



Province of Alberta

The 27th Legislature
Fourth Session

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Issue 4

The Honourable Kenneth R. Kowalski, Speaker

Legislative Assembly of Alberta
The 27th Legislature

Fourth Session

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Legislative Assembly of Alberta

1:30 p.m.

Monday, February 28, 2011

[The Speaker in the chair]

Prayers

The Speaker: Good afternoon and welcome.

Let us pray. At the beginning of this week we ask for renewed strength in the awareness of our duty and privilege as members of the Legislature. We ask for the protection of this Assembly and also the province we are elected to serve. Amen.

Hon. members and ladies and gentlemen, we will now be led in the singing of our national anthem by Mr. Paul Lorieau, and I would invite all to participate in the language of their choice.

Hon. Members:

O Canada, our home and native land!
True patriot love in all thy sons command.
With glowing hearts we see thee rise,
The True North strong and free!
From far and wide, O Canada,
We stand on guard for thee.
God keep our land glorious and free!
O Canada, we stand on guard for thee.
O Canada, we stand on guard for thee.

The Speaker: Please be seated.

Introduction of Visitors

The Speaker: Hon. Minister of Agricultural and Rural Development, you have some guests from a warm place.

Mr. Hayden: Yes, Mr. Speaker. Thank you. I rise to introduce to you and through you to the members of this Assembly the Hon. Peter Shanel Agovaka, the Minister of Foreign Affairs & External Trade of the Solomon Islands. Minister Shanel is accompanied by the Hon. Dickson Ha'amori, Minister of Education & Human Resources Development; His Excellency Collin Beck, the high commissioner for the Solomon Islands; Mr. Trevor Unusu, the chief desk officer, United Nations, Treaties and Americas, Ministry of Foreign Affairs & External Trade; and Mr. Ashwant Dwivedi, the chief executive officer of the Canadian International Training & Education Corporation.

The Solomon Islands, Mr. Speaker, share similar goals and ideals with Canada. As members of the Commonwealth, the United Nations, the World Trade Organization, and the World Health Organization both of our countries are committed to international co-operation and collaboration. This is the first time Mr. Shanel has visited Alberta, and we wish him a pleasant and productive stay. I would now invite Mr. Shanel and his delegation to please stand and receive the warm traditional welcome of the Assembly.

Introduction of Guests

The Speaker: The hon. Member for Edmonton-McClung.

Mr. Xiao: Thank you, Mr. Speaker. It's a great pleasure for me to introduce to you and through you to the members of this House today a group of bright students from my constituency from Patricia Heights elementary school and their teachers, Ms Shane

Boulton and Miss Nicole Dober. I would like to ask them to rise to receive the traditional warm welcome of the House.

The Speaker: The hon. Member for Edmonton-Calder.

Mr. Elniski: Thank you, Mr. Speaker. It's a particularly special day for me today as I introduce to you and through you to the members of this Assembly a group of people who have come to mean more to me than any other group aside from my family. I'll tell you of their remarkable achievements shortly, but for the moment I want to introduce the Archbishop O'Leary alumni class of 1978 Al Holmes MS liberation fundraising organizing committee. I'm going to introduce them, and then I'm going to ask them to all stand up. First of all, Mr. Al Holmes, the reason that we're here; Mr. Gary Ruta; Ms Carol McDonald; Mrs. Linda Weatherbee; and Mrs. Pat Van Meer. I'd ask this group to now rise or otherwise indicate and receive the traditional warm greeting of the Assembly. Wonderful. Thank you.

My second introduction, Mr. Speaker, along the same vein, is the person who reminds me every day of just how important friends and family really are: Dominic and Orion's grandma, my wife, Barb Grodaes. Please stand and get the respect.

The Speaker: Are there others? The hon. Member for Fort McMurray-Wood Buffalo.

Mr. Boutilier: Well, thank you very much, Mr. Speaker. Today I have the pleasure to introduce two students from the University of Alberta. As many of you may know, I do lecture at the University of Alberta. They're visiting today. In the public gallery we have Jeff Simmons and Jean-Michel Auger. This is their first visit to the Legislative Assembly to view the proceedings and, of course, wondering about the future. I would ask them both to rise today and receive the traditional warm welcome of the Assembly.

The Speaker: Among the visitors today should also be 50 young people, grade 6 students, from the Academy at King Edward elementary school. I'd ask them to rise, please, and be recognized by all hon. members of the Assembly.

Ministerial Statements

Black History Month

Mr. Blackett: Mr. Speaker, it's my honour to speak in front of this House today. February is Black History Month. The Canadian Parliament officially recognized Black History Month in 1995 following a motion by the Hon. Jean Augustine, the first black Canadian woman to be elected to parliament. Here in Alberta a number of events are taking place over the month to celebrate Black History Month, including workshops, presentations, and other celebratory events.

Black History Month provides an opportunity for all Canadians and all Albertans to share and learn about the experiences, contributions, and achievements of people of African and Caribbean ancestry. It is also a time to celebrate black heritage and culture in our province. These contributions are even more significant if we consider the past prejudices and discrimination experienced by some black Canadians.

While many of the early black immigrants to Alberta were escaping discrimination and prejudice, they also came to Alberta looking to make a better life for themselves and their families, and today that still holds true. People of all races from all parts of the world come to Alberta for the opportunity that our province presents.

I remember as a young person of 18 years of age, Mr. Speaker, when the Joe Clark government appointed Lincoln Alexander to be the first black member of the Canadian Parliament back in 1979. I remember the thought process going through my head was that it truly can happen for any of us. Today we are living proof of that.

Alberta has a rich black history. From the black Americans who established farming communities like Amber Valley and Keystone, later named Breton, who helped grow our province, to more recent years, black Albertans continue to contribute and make great achievements in the arts, science, sports, politics, and more.

I'm delighted that this year's campaign titled Proud of Our History features prominent Albertans past and present, including southern Alberta rancher John Ware, my son's favourite, and Calgary Flames' Jarome Iginla, the first black player in NHL history to be named team captain. Other notables include Edmonton Oilers goaltender Grant Fuhr; Clarence "Big" Miller, born in Sioux City, Iowa, who made his home in Edmonton in 1970 and became a fixture in our city's and provincial music scenes; Edmonton's poet laureate, Roland Pemberton, a.k.a. Cadence Weapon, one of the performers at the Alberta at the Olympics event in Vancouver last February; and Dr. Tony Fields, vice-president of cancer care for Alberta Health Services and one of the most outstanding and accomplished leaders in the cancer field today. He is a distinguished oncologist and cancer agency administrator who has made a significant impact on the fight against cancer in Canada.

1:40

I'm proud to stand here in the Legislature as the first black cabinet minister in Alberta and to acknowledge my colleague the hon. Member for Leduc-Beaumont-Devon, who not only was the first black MLA in our province in 2004 but a former mayor of Leduc and a successful businessman.

The diversity of our province and each and every one's history and sense of opportunity is part of what makes Alberta Alberta. Black Albertans from the Caribbean, Africa, America, or other places help create the wonderful mosaic of our province and help to lift up our spirits.

Each summer the colourful carnival costumes, the reggae, calypso, gospel music, and dancing come alive in Calgary with Carifest and with Cariwest in Edmonton as Albertans of Caribbean descent and many other origins get in the spirit of the islands even for just a few days.

I encourage all Albertans to participate in events taking place in the province to mark Black History Month. It's an opportunity for Albertans to gain insight into the experience of black Canadians and Albertans and the vital role that this community has played throughout our shared history.

Thank you, Mr. Speaker.

The Speaker: The hon. Member for Edmonton-Centre will respond on behalf of the Official Opposition.

Ms Blakeman: Thank you very much, Mr. Speaker. It is my pleasure to join the hon. minister in celebrating the end of Black History Month. Alberta's greatest strength has always been its people. Thank you to the minister for mentioning a number of distinguished individuals and some of the events that surround them. As the minister has noted, black Albertans helped establish this province's agricultural heritage, and black Albertans have always distinguished themselves in many fields: medicine, sports, service, literature, music.

But while most black Albertans enjoy successful careers, taking full advantage of Alberta's freedoms and prosperity, we mustn't

ignore the less fortunate members of our black communities. The MLAs of the Official Opposition have met many times with members of the Sudanese community, who are suffering rates of violent crime far out of proportion to their numbers. We've raised the issue in question period and hope that the government and police can work with the Sudanese community proactively to stem the tide of violence and bring some measure of peace to this vibrant community, a community with the potential to make terrific contributions to our province.

We also note that even now in the second decade of the 21st century, Canadian-born visible minorities earn less than their white counterparts even when doing the same job and despite the fact that these minorities attend postsecondary institutions at rates much higher than the rest of the population. This, too, is part of black history, part of Alberta history, and history we should be trying harder to reshape into a better form.

I do want to mention that this weekend I was at the Africa Centre in Edmonton-Calder, where, as the member says, it's all in Calder, to celebrate the conclusion of Black History Month. Mr. Speaker, so many people attended that there was no parking anywhere to be had. The lots were full. The street parking was packed for blocks around. It really was phenomenal. Thank you to the Member for Edmonton-Calder for his remarks at that event.

I also want to take the time to recognize and thank Pearl Bennett and the Caribbean Women Network, which is a great group in Edmonton that does wonderful work year-round.

Black History Month deserves to be celebrated, and I encourage all Albertans to keep taking part in the events that the minister has mentioned. It is an opportunity for all of us to learn from history so that we may build a better future for us all.

Thank you.

The Speaker: The hon. Member for Airdrie-Chestermere has risen, and I will assume that it is to seek unanimous consent to allow additional speakers to participate. I take it there will be an individual from the caucus represented by the hon. member who would like to participate. Anyone else who would like to participate? Okay. An additional caucus member would like to participate.

Hon. members, you need to provide unanimous consent. If you are opposed to allowing further speakers to participate, please say no.

[Unanimous consent granted]

The Speaker: The hon. Member for Calgary-Fish Creek.

Mrs. Forsyth: Thank you, Mr. Speaker. I'm honoured to be here today to share our thoughts on Black History Month. We take time to reflect on the contributions of black Canadians and Albertans to the society we live in today. We recognize someone like John Ware, who has a junior high school named after him in Calgary. There are so many people we could recognize and the huge impact that they've had on people's lives.

Black History Month actually started as only one week nearly one hundred years ago. February was selected because of the birthdays of two great leaders, Frederick Douglass and Abraham Lincoln. We owe Black History Month to one man, Dr. Carter Woodson. As a child he worked in coal mines, not starting high school until he was 20. He seized the opportunity and finished high school in only two years. He continued his education and earned a PhD from Harvard. Dr. Woodson was disturbed by the absence of black Americans and their contribution to society in American history. Not only did he start a week for black history; he started a scholarly journal as well.

Canada has a proud place in black history. Canada was instrumental in helping black Americans escape the terror of slavery through the Underground Railroad.

While we must be aware of the past, we must firmly look to the future. The most inspiring words, from Martin Luther King, are familiar to all of us. "I have a dream that my four little children will one day live in a nation where they will not be judged by the color of their skin but by the content of their character."

Thank you.

The Speaker: The hon. Member for Edmonton-Highlands-Norwood.

Mr. Mason: Thank you very much, Mr. Speaker, and thank you to members of the Assembly for this opportunity.

Albertans of African origin have good reason to be proud of their history and culture and their significant contribution to life in Alberta in a wide range of ways. I appreciate the efforts made to provide the rest of us with a rich menu of opportunities to celebrate and learn with them over the month of February. It's great to officially recognize how important people of African origin are to our community, province, and country.

There is a long history of black immigrants in Alberta and Canada, as the minister has noted, and many more Albertans need to know about this. Canada was the end of the Underground Railway, providing a welcoming place of refuge for people fleeing the horrors of slavery. Even earlier, Americans of African origin came to Canada as part of the Empire Loyalists, settling mostly in Nova Scotia. Here in Alberta we have communities like Amber Valley that were founded by people of African origin and have been vital in the development of rural Alberta and its tradition of community and co-operation.

I've been pleased to meet a number of outstanding and prominent African-Canadians such as "Big" Miller, who chose to make a home in Alberta in more recent years.

We have largely ignored the substantial history of the whole continent of Africa in schooling in Canada and missed out on a great body of knowledge as a result. Today we are seeing history being made across Africa in dramatic ways, and there are many things to learn from this as well. The past few years have seen a significant increase in Alberta of people of African origin and of the places of origin. It is good to honour and remember outstanding individuals for their achievements and to celebrate with them during times like Black History Month, Carifest and Carifest, and other events.

Mr. Speaker, we need also to remember during this month that there are very difficult practical realities facing Albertans of African origin. We have just seen changes which reduce services to immigrants, and this directly affects their opportunities to achieve labour market and economic success. Many of our newest neighbours of African origin are coming from refugee backgrounds and require specialized health services that are not readily available. We know that many people of African origin are still experiencing racism in a range of ways in their everyday lives, so we must be energetic in looking for more effective ways to counter this attitude, which diminishes us all.

I join with the minister and all Albertans in saying how good it is to have public awareness of the history and the vital role of people of African origin here in Alberta. I also encourage this government to be vigilant to have the necessary programs and services in place to ensure newcomers of African origin can find Alberta to be a great place to make a home.

Thank you.

Oral Question Period

The Speaker: First Official Opposition main question. The hon. Leader of the Official Opposition.

Size of Alberta Cabinet

Dr. Swann: Thank you very much, Mr. Speaker. Alberta needs a common-sense approach to budgeting. The shrinking sustainability fund cannot prop up this government's mismanagement much longer. To the Premier: will the government follow another piece of Alberta Liberal advice and reduce this bloated cabinet from 24 ministries to 17, saving millions of dollars for Albertans?

1:50

Mr. Stelmach: Mr. Speaker, the budget that was presented by the minister was balanced in terms of serving the needs of vulnerable Albertans, tapping into the savings that we set aside during the good years, the lean years. We do have the most volatile revenue stream in all of North America, and that is why we have to set savings aside when resource revenues are very high, to cover up those areas where they are pretty low.

Dr. Swann: Well, Mr. Speaker, I guess the Premier didn't hear me. Will you cut the cabinet from 24 to 17 ministries and save the Alberta taxpayer millions of dollars? Yes or no?

Mr. Stelmach: Mr. Speaker, just to go back in history, I think my first cabinet was 18 members, and I was criticized right across Alberta for it, but set that aside.

Not really something to be proud of, but in finding almost \$2 billion of in-year savings in the budgets over the last couple of years, we saw the ratio of the public-sector service in this province back to about the mid-1990 levels even though we've seen this huge population increase. So we have downsized government considerably during that period of time.

Dr. Swann: Now, that's doublespeak if I've ever heard it, Mr. Speaker, expanding to 24 ministries and calling that a downsizing. Very interesting.

Mr. Premier, why do you continue to spend millions on the failed greenwashing branding initiative while the programming budget for Housing and Urban Affairs has been cut by \$200 million over the past two years? Do you really think Albertans value public relations over housing?

Mr. Stelmach: Mr. Speaker, we are more than meeting our goals in affordable housing, and the minister can give further details on that. But I can tell you that the budget that we set aside for branding was used to ensure that we get Alberta's message out both in the United States and in markets around the world, and we're going to continue to do that. All the eyes of the world are on this province because we have about a third of the world's oil supply.

The Speaker: Second Official Opposition main question. The hon. Leader of the Official Opposition.

Emergency Room Wait Times

Dr. Swann: Thank you very much, Mr. Speaker. Emergency wait times have been pushed out of the headlines by the current disarray in this government, but a glance at the latest Alberta Health Services charts indicates the targets are not being met. Only 1 of 5 hospitals in Edmonton and 1 of 4 hospitals in Calgary have met the target. To the Premier: can the Premier explain what he is going to do now? Lower the targets?

Mr. Stelmach: Mr. Speaker, I can only say this anecdotally, but in talking to Albertans and, of course, having watched some of the Twitter and the blogs of two of the Leg. media that had to use emergency services prior to the Christmas break, they tweeted that emergency waiting times were very reasonable. They were down. We'll continue to see those numbers improve, and further evidence on the progress will be of course given by our minister of health.

Dr. Swann: Well, again, Mr. Speaker, Alberta Health Services has set a target that 45 per cent of patients needing hospital stay should be admitted within eight hours. In this case, too, only one Calgary hospital and no Edmonton hospital met the target. What confidence can Alberta health workers and Albertans have that these targets will be met anytime soon?

The Speaker: The hon. minister.

Mr. Zwozdesky: Thank you, Mr. Speaker. Let me respond to that because, in fact, I have visited some of these emergency rooms just in the last little while, and I can tell you that the issue that propelled the head of emergency docs in the province to contact me on the Thanksgiving weekend was about EIPs, emergency in-patients. These are people who need to be admitted into hospital, into acute-care beds, but they're occupying emergency room beds. Those numbers have dropped very significantly, and within a couple of weeks we'll be putting out the exact numbers so that even this member will know them.

Dr. Swann: Well, Mr. Speaker, the deadline was March, when the minister promised to have changes. That's tomorrow. Are these targets any more than wishful thinking?

Mr. Zwozdesky: Mr. Speaker, there's no deadline of March. What there is is a target for the end of March with respect to the number of people in EIPs, which I've just commented on, and also with respect to the number of people who are in for minor issues and who should be in/out in four hours or less. There's another target for those who need to be admitted, and they'll be admitted within eight hours. While those improvements are not as much as we had hoped for, nonetheless they are improving. I'm very confident that now that we have the promised 6 per cent increase, you'll see even more improvements being made as we go forward, and the wait times will be reduced.

The Speaker: Third Official Opposition main question. The hon. Member for Edmonton-Gold Bar.

Provincial Fees

Mr. MacDonald: Thank you, Mr. Speaker. Last week's budget fees for vehicle registration and vehicle plates went up by 23 per cent. Land titles fees for mortgages are up 133 per cent. Fees for registering a business or a nonprofit are up 150 per cent or more. This is really a \$157 million tax increase. My first question is to the minister of finance. Why increase these taxes by \$157 million, yet you cut a cheque before Christmas for \$140 million to Suncor in a royalty rebate at a time when they have record profits and the price of oil is close to \$90 a barrel?

Mr. Snelgrove: Mr. Speaker, we have an obligation as a government to try and have even cost recovery when we deliver services. We have not increased these fees since 2002, and everyone with any kind of a business mind would understand how much it has cost to deliver these services and that coming back to cost recovery is just a prudent financial measure.

Mr. MacDonald: It's not cost recovery, Mr. Speaker.

Again to the minister: given that this minister claims that this is merely cost recovery, will the minister table the analysis that backs up his statement just now?

Mr. Snelgrove: Mr. Speaker, we'd be happy to have the Minister of Service Alberta provide to the opposition and all hon. members in Alberta how we arrived at the breakdown of the costs.

Mr. MacDonald: Again, Mr. Speaker, to the same minister: why did the minister think increasing fees for businesses by 150 per cent and creating all these other new fees, which really are taxes, was necessary? Why force these costs onto businesses when other businesses, like Suncor before Christmas, get a \$140 million royalty rebate cheque from your government at a time you have a megadollar deficit?

Mr. Snelgrove: Mr. Speaker, we are talking about apples and oranges and grapefruits and some lemons. There is a responsibility, when we deliver services to Albertans, to run it on a cost-recovery basis. Should we have reviewed these possibly four or five years ago? Yeah, we probably should have, but we have now, and we've moved back to cost recovery, which is the prudent thing to do.

The Speaker: The hon. Member for Fort McMurray-Wood Buffalo, whose birthday it is today.

Provincial Budget

Mr. Boutilier: Yeah. Thank you very much, Mr. Speaker. On Friday the finance minister broke with a long tradition by calling a news conference to respond to the Wildrose balanced budget alternative. Usually it's the opposition who responds to the government's budget, but it's nice to know that we've got the minister's attention. Now that we've got it, I have a question for him. Given that this year's deficit of \$3.4 billion was projected only to be \$1.1 billion a year ago, why should anyone in Alberta, including those in his own caucus, believe this minister, and do you actually think Albertans will believe this minister?

Mr. Snelgrove: Mr. Speaker, when we are asked by the media to comment on an item, whether it is newsworthy or not, we make an attempt to do just that. Our budget deals with real people, with real issues, and with real numbers.

Mr. Boutilier: Well, Mr. Speaker, given that non answer of apples, oranges, and turnips, let me ask you this. The minister made the comment: back in the black by 2012. How quickly one forgets. You know what? That actual comment would actually be right next to the horoscope.

The Speaker: Hon. member, with due respect, remember a document that said "no preambles," signed?

Mr. Boutilier: Right. Yes

The Speaker: Let's get to the question.

Mr. Boutilier: Yes. Thank you. Given that, Mr. Speaker – and it's right next to the horoscope – will the minister please tell me and tell Albertans: what is he basing his projections on? It is clearly not new math.

Mr. Snelgrove: Mr. Speaker, I would presume that someone with a number of years' experience in this House would have the abil-

ity to read the budget and to understand what the different lines in the budget mean. Our budget is based on industry projections for the revenue sources that we get. It's based on a compilation of figures from Stats Canada, has to do with the growth in population, tax revenues, and such. All of that information is included in the budget documents.

Mr. Boutilier: Given the comment, Mr. Speaker, last week in this House I had posed to the Minister of Education about his secret list as well as to the Minister of Infrastructure. To the Minister of Infrastructure. His secret list: will he make it a priority to table it in this House today so all Albertans can understand the difference between a want and a need and a priority and a nonpriority for our communities across Alberta?

2:00

Mr. Danyluk: Well, Mr. Speaker, I think the only secret list is the Wildrose secret list of capital projects that they would cancel, \$2.4 billion, so I need to ask the hon. member: is it the Grande Prairie hospital, is it one of the 22 new schools currently being built, is it the south Calgary hospital, or is it a continuing care in Fort McMurray?

The Speaker: The hon. Member for Edmonton-Strathcona.

Oil Sands Reclamation

Ms Notley: Thank you, Mr. Speaker. For more than a decade the Tories have dragged their feet on implementing a plan for industry financing of oil sands reclamation, exposing Alberta taxpayers to an immense burden of unfunded liability. Independent estimates show that the taxpayer liability for reclaiming currently disturbed land is up to \$15 billion. My question is to the Premier. In light of this massive and unjust downloading of risk to Alberta taxpayers, how can the Premier possibly consider a plan that will reduce industry's financial security obligations by half a billion dollars over the next nine years to be anything other than a complete betrayal of our trust?

Mr. Stelmach: Mr. Speaker, I certainly appreciate the question, but the premise is completely wrong. This will actually give more safety to Albertans as owners of the resource. The Minister of Environment very clearly articulated the new policy, and I'll ask him to do that with the next question.

Ms Notley: Well, Mr. Speaker, given that documents released today by the NDP show that the government's too-little-too-late plan for financing oil sands land reclamation was drafted in secret, behind closed doors, with industry and given that this plan has severe long-term consequences that place Alberta's environmental legacy at risk, will the Premier stop this practice of pandering to their big oil friends, spike the current plan, and commit to starting fresh in consultation with the public and environmental scientists and community members?

Mr. Renner: Mr. Speaker, if only everything was so black and white as this member would like the world to be. The fact of the matter is that this is a very complex issue. Albertans, quite rightly, care and are concerned and should be concerned that we protect the public purse and that we do not have the taxpayer on the hook for mine liability. That's what this program is all about. As for consultation the member knows perfectly well that she wouldn't be in possession of the document that she has if we hadn't been doing consultation. That's where she got it from, Mr. Speaker.

Ms Notley: Well, Mr. Speaker, I find it really offensive that the minister would suggest some issues are just too complex for the public.

Now, given that the Royal Society's report in December completely discredited this government's model of allowing industry to monitor itself and given that this plan does not appear to include protection against groundwater and airshed contamination, will the minister admit not only that is he overseeing a failing Tory monitoring strategy but that his government has sold out on a plan for securing the sustainability of Alberta's environmental future?

Mr. Renner: Mr. Speaker, if this member would wait until the announcement is made on this plan and those kinds of questions can be answered for her, I think she'll find that this plan will bring additional security from a financial perspective. It will bring predictability. It will bring transparency. Above all, it will bring about progressive reclamation so that no longer will members like this be able to claim that this government is not looking after reclamation in this province.

The Speaker: The hon. Member for Edmonton-Meadowlark.

Wait Times for Cancer Treatment

Dr. Sherman: Thank you, Mr. Speaker. It has been brought to my attention that due to fierce competition for finite operating time between surgeons about 1,200 Albertans are on a wait list for lung surgery, and 250 died waiting on that list, many with lung cancer. I've also been told by others that this happened under Minister Mar and the hon. Member for Sherwood Park and that Dr. Trevor Theman of the College of Physicians and Surgeons and Capital health and Sheila Weatherill knew about this. Is the Minister of Health and Wellness aware of this, and will he call the Health Quality Council of Alberta and carry out a fatality review?

Mr. Zwozdesky: Mr. Speaker, I'm not aware of that, but I'll certainly have a look into it and see what information I can find.

The Speaker: The hon. member.

Dr. Sherman: Thank you, Mr. Speaker, and thank you, Minister. Given that it has also come to my attention that physicians who raised these issues were either punished or driven out of the province or paid out in millions to buy their silence and the costs buried in the books under the former Capital health region, I'm not surprised that this was never made public. Will the hon. minister commit to investigating and auditing these payouts in addition to the deaths and delays in cancer care?

Mr. Zwozdesky: Mr. Speaker, I don't know if those allegations are correct. They're certainly sounding inappropriate to me, but I won't challenge them at this time. I said I will have a look into this issue, and I will do that.

The Speaker: The hon. member.

Dr. Sherman: Thank you, Mr. Speaker. Given that people dying on cancer wait lists is absolutely inappropriate – and I agree with the minister; he is an honourable, caring, and honest man – will the minister conduct an independent forensic audit of AHS and Capital health records as it has also come to my attention that there were two sets of books while I was in the ministry, one balanced and the other with the details mentioned that may have contributed to the \$1.3 billion deficit inherited by Dr. Duckett when he took over?

Mr. Zwozdesky: Mr. Speaker, I said that I'll have a look into this matter, but what I'd like to know is where this hon. member is getting this information and if he is prepared to share that or table it or somehow live up to the allegations that he's making. I'm not aware of them whatsoever.

The Speaker: Hon. members, there always is an onus of responsibility on all of us to bring forth proof, which would be helpful.

The hon. Member for Edmonton-Gold Bar, followed by the hon. Member for St. Albert.

Drilling Stimulus Program

Mr. MacDonald: Thank you, Mr. Speaker. This government plans on throwing additional money away, unnecessarily subsidizing the oil and gas drilling industry at a time of record prices and record profits. Permanently including the drilling stimulus initiative in times of high-priced oil in the royalty framework not only robs government coffers but is an uneconomic subsidy. My first question is to the minister of finance. With the government predicting \$90 per barrel oil, why do oil companies need a subsidy like this at this time of high prices and record profits?

Mr. Snelgrove: Mr. Speaker, we set out to make sure that we could get Alberta workers back to work. We set out to set a framework that would attract foreign investment to Alberta so that the jobs that were there would be back. We haven't projected \$90; we're projecting \$88.95. We're projecting what's given to us. The fact is that as world oil prices rise, we get more royalties.

Mr. MacDonald: Mr. Speaker, he's getting less royalties, and the hon. minister knows that.

Why would this government permanently incorporate a program intended to temporarily support the industry during a time of low prices and world-wide recession?

Mr. Snelgrove: Mr. Speaker, it was put in place to make us competitive with the rest of the world. We need to be on an equal basis to attract long-term, solid investment to that industry, and that's exactly what we're doing.

Mr. MacDonald: Mr. Speaker, this doesn't make us competitive. This government sold us out, and the minister knows this.

Now, with this program reducing government revenue last year by \$1.7 billion, where will taxpayers or resource owners find in the fiscal plan this year the amount that has been used to subsidize these drilling programs when they're no longer necessarily?

Mr. Snelgrove: Mr. Speaker, the drilling stimulus program is incorporated into our revenue totals. If he doesn't think the stimulus worked, look at land sales: record high land sales last year. That didn't come as an accident. That came about because the stimulus program was put in place, attracted more people here looking for more areas to drill to provide more jobs for Albertans.

The Speaker: The hon. Member for St. Albert, followed by the hon. Member for Calgary-*Buffalo*.

Fusion Energy

Mr. Allred: Thank you, Mr. Speaker. I understand that an alliance of Alberta's industry, government, and postsecondary institutions has developed a multistage proposal for an Canada-Alberta fusion energy program. To the Minister of Advanced Education and Technology: what is the current status of this program?

Mr. Weadick: Mr. Speaker, fusion energy could provide an opportunity in the future for incredible energy, but at this point in time we're not quite there. However, my department did provide some seed funding to the University of Alberta to help create the Canada-Alberta fusion energy program. At this time that program has not received increased funding. However, many of those scientists continue to work in the area of fusion within the province.

2:10

The Speaker: The hon. member.

Mr. Allred: Well, thank you, Mr. Speaker. My second question to the same minister: what is the potential for adopting fusion energy as an alternative to coal-fired power plants?

The Speaker: The hon. minister.

Mr. Weadick: Thank you, Mr. Speaker. Although fusion is a potential for the future, we continue to look at shorter term options such as clean coal, such as carbon sequestration as the shorter term potential ways of reducing our carbon footprint, but fusion could play an increasing role as we go down the road.

The Speaker: The hon. member.

Mr. Allred: Thank you, Mr. Speaker. My final question is again to the same minister. What is the timeline for the commercialization of this new technology?

The Speaker: The hon. minister.

Mr. Weadick: Thank you, Mr. Speaker. My understanding is that although work goes on around the world in many places, including scientists here, we're still a ways away from any commercialization of fusion energy. We'll continue to monitor that, see what research is being done, and as researchers in Alberta can provide support, we'll continue to do that.

Charter Schools

Mr. Hehr: Mr. Speaker, earlier this year Alberta Education quietly posted a survey on the idea of converting charter schools to so-called innovation centres for educational researchers. Some of the questions in the survey such as allowing private corporations to operate charter schools deserve significant public debate. My questions are to the Education minister. Is the ministry using a rushed survey to claim public support for rewriting the mandate of charter schools in the new education act?

Mr. Hancock: Absolutely not, Mr. Speaker. What's happened is that, first of all, we have been talking about charter schools and permanence for a number of years. There was a position paper developed, I believe, in the fall of 2008. It was released in the fall of 2009 for discussion. There's been discussion around Inspiring Education for the last two years in terms of what we need in our system, and we're now at a stage where we're talking specifically about what permanence would mean for charter schools and what should be in a charter school mandate. The purpose of the survey is to gather information on that and to broaden the discussion.

The Speaker: The hon. member.

Mr. Hehr: Thank you, Mr. Speaker, and I thank the minister for that answer. It's my understanding he met with the Association of Alberta Public Charter Schools in October of last year. What was their response to the idea of them becoming innovation centres?

Mr. Hancock: I can't respond specifically to the meeting in October at the moment, but I can tell the hon. member that, generally speaking, we've had ongoing discussions with the charter schools about permanence, about what the *raison d'être* would be for an ongoing permanence for a charter school. Obviously, they must be different than just the regular public school system. They provide choice. They've always been intended to provide innovation. The question is: how is that innovation shared with the broader public system? So there have been very positive discussions around that nature, and we will be continuing those discussions.

The Speaker: The hon. member.

Mr. Hehr: Thank you, Mr. Speaker. Is the innovation and research mandate for charter schools so that they can take over from the much-admired Alberta initiative for school improvement program, that was cut in half by your government in last week's budget?

Mr. Hancock: Absolutely not, Mr. Speaker. Research and innovation are at the core of the future of education. The provincial Department of Education will have a role in making sure that we have available the best research from around the world, but we will continue to expect the public school system to participate in research through the AISI program, which is a very important program. The purpose of this discussion is to say: if charter schools are there to push the envelope in education to introduce new techniques or new pedagogy or to show where existing pedagogies may make a difference, they should be research based so that we can share that information on a database and research-driven approach.

The Speaker: The hon. Member for Lesser Slave Lake, followed by the hon. Member for Calgary-McCall.

Alberta Initiative for School Improvement

Ms Calahasen: Thank you, Mr. Speaker. All my questions are to the Minister of Education. I recently met with some of my school boards, and they're reeling over the 50 per cent funding cut to the Alberta initiative for school improvement program. Given that this program has been recognized all over the world for its innovative approach to education research and best learning practices, Albertans are grappling with what this means to the future of this program, especially since there was such a successful conference held here in Edmonton recently. So, Mr. Minister, why of all the programs would you cut this one? Do you not support innovation in schools?

Mr. Hancock: Well, Mr. Speaker, I very much support innovation in schools. Quite frankly, this is one of the most difficult decisions I've ever had to make as Minister of Education. The AISI program is a jewel in this province. Other provinces and other countries look to what we're doing. We've just had an international review, which has pointed out what a wonderful project it is. The fact of the matter is that we're in a period of restraint, and rather than cutting the direct budgets to school boards, I had to look at the various grant programs that we have, and we had to make a very difficult decision. I'm very fortunate to have been able to save 50 per cent of the AISI.

Ms Calahasen: Well, if it's such a jewel, can you explain what impacts will be felt within the education system now that this program has been cut in half?

Mr. Hancock: Well, Mr. Speaker, it will be an opportunity for us to look at the program with school jurisdictions and with the AISI partnership to see how we can retool the program, how we can make sure that it's focused in the right direction. It's a very good program, but with every program you ought to look and say: are you getting value for your investment? Yes, it will be difficult in mid-cycle. School boards are going to have to relook at their programs. The important part of this is that we managed to keep it alive and keep it substantially funded at 50 per cent. Is it unfortunate that we have to cut back? Absolutely. But let's look at it as an opportunity to recreate it.

The Speaker: The hon. member.

Ms Calahasen: Mr. Speaker, thank you. The innovation is great, and if we're really about research, is less emphasis being put on the educational research now since you've cut this by 50 per cent?

Mr. Hancock: No, Mr. Speaker. In fact, as we go forward, we need to put more emphasis on research and more emphasis on understanding, on a research-based and data-driven decision-making process, what makes for good educational opportunities for students and how we ensure that every student has an opportunity to be successful. Research is going to be the core of that, and we will continue to focus on it and make it a priority.

The Speaker: The hon. Member for Calgary-McCall, followed by the hon. Member for Olds-Didsbury-Three Hills.

Homeless Management Information System

Mr. Kang: Thank you, Mr. Speaker. This year more than 25 Calgary agencies that work with homeless people will start using the homeless management information system. The project is coordinated by the Calgary Homeless Foundation, and Calgary will be the first city in Canada to track the homeless. My questions are to the minister of housing. Since the nonprofit agencies that will be using the system are not subject to any privacy laws, how is the minister going to ensure that the tracking system protects privacy?

Mr. Denis: First off, Mr. Speaker, I'm happy that this member has moved away from some tunnel vision as in his questions in the past.

All kidding aside, we do take privacy concerns very seriously, and the Calgary Homeless Foundation's homeless management information system is something that we have talked about. The most important thing to us is that we have a province-wide system because I don't want to have seven or eight systems that don't integrate with each other. There has to be good value for the dollars. It is subject to privacy legislation.

The Speaker: The hon. member.

Mr. Kang: Thank you, Mr. Speaker. I will not give up until the tunnel is built.

To the minister again: given that many homeless people have had run-ins with the law at some point in their lives, can the minister tell us whether police will have access to this tracking system?

The Speaker: The hon. minister.

Mr. Denis: Thank you. Once again, Mr. Speaker, the privacy act does apply to anything collected by the Calgary Homeless Foundation, and we will respect those particular laws and concerns.

Mr. Kang: Well, to the minister again: will any of the personal information in the tracking system be included in the new TALON police database?

Mr. Denis: Again, Mr. Speaker, we will respect existing privacy legislation. It is my understanding that it has nothing to do with that particular database. I'd be happy to meet with that member afterwards to discuss further.

The Speaker: The hon. Member for Olds-Didsbury-Three Hills, followed by the hon. Member for Airdrie-Chestermere.

MRI Wait-list

Mr. Marz: Thank you, Mr. Speaker. Recent announcements of an increase of 9,000 more MRIs over the next two months is certainly welcome and good news for those who have been waiting for months for this service. My first question is to the Minister of Health and Wellness. Where is the money coming from to fund the extra labour and overtime and other costs associated in dealing with this extra surge in MRIs?

Mr. Zwozdesky: Mr. Speaker, it's true that we are adding about 9,000 more MRI exams to the schedule. The direct answer to the member's question is that we're able to do that through Alberta Health Services because they have some money in their budget right now as a result of the stable five-year health funding that we provided last year, and we're continuing with that promise this year. Secondly, there are some savings that have been attracted as a result of amalgamation, and those millions of dollars are going right back into improving health care for Albertans, including this announcement of MRIs.

The Speaker: The hon. member.

Mr. Marz: Thanks, Mr. Speaker. Again to the same minister: if we can afford to do these extra MRIs to deal with waiting lists, why not just do more every month of the year so that waiting lists don't accumulate in the first place?

Mr. Zwozdesky: Mr. Speaker, increasing access to important health services is one of our main goals of the five-year health action plan, and reducing wait times is another one. In this particular case we are already performing over 165,000 MRIs province-wide. We're adding 9,000 now because Alberta Health Services has the capacity to do that. Will they be adding more in the coming year? Yes, they will until we get those waiting lists down to a more manageable level and until Albertans feel comfortable that they're accessing the services in a much more timely basis as a result of the predictability and stability of our action plan.

2:20

Mr. Marz: Can the minister tell me, then, as my last question: are the extra number of MRIs they're going to deal with in the outgoing years going to be able to deal with the waiting lists so that no more accumulate?

Mr. Zwozdesky: Mr. Speaker, I think they're going to be able to be handled very efficiently. I know that as added capacity comes into the system, be it the finances or be it the staff or be it the facilities or the equipment – we have now mobile MRI units, for example – they will find their proper place. I'm happy that we're able to add 9,000 more MRIs, and I'm happy we're able to add 3,200 more cataracts. I'm happy we're able to add 5,000 more surgeries in general to the 250,000 we already do. There's much more good news. Maybe I'll get another chance later to address it.

The Speaker: The hon. Member for Airdrie-Chestermere, followed by the hon. Member for Edmonton-Centre.

School Construction in Airdrie

Mr. Anderson: Thank you, Mr. Speaker. Last week the Wildrose presented an alternative, balanced budget proposal that would erase this government's \$3.4 billion deficit. Our proposal includes the spending of \$4.2 billion on infrastructure. That's higher than the Ontario, Quebec, and B.C. average. Airdrie-Chestermere has roughly 65,000 people in it, so our share of that \$4.2 billion would be \$73 million. This is more than enough for three schools. To the Treasury Board president: will you ensure that this \$73 million is spent on three new schools this year for my constituents? They ask for nothing else than that.

Mr. Snelgrove: That is exactly what they asked for, Mr. Speaker. That is exactly what they asked for: their schools, their long-term care facilities, everything in their community, and the rest of Alberta can just go to hell.

Mr. Anderson: Well, Minister, people from Airdrie and Chestermere pay their taxes, too. Maybe you should review that answer. They've been greatly shortchanged these past 10 years. We ask only for fairness, Mr. Minister.

Let's try this. Given that Budget 2011 allocates \$115 million for the newly renovated MLA offices in the federal building, would this minister be willing to put these new MLA offices on hold and use this \$115 million instead to build urgently needed schools in Airdrie, or is that a big priority for Albertans, Minister?

Mr. Snelgrove: What we said: as long as it's being built in their community, they're happy. Mr. Speaker, we recognize – we've met with the school board in Airdrie. We've met with town council. I'll tell you: a great problem Alberta has is that we do have a growing student population, and we can solve the problem. The minister is working diligently and carefully with the school boards to see how we can accelerate the school building program.

Mr. Anderson: Well, that sure wasn't my question, but that's good that they're looking into schools for Airdrie. What did that have to do with anything I said?

You know, given that it appears this minister doesn't seem to understand what the difference between a need and a want is or what it is to make a priority and given that he asked for the Wildrose to be more specific on what it would cut and that then we tell him what we would cut, MLA offices for example, and that's clearly not good enough, I see no need for asking this big-spending minister another question.

The Speaker: Okay. Then the hon. Member for Edmonton-Centre, followed by the hon. Member for Grande Prairie-Wapiti.

Industrial Development in the Eastern Slopes

Ms Blakeman: Thank you, Mr. Speaker. The primary use for the heavy magnetic iron ore magnetite is to refine coal for use in electricity generation. Now, given that our largest source of greenhouse gas production in Alberta is coal-fired electrical generation, my question is to the Minister of Sustainable Resource Development. What is the government thinking when it ponders exploiting the Livingstone Range of the eastern slopes, pristine Crown land, to mine magnetite?

The Speaker: The hon. minister.

Mr. Knight: Well, thank you very much, Mr. Speaker. The hon. member opposite, I'm sure, would be very interested to know that I don't ponder on a lot of things, and that most certainly isn't one them. With respect to the fact that there are some legitimate people in the province of Alberta that have freehold mineral rights in the area, I think it behooves us to make sure that we understand exactly what it is that they intend to do.

Ms Blakeman: To the Minister of Energy: given that carbon capture and storage does not reduce greenhouse gases – it just stuffs them underground – and given that every other western country is moving away from dirty coal technology, why doesn't the government invest in alternative energy production rather than enabling and expanding development of old technology? Could you run backwards any faster?

Mr. Liepert: Well, Mr. Speaker, that's exactly what is happening in Alberta. I had the opportunity this morning to meet with a Spanish company, NaturEnergy, who is, in fact, in the throes of developing almost 400 megawatts of electricity through wind farms east of Medicine Hat. That's going to be, all things being equal, coming on stream in the next four or five years. Actually, wind production now makes up 8 per cent of Alberta's energy base, and that's expected to double in the next couple of years.

The Speaker: The hon. member.

Ms Blakeman: Thank you. Back to the Minister of Sustainable Resource Development. If not the minister, then who is standing up for the land-use framework and protection of the land, because the former minister of finance stood up for postponing major development anywhere – and I'm thinking the Livingstone Range – until the regional plan was completed, but the current Minister of Sustainable Resource Development says that development can't be stopped.

Mr. Knight: Mr. Speaker, in fact, what I have said is that through the history of the province of Alberta we've done a lot of different planning exercises. During the current planning exercise, which is a major piece of business for all Albertans, the development of the land-use framework and the development of the seven regional plans – we cannot just turn the key off and stop the province of Alberta from doing anything or continuing to develop and progress. Both of these things can be done and will be done at the same time.

Grande Prairie Hospital Construction

Mr. Drysdale: Mr. Speaker, last July the Premier announced that a new hospital would be built in Grande Prairie. Since then many people in my constituency have asked about what's happening with the project. My questions are for the Minister of Infrastructure. What progress is being made on the new hospital?

The Speaker: The hon. minister.

Mr. Danyluk: Thank you very much, Mr. Speaker. In fact, excellent progress is being made, and the project is moving ahead. It is in our budget. We bought the land, and the soil testing has been done.

I just want to say that we're ready to announce the design teams in five major hospitals. The design teams for southern Alberta, Medicine Hat and Lethbridge, will be announced tomorrow, and the design teams for Grande Prairie and High Prairie and Edson will be announced on Thursday.

Mr. Drysdale: Mr. Speaker, to the same minister: how will the design team ensure that local health professionals and the people of Grande Prairie have real input into the design of their new hospital?

Mr. Danyluk: Mr. Speaker, the design teams will work with local professionals. They'll work with the officials at the college, with the municipalities. When they do have that design, they will take it further to the public for their input.

Mr. Drysdale: Mr. Speaker, with the design work set to begin, when can we expect to see actual work beginning on the site?

Mr. Danyluk: Well, Mr. Speaker, first of all, I just want to say that we use a progressive construction model, and that saves about a year or two in design. Construction can start before detailed plans are in place, and this allows us to do more in a shorter time. I need to say that some work will start in late summer or early fall, and we are on track for having the project completed.

The Speaker: The hon. Member for Edmonton-Riverview, followed by the hon. Member for Edmonton-Ellerslie.

Alberta Health Services CEO Position

Dr. Taft: Thanks, Mr. Speaker. My questions are to the Minister of Health and Wellness. The Alberta Public Agencies Governance Act requires public disclosure of the knowledge and experience required of appointees before recruitment. That's the law. Can the minister of health inform Albertans when this information will be publicly available for the position of CEO of Alberta Health Services?

Mr. Zwodzesky: Mr. Speaker, I'm sure that I can get a very specific answer for the member. The point is that they have recruited now a firm that will undertake and perhaps already has started the recruitment process. I'm not personally involved in that at all. But I understand that there is an active recruitment process that has started or will be starting very, very soon, compliments of Alberta Health Services.

2:30

Dr. Taft: Well, I recommend the minister check the law, then, of his own government.

Can the minister provide any other information about the proposed term of the appointment and remuneration for the position of CEO of Alberta Health Services such as: what's the pay? What's this pay range?

Mr. Zwodzesky: Mr. Speaker, that's a recruitment process that Alberta Health Services undertakes. It has nothing directly to do with me, but I will get the information for the member. The chief executive officer of Alberta Health Services is an employee of that board. I'll get you the information, hon. member. As I say, I'm not involved in that process.

Dr. Taft: Well, Mr. Speaker, given that this minister has to sign off on that position, will he admit, then, that he's not doing his job if he doesn't know if recruitment has begun, if he doesn't know the job description and he doesn't know what they're going to pay? Do your job or get out of it.

Mr. Zwodzesky: You know, on the one hand they accuse us of interfering, right? On the other hand they say: get in there and interfere. Come on; let's get serious here. The point is that this is an employee of Alberta Health Services. They are doing the re-

cruitment, not me. I will get you the information you seek. You could just as easily phone Alberta Health Services yourself, but if you want me to do it for you, I'd be happy to do your job for you.

The Speaker: The hon. Member for Edmonton-Ellerslie, followed by the hon. Member for Lethbridge-East.

Special Education Consultation

Mr. Bhardwaj: Thank you very much, Mr. Speaker. From 2008 to 2009 we consulted with over 6,000 Albertans regarding their concerns with special education through the setting the direction initiative. During those consultations we heard an overwhelming majority of Albertans who wanted a different funding formula than the current system of coding and labelling. My questions are to the Minister of Education. Given that you accepted the recommendation of the setting the direction framework in June 2010, when will we have an adequate funding formula in place? What is taking so long?

The Speaker: The hon. minister.

Mr. Hancock: Well, thank you, Mr. Speaker. I can appreciate that the hon. member was the chair of the setting the direction process and is understandably concerned that implementation happen. I can assure him that while it's taking a little longer than we had hoped, we've spent a lot of time in this last year co-ordinating internally in government to make sure that every government department that's involved is part of the task force, understands the role and function, and that we use government resources most effectively. The next step is the provincial advisory committee, which is being put in place as we speak. We will be moving forward towards a new funding formula, which won't be fully in effect this fall but will be over the course of the next year.

The Speaker: The hon. member.

Mr. Bhardwaj: Thank you very much, Mr. Speaker. Given that special education funding has been frozen for two and a half years and that work is still ongoing for setting the direction, how are the school boards currently being funded in the interim, and what assurance do we have that this funding is adequate?

Mr. Hancock: Well, Mr. Speaker, we still continue to fund on the basis of the model that was in place. School boards get funded on a demographic model for the percentage of students they have with severe and special needs. We have in this year's budget allocated \$12 million more, which will be used as targeted funding for specific circumstances and to promote and lead the implementation of the setting the direction framework.

The Speaker: The hon. member.

Mr. Bhardwaj: Thank you very much, Mr. Speaker. My final question to the same minister. Parents have also expressed concerns to me that individualized program plans, known as IPPs, are going away. Can the minister tell all parents what they will be replaced with?

The Speaker: The hon. minister.

Mr. Hancock: Well, thank you, Mr. Speaker. There is a complete culture shift which is being proposed in this, and that takes some time. We're working on a pilot basis with some boards and some schools on this as we speak, but whether there's a formal IPP or whether there's just an understanding, in order to ensure the best

and the most appropriate educational experience for a child with severe special needs, the teacher, the school, the parent, and any support resources from Health and other places need to come together to work for that child. There needs to be a plan for the child, whether it's a formal IPP or not.

The Speaker: The hon. Member for Lethbridge-East, followed by the hon. Member for Whitecourt-Ste. Anne.

Political Contributions by Municipal Officials

Ms Pastoor: Thank you, Mr. Speaker. In October of 2010 the Rimbey council members and administrative staff were found to have made expense claims for political contributions to the Progressive Conservative Association of Alberta, and over five years the total was \$9,539.60. I don't believe they're the only municipality that has this practice. To the Minister of Municipal Affairs: is the minister aware if this money has been paid back to the taxpayers of Rimbey?

Mr. Goudreau: Mr. Speaker, I appreciate the question as asked by the hon. Member for Lethbridge-East. Municipalities are required to follow the rules that are established under a number of acts, including the Municipal Government Act and the Local Authorities Election Act as well as the Election Finances and Contributions Disclosure Act. Those three acts talk about contributions that municipal leaders are responsible to deal with.

Ms Pastoor: I was looking to see if the money was paid back.

You've quoted the laws, but does the province provide municipalities with guidelines to clearly indicate the difference between the government of Alberta functions and the Progressive Conservative Association of Alberta, or is it left to their interpretation of ethics?

Mr. Goudreau: Mr. Speaker, we do a number of inspections on individual municipalities as requested by individual residents. In this case, in the Rimbey situation, it's my understanding that all of the money was repaid, and that's the same for a number of other municipalities across the province.

Ms Pastoor: Thank you for that, Mr. Minister.

Given that there are leadership races and a possible election in the near future, what assurances can the minister make that what happened in Rimbey will not happen in other municipalities going forward?

Mr. Goudreau: Mr. Speaker, I can't promise or provide assurances that other municipalities won't fall into the same, you know, concerns or have the same issues with our particular ratepayers. Nonetheless, we'll continue to work with individual municipalities to make them aware of the rules and the regulations surrounding contributions towards political parties.

The Speaker: The hon. Member for Whitecourt-Ste. Anne, followed by the hon. Member for Calgary-Mackay.

Drilling Stimulus Program (continued)

Mr. VanderBurg: Thank you, Mr. Speaker. I've been hearing from constituents this past weekend, and I'm not sure, but it may have been fuelled by misguided reports that our budget deficit could have been wiped out if the province hadn't granted \$3.4 billion in royalty incentives over the past year. My question is to

the Minister of Energy. Sir, do you have any proof whatsoever that shows the deficit could have been eliminated by not granting these royalty programs?

Mr. Liepert: Well, Mr. Speaker, I think it's important first off to say that with the highly successful drilling stimulus program the cost to the provincial treasury for the current fiscal year is about 1 and a half billion dollars, not the \$3.4 billion that has been alleged, so tying it to next year's deficit is completely wrong. But I need to remind – I know the hon. Member for Whitecourt-St. Anne understands this, but I'm not so sure that all members of the House do, judging by some of the earlier questions. You know, it was partially due to the stimulus program that last year record land sales of some 2 and a half billion dollars were attained in this province, and that went a long way to ensuring that last year's budget deficit was only . . .

The Speaker: The hon. member.

Mr. VanderBurg: Well, thank you. Again to the same minister. It was obvious in Whitecourt-St. Anne that people were back to work, but around the province I'm not sure if that message got across to all Albertans. Do you have any proof or statistics on how many people actually did go back to work?

Mr. Liepert: I don't have any statistics as to how many people went back to work, Mr. Speaker, but I know that the Canadian Association of Oilwell Drilling Contractors recently said that the number of drilling rigs that were operational at the end of last year was twice the year previous. They're expecting that to even increase this year. In fact, the number was up some 80 per cent in the last quarter of 2010, and that doesn't just mean increased jobs on the rigs. It also applies to coffee shops, hotels, restaurants, car dealerships in all of the members' constituencies.

Mr. VanderBurg: Again to the same minister: constituents, again I believe fuelled by these inaccurate reports, are wondering why we provide subsidies to big oil at all when we're running a deficit.

Mr. Liepert: Mr. Speaker, you know, that big-oil thing is something that many of our opposition members have raised in this House and some of the members of the media, but, you know, it's really small and medium-sized Alberta businesses and companies that have benefited from these programs. What has happened is that if we hadn't had the stimulus program, there would be no jobs, there would be no land sales, and there would be reduced personal and corporate income tax, not more.

The Speaker: Hon. members, 19 different members were recognized today. There were 113 questions and responses.

We have seven members wanting to participate in Members' Statements. We will reconvene in 15 seconds from now.

2:40

Members' Statements

The Speaker: The hon. Member for Edmonton-Calder.

Al Holmes

Mr. Elniski: Thank you, Mr. Speaker. Colleagues, as I mentioned in my introduction not so very long ago, I'm here today to talk about my friends and the support that they gave to one of their own. Al Holmes was diagnosed with multiple sclerosis in 1989. Recently he was identified as being a good candidate for the Zamboni treatment, an experimental and somewhat controversial procedure that is not offered in Canada.

To make this happen, Al's friends had a party and raised the money, proving that friendship is not only one big thing but sometimes many little things. People will tell you that the liberation procedure has many risks, and Al knows them all. He knows and we his friends fully support that Al's future with the treatment is quite likely brighter than his future without it, so the committee I introduced earlier and a couple of hundred other people got together and solved the money part of the problem. It's simply what friends do.

I invited these people here today for two reasons. One is to let them know just how proud I am to be one of them and, two, to show what can happen when a group decides to solve a problem for one of their own. The Spartan class of '78 meet on an ad hoc basis, and we've been doing so for a long time. This event and the phenomenal results it has achieved have quite likely changed us all and taught, so long after the lessons ended, that maybe Kevin Murphy was right about Proverbs 17:17 when he said: "Friends always show their love. What are brothers and sisters for if not to share troubles?"

Interestingly, Mr. Speaker, Archbishop O'Leary high school turned 50 last year, as did most members of the grad of '78.

Good luck, Al. I hope that very soon I can introduce you to this Assembly while you show us a few of your old moves. Remember that "there is no medicine like hope, no incentive so great, and no tonic so powerful as expectation of something tomorrow."

Thank you.

The Speaker: The hon. Member for Calgary-Mountain View.

Provincial Budget

Dr. Swann: Thank you, Mr. Speaker. This government must aim higher to protect Alberta's economic future. Folks on the far right say that the government has a spending problem. Folks on the left say that the government has a revenue problem. The truth is that this government has a management problem. This is the third deficit budget in a row. The sustainability fund will soon run dry, and this government acts as though they're playing with an endless supply of Monopoly money, that they can just start the game over when they go bankrupt.

This is not a game. Alberta Liberals believe in stable funding for core people programs such as health, education, and social services. These are essential public institutions and services, that Albertans value tremendously. They protect public health. They enhance Alberta's prosperity. If we want to protect core people programs for the long term, this government needs to start slashing wasteful spending now. Government travel, communications, external consultant spending can and should be significantly trimmed. Trim the size of your bloated 24-member cabinet to a more efficient 17. Scale back investment in carbon capture and storage. Stop throwing subsidies at private golf courses and horse racing. Spread out the spending on capital projects. Perhaps more importantly, this government needs to build a comprehensive long-term savings strategy.

The sustainability fund was a fine Alberta Liberal idea designed to pull Alberta through short-term financial problems, but we've also advocated strongly for a long-term savings plan, with targeted investments to fund core people programs for the long term. Albertans shouldn't have to choose between the extremes on either end of the political spectrum and the incompetence of a tired Tory government. There is a better way. Alberta Liberals are committed to protecting people programs while eliminating wasteful spending. That's our common-sense solution for Alberta.

Thank you.

The Speaker: The hon. Member for Cardston-Taber-Warner.

Cardston Cougars

Mr. Jacobs: Thank you, Mr. Speaker. I'm honoured to rise today to share with the Assembly the outstanding accomplishments of young athletes from my constituency of Cardston-Taber-Warner. Last year the Cardston Cougars won the Alberta tier 3 football championship, defeating the Peace River Pioneers by a margin of 8 to 6 in a closely fought defensive battle. The last time the Cougars won this championship was in 1993, 17 years ago.

I would like to take this time today to applaud all of the players of the 2010 Cardston Cougars for all their hard work, grit, and determination. I would also like to thank the coaching staff and volunteers who made the victory possible. Sport is an important part of our community, and I am sure that the success of the Cardston Cougars will serve as an example to our younger generation. Through hard work and dedication anything is possible.

Thank you, Mr. Speaker.

The Speaker: The hon. Member for Edmonton-Beverly-Clareview.

Balwin Villa

Mr. Vandermeer: Thank you, Mr. Speaker. It's a pleasure to stand here today to highlight a noteworthy designated assisted living facility that is located in my constituency of Edmonton-Beverly-Clareview called Balwin Villa. Balwin Villa was developed by the Excel Resource Society and opened in September 2010. This designated assisted living facility is designed to meet the needs of family members with early onset dementia or brain injury. Eighty-nine of the units accommodate individuals with dementia and 16 accommodate individuals with brain injury. Of the 105 units 80 are for clients referred by Alberta Health Services. Through the affordable supportive living initiative this government has provided \$7 million towards the facility construction.

Mr. Speaker, this development is truly visionary as it provides an invaluable service through its enhanced facility design. Balwin Villa offers health care services as well as extensive support services and amenities. Residents of this facility can rest assured that there is a 24-hour nurse presence and round-the-clock security. Not only are the needs of the residents met, but also their lifestyles are maintained.

This designated assisted living facility is great news for my constituency and for the city of Edmonton and for this province.

Thank you, Mr. Speaker.

The Speaker: The hon. Member for Cypress-Medicine Hat.

Training Program for Older Workers

Mr. Mitzel: Thank you, Mr. Speaker. I had the honour of attending an event in Medicine Hat on Friday, February 25, to acknowledge Alberta's first training program funded under the recently signed targeted initiative for older workers federal-provincial agreement. This cost-sharing agreement will see the province providing a maximum of \$1.6 million and the federal government providing up to \$8.45 million over the next two years, benefiting up to 1,600 people.

Funding for this agreement is provided through Employment and Immigration's Alberta Works program to assist unemployed older workers between the ages of 55 and 64 gain new skills, preparing them for new jobs. Eligible communities include those with a population of less than 250,000 that have experienced high un-

employment and/or a high reliance on a single industry affected by downsizing.

Mr. Speaker, Medicine Hat is Alberta's first training initiative, which will see 24 older workers obtain the support and training they need to secure employment and adjust to the changing world of work. Many of these older workers may have retired from their original career or have been laid off due to the economic downturn we've experienced over the past two years.

There is no question that some older workers are having difficulty getting back into the workforce even as we continue to see steady improvements in the economy. The skill sets required are vastly different from what they previously used.

Older workers are part of Alberta's growing labour force, and we cannot afford to have them sitting on the sidelines. Alberta needs a fully utilized labour force, connected with the community and engaged in meaningful work. Every indication is that there will be labour shortages again in the near future, and these older workers bring a maturity and life experience to the labour market.

Mr. Speaker, I look forward to seeing the positive impacts that this new funding will bring to unemployed older workers in the Medicine Hat community and many others across Alberta.

The Speaker: The hon. Member for Edmonton-Ellerslie.

2:50 Industrial Energy Efficiency Projects

Mr. Bhardwaj: Thank you very much, Mr. Speaker. The Conference Board of Canada recently estimated that \$6.1 billion will be spent in Alberta on clean energy technology over the next five years. That's more than all other Canadian provinces combined.

Earlier today the Climate Change and Emissions Management Corporation contributed to this exciting story of leadership. More than \$27 million from the climate change and emissions management fund is benefiting six new projects that promote energy efficiency right here in Alberta. This investment means we are now pioneering advancements in nanotechnology, gas capture methods, and electricity generation.

With this announcement the corporation has invested nearly \$100 million dollars in clean technology projects since its creation in 2009. This money is collected from industry as part of complying with our climate change regulations and leveraged into significant emission reduction projects that demonstrate Alberta's commitment to a clean energy future. The fund is an integral part of Alberta's innovative system for regulating greenhouse gas emissions. After all, technology is the foundation of Alberta's climate change strategy and will ultimately help transition our province to a clean energy future.

Please join me in commending the Climate Change and Emissions Management Corporation for their important work and in congratulating NRGreen Power, ConocoPhillips Canada, Weyerhaeuser Company, Cenovus Energy, EnCana Corporation, and Quantiam Technologies as recipients of this latest round of funding.

Thank you very much, Mr. Speaker.

Alberta Achievements at 2011 Canada Winter Games

Ms Tarchuk: Mr. Speaker, I'm pleased to rise today to congratulate Team Alberta on their tremendous performance at the 2011 Canada Winter Games in Halifax. Three hundred and thirty-seven athletes, coaches, mission staff, and artists from 49 communities represented our province with pride and enthusiasm at the games. They collected an impressive 75 medals, finishing fourth overall in team standings.

Team Alberta had a strong blend of talent, experience, and enthusiasm, exemplified by our success on the podium, and a strong sense of camaraderie, with team members cheering each other on at every event. Our flag-bearer, Canmore's Scott Gow, raced his way to the podium, winning four gold medals in biathlon, part of the 12 total medals collected by Alberta's biathlon team. But, Mr. Speaker, Calgary snowboarder Pierce Mimura wins a gold medal for overcoming adversity. He dislocated his jaw and shattered several teeth in a race before the games yet toughed it out without pain medication to finish sixth overall in the men's half-pipe. Jesse Cockney, also from Canmore, captured an emotional bronze and two gold in cross-country, matching his father's gold medal count from the 1975 games.

Mr. Speaker, I wish I could list all of the competitors and their many achievements. Obviously, I can't in this short time, but suffice it to say that they all deserve our congratulations. They have made Albertans very proud.

Thank you, Mr. Speaker.

Introduction of Bills

The Speaker: The hon. Solicitor General and Minister of Public Security.

Bill 7

Corrections Amendment Act, 2011

Mr. Oberle: Thank you, Mr. Speaker. I request leave to introduce a bill being the Corrections Amendment Act, 2011.

[Motion carried; Bill 7 read a first time]

The Speaker: The hon. Member for Whitecourt-St. Anne.

Bill 8

Missing Persons Act

Mr. VanderBurg: Thank you, Mr. Speaker. I rise today to request leave to introduce first reading of Bill 8, the Missing Persons Act.

The Missing Persons Act will allow police agencies in Alberta to access the personal information they need to help find missing persons in cases where the police have no reason to suspect that a crime has been committed. This act also ensures that the information collected is protected if the former missing person does not want to be contacted once found. Information collected under this act is confidential and can only be used in situations cited in the legislation. Records and information collected must be kept separate from other police agency records and will not be shared through the TALON database.

Thank you, sir.

[Motion carried; Bill 8 read a first time]

The Speaker: The hon. Deputy Government House Leader.

Mr. Renner: Thank you, Mr. Speaker. I move that Bill 8 be moved onto the Order Paper under Government Bills and Orders.

[Motion carried]

Tabling Returns and Reports

The Speaker: The hon. Minister of Energy.

Mr. Liepert: Thank you, Mr. Speaker. I would like to table today the required number of copies of a report of the Energy Resources Conservation Board on a well blowout, Canadian Natural Resources, in February of 2010. This particular blowout was the subject of an inquiry by the Member for Calgary-Currie last fall in the House, so I'd like to table the number of copies today.

The Speaker: The hon. Member for Banff-Cochrane in her capacity as chair of the Standing Committee on the Alberta Heritage Savings Trust Fund.

Ms Tarchuk: Well, thank you, Mr. Speaker. Pursuant to section 15(2) of the Alberta Heritage Savings Trust Fund Act as chair of the Standing Committee on the Alberta Heritage Savings Trust Fund it is my pleasure to table the 2010-2011 third-quarter update on the fund, and copies will be distributed to members this afternoon.

Thank you.

The Speaker: Hon. members, pursuant to section 39(3) of the Legislative Assembly Act the chair wishes to table with the Assembly copies of orders that were passed by the Special Standing Committee on Members' Services at its December 8, 2010, meeting. Included are the Executive Council salaries amendment order No. 6, members' allowances amendment order No. 19, and members' committee allowances amendment order No. 7. All of the orders came into force the day they were passed.

The chair would also like to table some other related orders for the records of the Assembly: Executive Council salaries amendment order No. 5, members' allowances amendment order No. 18, members' committee allowances amendment order No. 6, and for the sake of completeness the constituency services amendment order No. 22 and the records management order No. 2.

Orders of the Day

Public Bills and Orders Other than Government Bills and Orders Second Reading

Bill 201

Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011

The Speaker: The hon. Member for Edmonton-Manning.

Mr. Sandhu: Thank you, Mr. Speaker. I am pleased to rise today and begin second reading debate on Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011.

I am proud to say that this is my first bill since being elected. Mr. Speaker, I am bringing forward this bill because I believe that it will help people all over the province and Canada. It would do this by changing the way we become organ donors. If Bill 201 is passed, all Albertans would have to declare their organ donors choice on the back of their Alberta health card. People would not be forced to become donors, but they would have to choose either yes, no, or undecided. Bill 201 would not apply to people under the age of 18 or to people otherwise unable to provide their consent, and Bill 201 would not apply to holders of current Alberta health cards unless they lose their old one and need to apply for a new card.

[Mr. Mitzel in the chair]

Changing the way we declare our organ donor status has the potential to greatly increase the amount of organ donors. As it stands right now, all of Canada is facing a serious shortage of usable organs, and the problem stems from our volunteer rates. In fact, in Canada only 13 out of every million people successfully donate an organ. This is alarming, Mr. Speaker. This is one of the lowest rates in the developed world.

The organ system that we use now lets people choose the option of doing nothing. Mr. Speaker, unless an individual chooses to become a donor and takes the steps to make it so, we assume that they did not want to donate. I believe that our failure to donate organs comes from how easy it is to simply ignore the question and avoid the topic of death. If I were to pass away, my wish would be yes to donation, hoping I could help someone, but it is not written anywhere, so my wife may not know my wish and choose differently.

No one wants to think about their own death, and no one wants to think about an organ being taken from their body. Rather than confront this difficult scenario, we ignore the choice and do nothing, and in Alberta doing nothing means that organs stay where they are. It means that people wait in pain for life-saving transplants, and it means that people die. This bill would not force people to become organ donors. That would be wrong. Instead, Bill 201 would require people to think about organ donation even if they choose to remain undecided.

3:00

Mr. Speaker, I believe this is a good bill. I believe this will save a great many lives and will improve the quality of life for many more. I believe that this bill could save our health care system millions of dollars and improve the quality of life for numerous individuals.

As it stands right now, treating one person for kidney disease can cost up to \$60,000 per year. This means that if a person was living with kidney failure for five years, that would cost our health care system well over \$250,000. However, transplanting an organ would now only cost about \$20,000 plus around \$6,000 per year for the cost of transplant medications. This not only represents huge savings but also greatly improves the quality of life for the patient. This is only one example of many, Mr. Speaker. This is just for one patient.

At present Canada has well over 3,000 people on waiting lists; Alberta has well over 600. If we were able to provide working organs to all of these people, the total savings could be great. This is money that could then be used in other areas of our health care system for helping and saving lives. Donating an organ is one of the most noble, selfless things that a person can do once they pass. In fact, every donor has the ability to save the lives of eight people. In addition, over 75 people can be helped with the tissues of one donor.

Second, I have heard concerns that not providing an Alberta health care card if they failed to answer the organ donation question would be heavy-handed, and I agree with this statement, Mr. Speaker. It's not my intention to deny people a health care card or health care if they choose not to declare their organ donation status. I believe that this bill could be amended to remove this misinterpretation. I believe that the idea of this bill is good and that if we move it forward to Committee of the Whole, we can make the change needed to finalize this idea.

Mr. Speaker, I would now like to take some time to address some of the concerns I have heard about Bill 201. First, there is a concern that Bill 201 would force people to become organ donors. This is not the case. People would be compelled to choose either yes, no, or undecided but would not be forced to donate an organ

if they do not want to. In addition, a person could choose to stop being an organ donor whenever they wanted.

Second, there is a concern that if a person did not wish to choose yes, no, or undecided, they would not receive an Alberta health care card and would not be able to get health care. Again, this is not the case. If people refuse to select either yes, no, or undecided, they would not receive an Alberta health care card, but they would still receive health care card numbers and receive health care. So in the end, the punishment for not choosing between yes, no, or undecided would be nothing more than a minor inconvenience. As well, an exemption would be in place for people's religious or moral concerns about declaring organ donor status.

Third, there is a concern that the bill may overstep personal boundaries, that organ donation would not be a personal decision made between individuals and their family. Mr. Speaker, I agree with this and would stress again that Bill 201 does not force a person to become an organ donor. Rather, I believe that Bill 201 will raise awareness and give people the push they need to talk with their family and make their wish known.

Finally, there is a concern that issuing a new Alberta health care card may be a financial burden on our health care system. While I agree that the change in Bill 201 may lead to a small increase in costs, I would argue that these costs would be easily offset by savings to our health care system that are the result of increasing organ transplants.

Mr. Speaker, Bill 201 is a measured approach that has the potential to increase organ donation rates in Alberta without overstepping government boundaries. I believe that this legislation is fair and in the best interests of the health care system. In addition, I believe that this change is supported by many Albertans. In fact, I've received many phone calls from people and organizations all over the province and Canada, and they all agree that this legislation has the potential to save many lives.

In closing, I would like to say that the impact of the bill could be great. It could incredibly increase the amount of organs donated by Albertans, it could save our health care system millions of dollars, and it could save the lives of hundreds and improve the lives of thousands more. I believe that this bill is in the interests of all Albertans, and I strongly urge all Members of the Legislative Assembly to support Bill 201. Everyone here today may be faced with a tough situation where a loved one or themselves need an organ donation. This bill is truly good for all. I would appreciate your support.

Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much, Mr. Speaker. Speaking to private member's Bill 201, I want to begin by thanking the hon. Member for Edmonton-Manning for bringing this forward. There is no doubt that improving the number of organs for donation will contribute to lives and quality of life. The problem with this particular piece of legislation is the mandatory nature. I agree with the hon. member that promoting education is key, but the mandatory nature suggests that there's some sort of penalty associated with not filling out your card. Whether you say yes, no, or undecided, there is the expectation of enforcement, and with that enforcement comes a cost.

Now, when we have discussed how best to indicate your desire to donate your organs, one of the problems that occurs is the first on the scene being police and ambulance paramedics and the possibility of your intention not going along with your body or your damaged circumstance to the hospital so that the organs that you

have indicated clearly that you wish to be donated can be present. I've suggested, for example, in terms of trying to improve the availability of organs for donation and the decision that a person has made to provide those organs, it would be either as a part of their driver's licence, where that is the singular piece of information that is most likely to be collected at the scene of an accident – obviously, the intention would be clearly represented – or if not on the driver's licence, I've also suggested previously on an electronic health card which a person would carry with them and would be also available for easy access to hospitals to determine their health care record so that it would be of a more permanent nature. Also, there would have to be security clearance proof so that it couldn't be accessed by anyone other than the medical system or the police forces for which it was intended, so that desire to provide that donation would be clearly indicated.

3:10

While I support the whole idea of improving the importance of the education process of Bill 201, unless individuals can come up with some type of an amendment that would get beyond the mandatory nature, which is the sticking point of this particular legislation, I'm not sure how it can be viewed successfully. There's no doubt about the value of organ donations, and there's no doubt about the need to improve the procedure by which organs can be donated. The reality is that currently – and I believe it's correct – a family member can potentially overrule an individual's donation request, so even if an individual indicated with this new process that they were willing to donate their organs, there is the possibility that in the time it takes to get the approval of the family members to the original consent, the time for harvesting would have gone by. So it's an additional complication.

I do want to thank the hon. Member for Edmonton-Manning for raising an extremely important issue. I'm just concerned that this may not be the most appropriate vehicle to achieve the improved education that the hon. member is trying for. I support the intent. I'm just not sure about this being the best vehicle to accomplish that intent.

Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Drayton Valley-Calmar, followed by the hon. Member for Calgary-Fish Creek.

Mrs. McQueen: Well, thank you, Mr. Speaker. I'm pleased today to rise and join the debate on Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011, brought forward by the hon. Member for Edmonton-Manning. Bill 201 proposes to ensure that all Albertans make an explicit choice regarding organ donation through indicating their intention on the back of their Alberta health cards. In the event that an individual is not yet ready to make such a decision or if they have made their choice but are uncomfortable making that choice publicly known, the opportunity would remain to select undecided as their official organ donor status. Children below the legal age of consent and adults who are unable to provide consent would be completely excluded from the requirements proposed in the bill.

Mr. Speaker, the intent of this bill is to increase the amount of organ donors in our province, which would save the lives of many who are waiting for transplants. I am just one of many examples of many Albertans who have needed a transplant organ. Years ago I received a cornea transplant thanks to an individual who signed their health card or made their intentions known to their family. This bill fills a very important void and deserves our consideration in this House.

There are several legislative ways in which to approach organ donation, the most common of which are the consent solution, or opt-in, and dissent solution, or opt-out. The consent solution would require individuals to explicitly state their desire to be an organ donor. Should they not make this declaration, it would be assumed that they do not want to become donors. Conversely, the dissent solution would require individuals to state that they do not want to become organ donors; otherwise, by default they would be.

In Alberta, as in the rest of Canada, we currently use the consent solution, requiring Albertans to declare their intention to become organ donors. If this declaration is not made, no organs would be donated. Mr. Speaker, this declaration is usually made on the back of the health care insurance card, but it can also be made in writing in the presence of two witnesses. Unfortunately, it seems that this approach is not always as effective as we would hope. While there are no organ donation statistics specific to Alberta, only 13 Canadians of every million actually donate their organs. This is one of the lowest organ donation rates in the western world, and this lack of organ donation means the difference between life and death for many across this country and Albertans.

For whatever reason, it seems many Albertans have not signed the back of their health cards or spoken with family members about their final wishes. Bill 201 would make the declaration of one's decision regarding organ donation via their Alberta health card, and while there is an option to remain undecided, the fact that one must indicate as such compels each and every Albertan to seriously consider the matter of organ donation.

While I believe this bill fills a very important role, there is one particular issue that causes me to hesitate in supporting it completely. According to this bill if an Albertan were not to sign their declaration, they would not be issued an Alberta health card. They would receive a health care number and would be required to be treated by law but would not receive the actual physical card. This is a great concern as I have heard first-hand accounts from constituents and Albertans who have required medical treatment but, for whatever reason, did not have their card on their person and were turned away.

We cannot deny Albertans the right to health care, and in withholding the physical document from them, this could become an obstacle to the delivery of timely medical care. So I look forward to the hon. member bringing forward amendments in committee to ensure that Albertans still receive a card, no matter what their declaration is.

Mr. Speaker, I am confident that this bill will help to increase awareness in our province regarding organ donation and, hopefully, help to increase the number of donors, which would in turn save more lives. For example, in 2008 there were 4,380 Canadians nation-wide on organ transplant waiting lists. Of those individuals, 215 died waiting, including 60 Albertans. Perhaps making a clear declaration regarding one's desire to become an organ donor would have saved more of those lives.

Mr. Speaker, Bill 201 would absolutely not force Albertans to become organ donors; it would simply require Albertans to make a decision regarding the matter. That way, should the unthinkable happen, health care professionals would know right away if an individual was a donor, saving precious time. I would urge all Albertans to have this conversation with their families to ensure that their wishes are followed.

The choice to become an organ donor is a very personal one and requires a great deal of consideration. We recognize that there are Albertans who are not comfortable with becoming an organ donor. The intent of Bill 201 is to get Albertans thinking about organ donation and its potential to save the lives of many and greatly

improve the lives of many more. For this reason I feel this debate is very important, and I thank the hon. Member for Edmonton-Manning for bringing this important issue to our attention.

Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Calgary-Fish Creek, followed by the hon. Member for Calgary-Nose Hill.

Mrs. Forsyth: Thank you, Mr. Speaker. I'm pleased to stand up and speak to Bill 201, which amends the Alberta Health Insurance Premiums Act, called the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. I am going to listen carefully to the debate and will put on the record that I'm a huge organ donor/transplant supporter. I brought forward a private member's bill many, many years ago, and we had this discussion. I think the Member for Calgary-West also brought forward a bill, if I recall.

I can't help but wonder – and I speak from experience because I had the honour of chairing the Advisory Committee on Organ and Tissue Donation and Transplantation probably a decade ago. I'm finding it ironic that we're debating Bill 201, on the subject of organ donation, when five years ago we were debating Bill 201, the Human Tissue Gift (Notification Procedure) Amendment Act, 2006. That act had made it mandatory for medical professions to notify the human organ procurement and exchange program when a person dies or is about to, and there is a suitable donor.

There are so many things that I like in this bill, and there are things that I like about the intent of the bill. I'm a little hesitant when we talk about mandatory and then talk about some of the things that I'm hearing from the hon. Member for Drayton Valley-Calmar when she speaks about not being able to get their health card.

I guess I'm wondering, and I'm sure the member can tell me. There was a committee that I chaired that talked about comprehensive legislation to improve organ and tissue donation in Alberta. Sadly, it seems that the progress has been somewhat slow and uneven. Again we're relying on a private member's bill and not a government bill to bring this important issue forward.

3:20

The member can maybe tell me what's come out of that committee. I know that it was a very, very comprehensive committee and had some wonderful health experts and professionals on it. It would be interesting to see what they have to say about this private member's bill and, particularly, if this has stemmed from that particular committee and this is what they're recommending to speed up the organ donation. As long as I can remember I've been a donor, since 1976 – and I hate to put that on the record because then it really does age you – and I've gone through all the tests, which I'm sure many people in Alberta haven't. I can pull out my organ donation card, that will give you exactly what my blood type is, what my tissue type is. That's what they did many, many years ago.

The experts are calling and have been calling for as long as I can remember for greater co-ordination and long-term planning for organ donation and how we need to think ahead, if a catastrophe appears. There's nothing worse in my mind, God willing, than being a parent and having to make a difficult decision when you have a child that is in intensive care. We travelled with the safe communities task force. I had a friend go through that when her son was murdered, not only having to deal with this child who looked perfectly, perfectly normal and making the decision, one, that there was no brain activity left but, two, then being approached by the same people asking if they would be willing to

donate Devin's organs. I don't know how many times I've heard the mother speak. I can only tell you that every time I do hear her speak, there isn't a dry eye in the house in regard to her horrific story about her son.

Currently, from the quick numbers that we were able to grasp, there are over 400 people in Alberta waiting for organ donation. While the stats are telling us that half of them will receive the needed transplants, many unfortunately do not receive theirs in time. As I indicated, as the organs shut down, they must endure the pain along with the family watching the lives of those they love slip away.

Canada has one of the lowest donation rates in the world. One dying person can have a huge, huge impact on saving someone else's life, and I'm sure the hon. Member for Drayton Valley-Calmar can tell of the impact that she's received from her cornea transplant. It's indicated in the records that we've been able to find that one donor can help as many as 80 people. Most people don't realize just how long people wait for donations. Albertans have a shorter wait than most for kidney transplants, but the wait is still two and a half years. The financial implication with regard to being on dialysis – and the member brought that up – is about \$60,000 a year.

A very simple but overlooked step to improve donation rates is education, and we've heard some discussion about that. I think Ontario and B.C. have taken a leadership role by creating donor registries. Government agencies – and I say that with all sincerity; the government, not a private member's bill – have actively promoted organ donation, and the results are worthy to look at.

The committee that I chaired called for a provincial organ and tissue donation and transplant system. You know, I keep alluding to this committee, and I'm hoping that as we go through this debate, the member will bring out the committee's findings. In my mind that has been a worthwhile procedure from the government. I haven't seen what the committee's recommendations are, and it certainly, I think, would be worth while as he proceeds through the processes of second reading and committee. There already have been some recommendations in regard to bringing some amendments forward, and I think that, rightfully, that's something that we have to do.

I think what's important to remember is that this donation system that we have currently in this province relies on the goodwill of others. A living donation is a serious decision, and I think it's another thing that needs greater support from our government. The government has taken a small step by allowing compensation to living donors for their travel expenses and income losses up to \$5,000. At the federal level – and I've had the opportunity to meet with the people involved in this – caregivers are given compassionate leave.

It's interesting that this bill has also been introduced in the spring session. National organ and tissue donor awareness week is in April, and I'm sure we can count on a member's statement from the member that's bringing this private bill forward. I hope, again, that the debate of this bill – and I said that this is the third private member's bill: myself, and I'm sure it was the hon. Member for Calgary-West, and now we have the hon. member bringing forward another private member's bill.

Ms Calahasen: Are you going to vote for it?

Mrs. Forsyth: Yes.

Mr. Speaker, I guess one of the things that I want to reiterate over and over again – and I was with the government when I brought that private member's bill forward, and I know that the other two members are still with the government – is that nothing

will move this further and faster and get it done quicker than if it's a government bill. If the priority is for us to increase organ donation, then instead of a private member bringing this bill forward – and as I explained, we're on our third private member's bill – why is the government not bringing this bill forward? There is a huge cost savings by getting people off dialysis and all the other things that go with it. I'm going to look forward to the debate.

I'm going to end the same way as I ended probably 10 years ago when I brought my private member's bill forward: don't take your organs to heaven; heaven knows we need them here.

The Acting Speaker: The hon. Member for Calgary-Nose Hill, followed by the hon. Member for Edmonton-Strathcona.

Dr. Brown: Thank you, Mr. Speaker. It's an honour for me to rise today and speak to Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. Unlike the previous speakers, I'm pleased to give my unqualified support to Bill 201. Bill 201 has the important objective of increasing organ and tissue donations in the province.

Specifically, the bill is proposing to create a requirement that Albertans of legal age would make an explicit expression regarding their organ donor wishes and that those wishes would be inscribed on the back of their Alberta health card. Now, Mr. Speaker, when I say wishes, I mean just that. When a person dies, they no longer have any personal capacity to direct what might become of their organs or their tissues or their body. Wishes regarding the disposal of one's remains after death are just that: wishes or desires. The final decision always rests with the next of kin or those who are the personal administrators of the estate of the deceased. No one is ever going to be forced to become an organ donor by virtue of the fact that they've chosen one way or the other on this card. They're merely expressing their wishes as either yes or no or undecided. What could be more simple?

Mr. Speaker, people are dying needlessly in our province and across Canada, people who could lead productive lives, people who will die far too young, leaving behind grieving families, children without parents, parents who've lost a child, husbands or wives who've lost their spouse. They're going to die because there's a critical shortage of organs in this country for transplantation. They will die because families or their executors have not taken the opportunity to donate their organs to an organ bank. Currently there are almost 4,000 Canadians, including more than 400 Albertans, on the waiting list for an organ transplant. This proposed legislation has the potential to decrease the waiting list and to save lives.

Mr. Speaker, I know that the issue of tissue and organ donation can sometimes be a sensitive topic. First of all, I think the reason behind that is that no one likes to contemplate dying, but die we all must at some point.

3:30

Secondly, there is a reluctance to contemplate someone somehow violating the *corpus delicti*, the person's body after death.

Thirdly, there may be some particular custom or ritual that we associate with one's faith or one's culture, and those must be respected, of course. But the fact of the matter is that most religious beliefs do not in any way conflict with the process of organ donation. The Bible says words to the effect that greater love hath no man than that he should lay down his life for his fellow man, and I would say that a corollary of that teaching is: what greater bequest can we as human beings leave behind when we depart this mortal coil than to give the gift of life to another person? The Bible also talks about faith, hope, and charity and that the greatest of these is

charity. It also says, "Thou shalt love thy neighbour as thyself." These are moral principles that transcend human philosophy.

Mr. Speaker, the process of organ and tissue donation is an amazing and innovative development of modern science. I remember on December 3, 1967, when the news came out that a South African doctor, Dr. Christiaan Barnard, performed the first heart transplant operation. The patient was a Mr. Louis Washkansky, a 54-year-old grocer who only survived 18 days after the transplant. But it was an important step. Those two people made an important step forward in medical science.

The improvement of antirejection drugs has enabled us now to have almost routine transplantation of many organs, including heart, liver, pancreas, kidneys, lungs, small intestines, and even parts of the brain, the dura mater. If organs and tissues are healthy and in good condition, nowadays there is about an 85 or 90 per cent success rate with transplantation. These organs are vital to our lives and maintaining our quality of life. Tissues that can be transplanted, as I mentioned, in addition to those organs, are things like bone marrow, cornea, sclera, the brain's dura mater, heart valves, skin, tendons, veins.

Mr. Speaker, voluntary donations from living individuals, such as where a person donates a kidney or a lobe of a liver, would not be affected by this legislation. The bill is only a means of signifying the wishes of a person who has become clinically dead, and thereby making their wishes known is assisting the next of kin in making that decision.

The organ donation process also has a time limit that is critical, and that's where this signifying of the wishes is so important. Organ donations come from traumatic accident victims sometimes such as fatal head injuries resulting from motorcycle crashes or vehicle crashes. Organs can also be donated from persons who are under active medical care in very limited circumstances. According to Alberta Health Services transplantation can be permitted with the specific consent of the next of kin in circumstances where the donor is brain-dead and where the donor is also reliant on artificial life support.

We know that organs can be preserved for a very limited time in a refrigerated state before the cells begin to die and they are no longer useful, so the bottom line is that decisions on organ donations have to be made quickly. They have to be made expeditiously, and that is why having the deceased person's wishes known to the next of kin will help the next of kin to make those decisions in an expeditious way while those organs can still be harvested and used to donate to others.

Just for information, colleagues, some of the times that these organs can be kept are very, very short. For a heart and a lung it's about four hours, for a liver somewhere in the neighbourhood of 18 to 24 hours, for a kidney 12 to 24 hours, and for a pancreas 12 to 24 hours.

As I mentioned, most of the patients who have the opportunity for organ donation have been determined brain-dead, and often they are in a hospital intensive care environment.

Some tissues, of course, can be preserved for longer periods of time, and we call those banked tissues. An example of a banked tissue could be something like skin tissue that's preserved for reconstructive surgery or skin grafts for burn victims and so on.

Mr. Speaker, the personal choice of donating organs and human tissues is the right thing to do. One person, through signifying their organ donation and through having their next of kin follow through with those wishes, can actually save the lives of up to eight other individuals.

We must never lose sight of the fact that becoming an organ and tissue donor is a personal decision. It's a personal decision not of the deceased but of the next of kin, but for the reasons mentioned,

those next of kin have a decision which is much easier taken when they know what the wishes of the deceased would have been. It's a decision that is best discussed beforehand with family and friends.

In conclusion, Mr. Speaker, I would strongly support Bill 201 as an interim step towards increasing the supply of organs and tissues and saving Albertans from premature death. I'd like to thank the hon. Member for Edmonton-Manning for bringing Bill 201 forward, and I urge all of my colleagues to give this bill their wholehearted support.

The Acting Speaker: The hon. Member for Edmonton-Strathcona, followed by the hon. Member for Edmonton-Beverly-Clareview.

Ms Notley: Thank you, Mr. Speaker. It's a pleasure to be able to rise to speak very briefly to Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act.

I rise to indicate that certainly I will be giving my support to this bill, and I would like to offer my thanks to the Member for Edmonton-Manning in his decision to bring this bill forward. It strikes me that for the most part this is a bill that's designed to get at some of the administrative roadblocks that sometimes arise in terms of ensuring that the desire or the wish, as had been so clearly pointed out by the previous speaker, of a potential donor is communicated in the way necessary to ensure that that wish is acted on.

At this point we have a system that still makes it difficult sometimes to connect that desire on the part of the potential donor to the process whereby that desire is appropriately acknowledged. It appears to me that this is one strategy, not the only strategy, certainly, but one strategy, to ensure more opportunity for Albertans who likely wish to have that donor decision made and recorded in a way that will ensure that their wishes are taken into consideration when the time comes. It ensures that those folks have better opportunities, and for that reason I support the purpose of this bill.

I note that at this point there aren't a lot of other jurisdictions, as far as I can see, that have legislation like this in place, but our trusty researchers indicate that similar legislation has been put in place in New Jersey, I understand, and that that has resulted in quite a significant increase in the number of donors in the system.

I think as well that when previous speakers have raised concerns around the potential cost of enforcement around this process, it is important for us to remember to balance whatever costs might accrue through this bill being implemented against the cost of not providing the treatment to those Albertans who require organ transplants, and previous speakers have already identified that we have roughly 400 Albertans currently on our waiting lists. It has been reported that by moving those people off the waiting list through increasing access to donors, we could save up to \$20 million per year.

I think that the cost savings to our health care system achieved through giving people the health care that will result in them not having to get intensive care while waiting for donors ultimately need to be taken into account. So this is not only a bill that would improve the quality of health care made available to Albertans, but it is also a bill that might and will likely result in achieving cost savings to our health care system.

3:40

I have noted the concern raised by one particular member about whether or not withholding the production of the actual card is the best mechanism to ensure that people fill out the card, and I anticipate hearing more about that issue from the sponsor of this bill as

the debate unfolds. However, overall I certainly do believe that we need to find as many ways as we can to link people who wish to donate organs to the institutional mechanisms necessary to ensure that those wishes are acknowledged.

Of course, should we get to the point where this bill is not only passed but implemented, we will need to turn our minds to other issues that impact on this; for instance, the wait-lists that currently exist for many surgical procedures across the province. We would want to ensure that we have the capacity to capitalize on the benefits of additional organ donors in Alberta should this piece of legislation pass, and that is a very important issue to consider.

Previous speakers have also questioned why this is not a government bill because, of course, that would ensure its speedier passage and implementation, and that is certainly a good question to ask.

Certainly, I do want to thank the Member for Edmonton-Manning for bringing this bill forward, and again I will say that on behalf of the NDP caucus this bill will receive our support. Thank you.

The Acting Speaker: The hon. Member for Whitecourt-Ste. Anne.

Mr. VanderBurg: Thank you, Mr. Speaker. I appreciate the opportunity to join the debate on Bill 201. I'd like to thank the Member for Edmonton-Manning for his work and dedication on this bill.

Mr. Speaker, Bill 201 provides the opportunity to rethink attitudes and approaches surrounding this very serious issue, organ and tissue donation. While I speak, for people that are listening, I hope that they look in their wallets or purses and pull out their Alberta personal health care card and check the universal donor declaration on the back and see if they have at least done that. If you haven't, I encourage you to make that declaration right now, while we speak.

You know, since I've been 17 years old, I've been giving blood. I was as a very young man awarded by the Red Cross Society a certificate for donating over a hundred pints of blood and very early signed onto the bone marrow transplant program as well. Again, things that we can all do in our daily lives: every 56 days just go across the river, have a cup of coffee and a cookie, and take half an hour to give blood. What an easy way to contribute to mankind.

You know, Bill 201 makes it a requirement to say, "Yes," "No," "I'm undecided" regarding their organ status on the back of their health card. I don't know if that's the right way to do it or if it's the wrong way to do it, but like earlier said, through the discussion in this House we'll find the right way. This is a right motion. It's the right thing to do. If we overlook this opportunity and we overlook the dedication that this man on this private member's bill has, I think we make a mistake. If the wording is wrong, let's correct it. We have lots of time during the debate, whether it's in Committee of the Whole or further on, to make amendments, but let's hear what everybody has to say on this. You know, there's a lengthy wait-list for those in need of organ or tissue transplants in Alberta, across Canada, throughout the world, and there are many strategies that might work or might not work, but I think what's unacceptable is to do nothing. It's unacceptable.

In Ontario, in Quebec, you know, they're rethinking this process right now. Ontario introduced some new legislation. What happened? People got talking about it. Organ donation went up 17 per cent. So one man can do something different. In the Legislature there that's what it took, one person to introduce the legislation and his colleagues to get behind him.

I don't care about the wording. I care about the motive of this individual, I care about this piece of legislation and what it says, and I care about the people that are in need of the transplants, whether they be our children or our parents or our friends or our neighbours. We have an obligation to help out, and this Legislature can fulfill that obligation very, very simply by supporting this bill, by helping this member rework the wording in this bill. Together we'll make a difference. Together we'll save lives, and there's not a better calling than that.

Mr. Speaker, I think we need to take a look at the intent of this legislation. I know in my heart and I know that in everybody's heart here we can find a way to make this thing work.

To you, Member for Edmonton-Manning, I thank you for introducing this. I thank you for getting this discussion on the floor. I hope that people here can all look upon themselves to do what I just asked. Just take a couple of minutes and look at your health care card. Sign it if you haven't. Support this legislation, and let's move on.

Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Calgary-McCall, followed by the hon. Member for Edmonton-Calder.

Mr. Kang: Thank you, Mr. Speaker. It's my great pleasure to speak in favour of Bill 201, brought forward by the Member for Edmonton-Manning. As mentioned before, too, there are 400 Albertans that are on the waiting list. It seems like when we're talking about the waiting list, there is a bigger waiting list, but I'm shocked that only 400 people are waiting, you know, for organ donations. I think one person, by bringing this bill forward – you know, this is like giving a ray of hope to those 400 people who are on the wait-list. This bill, I believe, will go a long way, if passed, to help reduce those waiting lists.

We all have obligations to our families, and we have obligations to society as a whole as well because when we get out of our own family circle, you know, we are a big family. In Alberta we are a big family. In Canada we are a big family. There are 4,000 people on the waiting list Canada-wide. Bill 201 would make it mandatory for any Albertan over the age of 18 to fill out their organ donor card when they receive their health card ID. I think that will be a little reminder for everybody that this is a good deed we should all be doing.

My only concern is that if the member doesn't fill out their donor card, they will get the registration number, not the health care card or some kind of health care ID, and that may be prone to abuse. Maybe a person is sick, you know, he doesn't have the proper ID, and he has the registration number. He can maybe be turned away from the medical facility, saying: that's not your number. That's my only concern, and I hope that concern can be dealt with as the Member for Edmonton-Manning assured me earlier that he will be bringing an amendment that people not filling out their donor card will still be getting their registration card.

As we know, Alberta has the lowest donor rate in Canada. We have to do something, have some kind of method in place, to improve our donor rate. This will impact Albertans receiving the health card. It would be required to fill out the organ donor information by indicating yes or no or undecided.

3:50

Although it's very difficult to estimate the impact that this requirement would have on the organ donations, we have to start somewhere. The likelihood is that in the beginning it will have minimal impact as family members still would remain able to override the preference indicated on the deceased individual's

donor card. I think we will have to have more education with that, too, like saving lives.

Organ transplant surgery costs significantly less than the medical support we provide to people who could otherwise be healthy and contributing to the economy. Reports estimate that the cost of kidney dialysis equipment is \$60,000 per year. Remember, if somebody donated the kidney, that's a savings for everybody, and the person may contribute fully to society.

Still more needs to be done to boost Alberta's low organ donation rate relative to the size of our population. I think that with Bill 201, at least, this will roll the ball in the right direction to bring awareness amongst Albertans.

You know, every person goes. We have to rise above the emotions, rise above all the religious beliefs we have. I know this one gentleman who has donated his body. He's a Sikh. He has made a will. He has given his will to his kids, and he said: you cannot change it. He said: after I go, my body should be donated for studies to the medical school. That's with much awareness. You know, once we start educating people, start talking to people about the benefits of organ donation, I think a lot more people will come around.

At least this bill will give people a chance to make the decision as to whether or not they want to donate. This bill doesn't take away individual choice as they can indicate no or even that they have yet to make a decision. By increasing the amount of filled-out organ donor cards, Bill 201 would also provide more guidance to family members asked to decide about the wishes of the deceased. If the family knows that the deceased had indicated that he was leaning towards maybe donating, it will be easier for them to make the decision to donate the organs.

I congratulate the Member for Edmonton-Manning for bringing this bill forward. I will wholeheartedly support this bill. Thank you.

The Acting Speaker: The hon. Member for Edmonton-Calder, followed by the hon. Member for Airdrie-Chestermere.

Mr. Elniski: Thank you, Mr. Speaker. I'd like also to offer my congratulations to my good friend the MLA for Edmonton-Manning for bringing forward this Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. This particular piece of legislation reminds me that often nothing really makes you think more about what you can do than actually doing something.

It's been mentioned here this afternoon by the hon. Member for Whitecourt-Ste. Anne that he's a long-standing and committed blood donor. I can't help but think that there is no one in this Assembly who, if they had a child or a sibling or a spouse who was in need of a kidney, for example, would not be, I think, first in line to have that particular test performed and, hopefully, be able to offer that particular bit of comfort or salvation to somebody that they love. This bill simply takes that idea and expands it, and it expands it to allow that same offer and that same contribution that you might be willing to make to your family member to virtually anyone that is in need.

Now, I don't know as a 50-year-old guy, you know, what parts you'd have that would have enough mileage left in them that you'd be able to use them to donate to somebody else.

An Hon. Member: Your legs.

Mr. Elniski: And I'm not so sure that a lot of them would fit, frankly. Thank you, hon. member, for the comment there. I suppose if there were someone out there who were five foot eight that

wanted to suddenly be six foot seven, we could probably cut a deal on that one.

This, I suppose, is a very good reason why we have the boxes that are indicated yes, no, and undecided. I think that the whole concept of organ donation is one that's very personal to the individual involved. Ultimately, I think there is no prior or more personal thing than one's right to the privacy of their own being, and I would suspect that while certainly that applies while people are alive, such a similar thing should also apply after they're gone. I think that the individual does in fact absolutely have the right to decide what will or will not happen to their remains. If that means that you can use them for some means, be that a donation to an institution for research or for the assistance in helping somebody else perhaps enjoy a longer life than you did, then I think that that's a very worthwhile and noble pursuit.

With this, I have to comment here briefly on some of the policies in a number of places. There are a number of European countries that operate on the basis that if you don't decide to donate, then we are in fact going to harvest, and there are other jurisdictions where if you don't explicitly say that organs can be harvested, then in fact organs will not be harvested. I think that this particular piece of legislation, the proposal that my member friend brings forward here in Bill 201, offers us something of a compromise on that point. It allows us to say: Yes; I am fully prepared, and I'm willing to allow my body to benefit whoever may so benefit from it after I pass on. It allows me to opt out of that process entirely for whatever, you know, philosophical or religious purpose or whatever it happens to be. If you don't want to do it, you can opt right out of the thing. It gives you the flexibility to do either/or.

I think the beauty of that is, of course, that it also doesn't create in mandate and in legislation some sort of government control or government intervention over, ultimately, what happens to your remains as you pass on from your mortal coil, so to speak. I think that that in and of itself is what makes the bill appeal to me.

You know, when you have a yes or no question, you always have people that will fall into the grey area. I do think that the undecided is very much likely the place where most people would find themselves.

It's not so much the recording of the documentation or the recording of the information that's going to make the difference to us here today. What is going to make the difference to us today is the actual conversation itself, the debate that we're having in the House here today with respect to: how do you want to structure something like this? We've talked about these things many, many times. How do you structure them so that individual citizens neither feel pressured to donate their organs nor feel that there's no desire or want or need for them but that individuals are allowed to make the choice? The choice comes very, very simply from you having that option of one of those three choices: yes, I want to do this; no, I don't want to do this; or maybe I don't want to do this.

You sort of have that today; however, your family can in the current system overrule. So if your family decides that they want to preserve you in your current and consistent glory, then they can certainly do that. I don't know in this bill, hon. member, and I would certainly like to ask the question at some point in time as to: does the declaration that you make have any possibility of being overruled by anyone at any particular time, or once you've made that declaration as an indication of your final wishes, is that, in fact, then the declaration of your final wishes?

You know, I think also, member, that it makes a very difficult time for family members much easier. I think that in and of itself is certainly a worthwhile consideration. As I look through some of the other documents that I have in front of me here – and I'm

going to skip towards the very end because I see I've used up a fair amount of my time – I'm going to have to say, hon. member, that I do believe the conversation is imperative on this topic.

4:00

I don't know, to be honest, if from a legal perspective this is in fact the correct wording or if we need to alter something or if there's some minor change that needs to be made. I do think, nonetheless, hon. member, that the value here is absolutely in the conversation. The value here is that everyone in this Assembly and everyone that listens to these things should take out their wallet, look at the back of their Alberta health care card, and make a decision with respect to their own personal choice for organ donation.

On that point, Mr. Speaker, I thank you very much.

The Acting Speaker: The hon. Member for Airdrie-Chestermere, followed by the hon. Member for Strathcona.

Mr. Anderson: Thank you, Mr. Speaker. I'd like to rise today and speak in favour of Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011, put forward by the hon. Member for Edmonton-Manning. I want to congratulate him on a very well-thought-out and a very useful bill. Because of this bill and because of the words of my esteemed colleagues there, the hon. Member for Whitecourt-St. Anne as well as the Member for Calgary-Nose Hill, I am taking out my card because I just realized that I don't have a checked box. So if nothing else good comes of this bill, at least I will check this out. I'm sure some of the folks over there think I'd be much more useful as an organ donor than I would as an opposition member, so I will sign up so that it is checked.

Anyway, I just wanted to say that, you know, everyone in this Assembly probably has had someone in their life – a friend, a family member, et cetera – that has benefited from an organ donor or from someone who's given blood, and my experience is no different. It seems like the least that we can do. Obviously, there are some people whose faiths might conflict with that, but I think the vast majority of people are in a position where that would not conflict. I hope that everybody in the constituency of Airdrie-Chestermere as well as in the province of Alberta will take the time to take out this donor card and check the appropriate box.

I would make one suggestion aside from this particular bill, that I think it would make a lot of sense if when we reregister our vehicles every year, we could maybe make it mandatory for people to check yes or no at that point as part of their registration form.

An Hon. Member: Saskatchewan does that.

Mr. Anderson: Does Saskatchewan do that? There you go. Saskatchewan does it. You know, it would seem like a good idea. That way we could for sure get everyone to sign either yes or no, at least know where people stand.

Unfortunately, I don't think that this will reach a ton of people, but it will definitely reach some people, hon. member, so it's definitely worth having.

I will absolutely support this bill. Thank you.

The Acting Speaker: The hon. Member for Strathcona, followed by the hon. Member for Bonnyville-Cold Lake.

Mr. Quest: Well, thank you, Mr. Speaker. I, too, had to pull out my donor card. Fortunately, it was checked off in the right place; I had done it some years ago. You're right that it's not something that we typically give a lot of thought to.

I'm happy to speak today on Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011, brought forward by the hon. Member for Edmonton-Manning. Thank you for bringing it forward. This bill touches upon a subject that we can all relate to.

Being in good health is perhaps one of the most precious things in life. Unfortunately, there are many individuals in this province that suffer chronic health problems which in some cases may result in tissue or organ malfunction. Indeed, every year hundreds of Albertans experience a situation which requires or, ultimately, can require a tissue or organ transplant. Mr. Speaker, as we speak, there are more Albertans who require a tissue or organ transplant than what our system can handle. Waiting lists are long, sometimes too long, and this alone is enough to prompt some debate on ways to improve the system. The Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011, as proposed by the hon. member may achieve just that.

Mr. Speaker, Bill 201 tends to at the very least increase awareness of organ donation. I think we all agree that that is something that needs to be done. It would also be a departure from the current opt-in system, which encourages individuals to donate their organs but does not require it. Indeed, individuals are asked to register their willingness to be a donor upon their death, but declaration is not mandatory. It's a simple process, but it's not as effective as it could be. Bill 201 would help improve that by requiring all adult Albertans to make an explicit decision regarding their organ donor status on the back of their Alberta health card, and I think that's a good place for it.

Mr. Speaker, I think it was mentioned before that a similar bill was considered in Ontario in 2006. That was the Organ and Tissue Donation Mandatory Declaration Act. That would have required that a health card or driver's licence not be renewed unless the person had completed a declaration. The declaration would have specified whether or not the person was willing to donate his or her organs or tissue upon their death.

Closer to home, in B.C., which uses an opt-in program like Alberta, the focus has been to increase exposure and availability of organ donor forms. British Columbians can now register to become organ donors online, request an organ donation brochure by mail, or download an organ donor form. Brochures are also available in a wide range of service centres like motor vehicle and driver service centres, doctors' offices, pharmacies.

Another example is our federal counterparts with an approach similar to B.C.'s, favouring the promotion of both public education and awareness. With the National Organ Donor Week Act, or Bill C-202, Ottawa ensures that every year the last full week of April is known as National Organ Donor Week.

Mr. Speaker, in the United States, where the donor rate is approximately 20 per million, compared to Canada's 13 per million, the federal government has pushed the envelope further. Although legislation regarding organ donation is under state jurisdiction, a Uniform Anatomical Gift Act was drafted by the national conference on uniform state laws in order to attempt to harmonize public policy on organ donation. This law prescribes how organ donations for transplantation and the study of medicine can be made. The act, enacted in 39 states, states that a donor can make an anatomical gift by authorizing a statement or symbol to be imprinted on the donor's driver's licence, in the donor's will, or during the donor's terminal illness or injury. It can be done orally with at least two adult witnesses, at least one of whom has disinterest. In essence, each state has an opt-in program whereby individuals are not donors unless stated otherwise.

However, many states demonstrate an individual's consent to organ donation via a symbol that appears on their driver's licence. It's believed this also promotes awareness and encourages individuals to become donors. New Jersey is one example of a jurisdiction that went beyond the opt-in program prevalent in North America. Reminiscent of Ontario's Organ and Tissue Donation Mandatory Declaration Act, the New Jersey Hero Act made New Jersey the first state to require individuals to declare their organ donor status before applying for a driver's licence. It requires that they either agree to donate their organs following their death or, if they decline, review information about the importance of organ donation. Further, the new law mandates high school education on organ donation. Finally, Mr. Speaker, as recently as last year the state of New York contemplated the idea of making everyone an organ donor unless the individual opts out.

I must remind this Assembly that in the system of opting out or presumed consent, every person living in a jurisdiction is deemed to have given their consent to organ donation unless they have specifically opted out by recording their unwillingness to give organs. This is the preferred method used in several European countries like France, Spain, and the Netherlands.

Mr. Speaker, as I mentioned before, better methods of encouraging organ donations are needed. The question is: which path should Alberta take in order to achieve our goal of increasing organ donation and, ultimately, saving lives? We now know that Ontario has been attempting to change the legislation from an opt-in system without mandatory declaration to one with mandatory declaration. B.C. chose to more actively promote organ donation by using conventional means. Our federal government is doing much the same with the National Organ Donor Week Act. In the U.S. the government is attempting to harmonize public policy on organ donations through the states, some of which, like New Jersey, are opting for more proactive reforms. Finally, in New York an opt-out system was considered as recently as last year.

Mr. Speaker, I'm not sure which avenue is better for our province and our citizens, but Bill 201 may be a step in the right direction. At the very least it's providing worthwhile debate. I'd like to thank my colleague the hon. Member for Edmonton-Manning for bringing this bill forward. I look forward to the remainder of the debate and potential amendments in committee.

Thank you, Mr. Speaker.

4:10

The Acting Speaker: The hon. Member for Fort McMurray-Wood Buffalo, followed by the hon. Member for Bonnyville-Cold Lake.

Mr. Boutilier: Thank you very much, Mr. Speaker. I want to also congratulate the member for such an important bill. I do believe that this is something in that as I looked, similar to the Member for Airdrie-Chestermere, I also had not completed that form. I think that the spirit of this bill is something that will serve Albertans well, and I want to congratulate him for the forward thinking on this particular initiative. I think it will serve all Albertans very well.

I want to say that I have a person that works in my MLA office who was the recipient of a cornea transplant, a transplant she had due to a tragic accident. She can see today because of the organ, the cornea, that was given in the first 24 hours because someone was so gracious to donate. This, again, is the same spirit of what the hon. member is attempting to do here today. As a member of the Wildrose I can probably stand here today and say that I support this very forward-thinking bill, one that will help all

Albertans, and one that I believe will serve humanity in a better manner.

I would like to add, Mr. Speaker, just some friendly thoughts to this. Saskatchewan was mentioned earlier, which I think was an important note. I find that when I go to register my vehicle or to get my licence, it would be really nice – and I know there was consideration in the past where, in fact, the folks in the registry under regulation would actually be in a position to ask the question: would you be willing to donate? I think I might have sat on that side when that actual report by Service Alberta came in. It was really good. It's just really about reminding Albertans.

So when you go into a registry branch to register and to get your licence, I thought that in strengthening the spirit of what is well intended in this bill, the civil servants could ask the question: would you consider? I think, really, that if Albertans were posed that question, the majority of them would answer yes. If that was intended to help and assist and broaden and to help even more Albertans, I think that would be a consideration that perhaps the member would consider.

I know there was good work done previously in a report relative to this issue, where, actually, civil servants at the registry, be it private registries, would ask the question. And by order in council as a regulation I actually think that it would be very valuable. I know that if I were asked the question there, clearly, the answer would be, in my judgment, keeping to the spirit of this bill, the right one, saying: yes, I would be willing to help. So it's friendly advice to consider if perhaps that could be worked through. There was good work done in previous years by the government in studying this type of proposal. It really is about interacting with Albertans, yet ultimately the responsibility is with Albertans for saying either yes or no.

Having said that, I do believe that this is very positive. I congratulate the member once again, and I encourage all members of this Assembly, in keeping to the spirit of what's intended, to support this very worthwhile bill.

With that, Mr. Speaker, I will take my seat. Thank you.

The Acting Speaker: The hon. Member for Bonnyville-Cold Lake.

Mrs. Leskiw: Thank you, Mr. Speaker. I am pleased to rise today to speak to Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011, which has been proposed by my colleague the hon. Member for Edmonton-Manning. Organ donation has always been an important topic, with many important and diverse viewpoints and opinions that should be heard and explored.

Mr. Speaker, I think it is important to discuss what exactly the purpose of Bill 201 is and what it is not. It's not a way to force all Albertans into organ donation. It is not a way to force Albertans to consent to something on which they do not agree. What Bill 201 is trying to do is ensure that all Albertans are educated about their choice of whether to be an organ donor and to have them declare this choice on their Alberta health care card.

If Bill 201 were to pass, a process would be created by which Albertans would be required to indicate whether or not they wish to be an organ donor or if they still are undecided. Mr. Speaker, declaring one's organ donation status is a very important decision, and I believe that many Albertans are willing to be organ donors. I also believe that due to many different circumstances there are some who do not indicate on the back of their Alberta health care card what their organ donor status is. This can lead to confusion if one of these persons is ever in a situation where their organs could be used to help another patient. This confusion could possibly cost

lives, which is why the topic of organ donation is such an important issue to be discussed. We recognize that every time someone confirms their willingness to be an organ donor, it could potentially save lives.

Mr. Speaker, there are several ways in which different jurisdictions handle the declaration of organ donor status. Some jurisdictions consider their citizens to be organ donors unless they specifically indicate on some form of documentation that they do not wish to be an organ donor. Some jurisdictions go even further and mandate that regardless of one's objections all citizens will be considered organ donors. This system may not be appropriate for all Albertans. I believe that the current way in which Albertans are asked to declare their organ donor status, by explicitly making a declaration of intent, works for our province.

That being said, changes to the way we ask Albertans to declare their status may be beneficial and deserve consideration. This bill cannot completely change the system, but it would ensure that our citizens declare their organ donor status. This would help to ensure that every available organ that could be donated would get donated.

Now, Mr. Speaker, with any program in which citizens' involvement is required, there are real concerns and legitimate exemptions that must be considered. As Bill 201 was being considered and drawn up, I know that the hon. Member for Edmonton-Manning made sure that apprehensions from religious and cultural groups were addressed as well as some of the logistical worries about how this process would work in reality.

First of all, Mr. Speaker, there is a legitimate concern that the bill would make it so that Alberta Health Services would have to reissue all Alberta health care cards that are currently in circulation. Obviously, this would be a large undertaking, requiring extra staff, overtime hours to make sure that proper checks and quality control procedures were followed for the issuance of over 3 million health care cards. All this would cost Alberta Health Services and taxpayers a significant amount of money and would take the focus away from the important work that they are performing.

However, Mr. Speaker, this concern is addressed in Bill 201. This bill would ensure that mandatory declaration of one's organ donor status would be phased in. Only when a person applies for a new or a replacement health care card would they be required to declare their organ donor status. This bill would not try to disrupt or reinvent the process that is already in place for issuing Alberta health cards. It will simply use the existing method, that already works.

The bill also respects the personal choices of each individual with respect to organ donation and makes sure that a person's religious and cultural customs are respected. This is not the first time this government has paid attention to this important concern. On August 1, 2009, the Human Tissue and Organ Donation Act, 2006, came into force. The purpose of this act was to encourage Albertans to be organ and tissue donors. Along with this act Alberta Health Services and other groups have been actively educating Albertans with facts and choices regarding their organ donor status. These education and awareness campaigns have been successful, and I would dare to say that today more than ever our constituents are aware of the choices they have. Bill 201 ensures their choices are indicated so those life-saving organs and tissues make it to people waiting for them.

4:20

It is important to note that Bill 201 would exempt those who are not able to make that declaration for themselves. For example, Mr. Speaker, many Albertans receive their health care card before they reach the age of 18. Those who are under the age of 18 would not

have to make that mandatory declaration regarding their organ donor status. This ensures that our children will not be pressured into making that declaration without their parents or guardians present. I do not think that it would be a good idea to pressure our youth into making decisions they do not quite understand or know the scope of.

We also want to ensure that those who are eligible to make this crucial and important decision can do so with input and education from those who care for them. This leads to a similar exemption, that provides for those who are not able to give legal consent for themselves. Those who would fall into this category would be the developmentally disabled, for example. Again, Mr. Speaker, these exemptions would ensure that individuals who are not able to make such an important decision are not forced to donate their organs without proper guidance and education.

In the end, this bill seeks to make sure that those who decide to be an organ donor make sure they indicate it on their Alberta health care card. Since we know that the number of people who are willing to be organ donors is higher than actual donation rates, this bill could increase the number of available tissues and organs for transplant.

Mr. Speaker, again, I am pleased that I can take part in this debate about such an important topic. Modern medicine has provided many life-saving techniques and procedures, and organ and tissue transplants are of a high importance in this regard. The decision to be an organ donor is an important one and should not be taken lightly, and the exemptions provided for in this bill are designed to make sure that those who may not be ready to make this decision do not have to.

I would like to express my gratitude to the Member for Edmonton-Manning for bringing up organ donation in this House. I know that our discussion today has provided me with more of an understanding of this important issue, and I hope that the bill will encourage awareness of this subject throughout the province.

With that, I will take my seat, and I look forward to the continuing discussion about Bill 201. Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Calgary-Bow.

Ms DeLong: Thank you very much, Mr. Speaker. It's my pleasure to rise today to speak to Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. This is an issue I've been interested in for quite a while. In fact, when I first became an MLA, I sort of looked at this and I said: "Hey, maybe that's something that I can do that would really help Albertans. Maybe there's something that can be done to actually increase the number of donors." I looked at it early on, and then, you know, with all the things that come at you as an MLA, it was one of the things which I did not move forward on.

Anyway, as some of you might know, I lost my best friend last year. I remember how very, very happy she was that even though she had been so very, very sick with cancer for so many years, she was able to donate her corneas, and when she went into the hospice, that was one of the real bright lights for her. This got me thinking that, hey, I've got to start looking at this again. First of all, I met with the Lions Club, and the Lions Club got me onto a lady by the name of Mrs. Sharon Hovey with the HOPE organization. HOPE is an organization in Canada, actually, human organ procurement and exchange, and it has been the provincial group responsible for managing the donation, recovery, and distribution of organs for transplantation within Alberta. I sat down and talked to her about, you know, what can be done. What changes can we possibly make to legislation which would end up with more do-

nors? It's very clear to everybody that, hey, we've got a lot of really sick people out there that we can help.

The first thing that was a real surprise to me is that there's a big difference between eye donations and organ donations. Just about everyone can donate their corneas, but it turns out that there are very, very few people who can donate their organs. It turns out that, essentially, you have to have been in a traumatic accident to be able to donate your organs. You have to essentially be on life support, and that has all sorts of implications for how we handle this whole issue.

What the HOPE organization does – and I will table these documents with the Speaker – is that they approach the families of possible organ donors. They talk to them and ask them to please allow the organs to be donated. Now, from their website are a couple of very interesting pages. First of all, how many of the possible donors do they approach? Well, it turns out that in most three-month quarters they approach 100 per cent of the possible donors. They actually approach 100 per cent of those families. The times when they don't approach them: what happens? For instance, somebody was in a car accident, and they already had cancer. Okay? Even though they at first appeared to be possible donors, it turns out that they can't because they've got cancer or they have ALS or they have viral encephalitis. So even though most of the time it's at a hundred, the times when they don't approach those families are times when there are other reasons why the person couldn't have been a donor anyway.

The next page that we need to look at here is that of those families that are approached by the HOPE organization, pretty well in the last four months 100 per cent of those Albertan families have donated those organs. One hundred per cent. So I guess there are a few questions here. Now 100 per cent of the possible donors are donating, so why is there a decline in donors?

Well, it turns out that we in this Assembly have been doing the right things, what might be considered the wrong things, but I think they're the right things. We have worked to make our highways safer. We have fewer people dying in car accidents. We have come out with helmet legislation, so we have fewer people having accidents on their bicycles or on their motorcycles. There is actually a decline in the number of donors, but the reason that there is that decline is because we have been doing the right things. Our cars are safer now. There are fewer people dying in car accidents, and that's the bottom line of why we have so few donors.

So what's wrong with this legislation? What would it matter? Why not just put it through? You know, why not just put it through? Well, it comes to this whole question of yes, no, undecided. The problem is that it is government saying: you have to make a decision. When government says, "You have to make a decision," you are going to end up with some people saying: "Well, get out of my way. I'm just going to say no." So what you're actually going to end up with is some people with noes. With that no, what we're doing is we're kicking the feet out from this organization that provides all of these donors. When there's a no on there, then what that means is that HOPE can no longer approach the families and ask for that donation. So we will actually end up with fewer donors. Right now we are at 100 per cent. By doing this, we're going to be cutting out a number of possible donors for these organs.

4:30

Now, when it comes to corneas, that's a different issue altogether. Just about everyone can donate a cornea, and that's one thing that we really need to push harder, in getting the general population to donate their corneas. I'm hoping that out of this

whole discussion there will be more awareness out there that you can donate your corneas and that we do need more corneas.

When it comes to the organs, we are now getting 100 per cent of those organs that we could possibly get, so I am very concerned – very concerned – that if we pass this legislation, we will actually end up with fewer donations. There will be people that HOPE can no longer approach, the families of people that HOPE can no longer approach, and we will thus end up with fewer donations.

You know, my heart goes out to this member in that he has his heart in the right place. He is working really hard here to try to get more donors, but it isn't a matter of people not stepping forward. It's not a matter of Albertans not doing the right thing. Albertans are doing the right thing. They are donating their organs, but as a result of our safer community, our safer roads, our safer vehicles, our helmets there are fewer people in Alberta dying traumatic deaths. So it's one of our losses. Everything has a pro and a con to it, unfortunately.

I do ask you all, very reluctantly, to defeat this bill. Thank you.

The Acting Speaker: The hon. Member for Olds-Didsbury-Three Hills.

Mr. Marz: Thank you, Mr. Speaker. I'm pleased to rise today as well to speak in the debate on Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. I'd like to thank the Member for Edmonton-Manning as well for his thoughtfulness in bringing this bill forward.

Organ donation is a very important topic, as we've heard, as many lives are affected by the selfless act of organ donation. Ultimately, this is a discussion that needs to occur within families. Mr. Speaker, it's estimated that well over a million people in the world have benefited from organ transplantation, yet long wait-lists for organ donations prevail.

Alberta along with the rest of Canada uses an opt-in system for organ donation. Under this system individuals are presumed to have said no to organ donation unless they have left explicit direction to do otherwise. In comparison to what's done in Canada, many European nations and several South American nations adhere to an opt-out, or presumed consent, system of organ donation. This presumed consent system allows organs to be harvested from an individual even in the absence of explicit consent of the deceased. In such a system an individual must inform the relevant authorities if they wish to opt out.

Mr. Speaker, I'd like to explore the European case of presumed-consent policies and the impact that these policies have had on organ donation. In the early years of organ donation, in the 1960s and '70s, most countries used the opt-in system. However, as demand for organ donation grew, a number of countries abandoned the opt-in system in favour of the presumed-consent system.

An interesting fact is that Singapore was the first nation to enact presumed consent, with several European nations following suit. To date approximately 24 European countries have some form of presumed consent, with the most prominent systems in Austria, Belgium, and Spain.

In those countries they've shown great success with their presumed-consent policies. In fact, several before-and-after studies reported an increase in donation rates following the introduction of a presumed-consent system. For example, kidney donation rates in Austria grew from 4.6 to 27.2 donors per million people over a five-year period while rates in Belgium increased from 10.9 to 41.3 donors per million during a three-year period. Some have argued that it's not just the change in systems that has elicited this increase in donors. It's argued that a combination of legislation, availability of donors, transplantation systems organization, in-

vestment in health care as well as underlying public attitudes to and awareness of organ donation and transplantation may all play a role although the relative importance reach is not that clear.

Mr. Speaker, presumed-consent systems can be hard, as in Austria, where the views of close relatives are not taken into account, or soft, as in Spain, where relatives' views are sought. The hard systems are known as pure presumed consent, and an individual must register at a courthouse and establish that he or she does not wish to be an organ donor. Such registration is the only way individuals can prevent their organs from being removed upon death. An interesting twist in the pure presumed-consent system is that if an individual who has refused to be a donor ends up needing a transplant, then he or she would automatically be placed at the end of the list. These countries operate under the mantra that those who wish to receive an organ must be willing to give one.

In addition, Austria and Belgium practise pure presumed consent for tissues only and will confer with families regarding organ donor donations. Spain, on the other hand, has had phenomenal success with organ donation following the implementation of presumed consent, and as mentioned earlier, this soft presumed-consent system still consults with families. Spain has seen the number of donations increase by 142 per cent since 1989. Not only does Spain have the highest donation rate in Europe, with 34 donors per million people, but it also has more than two times the donors of Canada, where the rate is approximately 15 donors per million people.

Spain may attribute some of the success to another factor, active detection, which is a key aspect of the Spanish model. That means having transplant co-ordinators such as doctors visit emergency rooms and the ICU on a daily basis, checking the roster of patients and their status.

The success that Spain has achieved in increasing organ donation rates has attracted attention across the European Union. In the drive to facilitate donation, transplantation, and exchange of organs in Europe, the European Parliament voted in May 2010 to pass legislation that sets common quality and safety standards for transplants across European Union nations. The aim is not only to increase the supply of organ donors across the EU but also to enhance the efficiency and accessibility of transplant systems and ultimately to ensure the quality and safety of those procedures. The directive came into force in late 2010, and member nations will have two years to transpose this directive into national legislation.

According to the new rules, EU member states must set up a national authority responsible for maintaining quality and safety standards for organ transplantation processes. The authorities will approve procurement organizations and transplant centres, set up reporting and management systems for serious adverse reactions, collect data on the outcome of transplants, and supervise organ swaps with other member states and third countries. This legislation must include the following item, that all organ donations must be voluntary and unpaid. Living donors may receive compensation provided it is strictly limited to covering the expenses and loss of income related to the donation. Additionally, member nations are required to ban any advertising of the need for or availability of human organs where the aim is financial gain.

Furthermore, a pan-European certification system designed to provide proof that human organs and tissues have been obtained legally must be put in place. So this is a far more complex issue than what this current bill is presenting to us, Mr. Speaker.

4:40

The EU initiative to increase organ donation is also to address a dark underworld of illegal organ trafficking. Long wait-lists have

created a practice which benefits organized crime and can have profoundly negative consequences, particularly for the donor.

Mr. Speaker, presumed consent is not without its criticisms. Opponents of presumed consent suggest that such a system could force someone to become a donor against their will. Furthermore, opponents also argue that it might lead patients viewed as prospective donors to worry about how hard a medical team will work to save them if there's greater benefit to harvesting the organs, and that's a real concern for many people. However, citizens of countries where presumed consent is law feel that they are given a fair chance to say no to organ donation.

Mr. Speaker, the debate on Bill 201 allows us to further understand the issues at hand. Furthermore, this debate in this House today should encourage all of us and all Albertans to sit down with their families and decide what our wishes are. I do have some concerns with parts of this bill, in particular the condition of not receiving an Alberta health card if you don't sign the back of your card. You'll receive a number instead. I'm not sure how we're going to get that number, probably on another card. Is this going to create two classes of Albertans, in which some have a health care card and some have just a registration number? I think some Albertans would be very concerned about that.

I'm going to reserve judgment on this until after I see what amendments may be coming forth in committee on this bill. I'd like to once again thank the Member for Edmonton-Manning for bringing this bill forward and this topic to the attention of the members of this Assembly.

Thank you.

The Acting Speaker: Hon. Member for Stony Plain, do you wish to join the debate?

Mr. Lindsay: Well, thank you, Mr. Speaker. I'm pleased to rise today and participate in the debate on Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. First of all, I'd like to thank the Member for Edmonton-Manning for bringing this bill forward. Organ donation is a very important topic to discuss as organ transplantation can and does improve the quality of life of patients and reduce health costs in the long term. Transplants have been taking place in Canada since the 1950s. Organ transplants most often are kidney, heart, lung, pancreas, and liver.

Mr. Speaker, many people are affected by organ failure. In fact, according to a new report from the Canadian Institute for Health Information, or CIHI, the number of Canadians living with kidney failure, for example, has been steadily increasing for 20 years. CIHI's report shows that the rate of people living with kidney failure had steadily increased between 1990 and 2000 but appears to have levelled off since 2005. This may be due in part to patients seeing a specialist in the early stages of the disease, possibly contributing to a delay in the onset of kidney failure, for example.

Research, in fact, shows that many people are seeing specialists sooner, which is a very positive trend. For example, in 2009 only 31 per cent of patients were what we refer to as late referrals. This is down from 42 per cent in 2001. Late referrals means patients that need to start dialysis less than three months after first seeing their specialist.

Mr. Speaker, CIHI's report goes on to indicate that close to 38,000 Canadians were living with kidney failure in 2009. This is more than triple the number, 11,000, of those living with the disease in 1990. The largest increase occurred in older age groups, with prevalent rates escalating more than 500 per cent for those age 75 and older. Patients in this age group account for 20 per cent of all kidney failure cases.

Mr. Speaker, a person who needs a transplant usually has to go on a waiting list and wait for someone to donate that needed organ. For instance, of all Canadians living with the disease in 2009, 59 per cent, or 22,300 people, were on dialysis, and about 3,000 people were on the wait-list for a transplant. Compare this to 1990 when 53 per cent, or 5,900 people, were on dialysis and roughly 1,600 people were on the wait-list. The point is, Mr. Speaker, that it is clear that organ donation and transplantation are growing concerns as there is a critical shortage of organs available for transplantation around the world.

Mr. Speaker, an organ transplant is no minor surgery. Not only does it affect the lives of many Canadians, but there are also health care costs associated with organ failure. There needs to be a focus on educating Canadians on how to prevent the onset of diseases that add a heavy burden to our health care system. For example, research has shown that diabetes continues to be a leading cause of kidney failure. The cost of a transplant, including preliminary testing, the surgery itself, and postoperative recovery, varies. These costs start to add up even before a person's transplant.

Kidney failure, for example, results in substantial cost to the health care system. In fact, the estimated cost for hemodialysis treatment is approximately \$60,000 per patient per year of treatment. Hemodialysis is a treatment for kidney failure. Comparatively, a one-time cost for a kidney transplant is approximately \$23,000 plus \$6,000 for the necessary annual medication to maintain that transplant. So based on these estimates, over a five-year period the cost savings of receiving a transplant rather than dialysis is approximately \$250,000 per patient.

In 2009 more than 1,500 patients living with kidney transplants saved the health care system an estimated \$800 million. There are currently under 3,000 Canadians on the wait-list for a kidney transplant. If they were all to receive that transplant, it would result in additional savings of \$150 million annually.

Mr. Speaker, this is a very important discussion. I, too, am of the opinion that it's great to have this discussion here in the Legislature. I'll look forward to others adding to this important discussion, and I'll reserve my judgment, whether or not I will approve this legislation, for a later time.

Thank you, Mr. Speaker.

[The Speaker in the chair]

The Speaker: The hon. Minister of Infrastructure.

Mr. Danyluk: Well, thank you very much, Mr. Speaker. It is indeed a pleasure to stand up and speak to Bill 201. I want to just talk about a couple of things if I can. First off, I would like to say – I thought of this yesterday, and it was something that I heard previously – that what you do for yourself dies with you; it's what you do for others that lives forever. I just want to say that the hon. Member for Edmonton-Manning is a member that is very committed to his constituency. He's committed to the people of Alberta and very much puts his efforts towards the good of individuals. He's very much a proponent about need.

4:50

Now, we can talk about words that need to be changed, and I do agree that there are some things in this bill that don't make me feel very comfortable, in fact, to the point that, you know, I have hesitation. Of course, the question that comes up is: what is the solution? First of all, in order to look at what the solution is, let's talk about why people have concerns. Well, it is a concern or fear of the unknown. I think that we need to have better information. We need to have better opportunity for people to understand ex-

actly what does take place when they sign their name on the back of their health card. I feel that there isn't enough public awareness, and this particular bill does bring the awareness forward. So, in essence, this member has achieved and has won this bill because of bringing forward awareness, and I think that that is critical.

As I said before, Mr. Speaker, most people are afraid to donate because I think most people don't know the parameters that are necessary or what takes place when a donation does happen. I know there is a lot of discussion, or at least some discussion, that the cost of an organ transplant is cheaper than maybe an individual staying on dialysis. But at the end of the day to me this is about education. Families need to be educated if a person wants to donate and sign his donor card.

I want to say to you, Mr. Speaker, that I have signed my donor card. I signed it years ago. When I was thinking about it, as we heard individuals speaking about the importance of communication with the family, I can say to you that I don't think that we've had that discussion. My children . . .

The Speaker: I hesitate to interrupt the hon. Minister of Infrastructure, but under Standing Order 8(7)(a)(i), which provides up to five minutes for the mover of the bill to close debate, I invite the hon. Member for Edmonton-Manning to close debate on Bill 201.

Mr. Sandhu: Thank you, Mr. Speaker. First of all, I'd like to thank all of the members who joined in the debate in favour and in opposition. I have listened to all of your concerns.

Mr. Speaker, I'm not lucky enough to have been born in this country. I came about 30 years ago. The first time I got elected, I was talking to my son. He just finished his BCom and is becoming a chartered accountant, and my daughter is in third-year nursing. I asked them: "What should I do? How can I save Albertans or Canadians?" The first thing they said to me was: Dad, we need to bring awareness to body organ donations. That's how I started this bill, by listening to lots of concerns. I'm not an expert on the side of how to put all the wording together, but I do understand that we can save Canadians. Like the hon. Member for Calgary-McCall said: we're all Canadians. We have to look after other family members who need body organ donations.

This is a topic of debate about awareness, education so that people can talk, to bring more people into the discussion throughout Alberta, and so we can increase the body organ donation list. Mr. Speaker, Bill 201 is all about improving. Every year thousands of Albertans and Canadians wait on donor lists, never knowing if they are going to live or die. The reality is that many wait too long; many don't make it. The problem is that we have low donor rates, and I believe that this is a result of how our system is set up.

Mr. Speaker, I was born into the Sikh religion. There's not much awareness when I go to Sikh temple on the weekend and talk about this. I try whenever I get opportunity to say something. I'd like to increase awareness in this society. Whenever I go to my constituency of Edmonton-Manning and get a chance to say the same thing to my constituents, they all like to say: you know, this is a very good bill. Before I came into the House today my leg. assistant – she's not working with me anymore, but she works with the Member for Drayton Valley-Calmar – got tears in her eyes and said: "Peter, good luck to you. This is the way to go."

Mr. Speaker, it's simply too easy to ignore the question. It's too easy to do nothing. Doing nothing means that people die. However, I also understand organ donation is a very personal decision and one that should not be forced on anyone. That's why this bill

does not make you choose yes or no. You can still remain undecided if you don't know, but it brings the discussion.

I also recommend that we alter this bill in the Committee of the Whole to reflect the fact that we do not want to deny people health care through this bill. Mr. Speaker, studies all over the world have indicated that people are most likely to remain with the default organ choice for all the reasons; however, if people are given the choice, the majority will choose yes.

Thank you, Mr. Speaker.

[Motion carried; Bill 201 read a second time]

The Speaker: The hon. Deputy Government House Leader.

Mr. Renner: Thank you, Mr. Speaker. Given the hour it has been the practice of this Assembly to defer the introduction of new bills when there is such a short amount of time allowed for the presenter of the bill to do so. On that basis, I would like to seek unanimous consent to now call it 5 o'clock and move on to Motion 501.

[Unanimous consent granted]

Motions Other than Government Motions

The Speaker: The hon. Member for Calgary-East.

Organ Donation Leave of Absence

501. Mr. Amery moved:

Be it resolved that the Legislative Assembly urge the government to introduce amendments to the Employment Standards Code that would require all employers to provide an unpaid leave of absence of up to 13 weeks for employees who donate organs.

Mr. Amery: Thank you, Mr. Speaker. We had about two full hours of discussion about organ donations, and I will continue on the same theme. I am very pleased to rise today and open debate on Motion 501. I am proposing this motion because I believe there is an urgent need to address the current disparity in supply and demand of organs in our province. I believe the wait-lists for people in need of organ transplants are far too long. More than 4,300 people are currently in need of an organ in Canada. As many as 6 per cent, or some 250, will die while on waiting lists.

Mr. Speaker, Motion 501 urges the government to introduce amendments to the Employment Standards Code that would require all employers to provide an unpaid leave of absence of up to 13 weeks for employees who donate organs. By providing formal job-protected leave for employees wishing to donate an organ or tissue, we can encourage those considering donating an organ to carry through with this potentially life-saving decision while providing peace of mind that their job will not be in jeopardy given their absence.

5:00

The act of donating an organ to someone in need is a very humane act. It takes a very noble and special person, and it is something to be commended. While I do not believe an employer would discourage an employee or otherwise endanger their position for taking this time off, I feel the need for actual legislation to be in place. This legislation or potential amendment to existing legislation must formally recognize the need for job-protected leave as it pertains to organ donations. Such a safety net is crucial for Albertans who are considering donating. Mr. Speaker, I be-

lieve that by providing this recognized job-protected leave, we can give assurance to those considering donating as well as an added incentive to actually follow through. After all, those who perform such an admirable act ought to be protected for their courage and selflessness.

Mr. Speaker, while I wish to raise awareness of the challenges surrounding organ and tissue donations and emphasize the need to recruit living donors, it is important to note that not everyone can actually become a living organ donor. All prospective organ donors in the country must first meet several screening criteria outlined by Health Canada, and they must also pass the donor suitability process in order to qualify. I understand this may be a disincentive, but it is necessary for the safety of those in need of the organs.

We would not be alone in providing job-protected organ donor leave should we move forward with this proposal. Two other Canadian provinces provide job-protected leave for living organ and tissue donors in their employment standards legislation. I feel that these two provinces have paved the way for providing this type of job security in other jurisdictions and can be looked upon as examples going forward.

Mr. Speaker, Ontario was first when it amended its Employment Standards Act to create a specified unpaid 13-week organ donor leave in 2009. This amendment also carries a special provision whereby the organ donor can extend their leave for an additional period of up to 13 unpaid weeks in certain cases. Manitoba formally recognized job-protected leave for organ and tissue donors. This occurred with a 2010 amendment to Manitoba's employment standards act. Just like Ontario, employees in Manitoba are entitled to a 13-week unpaid leave for the purpose of donating an organ or tissue. This leave may also be extended by an additional 13 weeks if recommended by a physician. In the case of both Ontario and Manitoba the employee must have been employed at their current job for at least 13 weeks prior to taking the organ donor leave.

A number of U.S. states, Mr. Speaker, have also enacted laws that provide unpaid or, in some cases, paid leaves of absence for the purpose of organ and tissue donations. More than 100,000 people in the United States are currently on a waiting list to receive an organ. State legislators and state-run campaigns have magnified the need for living organ donors in recent decades. This has acted as a vehicle to enact this type of job-protected legislation. I feel it's now our turn to do the same.

Mr. Speaker, I strongly believe that one way to significantly provide awareness of our organ transplant wait-list is to offer formal job-protected leave for living organ donors, and with recent reports suggesting that our province has the lowest proportion of living donors in the country, I feel that now is the time to amplify awareness efforts. This is why I felt compelled to introduce this motion. More must be done to recruit living organ donors. In a perfect world there would be no one on a wait-list to receive an organ, but we must acknowledge that this is not the case.

With Motion 501 we could take a positive step towards reducing the organ wait-list. This could at the very least be a step towards saving the lives of several Albertans. Mr. Speaker, formally requiring all employers to provide an unpaid leave of absence for employees who wish to donate organs would ultimately provide would-be donors the security needed in that their jobs would be legally protected during their absence. I do not wish to propose anything that's dramatic or unrealistic. I believe Motion 501 to be a very moderate and realistic step towards saving lives as it would be a sensible way of providing very necessary job security for prospective donors.

With that, Mr. Speaker, I would like to invite all my colleagues to join in the discussion surrounding Motion 501. Thank you.

The Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much, Mr. Speaker, for this opportunity to speak in favour of Motion 501. It's very appropriate, as the hon. Member for Calgary-East has pointed out, following on the heels of Bill 201, the Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011. In fact, this motion would be one of the ways of instituting what is hoped for in Bill 201.

There are a number of organizations whereby individuals who may not be of the same blood type or the same compatibility – for example, with kidney donations – are part of larger organizations where upon requirement individuals have indicated that they would be willing to donate their organ to a complete stranger with the thought that a family member closely related to them would be also a recipient of the generosity of individuals.

This unpaid leave also follows in the historical precedent established I believe it was last year of our military job-holding legislation, where it was recommended that individuals who serve in our armed forces be recognized for their personal sacrifices and that the jobs they held as militia members in civvy life they would be able to go back to. I see this along that same line. Individuals who provide donations, especially those who are living and donate one of their kidneys, are heroes. They're taking on a circumstance to ensure the well-being of another individual. As the hon. Member for Calgary-Nose Hill indicated, quoting the Biblical scripture of "greater love hath no man" applies very directly to this type of situation of donation. If a person is willing to make a donation of this type, then the least we can do for them is to have their job ready for them when they are sufficiently well enough to recover and return to work.

I do realize, Mr. Speaker, that this does put a fairly significant degree of onus on the employer to be without their employee for the number of weeks involved, but I think the type of employee that would offer this kind of contribution, I would suggest sacrifice, would certainly be worthy of retention by their particular employer. I would hope that the employer would recognize the quality of their employee in offering such a donation. The reality of our human body is such that this is not the type of donation that you could make repeatedly, unlike blood for example.

5:10

Also, we've had an hon. member previously mention his involvement with bone marrow donation. He's indicated his willingness should his marrow match with a needed recipient. A bone marrow transplant is considerably more involved than a simple blood transfusion or donation and, therefore, I would think probably would be included in the same type of legislation and protection as is involved with the organ donation. I would hope that Motion 501 would include, as I say, bone marrow transplants, which, after a fashion, are a donation.

I think this is a very good piece of legislation. As I say, employers are going to be affected by the loss of their employee over that time period, and I'm not sure to what extent their contribution of holding that person's job could be recognized. That would be an interesting part of the ongoing debate with this motion. But I think the concept is worthy of support, and therefore I lend my support and my thanks to the Member for Calgary-East, who put forward Motion 501.

Thank you, Mr. Speaker.

The Speaker: Additional speakers? The hon. Member for Bonnyville-Cold Lake.

Mrs. Leskiw: Thank you, Mr. Speaker. I am pleased to rise today and join the discussion on Motion 501, which is being brought forward by the hon. Member for Calgary-East. The objective of Motion 501 is to encourage the government to introduce amendments to the Employment Standards Code which would require all employers to provide an unpaid leave of absence of up to 13 weeks for employees who donate organs. With this change Alberta organ donors would obtain a greater level of comfort with the donation process, knowing that their jobs are not in jeopardy should they decide to make the decision of becoming an organ or tissue donor.

Currently, Mr. Speaker, Alberta does not have any legislation that allows Albertans to take a leave of absence from their job in order to donate their organs; however, the nature of the idea is not unprecedented. In fact, other jurisdictions across Canada and the United States have enacted similar legislation to that proposed by Motion 501 in order to protect jobs of living organ donors. In order for this government to make responsible decisions on this issue, it is important that we take a close look at the legislation created by other jurisdictions and the impact that it has created. In Canada Manitoba and Ontario are two other provinces that have legislation protecting the job security of living organ donors.

In Ontario an amendment was made to the Employment Standards Act on June 5, 2009, which created job protection for living organ donors. The amendment allows job-protected leave for up to 13 weeks for the purpose of undergoing surgery to donate all or part of a certain organ. However, organ donors can be granted an additional 13 weeks based on the recommendation of a physician. The amendment to the Ontario Employment Standards Act also mandates certain criteria that have to be met in order to be granted a protected leave of absence. These criteria include that the employee must have been working for their employer for at least 13 weeks and that the employee undergoes surgery to donate all or part of one of the following organs to another person: liver, kidney, pancreas, lung, and/or small bowel.

Comparatively, the legislation in Manitoba is quite similar to that in Ontario. In June 2010 an amendment to the Employment Standards Code was created to recognize the right of Manitobans to take an unpaid leave for the purpose of organ or tissue donation. It provides organ donors with a 13-week recovery period and an additional 13 weeks if recommended by a physician.

Looking south may also help us assess the merit of this Motion 501. Mr. Speaker, in the U.S. there are 29 states that have enacted laws that provide either paid or unpaid leave for organ donors. On average, the leave of absence period is 30 business days, which in the grand scheme of things is not burdensome to business.

Mr. Speaker, both Ontario and Manitoba acknowledge the fact that the employers of organ donors need to be protected as well. After all, they are directly affected by the absence of their employee. As such, a two-week written notice from an organ donor to their employer is required in both jurisdictions before the donation process begins. This allows employers time to adjust their business accordingly.

Mr. Speaker, I believe that job protection for living organ donors is an important issue. It could provide one less thing for donors to worry about before they start the demanding process of donating an organ. However, we must take into consideration the impact that this may have on employers and try to find a happy medium to have all parties benefit.

With that, I will conclude my comments and look forward to the rest of the debate. Thank you, Mr. Speaker.

The Speaker: Additional speakers? The hon. Member for Edmonton-Mill Woods.

Mr. Benito: Thank you, Mr. Speaker. I would like to rise today and join debate on Motion 501, which is being brought forward by the hon. Member for Calgary-East. This motion urges the government to introduce amendments to the Employment Standards Code that would require all employers to provide a leave of absence for employees who donate organs. This would encourage organ donation by giving donors peace of mind, knowing that their job would not be in jeopardy should they choose to donate organs.

Mr. Speaker, the Canadian Institute for Health Information releases extensive data for organ transplants in each province. In 2009 there were a total of 54 live organ donor transplants performed in Alberta. Forty-five of these were kidney transplants. However, there were also nine liver transplants.

I know the concept of live donor liver transplantation may be surprising to some, but this advancement has been around for a few decades. This medical miracle works because of the extraordinary regenerative capacity of the liver. However, it is not a minor procedure, and the donor must visit a physician constantly throughout the recuperative process, which normally lasts between two and three months. Kidney transplants are also major procedures, which require several weeks of recovery time before an individual can safely return to work.

Mr. Speaker, at the end of 2009 there were a total of 472 patients awaiting a transplant in our province. However, not all of these patients can receive an organ from a live donor as some of them are waiting for organs such as the heart, that can only be donated by the recently deceased. Even though most organ donations in Alberta, about 80 per cent, are from the recently deceased, encouraging live organ donation could also contribute to reducing the waiting time for organ transplants.

Mr. Speaker, there is currently no legislation in our province that guarantees employees time off in the event that they donate an organ. However, this practice is becoming increasingly common in other jurisdictions as employment standards continue to evolve. We should commend those who choose to donate organs as it takes plenty of courage to go through the process, but we should also respect the rights of employers and employees to come to a reasonable understanding on their own in the event that the employee is donating an organ.

Contrary to popular perception, I think many employers would understand the gravity of such a decision and would give as much time as needed for the employee to recover. They might even go a step further and pay the employee's wages for part of their recovery.

Mr. Speaker, I think all members can agree that shortening the waiting lists for organ transplants would be a tremendous feat. The reality is, however, that we do not know of a silver bullet which will substantially increase the number of organ transplants performed without raising certain ethical questions. I believe that this motion could help ensure peace of mind for those who are about to donate organs.

5:20

However, I also believe that communication between employers and employees may be able to provide this peace of mind without government interference. For these reasons I think that we should consider more investigation with respect to this issue.

With that, I will conclude my comments. Thank you to the hon. Member for Calgary-East for bringing forward this motion, and I look forward to the remainder of the debate.

Thank you, Mr. Speaker.

The Speaker: The hon. Member for Livingstone-Macleod.

Mr. Berger: Thank you, Mr. Speaker. I'm pleased to rise today to join the debate on Motion 501, which urges the government to introduce amendments to the Employment Standards Code that would require employers in Alberta to provide up to 13 weeks of unpaid leave for employees who donate organs.

I'd like to begin by thanking the hon. Member for Calgary-East for bringing our attention to this important issue. Mr. Speaker, there are well over 4,000 Canadians who are currently awaiting organ transplants, and unfortunately some will die waiting. Many of those lives can be saved with the help of a living donor. The kidney, liver, lung, pancreas, and small bowel along with some vital tissues can all be donated by living donors, making them much more readily available than organs from the deceased. Unfortunately, a barrier for many potential living donors is the amount of time that must be taken to prepare for and to recover from such surgeries.

Many fear that their jobs might not be waiting for them when they are ready to return to work. While it is commonplace for employers to grant extended leaves of absence to living organ donors, this is not always the case, and as such we should consider the possibility of enshrining this level of job protection in formal legislation. Mr. Speaker, legislated job protection may encourage individuals to become living organ donors who would not have otherwise done so for fear of unemployment. This increase in the number of living organ donors would no doubt save the lives of many who currently sit on transplant waiting lists.

There is indeed a shortage of living organ donors both here in Alberta and across the country. Organ donation is a potentially life-changing decision that is certainly not to be taken lightly, and many choose not to take the risk. In addition, Health Canada has stringent donor screening guidelines, that exclude many from becoming donors. As such, not everyone can become a living organ donor, but those who are able to should be given every opportunity to save another's life. This enhanced level of job security could help to balance the supply with an ever-increasing demand for organs.

However, while there are many potential benefits to Motion 501, an item of concern for me is the possible burden that job-protection legislation could put on Alberta businesses should a large number of employees take advantage of this leave. Here in Alberta we pride ourselves on being one of the best jurisdictions in North America to do business. Our tax regime alone has helped to ensure that the entrepreneurial spirit remains alive and well in our province. Since we are all recovering from the recent economic downturn, we certainly do not want to enact legislation that would discourage investment and economic growth.

Another potential problem with providing up to 13 weeks of unpaid absence for living organ donors is sometimes the contentious nature of organ donation itself. For religious reasons some people do not believe in organ donation, and it could become controversial if we were to compel employers who are against it to provide employees with 13 weeks of unpaid leave to donate an organ.

That being said, I believe that the intent behind this motion is to help raise awareness of the need for living organ donors to possibly save the lives of Albertans awaiting transplants. For this reason I believe that more debate is required before we can determine whether or not Motion 501 is in the best interests of all Albertans.

With that, I will conclude my comments and look forward to hearing other perspectives from my hon. colleagues. Thank you, Mr. Speaker.

The Speaker: The hon. Member for Calgary-Bow.

Ms DeLong: Thank you very much, Mr. Speaker. I would like to rise today and join debate on Motion 501, which is being brought forward by the hon. Member for Calgary-East. This motion urges the government to introduce amendments to the Employment Standards Code that would require all employers to provide an unpaid leave of absence for employees who choose to donate their organs. With a large disparity in the supply of and the demand for organs across our country, new initiatives are necessary to address this growing concern. Because donating an organ is a life-changing decision and can potentially carry serious personal consequences, many people considering this undertaking simply decide that the health risks are too great. A risk to one's employment only enhances this danger, making this decision even more difficult to make.

As we know, no legislation is currently in place to formally protect those willing to take a leave of absence from their employment for the purposes of donating an organ. I firmly believe that such formal job-protection legislation is needed for the security of would-be donors as well as to address the length of wait times for those in need of an organ. Ontario and Manitoba already offer a job-protection leave for organ donors in their employment standards legislation, and a number of U.S. states do also. In the majority of these examples the donor leave is unpaid, yet a recent law passed last month in California mandates that employers are required to offer a paid leave of up to 30 days; however, this is contingent on the employer having more than 15 employees. If the employer has fewer than 15 employees, they're not legally required to offer the 30-day organ donor leave to an employee.

Mr. Speaker, we must also take into consideration how many employees realistically would take an organ donor leave at the same time. I don't believe that if we enacted the job-protection legislation proposed in this motion, many employees from the same company would simultaneously take organ donor related leaves of absence. For a small business with fewer than 10 employees having even a couple take a leave simultaneously would be difficult to overcome. However, if just one is gone at any given time, I do believe that the employer would be able to adapt, especially given the reason for the absence. This example is amplified when we look at how a single employee on organ donor leave would affect a larger business with more employees. For all intents and purposes missing one employee would not have a substantial impact on day-to-day operations, and missing an employee for 13 weeks or less is certainly worth saving a life.

Mr. Speaker, Motion 501 does not seek to cause undue harm to Alberta businesses, nor will it. It simply offers peace of mind to those already considering becoming a live organ donor. Knowing that their job is secure may be just what would-be donors need in order to commit to the procedure, in turn enhancing and potentially saving someone else's life. For this reason I am happy to vote in support of Motion 501 as I feel it is in the best interests of all Albertans.

With that, I will conclude my comments and look forward to hearing other perspectives from my hon. colleagues. Thank you very much.

The Speaker: Hon. members, my speaking list is exhausted. Shall I call on the hon. Member for Calgary-East to close the debate?

Hon. Members: Agreed.

The Speaker: The hon. member.

Mr. Amery: Thank you very much, Mr. Speaker. I'm pleased to rise and offer closing remarks on Motion 501. The goal of this motion is to encourage the government to add extra incentives to prospective living organ donors through offering a formal job-protected organ donor leave by amending our Employment Standards Code. With this a would-be donor would be provided the peace of mind that their job would not be compromised in any way while on leave.

5:30

Mr. Speaker, given the length of present donor lists I believe this motion could help in reducing wait times for those in need of an organ transplant. Donating an organ to someone in need is a very, very humane act and one that is to be commended. A person who commits themselves to such a life-saving feat deserves to have their job protected. This government has and continues to take a leader-

ship role in ensuring that people are protected. I believe that Motion 501 will only enhance our efforts to ensure that Alberta remains the best place in which to live, work, and raise a family.

Mr. Speaker, I value and respect my colleagues' comments regarding Motion 501 and urge their vote of support. I would like to thank everyone who participated in this motion debate.

Thank you, Mr. Speaker.

[Motion Other than Government Motion 501 carried]

The Speaker: The hon. Deputy Government House Leader.

Mr. Renner: Thank you, Mr. Speaker. I would like to move that the Assembly now adjourn until 7:30 this evening, at which point we would reconvene in Committee of Supply.

[Motion carried; the Assembly adjourned at 5:31 p.m.]

Table of Contents

Prayers	61
Introduction of Visitors	61
Introduction of Guests	61
Ministerial Statements	
Black History Month	61
Oral Question Period	
Size of Alberta Cabinet.....	63
Emergency Room Wait Times.....	63
Provincial Fees	64
Provincial Budget	64
Oil Sands Reclamation	65
Wait Times for Cancer Treatment	65
Drilling Stimulus Program.....	66, 70
Fusion Energy.....	66
Charter Schools	66
Alberta Initiative for School Improvement.....	67
Homeless Management Information System	67
MRI Wait-list	68
School Construction in Airdrie.....	68
Industrial Development in the Eastern Slopes	68
Grande Prairie Hospital Construction.....	69
Alberta Health Services CEO Position	69
Special Education Consultation.....	70
Political Contributions by Municipal Officials.....	70
Members' Statements	
Al Holmes	71
Provincial Budget	71
Cardston Cougars	72
Balwin Villa	72
Training Program for Older Workers	72
Industrial Energy Efficiency Projects	72
Alberta Achievements at 2011 Canada Winter Games.....	72
Introduction of Bills	
Bill 7 Corrections Amendment Act, 2011	73
Bill 8 Missing Persons Act.....	73
Tabling Returns and Reports	73
Orders of the Day	73
Public Bills and Orders Other than Government Bills and Orders	
Second Reading	
Bill 201 Health Insurance Premiums (Health Card Donor Declaration) Amendment Act, 2011	73
Motions Other than Government Motions	
Organ Donation Leave of Absence.....	86

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