, Home-visiting Mental Patients Association; B.C. Homemakers' Manual, Suggested Guide; Canadian Arthritis and Rheumatism Society, Home Care; Canadian Red Cross Society, Homemaker Service; Cedar Cottage Neighbourhood Services, Community Care Programme for Elderly; Cedar Cottage Neighbourhood Services, Provision of In-home Care for Sick Children; Central Vancouver Island Health Unit, Home Care; CELDIC Report to British Columbia; Cerebral Palsy Association of B.C. Home Based Programme for Physically Handicapped; Charles Grierson, Director of Hospital Planning, Greater Vancouver Regional Hospital; Child Care Occupation Forces; Coast Foundation Society, Annual Report; Coast Foundation Society, Field of Mental Health Care; Department of Homemaker Services, Family Service Centres of Greater Vancouver Area; Department of Human Resources, Mission, Fraser Valley; Family Planning Association of British Columbia; Home Care Service for Greater Vancouver; Homemaker Training Course at Vancouver Vocational Institute; Langley Homemaker Service Society; Legislative Committee on Social Welfare and Education, Travel; Lower Mainland Society for Residences for Physically Handicapped; Medox, Medical; Mental Patients Association, Vancouver; Milton Weber; New Westminster-Coquitlam Home Care Project; New Westminster Red Cross Homemaker Service; Neighbourhood Services Association of Greater Vancouver, West End Senior Citizens; Pastoral Institute of British Columbia; Port Coquitlam City Council; Public Hearings, Health Unit 5; REACH Geriatric Nutrition; Social Planning and Review Council of British Columbia, Home Care; Social Planning and Review Council of British Columbia, Community Service Board; Status of Women Council; UBC, Programmes for Elderly Citizens of British Columbia; UBC School of Physical Education and Recreation; United Community Services of Greater Vancouver Area, North Shore Division, Home Care; United Community Services of Greater Vancouver Area, North Shore, Human Resources; United Housing Foundation; Vancouver General Hospital, Community Health Programme; Vancouver General Hospital Social Service Department, Home Care; Vancouver Women's Health Collective; Vancouver General Hospital, Department of Occupational Therapy, Community Health; Victorian Order of Nurses, Surrey-White Rock Branch, Homemaker Services; Vancouver General Hospital, Home Care; Victorian Order of Nurses, North Shore Branch, Home Care; VON Homemaker Service, Homemaker's Manual; Welfare and Rehabilitation Department, Intermediate Care; Women's Christian Temperance Union Vancouver District, Alcoholism and Drugs.

COURTENAY

Charles Hughes, Red Cross Loan Cupboard; Comox Valley Friendly Visitors Service; Comox Valley Homemaker Service, Past, Present, and Future Development; Comox Valley Meals on Wheels; Comox Valley Medical Society, Dr. W. O. C. Young; Delivery of Home Nursing Care, Mrs. L. Hammett, R.N.; Family Counselling Service, Campbell River; Home Nursing Care Programme, Courtenay; Mrs. Jeanie Harder, Consultant Physiotherapist; Old Age Pensioners' Organization.

NANAIMO

Adult Group Living Homes for the Retarded, Nanaimo Association for the Mentally Retarded; Children's Treatment Centre, Nanaimo Neurological Association; Forward Housing Project, Faye Griffith; Home Care, Central Vancouver Island Health Unit; Homemaker Service, Red Cross Nanaimo Branch; HOPE Centre for the Handicapped, Nanaimo; Meals on Wheels, Pearl Griffin; Nanaimo Council of Churches, Mr. Art Griffin; Port Alberni and District Labour Council; Public Health Nursing Services; Registered Nurses for Home Care, Nanaimo Local Council of Women; Request for Assistance to Improve Care for Incapacitated Persons in School District No. 69, District No. 69 Society of Organized Services; Mr. Oliver Travers.

VICTORIA

A Multi-service Centre Devoted to the Needs of the Elderly, Silver Threads Service; B.C. Federation of Labour; B.C. Voice of Women; Citizens Association to Save the Environment; Coast Foundation Society; Community Care Facilities Licensing Programme, Mental Health Branch; Crisis Intervention and Public Information Society of Greater Victoria; Delivery of Home Care in Greater Victoria Area, Greater Victorian Metropolitan Board of Health; Delivery of Retardation Services, Victoria Mental Health Centre; Greater Victoria Citizens Counselling Centre; G. R. Pearkes Clinic for Handicapped Children; Health Care and Aging Unit, Vancouver Welfare and Rehabilitation Department; Home Care Services, Department of Health Services and Hospital Insurance; Private Agency Committee; Scientific Research on Transcendental Meditation; St. John Ambulance, Patient Care Course in Nursing and First Aid; The Financial Potential of Our Students, M. W. Scott; The Victoria Home Care Project; Victorian Order of Nurses.

By leave of the House, the report was taken as read and received.

By leave of the House, the Hon. *David Barrett* (Premier) presented documentation relating to agreements between the Government of British Columbia, B.C. Cellulose, and Canadian National Railways.

And then the House adjourned at 5.37 p.m.

Wednesday, September 19, 1973

TWO O'CLOCK P.M.

Prayers by the Rev. *R. Holmes*.

Mr. Speaker made the following statement:

Honourable Members,—On the 5th day of June 1973 I did receive a declaration from the Hon. *William Andrew Cecil Bennett*, Member for the Electoral District of South Okanagan, of his resignation of his seat in the Legislature.

Pursuant to section 55 of the *Constitution Act*, being chapter 71 of the *Revised Statutes of British Columbia, 1960*, I did transmit to *L. J. Wallace, Esq.*, Deputy

Provincial Secretary, my warrant for the issue of a new Writ for the election of a member to fill the vacancy in the said Electoral District of South Okanagan.

The letter of the Deputy Provincial Secretary and the certificate of the Chief Electoral Officer of the result of the election of a member were read by the Deputy Clerk, as follows:

“OFFICE OF THE DEPUTY PROVINCIAL SECRETARY,
“VICTORIA, B.C., September 19, 1973

“*Mr. Ian M. Horne, Q.C.,*
“*Clerk of the Legislative Assembly,*
“*Parliament Buildings, Victoria, B.C.*

“*Re By-election, South Okanagan Electoral District, September 7, 1973*

“SIR,—I enclose herewith certified copy of the certificate of Mr. K. L. Morton, Chief Electoral Officer, respecting the election of William Richards Bennett to represent the South Okanagan Electoral District in the Legislative Assembly.

“Yours very truly,

“L. J. WALLACE
“*Deputy Provincial Secretary*”

(ENCLOSURE)

“CHIEF ELECTORAL OFFICER, REGISTRAR-GENERAL OF VOTERS,
“VANCOUVER, B.C., September 19, 1973

“*Mr. L. J. Wallace,*
“*Deputy Provincial Secretary,*
“*Parliament Buildings, Victoria, B.C.*

“*Re By-election, South Okanagan Electoral District, September 7, 1973*

“SIR,—The resignation, effective June 5, 1973, of William Andrew Cecil Bennett, the elected Member for the South Okanagan Electoral District, caused a vacancy to occur in the Legislative Assembly.

“A Writ, calling for a by-election to fill that vacancy, was issued on August 1, 1973, polling day being September 7, 1973.

“From the Writ now returned to me, I hereby certify the election of William Richards Bennett as the member to represent the South Okanagan Electoral District in the Legislative Assembly.

“Yours truly,

“K. L. MORTON
“*Chief Electoral Officer*
“*and Registrar-General of Voters*”

On the motion of the Hon. *Ernest Hall*, it was *Ordered*—

That the letter of the Deputy Provincial Secretary and the certificate of the Chief Electoral Officer of the result of the election of a member be entered upon the Journals of the House.

Mr. *William Richards Bennett*, having taken the oath and signed the Parliamentary Roll, was introduced by Mr. *Richter* and Mr. *Chabot*, and took his seat.

On the motion of Mr. *Gardom*, the following Bills were introduced, read a first time, and *Ordered* to be placed on the Orders of the Day for second reading at the next sitting of the House after today:

Bill (No. 13) intituled *Crown Proceedings Act*.

Bill (No. 14) intituled *British Columbia Ombudsman*.

Bill (No. 15) intituled *British Columbia Auditor General*.

Bill (No. 16) intituled *Public Scrutiny*.

Order called for "Oral Questions by Members."

Pursuant to Order, the House resumed the adjourned debate on the Address in reply to the Speech of His Honour the Lieutenant-Governor at the opening of the Session.

The debate continued.

On the motion of the Hon. *W. L. Hartley*, the debate was adjourned to the next sitting of the House.

Resolved, That the House, at its rising, do stand adjourned until 2 o'clock p.m. tomorrow.

35 Mr. *McClelland* asked the Hon. the Provincial Secretary the following questions:

1. What was the total number of persons receiving either salary or wages from the Provincial Government as at July 31, 1972?

2. What was the total number of persons receiving either salary or wages from the Provincial Government as at July 31, 1973?

The Hon. *Ernest Hall* replied as follows:

"1. July 31, 1972, 34,045.

"2. July 31, 1973, 39,860.

"NOTE—These figures do not include persons receiving salary or wages in Crown corporations."

36 Mr. *McClelland* asked the Hon. the Provincial Secretary the following questions:

1. What was the total number of employees within the Civil Service of the Province of British Columbia on August 31, 1972?

2. What was the total number of employees within the Civil Service of the Province of British Columbia on August 31, 1973?

The Hon. *Ernest Hall* replied as follows:

"1. August 31, 1972, 34,085.

"2. August 31, 1973, 40,579."

And then the House adjourned at 5.54 p.m.

Thursday, September 20, 1973

TWO O'CLOCK P.M.

Prayers by the Rev. *L. M. Carlson*.

On the motion of the Hon. *D. D. Stupich*, the following Bills were introduced, read a first time, and *Ordered* to be placed on the Orders of the Day for second reading at the next sitting of the House after today:

Bill (No. 3) intituled *An Act to Amend the Veterinary Medical Act*.

Bill (No. 5) intituled *An Act to Amend the Agricultural Land Development Act*.

Bill (No. 7) intituled *An Act to Amend the Milk Industry Act*.

Bill (No. 8) intituled *An Act to Amend the Oleomargarine Act*.

On the motion of Mr. *Richter*, the following Bills were introduced, read a first time, and *Ordered* to be placed on the Orders of the Day for second reading at the next sitting of the House after today:

Bill (No. 17) intituled *Guaranteed Minimum Income Plan*.

Bill (No. 18) intituled *Guaranteed Income Act*.

Bill (No. 19) intituled *An Act to Amend the Income Tax Act*.

Order called for "Oral Questions by Members."

Pursuant to Order, the House resumed the adjourned debate on the Address in reply to the Speech of His Honour the Lieutenant-Governor at the opening of the Session.

The debate continued.

During the debate, by leave of the House, Ms. *Brown* tabled briefs and letters presented to and received by the Select Standing Committee on Social Welfare and Education.

The debate continued.

On the motion of the Hon. *A. B. Macdonald*, the debate was adjourned to the next sitting of the House.

Mr. *G. H. Anderson* presented the Final Report of the Select Standing Committee on Agriculture, as follows:

REPORT

LEGISLATIVE COMMITTEE ROOM,

September 20, 1973

MR. SPEAKER:

Your Select Standing Committee on Agriculture begs leave to report as follows:

The Select Standing Committee on Agriculture, in accordance with the following resolution passed by the 1973 Spring Session of the Legislature, held five weeks of hearings in the Province:

That this House authorize the Select Standing Committee on Agriculture, upon prorogation of the House, to examine into and study the following matters, namely:

- (1) Complete its investigation of tree-fruit marketing in British Columbia;
- (2) Investigate vegetable growing and marketing practices in Interior and Coast regions with a view to improving economic return;
- (3) Investigate range use with regard to wildlife, domestic animals, and the forest industry;
- (4) Consider such facets of the agricultural potential of the Peace River area as the Committee may deem appropriate;
- (5) Investigate availability of pension plans for those employed in the farming industry.

The chairman of the said Committee shall, between sessions, file with Mr. Speaker a monthly report setting forth particulars of the meetings and a general statement of the activities and expenses of the Committee during the preceding month.

During the week of June 11 to June 15, the Committee held public hearings in Cranbrook, Creston, Grand Forks, and Oliver. The week of June 18 to June 22 hearings and orientation tours were held in Kelowna, Salmon Arm, and Kamloops. During the period of July 3 to July 19, hearings and tours were held in Williams Lake, Vanderhoof, Smithers, Fort St. John, and Dawson Creek. During the visit to Dawson Creek the Committee visited the Vocational School Farm, community pastures, operating ranches, and had a most informative trip to Beaverlodge, Alberta, to visit the Federal Experimental Farm and received valuable information on all facets of work being done with regard to agriculture in the Peace River area. In all cases extensive field trips were made by the Committee to view farms, ranches, and food-handling plants in company with Department of Agriculture personnel and local people engaged in one branch or another of the agriculture industry. This format was followed throughout the tour with transportation being supplied for the most part by District Agriculturalists and Forestry Agrologists.

The Committee wishes to express appreciation to these Government employees for their long hours of work and helpful information offered whenever needed.

Approximately 70 briefs were received from persons engaged in one phase or another of the fruit-growing and marketing industry. Thirty-one briefs were received on multirange use, 14 briefs were received on the vegetable production and marketing, and 15 briefs received on the agricultural potential of the Peace River area.

The week of August 27 to August 31 saw the Committee hold hearings in the City of Penticton in connection with our investigation into British Columbia tree-fruit marketing. Appearing before the Committee was a cross section of the wholesale and retail segment of tree-fruit marketing, representatives of United Fruit Growers, Allied Fruit Growers, British Columbia Tree Fruits Ltd., British Columbia Fruit Growers' Association, and the British Columbia Fruit Board.

Throughout the Committee's study, a matter of paramount concern was the fact that the larger percentage of the agriculture industry has limited means of increasing returns to meet rising costs. All costs for equipment, labour, fertilizers, transportation, interest on both operating capital and money for capital investment, etc., have risen to the extent that many farmers have found it impossible to operate a viable enterprise. Some owners were supplementing their farm incomes by outside employment while a few were forced to have entered employment elsewhere while their lands lay idle.

It was observed by the Committee that the average age of farmers in British Columbia is over 50 years. In answer to questioning as to why more young people were not entering agriculture many reasons were given, the most common were

- (1) not sufficient return for invested capital and labour;
- (2) the high cost of land and equipment;
- (3) the high interest rate for money to finance a farm, orchard, or ranch, or to convert to a higher return operation.

Some farmers volunteered their own interest costs and total annual debt load which so often made the difference in whether an operation returned the costs of production. The Committee is convinced that this is one of the most serious impediments to a successful agricultural industry in the Province.

MULTIRANGE USE

The Committee found that with regard to the multiuse of range land, there were many complaints from ranchers that the Forestry Department, who are responsible for grazing permits for cattle, were not sympathetic to the cattle industry and were more oriented to growing trees rather than grass. In the Kamloops area, the Committee found an excellent beginning of combined tree reforestation and the seeding of grass in clear cut areas and a good relationship between the Forestry Agrology Department and the ranchers. Unfortunately, these instances were too few.

All ranchers and their associations expressed concern about the lack of guaranteed tenure in the grazing permits that are issued for a one-year period. They felt that the ranching community would spend time and money in co-operation with Government to fertilize, seed, and generally improve range land to accommodate more stock, if they could be assured in some way that their grazing rights would be of longer duration.

Briefs were heard from Fish and Wildlife personnel in Williams Lake and Fort St. John expressing their concern about grazing for wild ungulates. Ranchers, Fish and Wildlife people, Forestry personnel, and Forestry Agrologists all agreed that there was room for stock, wildlife, recreation, and trees on Crown land with proper management and more co-operation among the departments concerned.

RECOMMENDATION

1. The Ministers of the Environmental and Land Use Committee should meet as frequently as necessary to decide the best use of Crown land in each area of the Province. Where a decision is made for single use, the appropriate department should administer that particular region of land.

2. Where a decision is made for multiple use, the management of the grazing lands and allocation of grazing permits in these instances should be administered by the Department of Agriculture. Every effort should be made to involve the local stockmen and their associations.

Tenure

The Committee recommends that the present lease system for grazing should be phased out and replaced by an annual permit system, including a right of renewal written into the permit, providing the permittee lives up to the terms and conditions established by the Department of Agriculture. No permit areas should be transferred between permittees on herd readjustments. In the case of herd reductions the animal unit months shall revert to the Department of Agriculture for reissue.

PROPOSED SHEEP-KILLING PLANT

The Select Standing Committee on Agriculture was made aware of the desire of sheep ranchers to have a centrally located lamb-slaughtering plant. It was pointed out that if such a plant were not built the sheep ranching industry in Canada could disappear. At the present time, only one company carries out this work, as the equipment needed is different from the usual plant in order to have an economic operation. The Committee was informed that the Federal Government and the Government of Alberta have agreed to assist in the funding of such a plant at Innisfail, Alberta, and studies have been carried out in England on a modern plant specializing in this operation.

RECOMMENDATION

It is recommended that the British Columbia Government give consideration to participating with the Alberta Government and Federal Government in funding this proposed plant if it is found to be more practical than locating one in British Columbia. Any arrangement must ensure that British Columbia producers have continued access to the facilities.

PENSIONS FOR FARMERS

The Committee found that in a general way there was not much interest in additional pensions for farmers. Many farmers testified they were unable to make full contributions allowed to the Canada Pension Plan and in some cases none at all. Those few who showed interest indicated they would prefer to have the terms of a pension plan to study before they could decide whether they would be interested or not. In general terms, farmers and ranchers stated they would prefer to have an adequate return for their investment and labour, and would take care of their own retirement and use present plans available.

The Committee is aware that a study of the matter has been undertaken by the British Columbia Federation of Agriculture with funds provided by the Provincial Government and recommend consideration be deferred until that study is completed.

AGRICULTURAL POTENTIAL OF PEACE RIVER

In the opinion of the Committee, the Peace River area has great potential to be a much larger producing area than it is. This was one of the last areas to be homesteaded in Canada and land is still being taken up by the method known as "lease-purchase" with certain performance qualifications leading to purchase of land. This means that the area was settled and is still being settled by people who, in a majority of cases, do not have enough investment and operating capital. In the opinion of the Committee and many people engaged in agriculture this has led to many farmers growing crops that are not necessarily suited to the area, but have the potential of the greatest cash return to repay operating loans at the end of the growing season.

The Committee believes that there is a great potential for the raising of beef, lamb, and pork in the Peace River area, and that every effort should be made to encourage farmers to take up stock-raising as opposed to 100-per-cent grain growing. It is felt that the Peace River District could raise stock to a finished animal for slaughter by feeding grain grown in the area. The animals could be processed at the slaughter-house in Dawson Creek which is at present operating in short supply of stock. This would create increased employment in the area and no waste would be shipped out as is the case with shipping live animals.

RECOMMENDATIONS

Recommended that the Government of British Columbia establish an agricultural loan programme funded under and administered by the Minister of Agriculture.

The objectives of this loan programme should be

- (a) to provide assistance to farmers in establishing, developing, and operating economic farm units;
- (b) to assist in the transfer of farms from father to son or daughter;
- (c) to establish young farmers in economic farm units;
- (d) to make possible diversification and production of marketable agricultural commodities.

The purposes of the loan programme should be

- (a) the purchase of live stock;
- (b) the construction and improvement of buildings, making improvements or additions to such things as fences and water supplies, and purchasing equipment to establish or expand live-stock facilities, including dairy, poultry, and beekeeping;
- (c) the clearing, breaking, draining of land, or installing irrigation;
- (d) the purchase of agricultural implements and farm machinery;
- (e) the consolidation of outstanding liabilities;
- (f) the paying off and discharging of mortgages, encumbrances, and other charges or liens on land owned or purchased;
- (g) the purchase of land;
- (h) such other purposes related to the establishment, development, and operation of a family or family company farm approved by the Minister and his staff.

Eligibility

- (1) Applicant must be a resident of British Columbia.
- (2) Applicant must be a Canadian citizen or landed immigrant. In the second instance the applicant must not have landed immigrant status of more than six years.
- (3) The farm must have the potential to contribute in a meaningful way to the agriculture industry.
- (4) The applicant must have adequate farm resources, a registered interest in the land or a full lease development purchase agreement or the written approval and consent of the registered owner.
- (5) A ceiling for off-farm income should be established beyond which loans would not be authorized.
- (6) Family farm corporations shall be eligible to apply.

Terms

- (1) There should be provision for short, intermediate, and long-term loans with a maximum of 30 years.
- (2) The interest should be at a reasonably low rate.
- (3) It should be possible, where considered appropriate, that payments on principal could be deferred for up to the first three years.
- (4) All loans should be life insured.

The Committee recommends that companion legislation should be enacted to guarantee farmers' loans from the private lending sector.

RECOMMENDATION—VOCATIONAL SCHOOL RANCH

- (a) That the Department of Education add an operating ranch to the farm they presently operate at the Dawson Creek Vocational Institute.
- (b) That a veterinary clinic be established in conjunction with the ranch to assist operations and be of service to Peace River ranchers.

PREDATOR CONTROL AS CONCERNED WITH STOCK GRAZING

Predatory animals, including the wolf, are becoming more of a problem with the passing of time in our northern areas. Many instances were related to the Committee of wolf and bear killing calves and colts, as well as young wild ungulates and birds. While your Committee is concerned with all wildlife, it is felt that the wolf has more than enough room to exist in unsettled lands and should be rigidly controlled in areas used for agriculture. The bear problem is not extreme and the occasional offender can be tracked down and dealt with.

RECOMMENDATION

(1) *Stock losses*—There should be compensation from public funds for cattle and sheep losses, not only in the Peace River District but throughout the Province. These losses may be from predators, hunters, or rustlers, with claims to be approved initially by the nearest stockmen's association.

(2) (a) Predator control in agricultural areas should be transferred to the Department of Agriculture.

(b) The Minister of Agriculture be charged with the development of an effective programme of control in those areas.

(c) The Committee recommends more severe penalties and strict enforcement of the law with regard to human predators such as hunters and rustlers.

(d) Forest Rangers and district RCMP personnel should be deputized as game wardens to check hunting licences and vehicles to enforce the game regulations and check for rustling.

RECOMMENDATION

Agricultural Department Staff

The Committee found the field staff of the Department to be highly dedicated, well-qualified people who were of great assistance to the Committee, but we feel this staff is insufficient in numbers and in some instances have unreasonably large areas to render the assistance required to those engaged in agriculture. Therefore, we recommend this staff be enlarged to the extent necessary to carry out their responsibilities.

Veterinary Services

Remote areas are badly in need of veterinary service and laboratory facilities. The Government should increase its efforts to encourage veterinarians to establish themselves in these areas to provide this essential service.

The Select Standing Committee on Agriculture unfortunately did not have sufficient time to carry out all of its tasks in a thorough manner. Tree-fruit marketing in British Columbia is a more complicated matter than could be handled in the time available.

Also it was not possible to hold hearings in the Fraser Valley or Vancouver Island with reference to vegetable growing and marketing practices in the time available.

Therefore, the Committee respectfully requests that the House authorize the Select Standing Committee on Agriculture, when it is reconstituted, to continue its investigations into these two matters until a comprehensive report can be filed at the next sitting of the Legislature.

Respectfully submitted.

G. H. ANDERSON, *Chairman*

APPENDIX A

Schedule of Public Hearings and Debates

Cranbrook, June 11, 1973; Creston, June 12, 1973; Grand Forks (lunch meeting), June 13, 1973; Oliver, June 14 and 15, 1973; Kelowna, June 18 and 19, 1973; Salmon Arm, June 20, 1973; Kamloops, June 21 and 22, 1973; Williams Lake, July 3 and 4, 1973; Vanderhoof, July 5, 1973; Smithers, July 6, 1973; Fort St. John, July 8 and 9, 1973; Dawson Creek, July 10-12, 1973; Penticton, August 27-31, 1973.

By leave of the House, the report was taken as read and received.

By leave of the House, the Hon. *David Barrett* (Premier) presented Agreement in Principle Relating to Joint Transportation Development Programme, Northern British Columbia.

Resolved, That the House, at its rising, do stand adjourned until 10 o'clock a.m. tomorrow.

And then the House adjourned at 5.43 p.m.

Friday, September 21, 1973

TEN O'CLOCK A.M.

Prayers by the Rev. *C. Klassen*.

Mr. *D. A. Anderson* rose on a point of personal privilege; namely, the action of the Government in releasing the Energy Report in the manner in which it was released.

Mr. Speaker stated that as it appeared the report was the property of the Government and not of the House or any Committee of the House, the report might be dealt with in such manner as the Government saw fit.

On the motion of the Hon. *Norman Levi*, Bill (No. 12) intituled *An Act to Amend the Adoption Act* was introduced, read a first time, and *Ordered* to be placed on the Orders of the Day for second reading at the next sitting of the House after today.

Pursuant to Order, the House resumed the adjourned debate on the Address in reply to the Speech of His Honour the Lieutenant-Governor at the opening of the Session.

By leave of the House, during the debate the Hon. *A. B. Macdonald* (Attorney-General) presented a report on matters concerning the natural gas industry in British Columbia.

The debate continued.

On the motion of the Hon. *D. D. Stupich*, the debate was adjourned to the next sitting of the House.

34 Mr. *McClelland* asked the Hon. the Minister of Health Services and Hospital Insurance the following questions:

1. Has the Provincial Government appointed one, Edward Zulkowski, as a public administrator for the Ocean Falls General Hospital Board?

2. If the answer to No. 1 is yes, what is the expenditure involved with this appointment?

The Hon. *D. G. Cocke* replied as follows:

"1. Yes.

"2. Mr. Zulkowski, a trained hospital administrator, is employed by the British Columbia Hospital Insurance Service as a hospital consultant and inspector. He is acting as public administrator of the hospital at Ocean Falls without additional salary. His travelling and living expenses connected with visits to Ocean Falls comprise the only expenditure related to the appointment, and the total in this regard to August 17, 1973, amounts to \$1,073.96."

Resolved, That the House, at its rising, do stand adjourned until 2 o'clock p.m. on Monday next.

And then the House adjourned at 1 p.m.

Monday, September 24, 1973

TWO O'CLOCK P.M.

Prayers by the Rev. *W. B. Taylor*.

Order called for "Oral Questions by Members."

Pursuant to Order, the House resumed the adjourned debate on the Address in reply to the Speech of His Honour the Lieutenant-Governor at the opening of the Session.

During the debate, by leave of the House, the Hon. *D. D. Stupich* (Minister of Agriculture) presented An Economic Study of the Tree Fruit Industry in British Columbia, a report to the Minister of Agriculture by S. C. Hudson, Consulting Economist, Agricultural Consultant Services.

The debate continued.

On the motion of Mr. *Nunweiler*, the debate was adjourned to the next sitting of the House.

Resolved, That the House, at its rising, do stand adjourned until 2 o'clock p.m. tomorrow.

Mr. *Nunweiler* presented the Report of the Select Standing Committee on Municipal Matters, as follows:

REPORT

LEGISLATIVE COMMITTEE ROOM,

September 21, 1973

Mr. Speaker:

Your Select Standing Committee on Municipal Matters begs leave to report as follows:

The Select Standing Committee on Municipal Matters examined the matters affecting islands in the Strait of Georgia and the adjacent waters. It visited and viewed the following islands: May 2, 3, 4, North Pender, South Pender, Saltspring, Galiano, Mayne, Saturna; July 23-27, Bowen, Gambier, Keats, Denman, Hornby, Lasqueti, Gabriola, Kuper, Thetis.

On July 23 the Committee experienced a most meaningful day at the UBC Resource Science Centre under the direction of Dr. Crawford Holling, who presented a computer simulation that demonstrated the relationships between speculation thrust, peoples satisfaction, land prices, land values, environmental equality, etc. In its context, environmental quality was related to ease of transportation, water availability, nearness to a lake or ocean, slope of land, type of land, i.e., agriculture vs. rock, and the amount of open land and finally the diversity of tree cover.

Public meetings were held on the islands, and the Committee was pleased and impressed with the interest and turnout by the local people who expressed a vital concern about the future of the islands.

It is apparent to the Committee that the islands are of extreme importance to the Province of British Columbia, they are fragile, their location is crucial, being between the two largest cities in the Province, it is felt that people are entitled to use them and enjoy them to the capacity which they are able to serve.

For the purpose of this report the Gulf Islands shall mean all islands in the Strait of Georgia and adjacent waters.

Observations

1. These islands are different from each other and from the Mainland. However, some Mainland areas, especially the Sunshine Coast because of difficult access, probably have some similar problems.

2. Apart from their natural insularity, isolation, and uniqueness, the islands have the problem of these "special interests":

- (a) Local residents, many of whom are retired, and others who have to make their living locally.
- (b) Large numbers of summer residents and (or) visitors.
- (c) Large landowners, usually absentee, often corporate and foreign.
- (d) A larger or "provincial" interest of the general public.
- (e) Land developers and speculators.
- (f) Tree-farm licence holders (TFL).

3. Existing boundaries of regional districts and means of representation and communication to and from some regional districts are causing considerable frustration. (Seven regional districts each have a portion of the islands within their boundaries).

4. A complete lack of jurisdiction by Provincial, regional, or municipal bodies over Indian lands because of exclusive Federal jurisdiction may cause increasing difficulty.

5. There are some existing subdivisions which appear attractive and rural in character but this is only due to the fact that many are as little as 15 per cent developed. Of all the problems the Committee identifies large subdivisions and over-development as the priority concern.

6. Requirements such as a 10-acre freeze or limiting subdivisions to larger parcels of similar size will not be sufficient in the long term, nor will such rules be as effective as other more sophisticated and imaginative planning techniques such as clusters, green belts, etc.

7. There is a need for an increase of supervised public space, beach access, hiking trails, picnic and (or) campgrounds, etc., on virtually every island. Most land adjoining the best beaches is privately owned. It is unfortunate that many of the Howe Sound islands' most attractive bays and coves are spoiled for recreational use by log storage and booming grounds.

8. Water transportation to the islands is a key to the entire situation and needs careful control and co-ordination (but this is not within regional district jurisdiction). It is also evident that no one island or regional district can control the frequency, cost, and type of transportation. Transportation on the islands is also an important related factor. Emphasis should be placed on pedestrian transit rather than vehicle transit, and the use of the islands should thus be planned accordingly.

9. One of the major problems encountered by the Committee in its tours, hearings, and public meetings is the fact that there has been, and remains, a very serious lack of co-ordination and communication. In many respects, the islands have fallen victim to *ad hoc* or "band-aid" activity. There is a need for a co-ordinated jurisdiction to be responsible for planning, zoning, control of land use, transportation, and related matters for all the islands and this jurisdiction would require sufficient funding over and above the current revenue source from local taxation.

10. Although regional districts are not geared to carry out all the responsibilities expected of them relative to the future of the Coastal islands of British Columbia, they can well serve the islands for many administrative purposes including hospitals, schools, local improvements, special projects, health, building inspection, etc. Boundaries of regional districts need to be reviewed for possible transfer of some islands, based on natural lines of communication. Further, the means of representation and communication between some islands and its regional district needs to be studied.

11. Recognizing the need to ensure continued employment opportunities for some residents of the islands, strictly controlled limited commercial development, light industry, and agricultural activity compatible with the life style of the islands can continue, nonetheless, emphasis for the future development of the islands should be placed on recreation, moderate residential use, and preservation of a rural atmosphere. The Committee was impressed with some instances of desirable land use (by residences, summer camps, a few parks, endowments) but was alarmed at the possession or hoarding of land by resident and absentee owners for high capital gains purposes. It was also distressed by the evidence of considerable subdivision activity in the past, which was undertaken without full determination

of its impact on the future of each island. Our belief is that the islands are too important to the people of Canada to be left open to exploitation by real-estate developers and speculators.

12. Virtually without exception shortage or potential shortage of potable water is of major concern to practically all islands and to this Committee.

13. Waste and garbage disposal is another serious matter of major concern to this Committee.

14. A potential exists for conserving many archæological sites on the islands.

Recommendations

1. The Committee recommends that the regional district boundaries be reviewed and adjusted to assure that the respective islands are in the most appropriate regional district.

2. The Committee also recommends that the Provincial Government establish an "Islands Trust" (or commission), as the most appropriate body to be responsible for and to co-ordinate the future of each island within our terms of reference. It must be emphasized most strongly that the trust is to assume the primary responsibility for all Gulf Islands' affairs within Government jurisdiction, including land use, future growth patterns, control of development, industrial, recreational, and commercial activity, as well as parks and open space designations. It is essential that the trust be fully representative of all interests, not only on the islands, but throughout the Province as a whole. While recognizing the rights of the islanders, the Committee suggests that this section of British Columbia is dramatically affected by private and public activity which does not have the same impact in other parts of the Province. The Committee again refers to the fragile nature of these coastal units. Because it is recognized that a variety of Government departments and agencies: Highways, Health, Ferries, Lands and Forests, Parks, etc., as well as regional districts and citizen groups on the islands, all have an important role to play in this respect, we emphasize that the proposed trust or commission must not be a separate and (or) remote agency, but rather a fully representative co-ordinating body, whose task it is to bring together each group, agency, or department of Government and to act in the best interests of the islands and their residents, with due regard for the broader and Province-wide interest.

3. The Committee also recommends that until the trust or commission is established, no subdivisions be permitted on any islands south of and including Denman, Hornby, and Lasqueti Islands, i.e., on any of the Gulf Islands in the Strait of Georgia and any adjacent waters.

4. The Committee recommends the 10-acre freeze be continued on the northern Gulf Islands that have not yet been studied by the Committee.

Conclusion

The Committee appreciates that many months of hard work have gone into the planning process on some of the islands, and the Committee hopes that if the Government accepts these recommendations, that the trust be established and operative as soon as possible, so as not to prolong unduly the wait on these islands.

A. A. NUNWEILER, *Chairman*

By leave of the House, the report was taken as read and received.

11 Mr. Fraser asked the Hon. the Minister of Highways the following questions:

1. Has the Provincial Government awarded any highway contracts since April 1, 1973?

2. If the answer to No. 1 is yes, (a) how many contracts have been awarded, (b) what was the value of each contract awarded, and (c) who was the successful bidder in each case?

The Hon. *G. R. Lea* stated that, in his opinion, the reply should be in the form of a Return and that he had no objection to laying such Return upon the table of the House, and thereupon presented such Return.

46 Mrs. *Jordan* asked the Hon. the Minister of Human Resources the following questions:

1. Has the Department of Human Resources hired any individuals to investigate complaints concerning rent increases?

2. If the answer to No. 1 is yes, (a) what is the name of each individual hired, (b) what is the salary paid to each individual, and (c) has the Minister received any reports on the investigation to September 13, 1973?

The Hon. *Norman Levi* replied as follows:

"1 and 2. This question was answered during the discussion of my Estimates, Spring Session 1973 (see Hansard of April 4, 1973.)"

48 Mrs. *Jordan* asked the Hon. the Minister of Human Resources the following questions:

With respect to the Social Assistance Handbook published June 1, 1973—

1. Was the handbook printed by other than the Queen's Printer?

2. If the answer to No. 1 is yes, (a) what was the name of the printing firm used, (b) how many copies were printed, (c) what was the cost of printing, (d) what is the method of distribution, and (e) how many copies have been distributed to August 31, 1973?

The Hon. *Norman Levi* replied as follows:

"1. Yes.

"2. (a) Price Printing Ltd., 1519 West Sixth Avenue, Vancouver, B.C., (b) 30,000, (c) \$8,639.31, (d) bulk distribution in the Vancouver area to Provincial and municipal offices, private philanthropic and public service organizations by a parcel delivery service, distribution to local offices of the Department of Human Resources, the Mental Health and Public Health Branches of the Department of Health Services and Hospital Insurance, and Mental Health occurred through the regular departmental mail service, copies requested by individuals and groups were mailed on request, and (e) approximately 27,000."

59 Mr. *Phillips* asked the Hon. the Minister of Highways the following questions:

1. Has the Department of Highways operated any aircraft for the purpose of providing ambulance service between April 1, 1973, and September 13, 1973?

2. If the answer to No. 1 is yes, (a) how many flights took place and (b) between what locations in British Columbia did the flights take place?

The Hon. *G. R. Lea* replied as follows:

"1. No.

"2. See No. 1."

61 Mr. *Phillips* asked the Hon. the Minister of Highways the following questions:

1. How much money was appropriated by the Legislature in 1973 or authorized by Special Warrant between April 1, 1973, and September 13, 1973, to be used for any and all purposes in connection with the Department of Highways for the fiscal year 1973/74?

2. How much of such appropriations or Special Warrant authorizations were expended between April 1, 1973, and September 13, 1973?

3. What is the amount as at September 13, 1973, still unexpended?

The Hon. *G. R. Lea* replied as follows:

"1. Authorized by Special Warrant: Special Warrant 7, Vote 116 (Grants and Subsidies), \$3,835; Special Warrant 14, Vote 11751 (Summer Employment Programme), \$9,000,000; Special Warrant 34, Vote 117 (Purchase of New Equipment), \$1,700,000.

"2. Expended (to September 13, 1973): Special Warrant 7, \$3,835; Special Warrant 14, \$3,000,000; Special Warrant 34, \$1,700,000.

"3. Unexpended: Special Warrant 7, *nil*; Special Warrant 14, \$6,000,000; Special Warrant 34, *nil*."

62 Mr. *Phillips* asked the Hon. the Minister of Agriculture the following questions:

1. What amount of Vote 6, Code 039 of the 1973/74 Budget has been expended to date and in what particular manner?

2. Specifically, was any advertising agency involved with any expenditure?

3. If the answer to No. 2 is yes, (a) what advertising agency was involved and (b) what was the amount of expenditure involved with the advertising agency?

The Hon. *D. D. Stupich* replied as follows:

"1. Vote 6, Code 039 of the 1973/74 Budget, the B.C. Food Products Promotion Programme expenditures to August 31, 1973: Radio, \$20,402.45; press, \$19,758.01; television, \$9,183; printed material, \$12,766.56; equipment, \$11,505.27; salaries, \$8,500; miscellaneous, \$1,426.86; total, \$83,542.15.

"2. No.

"3. Not applicable."

The Hon. *D. D. Stupich* presented to Mr. Speaker a Message from His Honour the Lieutenant-Governor, which read as follows:

WALTER S. OWEN

Lieutenant-Governor

The Lieutenant-Governor transmits herewith Bill (No. 9) intituled *Farm Income Assurance Act*, and recommends the same to the Legislative Assembly.

Government House,

September 17, 1973

By leave of the House, Bill introduced and read a first time.
Second reading at the next sitting after today.

And then the House adjourned at 6.13 p.m.