



House of Assembly
Nova Scotia

DEBATES AND PROCEEDINGS

Speaker: Honourable Kevin Murphy

Published by Order of the Legislature by Hansard Reporting Services and printed by the Queen's Printer.

Available on INTERNET at <http://nslegislature.ca/index.php/proceedings/hansard/>

Second Session

FRIDAY, OCTOBER 3, 2014

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House of Assembly
Nova Scotia

HALIFAX, FRIDAY, OCTOBER 3, 2014

Sixty-second General Assembly

Second Session

9:00 A.M.

SPEAKER

Hon. Kevin Murphy

DEPUTY SPEAKER

Ms. Margaret Miller

MR. SPEAKER: Order, please. We'll now begin the daily routine.

PRESENTING AND READING PETITIONS

PRESENTING REPORTS OF COMMITTEES

TABLING REPORTS, REGULATIONS AND OTHER PAPERS

STATEMENTS BY MINISTERS

GOVERNMENT NOTICES OF MOTION

INTRODUCTION OF BILLS

**Bill No. 16 - Entitled an Act to Amend Chapter 31 of the Acts of 2004. The
Police Act. (Hon. Lena Diab)**

Bill No. 17 - Entitled an Act to Amend Chapter 31 of the Acts of 2004. The Police Act, Respecting Complaints and the Nova Scotia Police Review Board. (Hon. Lena Diab)

MR. SPEAKER: Ordered that these bills be read a second time on a future day.

NOTICES OF MOTION

MR. SPEAKER: The honourable Leader of the Official Opposition.

RESOLUTION NO. 48

HON. JAMIE BAILLIE: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas in March 2006, Corporal Paul Davis of Bridgewater paid the ultimate sacrifice when he lost his life serving our country, protecting freedom and liberty in Afghanistan; and

Whereas on September 25th a ceremony took place to unveil a monument in memory of Corporal Paul Davis at his former school, Bridgewater Junior Senior High; and

Whereas hundreds of people joined with the family of Corporal Davis to remember and celebrate the ties between school, community, and a brave Canadian soldier;

Therefore be it resolved that all members of this House reflect on the sacrifice of Corporal Paul Davis and all of Canada's fallen soldiers, and show gratitude for all those who put themselves in harm's way to serve our country.

Mr. Speaker, I request waiver of notice and passage without debate.

MR. SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

The honourable Interim Leader of the New Democratic Party.

RESOLUTION NO. 49

HON. MAUREEN MACDONALD: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas on May 1, 2014, the Minister of Labour and Advanced Education told this House of Assembly that her Liberal Government would respect the desires of health care union members in which union they want to belong; and

Whereas on the same day, the Minister of Labour and Advanced Education told this House of Assembly that she had no intention of introducing legislation to merge health care unions; and

Whereas earlier this week the Minister of Labour and Advanced Education told this House that in spite of Liberal legislation to merge health care unions, her comments were still technically accurate because she isn't the minister who introduced the bill;

Therefore be it resolved that this House of Assembly remind the Minister of Labour and Advanced Education that if she votes in favour of Bill No. 1, she will be breaking her promise to "respect the desires of health care union members."

MR. SPEAKER: The notice is tabled.

The honourable member for Pictou West.

RESOLUTION NO. 50

MS. KARLA MACFARLANE: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Shane Hampton of Pictou is instrumental in organizing the annual Terry Fox Run; and

Whereas the Pictou run had 225 participants, making it the largest event in the country; and

Whereas there was \$3,800 raised for cancer research;

Therefore be it resolved that all members of this House of Assembly thank Shane for his commitment to the annual Terry Fox Run in Pictou.

Mr. Speaker, I request waiver of notice and passage without debate.

MR. SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

The honourable member for Chester-St. Margaret's.

RESOLUTION NO. 51

HON. DENISE PETERSON-RAFUSE: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas the Leader of the Liberal Party used paid advertisements during the 2013 election campaign to clarify his position about labour relations in the Province of Nova Scotia; and

Whereas in that paid advertisement it stated “we respect and will continue to respect your hard-earned rights and collective agreements;” and

Whereas every time the Liberal Party is in government in Nova Scotia, workers' rights are trampled and disrespected;

Therefore be it resolved that all members of this House ask the Leader of the Liberal Party to follow through on his commitment to respect Nova Scotia's health care workers, their right to strike, and their hard-earned collective agreements.

MR. SPEAKER: The notice is tabled.

The honourable member for Pictou East.

RESOLUTION NO. 52

MR. TIM HOUSTON: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas my friend Dawn MacNutt recently received her second honorary degree from her alma mater, Mount Allison University, and she remains a humble artist at heart; and

Whereas Dawn minored in art at Mount Allison and eventually travelled the world showing her art, she returned to Pictou County to follow her passion; and

Whereas after working in various mediums, Dawn has accumulated a long list of shows and commissions, and we are so appreciative that her most recent project is right here at home and is to encourage people to get reading by building a little free library near her local church, where people can take or leave a book at any time;

Therefore be it resolved that all members of the House of Assembly congratulate Dawn MacNutt on her personal success and her drive to help others.

Mr. Speaker, I request waiver of notice and passage without debate.

MR. SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

The honourable member for Sackville- Cobequid.

RESOLUTION NO. 53

HON. DAVID WILSON: Mr. Speaker, I hereby give notice that on a future day I should move the adoption of the following resolution:

Whereas one year ago the Leader of the Liberal Party was promising his health merger would save Nova Scotians \$13 million in the first year; and

Whereas two weeks ago the Minister of Health and Wellness was guessing the number to be approximately \$1 million; and

Whereas just this past week the Minister of Health and Wellness changed that number, again, to approximately \$5 million in savings;

Therefore be it resolved that this House of Assembly acknowledge that the only thing consistent with the government and its Minister of Health and Wellness is his inconsistent comments.

MR. SPEAKER: The notice is tabled.

The honourable member for Kings North.

RESOLUTION NO. 54

MR. JOHN LOHR: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Eleanore Howard, a nurse at Annapolis Valley Health, is a recipient of the Excellence in Nursing Clinical Practice Award from the Nova Scotia College of Registered Nurses; and

Whereas Ms. Howard is the Chair of the Provincial Educational Advisory Committee and academic advisor for the Canadian Association of Enterostomal Therapy Nursing Educational Program; and

Whereas despite a busy schedule, Ms. Howard finds time to mentor nursing students, educate front-line staff and is presently sought after to represent other health care professionals and patients and is well respected by both her clients and colleagues for her knowledge, wisdom and openness;

Therefore be it resolved that all members of this House congratulate Eleanore Howard on her accomplishments and on receiving this prestigious award and wish her continued success in future endeavours.

Mr. Speaker, I request waiver of notice and passage without debate.

MR. SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

The honourable member for Queens-Shelburne.

RESOLUTION NO. 55

HON. STERLING BELLIVEAU: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas the government is asking fish harvesters if they agree to pay mandatory annual dues; and

Whereas the government is running ads in newspapers asking fish harvesters if they want to be represented by an organization of their choice; and

Whereas the government has taken away the right of health care workers to choose their representation;

Therefore be it resolved that all members of this House of Assembly agree that both fish harvesters and health care workers deserve the right to choose who represents them.

MR. SPEAKER: The notice is tabled.

The honourable member for Northside-Westmount.

RESOLUTION NO. 56

MR. EDDIE ORRELL: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Craig Ivey received the Joe Scott Award from the Northside Sports Hall of Fame for his community involvement; and

Whereas Craig has 35 years of volunteering on the Northside and has been Little League coach, player agent, basketball coach, chair and founder of the annual Spring Fling Basketball Tournament; and

Whereas Craig has been coach and manager for several hockey teams, serves on the board of directors at Seaview Golf and Country Club and is both match captain and the junior golf program fundraiser;

Therefore be it resolved that all members of this House of Assembly congratulate Craig for receiving the Joe Scott Award and thank him for his community service and years of volunteering on the Northside.

Mr. Speaker, I request waiver of notice and passage without debate.

MR. SPEAKER: There has been a request for waiver.

Is it agreed?

It is agreed.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

The honourable member for Truro-Bible Hill-Millbrook-Salmon River.

RESOLUTION NO. 57

MS. LENORE ZANN: Mr. Speaker, I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas the Department of Health and Wellness's Annual Accountability Report on Emergency Departments gives Nova Scotians the opportunity to see how many hours each emergency room has been closed, the reasons for the closure and what the department and health authorities are doing to address these closures; and

Whereas the Annual Accountability Report on Emergency Departments for 2013-14 is overdue; and

Whereas Nova Scotians are wondering if the minister's DHA distraction has led to increased ER closures;

Therefore be it resolved that all members call for the Annual Accountability Report on Emergency Departments to be tabled this coming week to ensure that progress continues to be made on reducing ER closures.

MR. SPEAKER: The notice is tabled.

ORDERS OF THE DAY

GOVERNMENT BUSINESS

MR. SPEAKER: The honourable Government House Leader.

HON. MICHEL SAMSON: Mr. Speaker, I move that the Order of the Day for Third Reading of Bill No. 1 be discharged and that the bill be recommitted to the Committee of the Whole House on Bills for the sole purpose of the creation of a new provision affirming that all meetings of a community health board must be open to the public, that consideration of Bill No. 1 and the committee be limited to 30 minutes and that upon Bill No. 1 being reported to the House from the committee, Bill No. 1 shall be ordered, without question put, to be read a third time today.

MR. SPEAKER: The motion is that the Order of the Day for Third Reading of Bill No. 1 be discharged and the bill be recommitted to the Committee of the Whole House on Bills for the sole purpose of creation of a new provision affirming that all meetings of a community health board must be open to the public, that consideration of Bill No. 1 in the committee be limited to 30 minutes and that upon being reported back to the House from

the committee, Bill No. 1 shall be ordered, without question put, to be read a third time today.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

MR. SPEAKER: We'll now recess for two minutes while we set up for Committee of the Whole House on Bills.

[9:20 a.m. The House resolved itself into a CWH on Bills with Deputy Speaker Margaret Miller in the Chair.]

[9:31 p.m. CWH on Bills rose and the House reconvened. Mr. Speaker, Hon. Kevin Murphy, resumed the Chair.]

MR. SPEAKER: The Chairman of the Committee of the Whole House on Bills reports:

THE CLERK: That the committee has met and considered the following bill:

Bill No. 1 - Health Authorities Act.

with certain amendments, and the chairman has been instructed to recommend this bill to the favourable consideration of the House.

MR. SPEAKER: Ordered that this bill be read a third time on a future day.

The honourable Government House Leader.

HON. MICHEL SAMSON: Mr. Speaker, would you please call the order of business, Public Bills for Third Reading.

PUBLIC BILLS FOR THIRD READING

MR. SPEAKER: The honourable Government House Leader.

HON. MICHEL SAMSON: Mr. Speaker, would you now please call Bill No. 1.

Bill No. 1 - Health Authorities Act.

MR. SPEAKER: The honourable Minister of Health and Wellness.

HON. LEO GLAVINE: We're jumping right into it today, aren't we? I move that Bill No. 1 be now read a third time.

Mr. Speaker, the labour component of this bill has been the part that has attracted the most public attention. I understand that, and I expected it, so I'm going to start by addressing some of the points critics have brought up.

Some union leaders have said to media and at Law Amendments that they deserve the right to choose which union represents them. Mr. Speaker, anyone who joins our health care sector today does not have that right. If you're a lab technologist and you want to take a job at Kentville Regional Hospital, you're going to be a member of CUPE. You don't get a choice. That choice was made for you decades ago, and the Labour Board and unions in the past have agreed to move employees from one union to another without giving them a chance to vote on it.

When critics suggest they have a right to choose, Mr. Speaker, make no mistake: they are asking for runoff votes. As I toured the province earlier this year, health care workers told me time and time again that runoff votes are disruptive and pit workers against each other. They distract from patient care. Nova Scotians have told me in no uncertain terms that patient care is their first concern.

Some critics have also said that this legislation is unprecedented. In fact, Mr. Speaker, four other provinces have passed legislation to deal with union representation naming the unions: British Columbia in 1996, Saskatchewan in 1996, Alberta in 2003, and recently, P.E.I. in 2005.

I've said this before, but it's worth repeating: this bill will not impact wages, pensions, and health benefits. Health care workers will not lose the vacation that they have earned, and their salaries will not change, but Mr. Speaker, this bill will change our labour structure - and it needs to change. (Applause)

Today, if a public health nurse in Yarmouth wants to fill in part time at Yarmouth Regional Hospital, she must belong to two unions and pay two sets of dues. She can't simply answer a call from a colleague, decide if she is available, and offer to help out. That doesn't make sense to Nova Scotians. It doesn't help to improve patient care, and it must change.

Under this bill, a mediator will sit down with the existing health care unions and employers and work out solutions for the future. It's the unions and the employers who will be suggesting options, and I certainly hope they are able to reach agreement. As Minister of Health and Wellness, I have to keep the best interests of all Nova Scotians in mind, and Nova Scotians want a unified health care system that puts patients' needs and front-line care first. That's what this bill will do. (Applause)

There are a lot of really important parts of this bill that aren't related to the labour landscape and haven't gotten nearly as much attention as they should. I would like to take a few minutes to point them out to the members of the House.

First of all, the Department of Health and Wellness will now set a strategic, multi-year health plan for the province, with targets for improvement. For the first time, we will be able to ensure that our entire health care system moves as one to one set of goals.

Our health authority, along with the IWK, will report back to government and the public on the progress they have made. Nova Scotians will know what we're doing, how we're doing it, and most importantly, whether we are succeeding. Nova Scotians want to make sure that local voices are heard and that their concerns are addressed when we are setting those province-wide goals. That's why this bill will, for the first time ever, require health authorities to submit an annual public engagement plan. Health authorities will have to tell us how they reach the people they serve to ensure that their concerns are heard, and that means all of the people they serve. That includes diverse groups who are often underserved in our health care system, such as First Nations, African Nova Scotians, the LGBTI community, new immigrants, people living on low incomes, and Nova Scotians with disabilities.

We will be able to keep those concerns in mind as we set our strategic goals. Talking to communities across Nova Scotia will no longer be optional. It will be required by law, and that truly is unique across Canada. Community health boards will play a strong role in that public engagement. They will help in reaching out to their communities on wellness initiatives, as they have always done so well, and they will support the health authorities in seeking input on health needs and priorities and access to health services.

In short, they will help to make sure that the needs and concerns from people across Nova Scotia are heard. All of this adds up to increased transparency, more accountability, more common standards, and shared goals. This bill is all about removing barriers and costly bargaining. It's about better health outcomes and a sustainable system of care. That is the solid foundation we are building for our unified health care system in Nova Scotia, and it's the foundation we need to improve front-line patient care. Thank you. (Applause)

MR. SPEAKER: The honourable Leader of the Official Opposition.

HON. JAMIE BAILLIE: Mr. Speaker, it's hard to believe we're here today speaking on third reading, facing a vote of this size after only four days of debate. When the dust settles, I know that many Nova Scotians will wonder, what was the rush? What was the crisis? What was the deadline that required that this Legislature sit for four total days at hours of day and night to get a bill of this size through, a bill that reorganizes the health care management system and deals with the labour side of health care at the same time?

I say that, Mr. Speaker, because we did, as a PC caucus, want to examine both in some detail because of the size of the changes. For that reason, we brought a resolution to the Chamber to split the bill in two so that those things that the minister just spoke about, about how the health care management system may change, could be properly examined - not even so that we could oppose them, as I'll talk about in a moment, but so that we could ensure that real savings would come, that real change would be made, that the objectives that we share on making the health system more sustainable will actually be reached.

But that didn't happen. The minister himself says it's too bad that it didn't happen, but it's his own bill that made that impossible, because he put all of this into one omnibus bill and, of course, the attention went exactly where the government knew it would go, which is to the labour side.

Mr. Speaker, again, Nova Scotians wonder, why did our Legislature only have four days to talk about this big change? Where is this magic deadline that said we had to have a crisis this week? The answer, which also didn't get the time it deserved, was that last Spring, the Liberals told Nova Scotians they had stopped strikes in health care; they told health care workers that, no, they still have the right to strike. Both of those statements, of course, can't be true at the same time.

Now we know that buried in the details of this bill, unexamined, is an acknowledgement that what they told Nova Scotians last Spring is not actually what is happening, because there is a pending strike in our health care system. On top of everything else, this bill puts a Band-Aid on that, yet again, kicks the threat of a strike in health care down the road from this Fall until April 1st. Mr. Speaker, I really wish the government had split the bill in two so that we could have examined both sides together and in a timely way, but the government denied that opportunity.

Having said that, Mr. Speaker, I do want to spend a few moments on what Progressive Conservatives and our caucus have always supported, have always believed in, and hold true both in the run-up to the election and during the election and we continue to hold true today - that is, that there has to be change in our health care system to make it sustainable for today's patients and for the Nova Scotian patients of the future.

We have always advocated for finding greater savings and efficiencies in our health care system, particularly in administration. It's no secret that health care is almost half of the provincial budget and that administration, with all of the CEOs and vice-presidents and executive directors and nine different authorities plus the IWK, is a big chunk of our provincial budget supported by a lot of our tax dollars. It's growing at a rate that is beyond the ability of Nova Scotians or our economy to pay. So we've always supported making the health care system more sustainable, more affordable for Nova Scotians, and of course taking whatever savings there may be from this restructuring and putting it back into front-line care, where Nova Scotians want their health care dollars to be spent.

We've also always supported, past, present and future, making our health care system more accountable to the people of Nova Scotia by streamlining it, by holding its executives accountable for delivering real results to Nova Scotians, by not allowing the nine different ways that health managers can continue to point fingers at different authorities or different managers. We want a streamlined system so we know when we're paying people to run our system, who we turn to make sure we actually get the results that taxpayers pay for in health care.

We support better service delivery - and I'm sure everyone would agree with that - meaning that we need to actually reorganize the health care system. More shared back-office support, finding new ways to deliver health care appropriately to 21st Century Nova Scotia within the agreed-upon concept of a public, single-payer, universally accessible health care system. Certainly, whatever savings come from that, to reinvest in ensuring every Nova Scotian on the front lines gets the health care that they need.

We have supported all of these important principles for a long time, Mr. Speaker. We've supported them in the past. We support them in the present. We will support them in the future. In fact, we campaigned on them, as the Liberals did just a year ago, we campaigned on our commitment and our promise to the people of Nova Scotia that we would streamline health care administration and put those dollars back into our health care system. We believe that today, as much as we did during the campaign itself.

Now during the course of debate in this House, in the few short days that we had to debate this bill, Mr. Speaker, we raised some serious questions about whether the government can actually deliver on any of the objectives that the bill foresees. We do believe in the goals of the bill and certainly we accept that no matter what we do, it is going to pass. Our job in the Official Opposition is shortly going to change from debating this bill to holding the government accountable, every day, for actually achieving the things that the bill envisions. Will they actually save money from the changes they are proposing? Will that money actually go back into front-line care? Will rural Nova Scotia still have a voice in its own health care or not? These are examples.

Now the government is off to a very bad start already, just in the way they've handled the debate. On the issue of whether these changes will save money for taxpayers or not is a big, open question because the government itself has flip-flopped on that question. Their platform said they would save \$13 million; a few weeks ago the minister said, well, it might only be \$5 million. This week it was \$1 million. Now we're talking about a decimal point of a percentage of the entire health care budget.

Mr. Speaker, we are going to hold the government accountable every day for actually making real change in the management of our health care system in a way that meets the goals of the bill that we support, which is more efficiency, more savings, more transparency, more accountability. I doubt we're going to see a lot from this government in actual delivery, but we'll see in the days ahead.

I also want to point out that, as Progressive Conservatives, we have also always believed in the truism that rural health care delivery is very different than city health care delivery. When you think about it, Mr. Speaker, that is so obviously the case. Halifax has among the highest number of family doctors per capita in the whole country. Halifax has a tertiary care facility, a teaching hospital, great research facilities, regional delivery across the Maritime region, and some important acute services. Those are all unique to the City of Halifax and we are blessed to have them.

That is a very different structure than exists in rural Nova Scotia, where the problems are quite often the exact opposite. There are too few family doctors in rural areas, not as many as in Halifax. The challenges of delivering primary care or family care across a broad, less-populated area of the province are very different. Emergency care is very different in rural Nova Scotia, Mr. Speaker, as we still have too many communities where their local emergency room is open and then closed and then open and then closed again. They struggle to advertise the hours so that at least people will know when it's going to be closed or open.

That is not an issue in the City of Halifax. Rural health care is different than city health care and the management of our health care system must reflect that. That's why we proposed an amendment to this bill to actually create a health authority for mainland Nova Scotia and Cape Breton where the challenges are so different from the city. In fact, Mr. Speaker, it is that old, great management expression that the form should follow the function when you're designing a system, that it should actually reflect the reality of the system you are trying to manage.

The Liberals have focused all of this health care authority, the new authority, on Halifax, and rural Nova Scotians are going to rightly wonder whether their needs will be looked after or not.

Mr. Speaker, our amendment to add a health authority for mainland and Cape Breton is exactly what we campaigned on and we are being true to that. I wish the government had taken some time to consider it because there is no doubt in my mind that we would have a better system in the future if they had. But they didn't. They rejected outright having a health authority for mainland Nova Scotia and Cape Breton. And we will hold them accountable for that, as well, when we watch health care delivery roll out across rural Nova Scotia.

I also want to make clear, we even agree on the need for changes to the unionized system of health care organizations, even bringing the number of unions down to a smaller and more reasonable number in order to make for a more streamlined and more efficient management of the system. The bill proposes to bring that number down to four and to have four general areas of health worker represented by four unions. That is a change from the current system. We have not spent any time debating that with the government, because we're prepared to go along with that. But I have to say, and I mean this personally, and I

mean it on a policy basis, the government's methods of getting there are highly questionable.

In their haste, they didn't even consider how, within the new structure of four unions, to get to that goal in a democratic way. Or worse, maybe they did consider it and rejected it. It appears from the debate that we had that the government did consult and coordinate and work with some of the union leaders on this very question, and together deliberately decided to avoid having a democratic vote within those four unions. And to use an old saying, I think the government deserves to be ripped a new one over that alone. And I say that as a democrat, as a person that always believes that voting is better than not voting, that democracy is better than no democracy, that giving people choice . . .

MR. SPEAKER: Order, please. I'd just like to remind the honourable Leader of the Official Opposition that - I'm not going to repeat the phrase. It's unparliamentary and I'll ask him to retract that phrase.

The honourable Leader of the Official Opposition has the floor.

MR. BAILLIE: Mr. Speaker, I do retract that. I didn't realize it was unparliamentary, as it didn't refer to exactly - although we all conjured up the image.

MR. SPEAKER: I was reading between the lines.

MR. BAILLIE: But it's the right image. I retract the words; it's the right image.

Who are we in this House, having all been elected here, to deny the right to vote to our fellow Nova Scotians, who should also have a say in who their representative at the bargaining table is?

I know how ironic it is that it's the Leader of the Progressive Conservative Party making this point. Believe me, I know. But those aren't just union members outside. They're health care workers. But they're not even just health care workers - they are our fellow citizens. They are Nova Scotians and they are Canadians. If there's one thing I thought we all agreed on in this Chamber, in this country, it's that you elect your representatives. That's something that we're supposed to all believe in, Mr. Speaker. (Applause)

Whether it's your city councillor, your provincial MLA, your federal Member of Parliament, or who is going to speak for you at the bargaining table, we choose those people in this country. You could still, as a government, have come down to four unions and had all the goals that this bill envisions accomplished and given people a democratic choice. But they didn't. They sold out their own principles in their rush to get down to this smaller number of unions. It is odious what they are doing to our fellow citizens on this point.

I want to dwell on this for a minute because I heard the government's defence that it's too divisive, it's too divisive. Well, you know what, Mr. Speaker? Democracy is messy. Get over it. Elections are divisive at all levels, and we should be able to have reasonable disagreements and cast reasonable ballots that are different from each other and accept the results. It's too divisive? That is a terrible defence for why we wouldn't allow a vote on important questions like this.

The other defence I heard, Mr. Speaker, is that when you get your job you are assigned a union, so what's the difference? Well there is a big difference. When you are hired you accept the terms of your employment, voluntarily, including who is going to represent you. Now they are changing the rules partway through the game.

I'll give you an example, Mr. Speaker: a Nova Scotian moved to this province today, they are going to accept that they are governed by the Liberals, but there will be an election at a future day and they will have a choice about who they vote for. The same principle should apply in this case but they rejected that.

A third defence that the government provided is that well, we may not like the result of the vote. They may vote for this union instead of that union. Well that is the worst defence of all, to not have a vote because you may not like how the voters actually vote. That is wrong. I can tell you from recent personal experience, Mr. Speaker, of having gone through an election where I didn't exactly like the outcome. But I accepted it, and I am governed by it, because despite our differences in the way we vote, we all accept the result.

I want every member on the government side to take a moment and reflect on that. Our fellow citizens, no matter what you think of unions, no matter what you think of their positions, they are our fellow citizens and the government says you are not going to vote because it's too divisive, because you accepted that when you took your job and because we might not like the result of the vote. That is, as I say, odious to all people who believe in our democratic system, no matter what level voting is practised at.

It's pretty clear, Mr. Speaker, that on this issue the government overreached. They could have accomplished all that this bill envisions, including the four unions, and respected democracy, but they chose not to. They have overreached. We will, in the days ahead, hold them accountable for that as well.

Mr. Speaker, as Progressive Conservatives we made these points during the debate on this bill. We made these points inside this Chamber and outside this Chamber. I do hope that every MLA here, in all Parties, takes a moment and reflects on what they are doing to people's democratic participation here today. In fact, I think it's kind of ironic - and I may have made this point - that it's Progressive Conservatives who are making this point. I know that our colleagues in the NDP are making it as well.

One of my personal disappointments in the past week is that union leaders themselves are not united on this basic principle, Mr. Speaker. I've heard the same lines that are coming from the government about it being too divisive and so on, coming from some of the leaders of some of our public sector unions and I am very disappointed to hear that, so we have raised these points. I do want to say that for someone who believes in our democratic system - I know we all do, or thought we all did - as someone who grew up following it, as someone who ran in it, that this is for us both a pretty important policy point but it's also a personal point, people should be able to vote.

I say that because I am disappointed that the union leadership is not together on this. I would like to advise them, Mr. Speaker, that the advice we are getting, the legal advice on the bill, which I want to share today with the people outside and with union leaders, is that if they want, they can still get together and have a vote and present the vote results to the mediator that the government is going to appoint.

I can only hope that a mediator, receiving those vote results, would give that the weight that it deserves, within the confines of the four unions that the government envisions. Maybe there can still be a little democracy here, Mr. Speaker, if the mediator will look at a democratic vote of nurses and allied health workers and technicians and others, when he considers allocating people to a new union.

My final point about democracy is this: I know we have stood in this Chamber, and outside the Chamber, to make this point, and have watched the union leaders themselves who could not come together on this, so I feel we have done our bit. I also encourage them, just as I have encouraged members of this House to reflect on this democratic point, I want the union leaders to take some time and reflect on this important principle of voting for your representative. I think they need to do that as well.

Having said all that, I do want to conclude where I started, on the things that the Progressive Conservative Party has always supported and that is making our health care system more sustainable, more affordable, more efficient, less administrative and that money where we have it, taxpayers money, should be devoted to front-line care and not to excess administration. Those are things that we have always believed in. Those are things that we campaigned on and let me be clear, as long as I am the Leader of this Party, the Progressive Conservative Party will say the same things before the election as we say after the election. That is also an important democratic principle.

I will point out it was the Leader of the Liberals who wrote an open letter to nurses saying he would respect their democratic rights, and published it in *The Chronicle Herald*, among other places. It was the Leader of the Liberals and the Liberal Party, ironically, that just one year ago stood in this Chamber and voted in favour of allowing paramedics to go out on strike, just before the election. Ironically because what could be a greater example of an essential service than our emergency medical people, our paramedics? They were quite prepared to be against essential services laws then and let them walk out.

That Party has not said the same thing after the election as before but this one will. This bill is a test of that. We are going to do, act, say, and vote the same way after elections as we told people we would before elections. We are going to take our time, from today on, to hold the government to account for actually achieving the goals that the bill envisions, but consistently with Progressive Conservative principles, we are going to vote the way today that we have always voted and it is for the goal of the more sustainable system. Thank you.

HON. MICHEL SAMSON: Mr. Speaker, on a point of order. I would ask you to review Hansard and the comments by the Leader of the Progressive Conservative Party. I believe his remarks indicated an accusation that government members had sold out their principles. I would suggest to you that it is unparliamentary, and certainly if not unparliamentary, it crosses the line of decency in making such a statement.

I would encourage you, Mr. Speaker, to have a review of such comments, in light of the fact that previous comments by the Leader were ruled out of order by yourself. I would ask you to have a look at them and advise the House.

MR. SPEAKER: I will take that under advisement and report back to the House.

The honourable Interim Leader of the New Democratic Party.

HON. MAUREEN MACDONALD: Mr. Speaker, I'm pleased to rise in my place and join in the debate. I want to say that I'm pleased that we have heard from the Leader of the Official Opposition for the first time in here, through the debate on this bill. I listened very intently to what he had to say and I would like to say he made a lot of very good points. It was good to hear him and what he had to say about this bill because until now we had not actually heard his voice as part of this debate.

There are so many things that need to be said about this bill. A lot has already been said, but there are so many things that need to be said about this bill.

As you know, this is the fourth piece of legislation that the Liberal Government has brought forward in their one year in office aimed at eroding the democratic rights of Nova Scotians in the workplace. I think, for many Nova Scotians this is a big shock, this comes as a surprise - they had not anticipated that this would be the government that they were electing in last year's election.

Many people have expressed to me their surprise at this government and I've said that there is, certainly for many working people in labour organizations, a kind of Liberal voter remorse going around because people are feeling so profoundly betrayed, attacked, disappointed, and abused - those are all words that we have heard at the Law Amendments Committee throughout this process.

And I want to say something as a member of this Legislature for 17 years, from a personal experience - I have never, never been so offended as a member of this House by the level of security that has been imposed on myself and other members of this Legislature in the last four days, including this morning when I arrived here to find that I could not get onto grounds of this Legislature, as I have every time I've arrived here for the past 17 years. Mr. Speaker, this is the people's House. This House does not belong to any one Party. We are sent here by the people of our constituencies, the citizens of the Province of Nova Scotia, to represent them - and this is not acceptable.

The level of security that has been imposed is over the top, in my view, and I have never experienced it before. I've been here through Bill No. 68, I've been here through the previous Bill No. 1, and I've been here when the paramedics were looking at going on strike - twice. I was here when the streets were full of teachers and parents and school board members during an education budget when my respect for Dr. John Hamm grew when I watched him wade out into the demonstration and talk to people - not run away from them. (Applause)

Mr. Speaker, we live in a democracy. This is the people's House and we are the people's representatives. The last four days have made me question what the thinking is of those who have the authority to organize what we've seen in terms of security here. I really needed to say that.

Mr. Speaker, we had an election last year and two of the political Parties campaigned to merge district health authorities and reduce administration, CEOs and VPs. We didn't here in the NDP. Now why was that? Is it because we loved the district health authorities? Because we love administration? No. We didn't do that - actually, when I was thinking yesterday about the third reading on this bill, I thought about when the nine district health authorities were created.

The Progressive Conservative Party were over there. It was their bill that created the district health authorities. I was over there. We opposed moving from four to nine, and I remember standing in my place and talking about how the creation of nine boards would result in more bureaucracy and more administration. We knew that would happen.

When we were in government, we worked really hard to reduce administration. We brought health administration down from above the national average to below the national average, and we did it without causing any of this - what *The Chronicle Herald* editorial today calls the "health bill fiasco". We have a study on merging services in the health DHAs and work was certainly underway, and we'll have a chance to ask more about where that work actually has ended up in coming days.

Mr. Speaker, it's not that we love nine DHAs or it's not that we love administration and bureaucracy - far from it. What we don't love is chaos in the health care system, and we got that. That unless you had some really incredible plan to merge district health authorities

in a way that could avoid what's happening out there, you are taking a risk of creating chaos in the health care system.

Our Party believes deeply in the importance of front-line patient care delivered by health care professionals who are valued, who are respected and who know and understand they're valued and respected. That's how you get the best patient care out of health care workers, not by kicking them and beating them and disrespecting them and taking away their democratic rights.

I want to say . . .

HON. STERLING BELLIVEAU: Mr. Speaker, with all due respect, I rise on a point of order. This is an important bill before the House, and the Minister of Health and Wellness opposite is sitting there reading the local paper.

MR. SPEAKER: I don't see that as a valid point of order.

The honourable Interim Leader of the New Democratic Party has the floor.

MS. MACDONALD: Thank you, Mr. Speaker, and I want to thank my colleague from Queens-Shelburne. This particular bill, Bill No. 1, as I said, has many themes and it has many, many problems. We have not had - and I said this earlier - we haven't had sufficient opportunity to really think about the health care side of this bill because the labour relations pieces of this bill are so profoundly offensive and problematic.

I want to say one or two more things about the health side of this bill before I go on to the labour relations piece. The government has made a big deal about the role of community health boards - that they're going to be strengthened, that they're going to be expanded because of Bill No. 1. Baloney! They are not going to be empowered because of Bill No. 1. Do you know that right now, in the district health authority system, every DHA board, by law, has one-third of their members from the community health boards?

This bill makes no provision for any representation from community health boards on the new super board - it's not there - yet in every DHA right now, one-third of the DHA board is made up of people from the community health boards.

Now, why does that make a difference? Well, that means that right now, community health boards are in the loop. They get information and they have input into what's going on at the local level in their region. They have a direct pipeline into the Department of Health and Wellness. That is being taken away by Bill No. 1.

So you have to ask yourself, how likely is it that community health boards will really have input into this health plan for the province and for their particular area? What

information will they get? What opportunity will they have to put forward the excellent work they do? There's no provision for that in Bill No. 1, no provision whatsoever.

You know, I look at a board like GASHA, in the Guysborough Antigonish Strait area, that has had amazing volunteers sitting on the board, both as appointments from the minister and the community health boards. There's a First Nations community in GASHA. GASHA has always had a representative from the First Nations on their board, and they are a trailblazer in terms of the kinds of services that they have developed and have provided into that First Nations community, where there are many, many health issues.

This new super board - what possibility, what opportunity, what is the likelihood that that voice or that the voices of First Nations people, for example, who have been on some of our boards, the Acadian communities who have been represented on the boards where there are Acadian communities - what is the likelihood in this super board that that's going to be captured? No provisions for any of this in Bill No. 1, I have to say.

This reorganization is eroding the opportunity and the involvement, the inclusion of rural representation around health care planning and delivery and of the diversity of the various communities that make up our beautiful province. We are rushing this through - four days, at lightning speed, no opportunity to really interrogate these points with the minister and the government.

I want to talk about the labour relations part of this bill, because it has been the subject of considerable study, discussion and controversy. Mr. Speaker, actually my background, my academic background - I'm a social worker, as most people know, and have worked in our health care system - but I also have an academic background. I have a Ph.D. in labour studies.

There is a huge body of research on the very question of labour relations in the health care sector. Over decades, people have looked at this question about whether or not strikes in areas that provide services to vulnerable people should be permitted, and to what extent should they be permitted, and what are the reasonable limits that should be put on them? What is behind labour relations in this sector? Why do strikes happen in this sector? How do you resolve all of these tensions? We could be here for a long time, sort of looking at all of the empirical evidence and the research that has built up on a very complicated topic.

Of course, there is lots of jurisprudence on this issue. These issues have been tested in the courts and will continue to be tested in the courts. We are very privileged here to be Nova Scotians and Canadians, to live in a free and democratic society that our grandfathers, and in some cases perhaps fathers, have fought for the rights that we have, and we heard from many people in the Law Amendments Committee who talked about this.

We enjoy rights and freedoms that many people in our world don't enjoy. It is ironic to watch the demonstrations in Hong Kong, where people are fighting for the right to actually have choice on a democratic ballot rather than to have no choice and to have the Communist government in China impose on the people of Hong Kong the decision about who the rulers shall be there. That irony has not been lost on people here in Nova Scotia.

The Supreme Court of Canada has, in looking at the Canadian Charter of Rights and Freedoms, in more than one case, reaffirmed that the right to association includes the right to strike. The right to association isn't just about you get to be in an association, but there are some inherent rights that go with being in an association. The right to strike is one of those things. Inherent in that is also the right to choose who will represent you.

I think, in talking to people through the Law Amendments Committee process and outside, the biggest insult to people from the Premier and members of his government is they're telling people who are telling them that it matters whether they have a choice or not, that it doesn't matter. You know better. People are saying, it matters to me, and the government members and the Premier are saying, no, it doesn't matter. You're not listening. You haven't been listening. That's an insult, "it doesn't matter."

MR. SPEAKER: Order, please. I just want to remind the Interim Leader of the New Democratic Party not to refer directly to other members.

MS. MACDONALD: Mr. Speaker, I apologize, I rarely do that. I will attempt to keep myself in check on that point.

Mr. Speaker, I've heard the Minister of Health and Wellness as recently as this morning say that the idea of having a choice is kind of a ludicrous idea or it's some sort of a silly notion. The other day in Question Period he said 30 years ago he had no choice - so I guess he thinks that should carry on for everyone.

Mr. Speaker, it is true that if I were to apply for a job as a social worker in our health care system the bargaining unit would be there and I would become a member of that bargaining unit, and part of my hiring process wouldn't be what union would you wish to be in. But you know if there was a change in my employer, if who my employer was changed, I would have a choice. Normally you would have a choice if a new employer came along. Maybe not if there was a new employer who just had the union you were already in there would be no need, successor rights would take care of that, but if there was a new employer who had multiple bargaining units and a decision needed to be taken about how are we going to handle this, there would be a choice unless you could find some other way to deal with that.

This idea that people don't have a choice when they get hired is a red herring, that people don't have a choice when they go into a workplace. With all due respect, Mr. Speaker, that choice, that democratic right was exercised in establishing that bargaining

unit at some previous time. If the employer changes, as it is here, they are no longer to be GASHA as an employer, there's no longer going to be the Capital District Health Authority as your employer, there's going to be a new employer and because of that reorganization to a single and a different employer where there are multiple bargaining agents now, this is why we're in this situation.

People, indeed, deserve a choice or they need to remain where they are. The government has a variety of options here and they were given those options.

I started by saying there was an election and this idea of merging district health authorities was probably the single most important platform item for the Liberal Party in some ways. We all knew this was going to happen, and I respect the democratic process that people made their choice and this was going to occur. I watched with great interest as a former Health and Wellness Minister, somebody who has been in this House a long time and who knows the health care system. I watched with great interest and I wondered how this was all going to unfold. When I heard that the four health care unions had come together - and I heard this in the same way that all Nova Scotians heard this, through media reports - and I heard that they were starting to work with the government to look at how they could find a resolution for the dilemma of going from nine employers down to one. I thought, this will be an interesting process because these unions are going to have to first of all agree among themselves and come to some agreement and I know that is something that doesn't happen easily, but I know it can be done.

I have seen many examples of it but the example that I would like to refer to is something called the Good Neighbour Protocol. When I became the Health and Wellness Minister in 2009, H1N1 was beginning in Nova Scotia. Prior to my becoming minister, under the previous government, the health care unions had already been meeting and doing the work of saying, look, in a health care crisis, in a pandemic, we want to do what is right for the province; we want to do what is right for patients; we want to be as helpful as we possibly can. We don't know how many health care workers could become infected and be off the job. We don't want a big staff shortage in one DHA and all kinds of health personnel in another. Let's find a way to identify if there are any barriers or any walls between health care providers, let's tear them down and let's move in the direction of collaboration and co-operation, more workplace flexibility.

They developed this protocol called the Good Neighbour Protocol. It's a public document. They all signed it and it was implemented. I don't know whether or not, during H1N1, it was ever used; I don't think it actually had to be, but it was there. It provided great reassurance to people who were managing the system that this could happen. If that can happen in a pandemic, then certainly it is something that we need to look for all of the time in our system. But nobody had to lose their legitimate representation to do that.

We know that the unions had worked very hard all summer. They had a proposal on the table. I don't know all of the details of that proposal, I wasn't at the table. If there were

problems with that proposal, and the government says there were, then deal with them. Continue to problem solve around that. What is happening here is going to impact our health care system for a very long time. We heard from a man at the Law Amendments Committee who had worked on other mergers; he was very clear about the importance of getting things right when you do this.

I was thinking last night about Air Canada. We have all flown on Air Canada, probably, and we have all had some fairly unparliamentary things to say about service, from time to time, with Air Canada. There is an example of a merger that was done poorly that has had repercussions for decades. There are still people who work for Air Canada who resent that they work for Air Canada. They still identify with their previous employer, an airline, and that has created a lot of problems - a forced merger in a way that never really got it right for many, many years.

So we know there are probably - I would think that the text books in business schools have lots of examples. Maybe the Minister of Environment, who teaches, I think, in this field could provide us and his colleagues with a lot of case examples of mergers done poorly. He probably wasn't consulted too heavily about how to pursue this, so we won't hold him responsible for the big fiasco that's unfolding in front of us, but I'm sure they're there.

At the Law Amendments Committee, we also heard about concerns from the health care workers, not only about their democratic rights, but we heard their feeling of disrespect as female workers. I know we had a little exchange here in Question Period the other day when the Status of Women Critic for the NDP asked some questions to the minister responsible about her thoughts on this. I want to assure the Minister responsible for the Advisory Council on the Status of Women Act that the health care workers who have been at Law Amendments talking about how they feel disrespected as women workers is anything but rhetoric. This is how they feel.

Sometimes facts are just facts. It is a fact that the sector that's being impacted the most by Bill No. 1 is female-dominated. Some parts of this sector are probably 95 per cent female - nurses, LPNs, continuing care workers, social workers. There are men who work in that sector, obviously, but the vast majority of the people who work in that sector are women. And it's just a fact that women in a union do have better pay and benefits than those who aren't represented by a union - that's just a fact; it's not rhetoric. The minister's point that these women are still going to be in a union so what's the big deal, is, I think, somewhat misdirected.

A political commentator, whose name shall be left out of this conversation, has basically asked, how is this government going to deal with the male-dominated side of the health care labour front? This is the real test. And I think, in fact, that's what many of the health care workers were saying and alluding to in the Law Amendments Committee. We all know that significant dollars are in health human resources, and there are significant

dollars that aren't represented in that \$1.66 billion in the DHAs. They're in physicians' salaries and they're in the specialist salaries, and certainly on the specialist side we're talking about male-dominated health care providers, by and large, who have academic payment plans, who have alternate payment plans, and I can tell you, you want to talk about complex, you want to talk about tying resources up in negotiations that go on and on and on forever. That's an area where they go on and on and on forever.

So we will be looking forward to seeing if this sector gets tackled by this government and this minister to be simplified, to be streamlined, and we will see in that process if the government would start telling the doctors and physicians who their voice or representative will be in those talks and in those negotiations.

I somehow doubt it, but if they do decide to go that route, I hope they will let me know because I would pay the price of admission to sit and watch that one. I started by saying that this government has brought forward four pieces of legislation that significantly erode laws that have been passed in this House of Assembly that protect Nova Scotian workers and they have, without a doubt, tipped the balance of power in labour relations toward the employer.

We had no indication, Nova Scotians had no indication from this government, when they were in Opposition that that would be their direction or their approach. In fact, we had every indication that that wouldn't be their approach. The Premier himself has said that he would respect the hard-earned rights of health care workers and he has broken that promise now four times in one year. I don't know about you, Mr. Speaker, but when I went door to door in the last election, and in previous elections, I never, ever, went door to door and talked to people and told them I would come to this House of Assembly and reverse their hard-earned rights by introducing labour legislation that would take away things that they had earned in perpetuity. I doubt very much that any of those members did either.

That is exactly what is occurring here, and for what? The government hasn't been able to establish what the savings will be, and to the extent that we have heard anything - and it is a moving target, as we know - it has changed to \$13 million, to \$1 million-ish, and now to \$5 million. We really don't have a plan and they have produced nothing to show us what this is all about, where the savings are that they will achieve that can be redirected into patient care.

We are left to wonder what else is in store for workers in the Province of Nova Scotia and for health care workers. We saw a Speech from the Throne that talked about doing things differently, which is code, quite often, for outsourcing. We saw the words in the Speech from the Throne around privatization and I can tell you, as a former Health Minister, there are many, many pressures and lots of lobbying occurs from those who make the claim that they can deliver health care services at a better price than is currently the case. For governments that are under a lot of pressure to control costs and bring their

departments in under budget, it can look pretty sweet, some of the things you are being told.

However, I'm hoping that this minister will show more sense when he is dealing with those kinds of activities than he has with this bill and that he doesn't buy into the carpetbaggers and the kind of snake oil peddlers because in many, many jurisdictions that have gone this route, the costs have gone up for health care - they haven't come down. We actually have, administratively, one of the most efficient health care systems in the world. If you compare Nova Scotia and Canada and the amount of dollars we spend on health administration, compared to the United States, we are miles, miles, ahead of a system that rests on private delivery and that is extraordinarily administratively heavy in costs - the cost is in administration.

Mr. Speaker, I'm about to wrap up here, and I want to finish my discussion on Bill No. 1 in this way - I want to say that in order to make change to improve patient care in our health care system, much like in our province, much like the Ivany report says, we need people working together, rowing in the same direction, not pitted against each other. You can't make change, you can't move forward if you're out there picking fights, and you don't have the very people at the heart of the system you're trying to change not with you. They have to be with you - so that is the irony of what this government has done with Bill No. 1.

We have three Parties in this House who all agree on less administration in the health care system; we have a public that agrees; we have a labour movement that agrees; we have health care workers who agree - and they got it wrong. Now go figure that, Mr. Speaker. How is that possible? You have all this agreement, so much agreement that I've never seen agreement like this around an issue, and they've messed it up entirely.

Mr. Speaker, I don't know, this does not bode well for patient care. The people who provide patient care are the nurses, are the LPNs, are the technicians and technologists, and the cleaning people and the maintenance people and the social workers and the psychologists and the dietitians and the pharmacists, the physiotherapists - these are the health care workers who are outside our Legislature, outside our Legislature. We need them focused on patient care, not on having to defend their democratic rights because they're being eroded in this House of Assembly.

This is a dark, dark day for the Province of Nova Scotia. This is a regressive, regressive piece of legislation. This legislation - mark my words - will characterize what happens in our health care system for some considerable period of time, unless this government comes to its senses and starts to treat the people on whom we rely for health care with some respect. They deserve our respect, Mr. Speaker. Thank you.

MR. SPEAKER: Before I recognize the next honourable member, I just want to briefly respond to the honourable Interim Leader of the New Democratic Party, her

concern outlining security at the House. I do want to remind all members that security of the Legislative Precinct is the responsibility of the Speaker and the measures that were taken were implemented in consultation with all the policing agencies involved. My priority here is the health and well-being of all 51 members of this Assembly and the staff. (Applause)

Security of the Legislative Precinct is not the responsibility of government, but the Office of the Speaker.

The honourable member for Sackville-Cobequid.

HON. DAVID WILSON: Mr. Speaker, it's a pleasure of mine to rise and speak on Bill No. 1. But I'm not only speaking for myself. I'm speaking on behalf of the many people, Nova Scotians, who tried to have a voice on this piece of legislation but weren't allowed to because of the motion passed by the Liberal members of Law Amendments Committee that limited the time allowed, even though there were Nova Scotians wanting the opportunity to come forward and voice their opinion of Bill No. 1. Many of them did not have that chance, so I'm pleased to be able to bring their voice here to the floor of the Legislature on their behalf.

I, too, for a brief moment, and with all respect of the Speaker and your authority, want to mention my experience over the last four days and my observation of the security measures that have taken place. I haven't been in the House as long as my colleague, our Leader - I believe she is going on 17 years - but I've been here over a decade, 11 years, going on 12. I have to say, Mr. Speaker, I have never seen the amount of security around this historic building, to the point where I've never been denied access to the grounds of the Legislature.

Yesterday, after a long evening, I think I returned home to my house at about 4:00 a.m. - and I'm privileged to be able to get home because I do live close to the city. I returned for some meetings at about 11:00 a.m. but found myself, of course, with those outside trying to voice their concerns around this bill. I was told that I wouldn't be able to gain access to the grounds, to which I thought, well no, I don't recall getting your memo. I know over time, there are times we are restricted access for our cars for parking and I fully understand that.

It wasn't an easy exchange of - no, I'm an MLA, and I think I have the right to park there. It was pretty much a one-sided discussion of how quick I needed to move my vehicle and how I was surrounded and told to just keep moving. I wasn't happy about that, Mr. Speaker. I did have to find alternate parking. I came to the gates and recognized one of the Commissionaires, who said, no, you are permitted, and I was able to get in.

As I said initially, I've never seen that type of restriction around the House. Even the other night going to Law Amendments Committee - I know we're not allowed carrying

badges and pins on our suits - but I left this Camber, walked across the hall to go into the Chamber and was stopped and asked who I was. I acknowledged who I was, and I was told, well, anybody could say they're an MLA. That is true, but you know, I got over it. I acknowledged to them who I was. Actually, they had pictures of all of us, and I pointed out my beautiful face to the Commissionaire and he let me in the room.

I wanted to make the point, Mr. Speaker, that I've been here a long time and I've been through a lot of debates, a lot of bills that have had many, many people around this Legislature, and I haven't, until now, felt the restriction as an MLA to the Legislature and to the grounds.

On Bill No. 1, there were options in front of the government, Mr. Speaker. I know my colleague made mention of this - when we heard that the government was going to propose legislation around the merger of the district health authorities, that the unions involved were going to try to come up with an alternative, or present options to the government. My first impression, because I've been around the Legislature for over a decade, I wasn't too optimistic that the unions would be able to really come forward with a proposal that would satisfy not only their membership and each of their respective unions, but that of the government.

Lo and behold, Mr. Speaker. They worked extremely hard through the summer to work together on an option to, I think, obtain the goals of the government, and that is the amalgamation of the district health authorities, to roll them into two areas - the IWK and then, of course, one for the rest of the province. They presented that proposal to the government. They were asked by government to do that work, they did that work, they worked extremely hard and they came together with an agreement.

I'd like to just read a quick excerpt of the letter that they sent along with the agreement to the Premier and to the Minister of Health and Wellness. Throughout my speech I'll refer to it, so I will table it before I sit down. "We are writing to propose a straight forward approach to the labour relations aspects of your plan to create a single Provincial Health Authority to replace the present District Health Authorities. This approach will permit a smooth transition to a single health authority while minimizing disruption of the employment rights of front line employees who provide acute health care services to Nova Scotians."

It also goes on to say, Mr. Speaker, "... we propose that the merger legislation also include a provision that neither the Authority nor any of the Unions representing its employees may apply to the Labour Board to modify the existing bargaining units without the consent of all parties."

It also states, "We believe that our approach to the organization of labour relations in the new Provincial Health Authority will provide security to employees in the acute care sector and make the merger of the District Health Authorities smooth and successful at the

front line of delivering care to Nova Scotians and we anxiously await your response to this positive approach.”

In their opening letter, they indicated that they understood, that they agreed with the approach of merging the district health authorities and the work that they did throughout the summer to try to come up with an agreement on how to move forward. They came up with a framework agreement, and there are a number of aspects of it, from provincial bargaining to collective bargaining, to bargaining principles, administration of collective agreements. It goes into some detail. They did that so that the government could recognize that it wasn't just an agreement saying, listen, we're just going to keep our members, we'll collectively bargain for them, but just leave us alone and we'll figure everything else out.

That's not what they did. They brought forward a comprehensive framework that would spell out and, I think, address the concerns the government may have had with the amalgamation. Under “Provincial Bargaining”, they indicated, “We accept that the merger of the District Health Authorities will result in provincial bargaining units; . . . We support a new model of collective bargaining in which the Provincial Health Authority and the IWK Health Centre (together ‘the Employers’) bargain with an association of bargaining agents in each of the four provincial bargaining units; . . . Each Bargaining Association will negotiate a single collective agreement for each provincial bargaining unit . . .” I'll table those quotes and that framework.

When I looked at that, I realized they did their work. They did what the government wanted them to do - go away, try to figure this out. I'm just guessing; maybe the government thought that there was no way within - I don't even know if it was a couple of months, maybe a month - that the unions of our province that represent the men and women who provide health care would come forward with an agreement. I think I heard - I spoke with all of the leaders of the four unions that are affected by this, and I think the surprise on the faces of government officials when they sat down and saw the signatures of all the union leaders on an agreement was evident.

I've mentioned many times my background and the reason why I'm here in the Legislature. When I became a paramedic, we had a system in Nova Scotia that really didn't provide the best kind of care or representation of the paramedics here in the province. We had 52 independent, privately-owned ambulance operators throughout the province. Each one of them did different things. If you were in a car accident in Yarmouth and the paramedics showed up, you might get a certain level of treatment from those paramedics than you would if you were in downtown Halifax.

The thought of the day under the Liberal Government was to merge the private ambulance companies of this province because it would better represent and be able to ensure that the care that Nova Scotians got, no matter where they lived, was the same. Dr. Ron Stewart, whom I hold in high regard for initiating the movement of not only that but

the improvement within the health care sector as in the paramedic profession, really worked hard to improve the conditions in the province.

I had a choice. I had a choice to make when that merger happened. It wasn't imposed on me what bargaining unit I would belong to, who would represent me. We had a choice. Throughout the time, there have been many changes within the paramedicine field. We originally started with a certain union, and over time, the membership thought, you know? We don't feel like maybe we're in the best bargaining unit or we're with the best union. So we had a choice then. What do we do? Do we remain with that bargaining unit or that union or do we look elsewhere? We had that opportunity.

So to hear the Minister of Health and Wellness and other members of government say you don't have a choice when you get into the health care sector when you start your work - you do have a choice. You can choose where you work, what job you apply for, and when you get that job, you have more choices. Are you satisfied with the representation that you have? Are you content with what they're doing for you and what they're pushing for? The paramedics of the province made a choice a number of years ago to change unions. That was their right. They moved on to another union that represents them today. Five years down the road, if the environment makes that they're not satisfied with that, they have a choice to change unions again.

But under Bill No. 1, that's not going to be allowed to happen. I think it was our House Leader who mentioned to me he thought it was a bit strange that the legislation in the bill actually named unions, because as we've seen with the Unifor union, a year and a half ago they didn't even exist. They were a merger of a number of different unions. What would happen if the four unions that are mentioned in the bill, down the road, two of them decide they want a merger? From my understanding of Bill No. 1, that won't be allowed to happen. Members in the bargaining units that they will end up in won't have a choice. That's what the government was arguing and giving the reasoning of doing this - it's well, you're not given a choice when you first get employed by a certain sector here in health care.

I think it infringes upon those rights. We're not saying one union is better than the other union in this. What we're saying is that the unions got together to try to come forward with a proposal that would satisfy their membership and satisfy the needs and the wants of the government. By doing that, I believe that if that was implemented with the changes that the minister brought forward on the amalgamation of the district health authorities, that he would have an easier job implementing the changes that are in front of us now over the next couple of years.

But I have to say, as my colleague said, it's not the Minister of Health and Wellness, it's not the Premier, it's not the MLAs in government or the MLAs here who are going to be out there making the changes, implementing the changes. It's health care providers who are going to be doing business differently as this piece of legislation passes

- because it will pass, they have the numbers, unless some of the government members listen to their constituents, listen to the people who came before Law Amendments Committee asking them to vote and represent the people who put them in office.

But that likelihood is probably not going to happen. I'm not going to pretend that, all of a sudden, the backbench is going to change and vote against the Cabinet and against the Premier. I would hope maybe it would. But I hope they realize that they need to stand up and defend this. If they fully support this going through the way it is, without really any amendments - I know we had a show of, I don't even know what to call what happened this morning, when yesterday we were told, no amendments at all, the Premier put his foot down, held a news conference across at One Government Place saying no more, no, we're not going to entertain it - and then today we hear that they entertained one of our amendments they put forward, a very small one.

I mentioned the need to ensure that there is transparency as this board is set up. They agreed that the community health boards would meet in public, but they forgot about the district health authority board, the megaboard where really the financial decisions are going to be made. They should be held in the public realm also.

One of the things that stood out to me on Bill No. 1 as we read through it and realized that this piece of legislation is something that will really dramatically change labour relations and how labour is done in the province is the timelines that are in here. We're on the eve of one year that the government that has been elected. I think it's next week it's a year. It has been a long, long year. I have to tell you, Mr. Speaker, it has been a long year.

But in Bill No. 1, many of the changes, and really the direction that Nova Scotians want to see from the government on what the focus is, what the priorities are, what the vision is of the new health authority, won't take effect until April 1, 2016. We'll be 16, 18 months away from an election by then? Maybe a little less? Maybe a little more if the government decides to go five years, but that's pretty rare. Government usually doesn't go five years.

Maybe they'll be on election mode then. April 1, 2016. The budget will come in and they'll say they need a strong mandate to go forward. Here's the vision for the health authorities, this is what we promised you back in 2013. Well, Mr. Speaker, people are going to see through that. What it says to me, it reinforces what I was saying leading up to the last election, and what I have been saying over the last year is that the government and the Liberal Party really didn't have a plan in place with their commitment on amalgamating the district health authorities. I think all they had is that we will amalgamate the district health authorities, something easy to say, something we have heard many times over, over the years.

Mr. Speaker I have said this before - for many years when you say that we have too many, we have fewer than a million people in the province, we have too many health authorities, we should get rid of them, it's something that you could nod your head to. I did. I was in the camp for a number of years saying we have too many, we should get rid of them.

Then when I had the privilege and opportunity - and it is a privilege and an opportunity to be given the chance to govern in the province, to be given the chance to be a minister, and with all of its challenges it's actually a privilege to do that. I had to sit at the table as the Minister of Health and Wellness and you get bombarded with information about what the situation is, what the ramifications are if you do this or don't do this. You get bombarded with requests that we should be doing this and we shouldn't be doing this, and you need to circle yourself with educated and smart people who can help guide your way through the mounds of studies and the mounds of information and all the information that goes with new services, procedures, medications that should be given in the public. There is a lot of information and there is no way that one person, as an individual, could siphon through all of that and make the best possible decision.

When I started to look at how we continue the work - I wanted to continue the work that the former minister had started in 2009, and that was to reduce health administration costs - how do we continue to move forward? I too, like her, talked with colleagues from across the country and they are very willing to talk with you, no matter what political stripe they are. Interesting enough, some of my best conversations were with Ministers of Health from other Parties because I think once you get to that table you realize the job in front of you and that you need to seek advice. You need to get advice and support from people who have been there before you on how you best serve your residents when you make a decision in health care. I know it's like that in other departments, but in health care it's important.

I'm reminded, and I know I wrote this down somewhere, I know the minister is here but they are meeting now, I believe as we speak, over the next couple of day, the ministers from across the country, and our minister isn't there. I know he's here because, well, for one I would suggest we called the Legislature a little bit earlier than normal. Normally we are not in this early in the year. We had been years ago, I think we were in September, but usually it's a little later.

That is an unfortunate thing because what is happening is here we have the minister trying to defend his government's proposed legislation, but we don't have a voice at the national level with the other ministers and those are missed opportunities, Mr. Speaker, missed opportunities to seek the advice of other people who have gone down the road that the minister is going down now, trying to be a Minister of Health and Wellness who is responsive to the concerns of their citizens, trying to improve health care.

We have three former Ministers of Health and a current Minister of Health and Wellness in the Legislature today. We have all been there. We know it is a challenging job

and I think each and every one of us turned to other people to try to get advice, and our whole goal is to improve health care, but you have to stand up to the decisions you make and you have to take advice from people who have been there before.

I said it on second reading, I think, that jurisdictions like Alberta and New Brunswick have gone through the exercise of merging health authorities and they were putting up red flags to me, and I know they did it to my colleague before I was minister. You have to be very careful when you do that, because there are costs involved, which I think I've mentioned a few times, and that really refers to severances of executives, severances of CEOs, of VPs. It can be very expensive. These individuals, men and women, were committed to providing the service of the CEO and the VPs of a district health authority.

I must say, over the last four years that we were in government, they worked to reduce health administration costs. They worked together. I know Ms. Knox mentioned, when it was announced that she would be the new CEO, that she had been working with the other CEOs to streamline services in health administration to reduce costs, and that they've worked together well. I think the difference between then and now is that the government went to them and said, we need to improve our efficiencies and we need to find savings.

They got together and they worked hard on it. They went back to their districts. They went back to their district health authority boards, that consist of community leaders within each of the regions. We had accountants, we had businesspeople, we had volunteers, we had people from a wide section, as my Leader said earlier, represented on these health boards - from diverse communities, First Nations communities. All had opportunities to have input on how to try to reduce health administration costs and move those savings to the front line and to front-line health care.

The approach the government is taking now - well, the first thing they did was fire a bunch of volunteers, the district health board authorities. That was their first move, to get rid of them, because I think the government and the minister realized, well, I can't fire the CEOs and the VPs right away, because they all have contracts and that would cost us money. I heard that before, I don't know who said that before. I think I may have, on a number of occasions, Mr. Speaker.

The first thing they did was get rid of and fire volunteer boards. They didn't get paid. They may have gotten some mileage for when they went to meetings, but they didn't get a per diem. Many of the agencies, boards, and commissions that people are appointed to can get a stipend, for example; some of them are \$100, \$200, \$300, \$400 a day or a meeting. I always thought, well, why would that be any different for people who choose to volunteer themselves to go forward on a board? I was told by the chairs of all the boards that no, we don't want to entertain that, we do not want that. That's not why they're there.

It's interesting, the approach the government has taken so far - you fired the volunteer boards, got rid of them, and now we're looking at, how do you reduce the CEOs? That will happen by April 1st, I think. I believe Chris Power has already gone, and I'll be asking questions as we move forward on what that true cost was, to have her exit the system.

This was all information that was given to me. It was given to my Leader when she was Minister of Health and Wellness, that those are the true costs of health administration amalgamations, creating superboards - be careful, don't go there, don't do what we did. We see on the records that accumulated across the country around health costs, that continue to go up. When you look at the health administration costs in the jurisdictions that have done what the government is trying to do now, their costs have gone up.

Will there be savings down the road? Maybe, but some of the criticisms I've been giving to the government is that before they were in government it was going to be \$13 million. Then it was going to be \$1 million. Now, just recently, it's \$5 million. We've tried to ask the government, how can you say that?

I don't want to dismiss what the minister says, but I've got to say that at this point I need to be given some evidence that that is going to happen. If they have the plan in front of them, or if they have a plan, then that should be easy to provide. The media has asked the minister on a number of occasions, how much is this going to cost? I know the last time I asked, I was told, well, at the end of this fiscal year I'll find out. The only reason I'll find out is because they're required to put down where they spent their money.

That's not the way it should happen. That's not the transparency that the Premier said he would bring to government. He said they would be transparent. The last thing I heard was a \$55,000 figure that they have spent so far. Everything is in-house. Well, Mr. Speaker, you can't just blatantly say that. You have people working on this file now who are taken from other regions of the province, from my understanding from what I've heard. There is a cost to that. Is someone else doing their job in the region they used to be in? If that's the case, then that's a cost.

You have to accumulate and make sure - and I'm not an accountant and I look at some of my colleagues in the House who are accountants - you need to be proper in the account of how much you are spending on this. So I will be looking forward to those numbers. The unfortunate thing - the reason I'll get them is because they are required by law to put them in the budget. So that's why we have a little - a lot of doubt that, when the government says that they're going to achieve something, this is what it's going to be, because there really hasn't been any proof that that will happen.

Now, through my sitting in at Law Amendments Committee, we heard from a number of people, some who I would consider experts, those within the labour movement. One of the concerns that I heard, and I didn't think about it until they brought it up, was the

fact that this piece of legislation may be challenged in the court, down the road. I believe, in another jurisdiction, in British Columbia - I think that's the reference they made with one of the presenters - a similar thing happened, and it's going through the court system now. Maybe the government's thinking is that, well, that is two or three or four years down the road. That'll be, maybe, on a second mandate - I hope not, I'm going to work hard that it's not. No disrespect to all of you over there, but that's not the stance you should take. That's not the view you should have.

I would hope that the government had sought out some legal advice on this. I don't know if they have. I haven't heard any reports that they have. I hope that they have some lawyers looking at this who said, no, this will hold up to a court challenge. I haven't heard that from the government yet. I've heard that it won't, from many people.

The unfortunate thing is then that causes a cost, both if it's the union that does it - even if the government thinks they're okay, if the union proceeds with that, the government is going to have to defend itself. So the government's going to be pulled into additional costs, which, if it's challenged in the court - in my view, I'm not an accountant, but that would add to the cost of the district health authorities' amalgamation. Same as the security, in my view - and I know the security of this place is under your budget, Mr. Speaker, but I can just imagine what the additional security costs. The police officers and those around us here doing the security details don't make minimum wage. I haven't seen so many police motorcycles, bicycles, paddy-wagons I think, tinted black SUVs, police cars in the 11 years that I've been here. That all costs.

I know down the road I'll be asking, what was the cost of Bill No. 1? I hope that the government comes forward and tells Nova Scotians exactly what it has cost. I hope the government has done their work on this and they fully stand behind this piece of legislation. One of the criticisms I've heard over the last four days is the fact that a lot of the people around the Legislature, and the ones that have been getting in contact with me, they haven't been able to make contact with their MLA, and most of the time they're a government-sitting MLA or the minister or the Premier.

We know the other day after the minister did a news interview, I believe, it sounded as though he was opening the door again about a bargaining association. When the union leaders heard that, they thought maybe all this, maybe Law Amendments Committee, maybe the government recognized - maybe let's have a look at it. They came here to the House wanting a meeting with the minister, but that didn't take place.

We've heard from a number of people who have said - I know my Leader had mentioned that other Premiers and other ministers in the past who have brought forward legislation that had major opposition to it, they faced those outside. The minister is going to have to do that, and the Premier is going to have to do that. Maybe not today, maybe not tomorrow or next week, but eventually they will have to face them and explain why, after all the work that has taken place from the union leaders and the unions here in this province

to try to come forward with a solution that wouldn't have people walking around here with bullhorns, sirens, and buckets.

They have some stamina. I'm amazed that someone can bang a bucket for 12 hours. I don't know if it's the same person, but I know when I came in at eight o'clock in the morning the other day and left at about three o'clock in the morning - well, it wasn't three o'clock, they were gone by then - but when I went out around 12:00 midnight, the same guy was on the same bucket. They have some stamina.

I think it shows how important it is, for some of the workers and some of the health care providers and health support workers, for them to be here and have a voice and make sure the government and the government members realize that the decision they're making is going to impact their lives. They feel that this piece of legislation hurts their rights, that they no longer have the opportunity and the freedoms that they've had for decades.

I know we've heard from the minister and the Premier that what they've achieved so far in benefits and that will be there. But they've heard promises before. That isn't in the legislation. That reassurance isn't there. I haven't seen it in there - I don't see it in there, so I can understand why they're worried. Throughout all the presentations, I never once heard from any of them, not one, that they were there because they wanted to continue on so they could make more money, so they could have more benefits, so they could increase their pension, their sick time, their vacation - not one of them said that when I was sitting in on Law Amendments Committee.

What they want is to be respected. What they want is to have choices. What they want is for the government to listen to their leadership who came together. As I said in my opening comments, I was surprised that they came together with an agreement. I tabled it earlier, and on the back it had the signatures of the leaders of each union - CUPE, NSNU, NSGEU, UNIFOR, and the Nova Scotia Federation of Labour president, Rick Clarke. I don't know if that has ever happened in the history of our province here. I don't know if that many unions got together and said, okay, let's figure this out.

I said it yesterday, I had the opportunity - after I finally got in to park - to address some of them. I'll say it here on the floor, because I believe it that this piece of legislation's real purpose is to divide and conquer. The unfortunate thing is, we've seen over the last few days that people are feeling that's what is behind this. It's not to improve health care. I don't know how you improve health care when you have a lot of health care workers and health care support workers angry, upset, and mad. I've seen the emotion as I sat in Law Amendments Committee, people were crying about losing what they have now, losing the ability to have choices.

They could say it all they want, they do have choices, and this piece of legislation will limit their choices, it will restrict what they are allowed to do, it will take away their rights. You cannot tell me that it does the opposite and it secures their rights and it gives

them more choices. It's going to limit their ability to have the choice to have an organization represent them and have their best interests as they move forward.

Out of the four unions there's not one that's better than the other, Mr. Speaker. I don't believe there's one that represents their members better than the other one. I think they all are there to improve the working conditions of their members through collective bargaining. I know it's not easy, as a government, to work in that environment and have a good labour relations environment in the province. We worked damn hard over - sorry, Mr. Speaker, I'll retract the "d" word.

MR. SPEAKER: Thank you.

MR. DAVID WILSON: Darn - no? Okay, I'll retract that one too.

We worked extremely, extremely hard, Mr. Speaker, on labour relations in this province under our mandate. I know it's not easy.

Mr. Speaker, I'm a paramedic and we had to deal with a situation in front of us with paramedics willing to walk off. Do you think that was an easy decision for me and for our government? It wasn't. Every day I continue to talk with paramedics on why that needed to happen. I can say that I'm proud that I got out of my seat and went out those doors and into the crowd of my colleagues and friends who were upset. I talked to them and I explained to them.

I know that not all of them have forgiven or have realized why we did it, but there was definitely a need. I mean, you think about not having ambulance services or paramedics on duty. It wasn't like many of the other - all of the other bargaining units that had a level of care or of workers who were going to stay - essential services. I think the new negotiation that's going on, it's 72 per cent I think, maybe, if right now nurses went today, they'd remain on the job. The paramedics, there was none - zero - no ambulances, no paramedics to work on those ambulances, nobody to get in the seat of LifeFlight and respond to an emergency.

I know we have some management who are paramedics, but I don't think we could have sustained a few hours. That was a difficult choice, I would say the hardest choice for me, as Minister of Health and Wellness, even though it wasn't my bill, it was under Labour and Advanced Education where I think these bills should be, and maybe I'll get to that in a few minutes. It was the most difficult thing I had to do, but I knew it was the right thing to do because people's lives were in jeopardy.

I continued to get information after that on calls that happened and the severity of those calls. I had a look at the following week and I was astonished - it was a bad week for EMS. There were a lot of calls, there were a lot of deaths and accidents. That was one of the reasons why we made that choice at the time. I stood up in my place and I went out and

confronted them and talked to them. I explained our position and I think I got the respect back of many of them. Unfortunately I was unable to talk to every single one of them, but I'm going to continue to do that.

I'm very proud of being here and being a paramedic, and a former paramedic, representing their interests. Just yesterday I introduced a bill - and I know I can't talk on other bills - but I introduced a bill that would support them. I'm having good talks with the Minister of Health and Wellness, the Minister of Labour and Advanced Education, and the Premier on maybe going forward to try to see what we can do to support emergency workers in our province who have PTSD.

I'll continue to do that in my role now, in the role that I accept as an Opposition member. My point in bringing some of that up is the fact that I had to stand behind that decision and the government members are going to have to do the same. I hope they have done the work, especially around a court challenge, that this piece of legislation will hold up in court. I would think the Minister of Health and Wellness and the Premier, if this court challenge doesn't hold up in court, would do the honourable thing and say we made a mistake, I'm out of here. I'm done, I resign.

That's a significant thing, to bring a piece of legislation to this floor and make a change, a significant change that we're going to do, the one thing you want to make sure is that you're not infringing on anybody's rights, that that piece of legislation can withstand a court challenge. I'm sure there will be experts all around, on either side of this, but ultimately it will be the courts that decide it. My decision doesn't matter, or my view on it doesn't matter. The minister's view doesn't matter. The Premier's view doesn't matter. It will be the court and the judges in the court and on the court - it matters to them. They are the ones that make the decision.

I hope that they have done that work and the members realize they have to stand up and they have to face supporting this and moving forward, will have to defend this. I took a lot of time talking about the labour relation part of Bill No. 1. There is another part of this that is significant and that is the health delivery's part and the health authority's part and the health care part of the health care sector here in the province. I know the Progressive Conservatives brought forward an amendment to split it because it really doesn't belong together, I agree with that.

To think that you are going to change the labour relation makeup of the district health authority to the degree they are going to, that that couldn't be a stand-alone bill? Then you mix it in with the other part that is significant, that will have an impact on health care delivery; the amalgamation of the health authorities will have an impact on health care delivery. I believe where you will see the biggest impact is not here in Halifax, not in my riding of Sackville-Cobequid, it will be in rural Nova Scotia where many of the members of government are from, where many members of the Opposition are from.

I truly believe - and this goes back to some of the warnings that were given to me by other ministers - that when you do something like this, the key is to make sure that you do not lose the ability to respond to issues locally. I don't see how that's going to happen when the board is situated here in Halifax. They will move around a little bit throughout the year to have their meetings, but for the most part, if you're one of those board members, you're most likely going to have to come here to Halifax to do some of the work. Rural communities are going to suffer. I don't wish that on any rural community. I hope it doesn't happen, but the likelihood of it happening is pretty high.

Earlier I referred to an example of why I think that and it is worth repeating. When we as a government knew that we had to respond to an issue - a crisis, really - that was going on across our province for decades and that no previous government could kind of get a handle on it, it was difficult, and that was the chronic closure of emergency room departments all over this province. In small rural communities and their community hospitals, even in the larger regional hospitals there were issues and there were challenges with keeping the doors open.

We knew it was something we had to do, so we had to think out of the box. We asked Dr. John Ross to go around the province and visit emergency rooms and figure out what their concerns were, what their issues were, and how could we move forward. The Ross report - and I hope the minister has read the Ross report because there is a lot of stuff in there that needs to continue to be looked at and worked on and we're more than happy to let you have it, take ownership of it - out of that was the birth of a new model of care. Never seen in Canada, and I believe it is okay to say never seen in North America, and that was the Collaborative Emergency Centre.

This was a significant change. Can you imagine, Mr. Speaker, we were going into communities proposing that the physician won't be there 24 hours a day, seven days a week? Imagine what they thought when we initiated those discussions. They were not happy, they wanted to keep what they had worked for and some of them had funded for years. They wanted to keep what they had, weren't going to give anything up. I mean, that's really a response that most people had, we want to keep what we have. That's the response that we're getting from the health care providers who are here today - we want to keep what we have and we're not asking for more, we just want to keep what we have. So that's the response that we received.

It was through the ability of the district health authorities, those local volunteers, the CEOs of the boards, their ability to get into those communities, have public engagement, have the opportunity for community members to come and sit down at a table in a room and community halls all over this province, or in the communities that we were going to move on the change in model of care. We heard what they were saying, we took that back - we weren't there to dictate to them what we were going to do, we weren't there saying this is the model of care that is going to be the answer to all our issues and all your issues in health care in your community.

We didn't take that approach. We listened to their concerns, we came away from that and worked with the district health authorities and the boards that were there, the community leaders that I talked about before, and asked, okay how do we address their concerns, each and every one of their concerns?

Then the process of trying to educate communities on what this model means and that it wasn't a one-shoe-fits-all approach, it was tailored to their needs, it was using the people and the resources that that community had - and I don't know if I get this right, but we exploited them a bit. We said okay if you're a nurse here in this community we're going to use you to your full scope of practice, we're going to maximize what you can provide a patient that walks through the door. We did the same with paramedics, the scope of practice for paramedics now in this province is better than anywhere in the world - anywhere in the world, Mr. Speaker.

They can provide amazing care, they provide emergency room care. The resources you get in an emergency room, many of them, if not most of them, other than like surgery, is being brought to people's homes, their living rooms, to the side of the road, and that same kind of support was brought to the model of care. No matter what level of care you are as a paramedic, you are trained to respond to emergencies - that's what an emergency room is.

So in each area of the province you were able to modify it and change the model a little bit and it best served the people - it best served those in the community who were finding it difficult for decades to get the care they needed when and where they needed it. The evolution of the same day/next day service, originally they said it was impossible.

I remember a discussion with a resident of Parrsboro who told me it was five to six weeks before they could get in to see their general practitioner - if they had something wrong with them, it would take them that long to see their doctor.

I returned there sometime after, and the care that individual gets now is amazing. If they are not feeling good - they had some chronic diseases - they know, they feel reassured that they can get the care either that night or the next day, the same day, Mr. Speaker. I know that down the road - you could probably pull this information and the stats now, but I know, for example, in Parrsboro that the community is healthier because of the quicker access to that primary care. If you take care early on of somebody who might have a chronic disease, then the likelihood of them needing to go to the regional hospital or into the tertiary care hospital drops. I believe, and down the road I'm sure we'll get more information, that the community is healthier because of quicker access to that primary care.

As I began to say, Mr. Speaker, there were options in front of the government. The government had some choices to make, unlike some of the workers who feel they're not going to have. The four major labour unions that were tasked to come up with an initiative or a solution came together to work together, to bring forward a resolution to this. I think

that we would today, right now, be talking on maybe the fracking bill, which we'll get to next week, I guess. We wouldn't have had the protests around the building over the last number of days. I would have never been denied access to the grounds of this Legislature. I would have never been told I can't go into Law Amendments Committee because I didn't have an ID right here that I'm not allowed to have in this Chamber.

The government had choices, and they chose to bring forward Bill No. 1, which I think is not the right choice. There were other options, and it's just unfortunate that we are here today to see that they chose this path. We'll continue to stand up and be a voice to those people who feel they are not being heard by government. That's our role, and we take our role very seriously, Mr. Speaker. I'm saddened to see that we are getting closer to the time where this bill will pass. Thank you.

MR. SPEAKER: The honourable member for Hants West.

MR. CHUCK PORTER: Mr. Speaker, I appreciate the opportunity to rise for a few moments today to speak to Bill No. 1 in third reading. In all the years I've been here, I think there are very few bills that have gone through this Legislature on third reading that we've talked out fairly extensively. Really what it does - a lot of them go to second reading and we hear from a number of members, as a rule, and that's fine; then Committee of the Whole House on Bills and third reading.

That's all fine. People should get up. They have the right to speak. They were lucky to do so; on something they believe in doing and that they are passionate about, they will get up from time to time - maybe some members more than others, as they get a little more experienced, a little more used to this House. They'll rise and they'll bring comments forward, and most importantly, they'll bring their constituents' comments forward and what they wish them to do on their behalf.

It's great to be able to get up today and speak to this. I wasn't sure if I was going to or not. I spoke at length the other day - maybe a little longer than some would have liked - on second reading. I'm not looking at anybody specifically, Mr. Speaker. Sometimes you get up and an hour goes by relatively quickly and you don't realize that it does. It seems like 10 or 20 minutes - generally 20 minutes, it seems like, and it's 45 minutes or 50 or more. (Interruption) Yes, maybe it seems longer than that at times, depending on who is up.

Mr. Speaker, in all seriousness, I wanted to sort of pick up where I left off the other day, and perhaps also re-emphasize just a couple of things. One of them we've heard a lot about today in debate, which has been a little bit interesting for this very historic building and this property. They've talked about the security and being able to access the grounds. I came in Monday night and was not able to access. There was quite a crowd out there, as you know, and I parked on the waterfront and walked up through, and actually ran into a few people I knew out there on the streets, some from home and different areas around the

province that I had met in the past. I had a great conversation with some of them and tried to get a feel for where they were on some of this.

It was interesting to talk to them. I did the same on - I don't know what day this is or what day we were here last - I want to say Wednesday evening, we came in Wednesday evening for 8:00 p.m. and I got through no problem to park after a couple of minutes of getting in the gates and, again, I had a great chat with some people. As you make your way down to the crowd and you stop to speak, you tend to get a group that will come to you and gather around and ask a few questions or maybe hear a few comments you might like to make.

They were great. I wasn't concerned for my safety at all. I'm not sure I ever really have been here, although some days feel a little more intimidating than others, especially when you are new to this environment. Over the years we have been through a few bills where things have been pretty hot at times, pretty heated in this Chamber, sometimes a little heated outside and that is part of what goes on in a democratic society. People have the right to come here to protest, peacefully. For the most part I think we have seen that happen. We had some good discussion the other night.

While I was standing there - there wasn't a great big crowd; I would say 50-70, something like that. There might have been 15 or 20 in the circle where I was talking. The gentleman I was talking with said, it's kind of intimidating behind you, that big building. I never thought much about it at all. I couldn't imagine what he was referring to and I turned around and there were five or six HRM police officers standing within a foot of me and I'm thinking, wow, this is different.

It wasn't that I minded the security; don't get me wrong, it wasn't about that. It was the feeling that it presented though, in all honesty, it was, what has it really come down to? I know that some things have been said and some things have gone on and certain members or others have made comments that would suggest that some extra security was required. I can appreciate that and I'm not opposed to that. If that's needed, that's fine. But from a personal perspective, I wanted to say that it has been, as it has been in the past, you have been able to go out on the street; you've been able to talk to people.

The member for Sydney-Whitney Pier spoke the other evening, as well, and he went on about - just go on and have a chat with them, that's what they like. They want to be able to bend your ear; they want to be able to say, this is what's wrong with this or this is what's wrong with that or we like parts of it, and some of them did. Some of them did say there is some good stuff in the bill. They agreed it's time for a change with regard to the nine or 10 district health authorities. They're okay with that.

There are a lot of things that they were okay with. Of course there are some things they are certainly concerned with and I appreciate that. We've tried to come, this week, and as we know there has been a fair bit of discussion, I spoke to it the other day as well and I

will touch on a couple of them in what will soon be this afternoon, as I look at the clock. It is important to be able to have a say, that's for sure; they think that is probably more important than anything else.

I was part of a union environment quite a few years ago as was my colleague for Sackville-Cobequid; he referred to it a few minutes ago. We went through what was probably an interesting period, through the formation of what is now EHS. That is a very well run organization and what it does prove to me - just on that very topic of EHS - it does say to the people of this province, it has been proven that one unit can work very well and that one unit does work very well. I spoke to that a bit the other day as well. It's smooth, it runs well. Are there issues? There are always issues. It doesn't matter what it was, you will find issues, whether they are HR issues or management issues, we find those.

I had the pleasure, while working as a paramedic, to be on both sides of that fence. I sat for a long time working in the street as a paramedic and I sat quite a few years as a management person, having gone to the management side supervising the communications centre in a variety of different roles there, teaching others who were coming in to take those phone calls and then to measure the quality - some great people there.

All throughout our health care sector in the Province of Nova Scotia there are great people. Through my experience working in it, I not only worked in Windsor where I started, I worked in Halifax, and Sackville for many years along with the member for Sackville-Cobequid. As management I went to Pictou County and helped transition what was then Dort's Ambulance through New Glasgow and Pictou, some of you would recall, into what is now EHS and EMC. And that takeover - "takeover" is not a good word, but "transition" is the right word there - of the service and building that and strengthening that, that was all good. That was good stuff.

There can be good things through transition of the health care system, and the people are what made that. The people continue to make that today what it is. And they always will, because, again, as the member for Sydney-Whitney Pier said the other evening about how important that health care is when needed, and when it's needed, it is there. We know that.

One of the things I have heard though that I don't agree with totally in this House, to be perfectly honest with you, I hear about how this is going to change those people. You know, in my own opinion through experience knowing them - some of them relatives who are nurses - they will get up the day after this is done, they will go to work, they will look after people, and they will do their jobs. (Applause)

They will have issues, yes, around the entire piece that we're talking about today. Some will be happy, maybe, or accept it, and some will not. Some will not accept it at all. They will not be happy. But they will not take that out, I don't believe for a moment, on patient care or any of that. I don't. Maybe I've misread or misunderstood some of the

comments that have been made. Yes, it will affect them. It will be stressful and it will be difficult. I saw it through the paramedic years of that transition; people were upset then too. There was a slight difference, though, as the member for Sackville-Cobequid alluded to earlier. I think when EHS was finally done that transition - there were at least four or five unions at the time, and we as paramedics were given that opportunity to choose where we wanted to go. Changes throughout since have been able to be put forward and made as necessary. Some may not agree with that but it is the right for them to choose.

As we move into this bill, many believe in reading that bill that that will be taken away. It will be pointed to, where that will go. This had been an interesting debate where the unions have come together, to some degree, to say, we thought this might work, or this could work, or this can work. I hope that, when all is said and done, that they come back to the table and they're still willing to put forward good ideas.

It might be seldom people or outside of this House, would think that I would ever say that the Leader of the Progressive Conservative Party had a decent idea. But this morning he presented the idea, outside of this House, of going and the unions coming together and still having that vote among themselves within, to take to the mediator. It may not be a bad idea at all. It may reflect very much so what can happen, or should happen, or we'd like to happen. I don't know whether that will happen or not, but it is another suggestion. We have to hope.

It doesn't matter what any of us on this side of the House really vote - we know the majority - and that is what Nova Scotians elected, we accept that, that's a democratic process. They will make the decisions on this bill. They have made the decisions and here we are in third reading, soon to be passed, no doubt. And it will pass.

So we have to understand that, we have to hope that something reasonable will come of that when it comes to bringing the labour part of this together. I, too, wish this had been a separate bill. As I spoke at length the other afternoon, Mr. Speaker, this is a bill that I've wanted to see for some time, for all the time that I've been here. A reduction in the administration more so, but a reduction in the number of district health authorities for more than just the administration and the dollars, and the people.

The efficiencies are one thing, but business is done through many different ways, and I gave examples of that the other day. When I was a paramedic we left Windsor with a patient - I'll never forget this - and we were just transferring them to Colchester Regional Hospital in Truro. When we got there, they had to take all of the equipment off and put new equipment on, because it wasn't what they used. That instilled in me, hold on, there's something wrong here.

We know the cost, and the cost has done nothing but go up in health care - \$4-point-odd billion now of money. We need to hope that there is some savings in what is being put forward. I don't know what the number is - \$13 million, \$5 million, \$1 million -

\$500,000? Who knows what it will be. We need to hope that that will actually be the case. Some would say that it will not. Experience from others who have spoken from other provinces would allude to it not being the case.

It's difficult for me. I came into this House thinking about Bill No. 1 on Monday night, finally having a chance to read through it a number of times now and wanting this bill for so long, I've been back and forth - yes, I will support, no I won't support, I can't support, I will support. I've had a lot of conversations, I've had, surprisingly I must say, Mr. Speaker, I'd had a few emails at home both ways and I've had a number, probably a couple of dozen, that said this is about the rights and freedoms of individuals to choose. Those, of course, are nurses who are emailing us and health care workers from all sectors and that's okay. That's what we're here for, to help carry the message of our constituents to this place and debate, and they expect that.

There's nothing wrong with standing in your place and saying one way or the other how you feel, but it's also important how your constituents feel because that is who put us here, Mr. Speaker.

When I think about democracy, and we've heard an awful lot about democracy during this debate and how the feeling is that this may be undemocratic, I think about being weeks away from celebrating our biggest day of the year, when many gather at cenotaphs around the country, around the world for that matter, to reflect upon how we arrived where we did, why we're here today. Whether people like it or not, we went through a democratic process each and every one of us, Mr. Speaker, all 51, to arrive here - with multiple candidates in each constituency carrying multiple flags of colour when they ran in hopes of finding a seat here. We accept the results, as we have in the past elections and before that.

As I spoke to the other day, I've had the honour of sitting on every side of this House and I'm now in a different spot again, as I said. That's okay too. The job is still the same, regardless of the Party you are with, Mr. Speaker, the job is still the same, and it is to come here on behalf of the people and bring forward what we believe are the right ideas.

As an old friend to a lot of us used to say in this place, no one Party or no one member has all the right ideas - Mr. Bill Estabrooks, whom I very much enjoyed coming here to see each time we sat. Bill and I would be here and people used to say, why are you always here early? I'm usually here at least an hour early, and it was really to sit and to chat with Bill because he, too, was here early. Even when he was a minister he showed up in this House early. He was a teacher by profession, as a lot of people in here would know, and that never stopped, even in the days of this House. There are many who say there were lessons learned from Bill Estabrooks, and there were. (Applause)

Mr. Speaker, Bill Estabrooks taught people in this House a lot - character, how to stand in your place and how to speak. I see a member over there pointing, he may have had a lesson or two as well- it was in his caucus at the time, the member for Queens-Shelburne.

There were others. Bill was one of many who have come through this House who had a lot to offer and had many opinions, both on this side of the House, as he was on when I first came here, and on that side of the House, where he was when he left. He shared many things, whether they were his own personal stories, stories of his constituents. He spoke on many fronts and many people in this House - I dare say most probably over the years - stopped to listen because he had something worth saying. He was teaching the whole time he was here. He was carrying the messages of former students who spoke with him, who elected him, people in his constituency and others, people he never met. Mind you, given his campaign style he probably met everyone in his constituency over the years, which is a wonderful thing as well.

We have to remember, Mr. Speaker, the importance of the role that we, as politicians, coming to this House are subject to, what is expected of us. And I spoke about this the other day as well. So it's not just - when we're making our decision today, I'm not making it for me, and I assume others are not making it for them. They are making it because they believe it is what the majority of their constituents, of Nova Scotians, wish to have happen.

When government brings a bill forward I would assume - in this case a very controversial bill some would call it - that most Nova Scotians would agree with it. Otherwise, why would you bring it forward? I assume some consultation must have been done somewhere - maybe not, but I would think, Mr. Speaker, that it was done perhaps. We will find out; time will tell.

We will all have a choice a little bit later on, and that's okay. It doesn't matter what the choice is; we will live with those individual choices that we make. Some of them will not be popular, but it's not about being popular. It's about doing the right thing on behalf of the people that we represent.

I don't want to take a long time today, Mr. Speaker. I spoke extensively in second reading on this bill. But there will be more controversial bills - there always are, ever since I've been here. It doesn't matter who's in government, there are always bills that come forward that not everyone can support, and that's okay too. We'll get through all of those, as we have this one and those that are coming. But we need to keep in mind when we're voting and how we're voting is who we're voting for and what we're voting for.

Mr. Speaker, I hope that when we're done here and we move forward that things will proceed and they will move along well, that there will be an opportunity for all of the bargaining units that are involved here to come together in some way, shape, or form with government to decide through the mediation process, as it appears to be outlined, to make life acceptable, perhaps better in some ways for some of them, because it is those people that we are here for, those people that we are here for, each and every Nova Scotian.

Mr. Speaker, I will be wrapping up my remarks and I just want to say again that I appreciate the opportunity as a member of this House, an elected official of this House who was elected through a free and democratic process to this House, to be able to offer a few remarks on this, the closing day, I'm sure, of Bill No. 1 and third reading. With those few remarks, I will take my seat.

MR. SPEAKER: The honourable member for Chester-St. Margaret's.

HON. DENISE PETERSON-RAFUSE: Mr. Speaker, I stand in this House as an elected representative of Chester-St. Margaret's and the Province of Nova Scotia. I received this honour through a democratic process, a process which the Liberal Government does not understand, as is evident in Bill No. 1, the Health Authorities Act.

We know that government members plan to pass this bill today. That is their democratic right, although that's very hypocritical in the sense that they are taking away the democratic right of health care workers. I actually thought today whether I should even get up and speak, because it's like you're thinking that, well, what's the sense? The whole process is going to be passed because of the fact that there is a majority government.

It just seems like it has been nothing but a farce, ramming through this bill. For example, in Law Amendments Committee, there used to be a number of events that took place in that Red Room and there was no concern about the number of people that were in there. For some reason, during this bill, when we had many people out on the streets protesting and wanting to speak about the bill and wanting to be there and support their colleagues, all of sudden there was a fire regulation that they had to reduce the numbers. Where that came from after all these years, I certainly don't know. You know we'll pay attention to that for other functions, Mr. Speaker. We'll have to make sure that that is followed through since it was never recognized in the past.

It's very, very disappointing to be a member of this House and see people go, take their time - some of the health care workers had worked different shifts and were very tired, but they still had the energy and the dedication and commitment to come out to voice their opinion. It was very sad to watch a process with, when they're voicing their opinion, that it really means nothing to the government members because their minds are made up, or they're told that their minds are made up.

When you are listening to people and they're talking from the heart, they're not talking politically. They don't live in a political world. They live in a world where they go to work each and every shift that they have to look after people, they take care of those who are very, very sick in our society, and they work very long hours, and they go home to their family and look after their family. They're not in the political world. They don't know of all of the ins and outs of what takes place. They come in here and they go to Law Amendments Committee and express from the heart their experience, and no one is listening except for ourselves here on the NDP side. Listening to (Interruptions) That is a

fact. Don't go "ohhhh" when half the time nobody was asking questions from the Liberal side.

They were not listening. If they were listening, they would have been able to go outside and talk to those individuals, because as far as I'm concerned, when you are given the right to be an elected official and your government is making a decision, you should be able to stand in front of somebody and talk to them about it and say, we may have differences in opinions and philosophy, but this is why I'm standing up for what my government has decided. These are the reasons.

Not one of them over there could do that. Not even the Premier of this province. He refused to even meet with a health care worker that came here to meet with him. Well, I'll tell you something. Before the Premier was elected, he would have broken his legs jumping over the seat to go out to talk to somebody and say, oh, I care. I'm there to support you. But yet, he could not talk. Why could he not talk to a Nova Scotian who is working in the health care system?

I went and I talked to those people. I didn't back down, buddy. I did not back down.

MR. SPEAKER: Order, please. We'll keep the exchange directed at the Speaker's Chair.

The honourable member for Chester-St. Margaret's has the floor.

MS. PETERSON-RAFUSE: Thank you, Mr. Speaker. I would like to say that the fact is that as a representative of this House, that when there were issues, I dealt with them front on, whether they were controversial or not. And you know what? I went and spoke to those people. Anybody who had an issue, I gave them time. It may not be easy, but if I believe in something, I will speak to a person about it and offer my opinion so they have an understanding. That's not what's happening here. It's not happening at all.

It's interesting how they get chirping when they know what we are talking about is reality. I decided to stand here to speak today, although the members of the Liberal Government think that it's over, because they rammed this bill through in a week. It's not over at all; it's only the start. It's only the start. I will be here today and I will be speaking in the future and the public will be speaking in the future.

The points I would like to make are to clarify the misinformation that continually flows from that other side of the room. Number one, the minister stood in this House to say that health care workers don't have a choice of their union when they go to work. He talked about the fact that when you take a job, you haven't chosen your union. That's just a twist of a situation, like always. The fact is, that individual had a choice of where they wanted to work. They know what union is going represent them before they get to work. They do have a choice and they did have a choice whether they would go to the South Shore to

work, whether they'd go to Cape Breton or have their family here in the city. That choice was not taken away from them. So to stand in the House or try to make out publicly that in the first place they did not have a choice is not factual. It's just a twist of words, as per usual.

The second point I want to clarify is that the Premier and the minister are saying that health care workers will not lose any of their earned benefits. This is not the issue that the health care workers have presented at Law Amendments Committee or those who have been speaking to myself or my colleagues. They're not talking about earned benefits in the sense of, okay, you work 20 years, you still keep that seniority. Yes, that's important to them, but what they're expressing is the fact that each union offers different benefits. It's not about the earned benefits; it's about the benefits of particular union offers, and each union does offer different benefits to their union members. That's part of the problem that I don't think that those on the other side understand. Not very many of them on the other side have a knowledge of the labour or an understanding or experience.

Now there are a few that were in unions before and they should know, but they should be also ashamed of themselves that they've thrown their own sisters and brothers under the bus, which is what they have been doing. I can't imagine looking at being in that position, working in a union for a number of years and then (Interruptions)

Excuse me, Mr. Speaker, I have the floor. (Interruptions) And I do. Thank you.

MR. SPEAKER: Please continue.

MS. PETERSON-RAFUSE: Thank you. So I think they should think very dearly about that, about the fact that they were once one of those brothers or sisters in a union. Maybe they should have a conscience, but I don't think they do. (Interruptions)

MR. SPEAKER: The honourable Government House Leader.

HON. MICHEL SAMSON: Mr. Speaker, for the member for Chester-St. Margaret's to continually abuse the privileges of this House - she knows very well that that's unparliamentary. For her to make those kind of suggestions, one has to ask whether she's doing it intentionally or not, but I would ask you to call her to order and ask her to show a bit of respect for this Chamber.

MR. SPEAKER: Order, please. I'd like to ask the honourable member for Chester-St. Margaret's to retract the comment that the members opposite do not have a conscience.

MS. PETERSON-RAFUSE: I will retract that they don't have a conscience.

MR. SPEAKER: Thank you, please continue.

MS. PETERSON-RAFUSE: I may not believe it, but I retract it. (Interruptions)

MR. SPEAKER: Order, please. I will ask the honourable member for Chester-St. Margaret's to keep her comments on track and I'll ask the members on this side of the House to respect that she has the floor.

The honourable member for Chester-St. Margaret's.

MS. PETERSON-RAFUSE: Thank you very much, Mr. Speaker. I'm trying to publicly clarify what the union members are saying, and not what the Minister of Health and Wellness or the Premier is saying, to take words and throw them out with one meaning when that's not what they're saying.

They're talking about, can they not amend the legislation to say that the union members will not lose their particular benefits that they are receiving from the very union that represents them now? I do not believe that we will see that happening, because the fact is, they are saying something else publicly to get a different story out to the general public rather than what is the reality, what are the union workers, the health care workers, wanting, and it's pretty sad.

Perhaps what they should do, Mr. Speaker, is offer to those union members a grandfather clause that allows them to continue those benefits, because you have to realize that they have worked very hard over the years, and the particular union that represents them have worked very hard to bring those types of benefits to them. That's why choice is so important to our health care workers on who represents them. It's important and it's only fair that they are able to continue to have their earned benefits as the Premier says, but it's also important to them to be able to continue the benefits that they are receiving from a particular union. That is what the reality is and that is what the truth is and that is what they want, and they're not being heard.

The other point I would like to clarify, Mr. Speaker, is how wrong the minister is when he gets up and he says that there are other provinces that have created such kinds of legislation, and that's not the fact. The extreme type of bill that we have here has not been seen elsewhere in Canada. If the Minister of Health and Wellness or the Premier would have taken two minutes of their time to go to Law Amendments Committee or to go outside and talk to those individuals or to meet with the individual health care worker who was here, they would realize that the fact is it has not happened anywhere else. So we will be the first in Canada to have such type of legislation that takes away choices and takes away that democratic process.

That is backed up by a gentleman named Larry Brown who is the national secretary of the National Union of Public and General Employees. He came here all the way from Ontario to express his concern about how this looks on the Province of Nova Scotia. He said at Law Amendments Committee that we have never seen this anywhere in Canada. So

how can the minister stand there and say it has happened in other places in Canada? Here's a gentleman who works with unions, is a part of a national union, and he is saying clearly we have never seen this anywhere in Canada - in every case of health mergers, this has never happened.

I am encouraging today that the media do a little bit more investigative work, for the media to report the real facts of what is taking place, instead of what the Liberal Government is trying to do, give out messages to those who are not in unions to make out that there are these big, bad unions and they don't get along. They're not giving out the real messages or facts about how the unions came together and worked out a solution because they were asked to work out a solution.

I don't think that the Minister of Health and Wellness ever thought they could work out a solution, so he could have come back to this House and said, I'm sorry, we have to go through with this bill because the unions could not come together. They came together, and suddenly there was this flight of panic to turn around and run and hide and say, oh, oh, well that's not what's going to happen; we're going to go through with this bill.

That's the logical sense of what took place here, Mr. Speaker. I do encourage the media to do some stories about that. Talk about the fact that this is the only type of bill of this nature that takes away choices in all of Canada. I guess the Liberals said before the election they wanted to be first in something; I didn't realize it was going to be first in taking away the democratic rights of people of this province.

Unfortunately, it seems like a game to them - a game of words, a game of misinformation. We all know one game that is out there - it's called Truth or Consequences. Well, let me tell you, Mr. Speaker, this is not a game. It's about people's lives. There are no truths, but there will be many future consequences for this Liberal Government because of it. Today is not the end; it's only the beginning.

To be known as the only province in Canada that has taken away the rights of labour workers to have a choice, it's really unreal. You turn on the TV and you see what is happening in China and the protests for democracy and they don't think that's comparable? Well, it started in China - you start with one, you go with another. So why is there such a pick on the health care workers? Why is there such a pick on health care workers? That's my question.

The Minister of Natural Resources thinks this is all funny, but believe me, it's not funny to me and it's not funny to the health care workers and their families. What I'd like to know . . .

MR. SPEAKER: Order, please. The honourable member for Chester-St. Margaret's has the floor.

MS. PETERSON-RAFUSE: I'd like to know, Mr. Speaker, where is the sustainability in the health care profession or system when you're creating such chaos? Those two, they don't go together. They don't go together at all, and that's the message that the Liberals are trying to get out there - this is about sustainability, we've got to save people money. What, on the backs of the hard workers? Why not on the backs of those that are administrators and CEOs who are making huge dollars? You're going to be paying them out big severance packages, and then what's going to happen? Those who are not leaving will be another line on the organizational chart. I've seen it. I'm gone through HRM amalgamation. They don't have to look very far in history to see why this does not work and why it costs so much money, because that's exactly what happens.

I spoke to a nurse who told me that she worked at a hospital with 98 beds. You know how many administrative staff in that hospital? Seventy-six. Now where does that make sense? It's not going to change, because you're going to have another layer. Those people in those more senior positions protect each other. We've seen that all over the world. You don't have to be a rocket scientist to know that that's the way things happen unless you've got some leadership to make a change.

Well, when you have leadership, you talk to people. You don't ignore them and stand in this House - and I find it very ironic when I hear them say that, yeah, the nurses and the health care workers are dedicated and they're committed. Yes, they are, but how much is too much? When is the breaking point? So you just think that it's okay to say that, yeah, they're going to look after us as patients, there is no problem there, because they're such dedicated professionals? Well, yes, that is true. So does that mean you slap them around because of the fact that they are the easier target, and that's the route you take? Well, that's obviously what this is all about. They're the easiest target. They've been the easiest target for the Liberals ever since they got in.

Tell me, how do you create sustainability when you're going to have health care professionals who are going to decide to leave this province? There will be an economic consequence to the fact that people are going to leave. Do you not believe it? Do you think they are just saying it? Well, we've seen that happen before in the past because of a Liberal Government. Do you think you're doing anything different? No, you're not being restorative at all in your approach of governing. It's about power.

It does not make sense, Mr. Speaker, that you would even fight about somebody making a choice of their union. What is the reason behind that? Is it because there is a personal thing, or vindictive against a particular union, or we want to show unions that they're no longer going to be part of labour negotiations? Where's it coming from, and why? It doesn't make any sense whatsoever.

But believe me, you're not going to keep union and labour people down. Those are the people in our society who make things, who provide us with the services - not the ones on top having wonderful ideas. The very people that you're attacking are the people who

provide us with the service so we can do what we want to do in our lives. The people who, when we go to the hospital, are there to help each and every one of us.

All of us use the health care system, every one of us and our family members, and to do this, to take away - do you think they are out there just to make noise? They've been there all week. Do you not think that there is a concern? And then the response is, well, because they're health care professionals they'll do the best job, and that's fine, we'll let them do that. We don't really care about how they feel at all. We don't care that they feel that they are being trampled on. Well, if you think that way, you're pretending.

MR. SPEAKER: Order, please. I just want to remind the member for Chester-St. Margaret's that her use of the word "you" and "your" is - I'm giving you the benefit of the doubt, but please refer to the government as the government or members opposite.

MS. PETERSON-RAFUSE: It's really sad that they can't even think about how people or the government think about how people feel when they're at work. How would government members feel if they were under the same situation?

We are talking about human beings here and the human effect. That's the part that's missing out of this and that's the part that I'm afraid is missing out of the media, the human effect, the domino effect of this. This is not just a situation that is confined within unions and union members. This is a situation that has an effect on anyone using the health care system. It's going to break, if it's not already broken. As we know, many of the nurses talked about the lack of support. I heard about nurses who said they can't take vacation time. What if any of the members of the government were told they weren't allowed to take any vacation time at all? Would they like that? No, I don't think they'd be happy with that.

The fact is, that's what is happening to nurses. I know a lot of the members here complain about the hours we have kept this week. Those are normal hours for a lot of these health care workers and the pressures that are put on them. If they can't last a week to do it, how do you think you can last in a career doing it? But yet they always come back to, oh well, they'll do it because they are dedicated. Is that what we give in Nova Scotia for our dedicated health care workers? Is that the reward they get? No choice and more pressures - is that what we give them?

I would say if that is what we are giving them, and it looks like it through Bill No. 1, why wouldn't they choose to go somewhere else? Why wouldn't the rest of Canada and the rest of the world look at this province and say, whoa, I'm not going there to work. Why would I want to work in that type of environment? I can go almost anywhere in Canada and I'll have choices.

I know that the health care system has lots of pressures. There's not one of those health care workers who has not said that. I can tell you something, they have seen the waste in the system and they have seen what some senior-management level people are

getting paid and what they're doing. They get a support person for them and then another one and another one - that's how it works. You get one person and they need a person to support them to do this work and that work. Suddenly there are fewer on the front lines and more on the top. They are top-heavy.

I do understand, and I know they understand, that the dollars that are being spent in health have to come under control but you can do it in a way without creating a crisis and do it in a way that's restorative. We have shown that when we were in government, because we were able to have the administrative costs reduced in this province from above the national level to below, and that was within four years. It can be done and it can be done without chaos. It's just not logical why the government is taking the route that they're taking. It is absolutely not logical.

I wonder too, how is having nurses leaving the province going to improve our health care? The minister said about hiring, well, they hired the nurses before all this took place. Do you think some of them are not going to turn around and leave pretty quickly? As I said, we all use that service and as our society ages, we'll be using it more. We have very sick people in the health care system, because of the fact that people are living longer. Yet we are not supporting those very people who are working to keep people alive and to help them when they're having a health crisis.

I have heard the minister and the Premier say, this minister has travelled the province in consultation. He might have travelled the province but he didn't consult with the front-line health care workers. The one thing he missed though because he said everybody talked to him and this is why we're doing this, and da da da da - what he missed is the fact that when he was doing his consultation process, he didn't tell anybody what he planned on doing. He didn't tell anybody that he was going to take away their right of choice to decide what union they were going to be a member of.

If he had told people that, I bet his consultation process would have been much different than what he boasts about in this House. Mr. Speaker, there are many things we're worried about in this particular bill. We're worried about the fact that we know amalgamation does not work when you rush it. The last Liberal Government, in the Savage years - they did that with HRM amalgamation. They rushed it and it was horrific, and people have suffered and the finances have suffered ever since because they rushed it. What it meant at the end of the day was the rural parts of HRM lost out - and they still lose out. They do not get the same services - they pay for them but they do not get the same services because of the lack of planning. That's what we're talking about.

When you hear a minister who is responsible for decisions in a Department of Health throw around figures like he's at a ball game in Boston, you got to ask why. Where's the planning? That's part of the problem with this - it takes time to plan appropriately and properly.

How ironic is it that we have the Ivany report and it talks about taking rural communities and how it's now or never? This is being totally twisted around - you're not going to have the same representation with one person on a board that is centralized here in Halifax. I've seen that all my life and I cannot believe not one of the rural members in the Liberals do not know that. They have to know that and the fact that in the rural communities it is very different and can be unique - and it's different between one rural community than the other. And the resources in rural Nova Scotia are not the same in Halifax here.

So the fact is that they're not the same and they don't have the resources. Where are their voices going to be? They are going to be lost. There's another situation that the minister hasn't spoken much about or paid attention to - he thinks that if you take IWK and put them aside, everything's going to be fine for children's services and for women. Well, he's going to learn that that's not the fact either. Are they going to increase their budgets so that they are going to be able to run the same women's programs that are in other parts of the province in rural Nova Scotia that are under other health authorities?

The fact is there are programs that are being done by other health authorities and the local health groups that have been fired by this minister. They would do programs that got to the grassroots level, got out to the most vulnerable women in this province - programs that are proactive instead of reactive. What's going to happen to all those? Are they going to be gone? There are many, many questions, but there's no plan. If you have a plan you should be able to provide it to the people of Nova Scotia, but there's no plan and that is a huge problem.

As I said when I started, I wondered whether or not I should get up today and say a few words, and it's so discouraging, so hard to believe that this is Nova Scotia because it's not the Nova Scotia that I was born in. It's not the Nova Scotia that I've had family members who died in the war as veterans for a democratic process, and it's not the Nova Scotia I thought we were going toward in terms of empowering women, when you have a profession that 80 per cent are women and they're being stomped all over. That's not the Nova Scotia that I thought I lived in, but I will tell you something - I will work and work, and I will work with the people of Nova Scotia and I will work with health care workers and others in this province to make sure that we bring back the real Nova Scotia and we'll see that in four years' time. Thank you.

MR. SPEAKER: The honourable member for Truro-Bible Hill-Millbrook-Salmon River.

MS. LENORE ZANN: Mr. Speaker, I rise in my place today to speak to Bill No. 1 for the last time, third reading of this very upsetting and concerning bill. In the past week I have heard from nurses and other health care workers from across this province, nurses who are worried sick about the future of health care, the well-being of their patients, their own future and that of their children. In fact I've learned a lot about nursing this past week.

Nurses have told me that during their nursing training, they were taught that nurses are equal members of the health care team and they certainly aspired to such a reality.

However, they tell me, it's very clear today that this statement is just not true. Nursing is still a female-dominated profession and medicine is still male-dominated, although I have to say I personally have an incredible female doctor in Truro, Dr. Roya Murray, and I feel absolutely blessed to have her. Nurses are wondering if, when it comes time for the government to negotiate with the physicians, such heavy-handed tactics will be used as those being used against them and their other health care workers who are affected by Bill No. 1, the Health Authorities Act.

To be honest, Mr. Speaker, it's my belief that because nursing composes such a large part of the health care system, and that nurses are mainly women, that such an attack on unions has been waged by this government. Why? Is it because they just don't care? In fact, while we were in government, the NDP, we heard a lot of union-bashing coming from the Liberal and the Progressive Conservative caucuses. In fact, it's too bad that those union workers who voted this government into power, were not there to hear the same thing on the floor that we did, especially when they didn't have the microphones on.

Sadly, the Health and Wellness Minister's own wife is a retired nurse so one would think he would know better than to introduce this bill. One of my constituents is Linda MacDonald, a nurse, a continuing care coordinator in Truro. Linda's nursing career began in 1973 and has included hospital nursing, VON nursing, public health nursing and she will end her career in continuing care. In fact Linda has cared for fellow Nova Scotians from birth to death. She is also an advocate for human rights for older adults to be considered as persons and to be treated with the respect, dignity and equality they deserve.

On Tuesday and Wednesday of this week Linda was here, at the people's House, to advocate for her own human rights and those of her colleagues because she feels that their rights are being trampled - their right to equality, their right to association and their right for democracy.

In 1992 Linda was a member of the Nova Scotia Nursing Task Force and she presented on gender equality in nursing, yet 22 years later she finds herself in this situation, here, still dealing with discrimination, with misogyny and still asking for the same solutions in health care.

There are many other ways to save money within the health care system, Mr. Speaker, such as CECs, which our NDP Government introduced to improve health care and prevent emergency room closures in rural Nova Scotia. It is working; in fact, what our health care system needs is not an ongoing fight with health care workers, but more community-based clinics, more nurses, nurse practitioners and salaried doctors in the rural communities; we also need to address polypharmacy, to name just a few of the

improvements that can be made and will save money and make a much smoother and happier system and workforce.

However, sadly today, in the year 2014, there are plans being enacted by this Liberal Government to save health care costs on the backs of the working women of this province. Mr. Speaker, one of our most cherished values is surely democracy, but with the stroke of a pen this government is planning to take away the democratic right to choose which union health care workers belong to. The Minister of Health and Wellness has been known to say a mediator/arbitrator will be chosen to facilitate this process.

Well, health care workers do not want a mediator/arbitrator to make their choice for them, they want their own human right and their own democratic right respected. For the most part, health care workers tell me they are satisfied with their job and they love their patients and they want to make a difference in their lives. That's why they became health care workers in the first place, because they want to keep helping to heal wounds and to give people in crisis compassion and caring. In fact, I would suggest that's why health care is namely given, because these people care.

My strong objection to this legislation is based on my concern for women's rights and for democracy in Nova Scotia and in Canada as this will be the very first time in Canadian history that such action is being taken. In fact, that's why this Liberal Government has been named the number 1 offender to workers' rights around the world for the past week. LabourStart is an international organization that highlights attacks on workers' rights all around the world - and one would think that the number 1 offender may be Hong Kong or China, but no, it is not. The No. 1 offender is actually Nova Scotia.

It's hard to believe, isn't it? Well, there you have it. I'd like to congratulate the Liberal Government for their first anniversary coming up on October 9th, next week, because they've made a record that I'm sure with no less than four anti-worker, anti-union, anti-women legislation in just one year must set a record. As they say, first they came for health care workers, who's next on the chopping block? I'm told the Teachers Union officials are now worried their members are next.

Canadian women before me have fought for the right to vote, they've fought to be treated as a person and under the Canadian Charter of Rights and Freedoms, Section 2(d), they have the individual right to freedom of association. They are not objects to be traded about like horses and they are gravely offended by the government's actions.

Bonnie Rafuse has been a registered nurse for 28 years, she told me yesterday' and wrote:

I respect my patients, my managers, and my colleagues. Our patients get excellent care. We provide a high level of service to the members of this community. I work days, evenings, nights, and short notice. I

do not work overtime. Due to the nature of the shift work, I have not been able to see my children and to look to their care over the years into the standard hours of sitters and daycare so my husband and I work opposite shifts. I work every shift with people who are sick, that's why they're admitted - viruses, infections, community outbreaks, we look after them so we too get sick and require time off work and then our children get sick and we require time to look after them as well - no hidden agenda there for sick time requirements. I work holidays, our children have grown up knowing that every second year their mother works Christmas. Sometimes I work Easter and Thanksgiving and I do not get vacation on March break until last year after 20 years.

What Bonnie Rafuse is complaining to me about is she accumulates days off when she works holidays, but cannot take them as time off because operational requirements do not permit. She says there's not enough staff to replace, the workload gets larger, people get sicker, and staff numbers are down which is, I have to say, a country-wide trend that shows no sign of getting better before it gets worse.

So how dare we have front-line workers, who care for the ill and dying, standing up for their rights to a contract providing adequate sick time to heal or mend when they, themselves, become sick or injured. How dare they expect to spend holidays like Christmas and Thanksgiving with their patients and their families, when their own utility bills have all gone up, groceries cost more, gas is expensive, parking rates at work have increased and yet they are expected to stay with these patients, not take their legitimate time off and expect that they should be able to fairly negotiate a wage and benefits, in keeping with all of these increases. Is this too much to ask for, Mr. Speaker?

Health care workers, I would say, need to feel confident that the union representing them at negotiations is the one that they feel will look out for their interests. Union representation means that an employer falling on desperate times of low staff and un-filled shifts cannot unfairly impose requirements on staff that are unsafe and can lead to patient incidents or near-incidents.

A good union will protect health care workers' rights when they are challenged. Both new staff and those nearing retirement have options to remove themselves from an un-democratic, disrespectful and unsafe health-care system, by leaving. And Mr. Speaker, they will. Some have already decided to go, thanks to Bill No. 1.

My mother always taught her children, my sister and me, that democracy is a precious and precarious right. I do not agree with the Premier that this way of organizing the health merger will be better for everyone in the long run. Dictating choices to people is not democracy and all citizens lose when human rights are eroded. The Premier told

workers in August of 2013 that, “We respect and will continue to respect your hard-earned rights and collective agreements.”

Well, I’ve read Bill No.1 and I know that their collective rights will not be respected or protected. No two collective agreements are the same and the mediator/ arbitrator who would be the same person, would very likely go for an agreement that costs less or takes more away from the workers, in spite of what the Premier is saying. The structure system of unions is different and workers benefit packages will be affected. What will be some of the losses in health care from such an abuse of power and violation of workers’ rights? Loss of trust comes to my mind first.

In August 2013 when the Premier was quoted to have said that he respects those agreements, people believed him. When Bill No. 1 is passed, these words will prove that this government and this Premier cannot be believed. With such actions, definitely comes the loss of trust and such loss of trust will bring disillusionment, low working morale, job dissatisfaction, increased sick time, and people moving away to other provinces for employment.

A union contract between employees and employers is about relationships. In this case, the union contracts are about how employees and employers agree to care for and about the health of Nova Scotians. We all know that health is the number one concern of pretty well every Nova Scotian. Once such a trust is broken in relationships, it is very hard to repair, and it is my belief that such a cost from such a relational loss of trust will hurt people in this province to the core.

It will also create problems in this province for years to come and will do the opposite of improving front line patient care in Nova Scotia. I moved home, Mr. Speaker, to Nova Scotia in 2007 to try to give back to my community, to try to help improve the quality of life for those people in my community, and, in fact, for all Nova Scotians. I’ve been working 18-hour days for the last five years, and usually that’s six or seven days a week. I take my job seriously, and now I feel that with one piece of legislation, this Liberal government has undermined a lot of the work I, and my colleagues who also work hard on behalf of the people of Nova Scotia, have done.

Bill No. 1, the Health Authorities Act, is not going to make life better for everyday Nova Scotians. People’s hearts are broken, they are angry and disappointed and, I would say, disgusted by the actions of their government. I have to say that I feel the same way, Mr. Speaker, but I vow to keep fighting for the rights of every Nova Scotian.

Mr. Speaker, I’ve also heard from another concerned health care worker, Kim Henderson, who said that for the last days she has been trying to write something since this “clash of government and labour” has begun and it has taken some time to settle the discord that Kim had in her brain and heart to be able to sit calmly and actually write something down. She said she has never had an issue with this before, except the last time the Liberals decided it was okay to bully the workers, taxpayers, and Nova Scotians with their bills to

demolish what our ancestors and these very people have worked so hard to get, not just for them but for all workers: It has been well-known that the Liberal Government feels threatened by organized labour - Kim writes - God forbid they stand up for their rights in collective bargaining. To take away workers' rights is simply incorrigible.

The Health and Wellness Minister first says this will cut our costs by \$13 million, then save \$5 million, then \$3 million, or even as low as \$1 million-ish. But when a government can't even tell the people exactly how much this supposed saving is going to give the people, then something is seriously wrong, Mr. Speaker. So either the management that is going to be downsized will have really good severance packages or, more likely, this is not going to save us anything and only cause a migration of Nova Scotians to other provinces or countries.

MR. SPEAKER: Order, please. Can the honourable member just clarify for me, are you reading from letters or are these your words? You are reading the whole thing, so I'm losing track of where your quotes begin and where your quotes end.

MS. ZANN: That's the sign of a good speech, Mr. Speaker, I would say. Actually, there were parts of it I read earlier that were letters and these are my own words, and I've written my whole speech down so I'd remember what I really wanted to say.

MR. SPEAKER: I'll ask you if you have any letters in there, to table them and just read excerpts, and to be very clear when you are quoting somebody else - when you are starting and ending, please. Thank you. Go ahead.

MS. ZANN: I understand, Mr. Speaker. I'm just trying to find all my notes because I write them on several different pages and I pick and choose and throw around - I'm up on my feet and I'm working hard.

Anyway, I was going to be saying that throughout this fiasco I have heard over and over that this legislation is supposedly for the good of Nova Scotians, to help the Nova Scotians I represent, or for the taxpayers of Nova Scotia. The Liberal Government seems to forget that 24,000 workers are, indeed, Nova Scotians and taxpayers. So continuing to target them like this, in the first year of government, the Liberals will actually be representing 24,000 less Nova Scotians and their taxpayers come the next election - not to mention, I would say, their parents, grandparents, sisters, brothers, aunts, and children. I think that is something that our Liberal members should keep in mind.

I would like to take this opportunity to remind people just what it is that unions have done for the good, hard-working people of Nova Scotia. For instance, unions gave us the weekend, unions gave us fair wages and relative income equality, unions helped end child labour in the Province of Nova Scotia, most notable in the coal mines, the pits, Mr. Speaker, unions won widespread, employer-based health coverage, and they spearheaded the fight for the Family and Medical Leave Act.

Now collective bargaining, on the other hand, gave everyone 40-hour work weeks, overtime pay for required work beyond eight hours a day, unemployment compensation if a worker has lost a job through no fault of their own, paid vacation days and paid holidays, and safety and training standards for workers.

Mr. Speaker, I would have to say that without unions, without unions and without collective bargaining and workers being able to stick together, employers would dictate working conditions, hours, wages, and benefits without any inputs from the workers. Without unions there would be no Canadian middle class. There would be the rich and the poor and no in-between. As we know the middle class across North America is eroding as we speak and many middle class workers are becoming the working poor. It's a very, very sad and frightening state of affairs.

Unions have helped to keep non-union companies more honest just by their mere presence, Mr. Speaker, and they have made non-union companies pay a competitive wage to recruit workers to their companies. They've been able to give this to their workers and then to others because of the Trade Union Act, and because of voting: the vote on what union the workers wish to have represent them, the vote on who will represent their local at the meetings within the union and with the employer, and the vote of motions on the floor over everything from finances to donations.

As Nova Scotians, Mr. Speaker, each and every one of us, of age, vote for who represents us municipality, provincially, and federally, and if we belong to any community associations we vote for the people on those executives. It would be too easy to make comparisons with more odious regimes around the world but sometimes when the actions merit it, it's very hard not to. This government is heading down a dangerous path, when it actively chooses confrontation over consultation. The test of a democracy and governing is not just to do what you think is right but to do it in a way that respects everyone, and I would say that Liberals are failing this test.

In closing, Mr. Speaker, I would just like to say that yesterday morning, when I got home at 4:00 a.m. from our long session - which by the way began for me in Law Amendments Committee at 8:00 a.m., so in fact it was a 20-hour working day for me, and which, if I had a union representing me, would be illegal - I would like to just say in closing that when I got home I looked up a few words online and I read a wack of letters that I had received, a lot of emails from concerned people from my riding and from across Nova Scotia and the overwhelming thought and words that were being used were ones that I wanted to look up and make sure I knew exactly the meaning of and I'd like to just share them with you now before I take my seat.

Democracy is a form of government in which people choose leaders by voting, or an organization or situation in which everyone is treated equally and has equal rights. Collective bargaining is a process of negotiation between representatives of workers, usually labour union officials and management, to determine the conditions of

employment. The agreement reached may cover not only wages but hiring practices, layoffs, promotions, working conditions, hours, and benefit programs. Vote is the official choice that you make in an election or a meeting, et cetera, by casting a ballot, by raising your hand, by speaking your choice aloud. Finally, dictatorship is an autocratic rule, control, or leadership, a form of government in which absolute power is concentrated in a dictator or a small clique.

Now when I fell asleep at around 8:00 a.m. yesterday morning, I have to say that my thoughts were about Joseph Howe and some of the founding members of our government in Nova Scotia. I would have to say, Mr. Speaker, I fell asleep wondering what people like the Honourable Joseph Howe would have to say with what's going on in this House today.

MR. SPEAKER: If I recognize the minister it will be to close the debate.

The honourable Minister of Health and Wellness.

HON. LEO GLAVINE: Mr. Speaker, I want to thank the members opposite and our independent member for their comments on Bill No. 1. With that, I close debate on Bill No. 1.

MR. SPEAKER: The motion is for third reading of Bill No. 1. Would all those in favour of the motion please say Aye. Contrary minded, Nay.

A recorded vote is being called for.

Ring the bells for 15 minutes. Call in the members.

[1:05 p.m.]

[The Division bells were rung.]

MR. SPEAKER: Are the Whips satisfied?

[The Clerk calls the roll.]

[1:21 p.m.]

YEAS

Mr. Colwell
Mr. Churchill
Ms. Bernard
Ms. Regan

NAYS

Ms. MacDonald
Mr. David Wilson
Ms. Zann
Ms. Peterson-Rafuse

Mr. Samson
Mr. McNeil
Ms. Whalen
Mr. Glavine
Ms. Casey
Mr. MacLellan
Ms. Diab
Mr. Younger
Mr. Horne
Mr. Hines
Mr. Stroink
Ms. Arab
Mr. Delorey
Mr. Ince
Mr. Kousoulis
Mr. Furey
Mr. Farrell
Mr. Gordon Wilson
Mr. Rankin
Ms. Miller
Mr. Rowe
Mr. Maguire
Ms. Eyking
Ms. Lohnes-Croft
Ms. Treen
Mr. Gough
Mr. Jessome
Mr. Irving
Mr. MacMaster
Mr. Dunn
Mr. Baillie
Mr. d'Entremont
Mr. Orrell
Ms. MacFarlane
Mr. Houston
Mr. Porter
Mr. Harrison
Mr. Lohr

THE CLERK: For, 42. Against, 5

MR. SPEAKER: The motion is carried.

Ordered that this bill do pass. Ordered that the title be as read by the Clerk. Ordered that the bill be engrossed.

The honourable Government House Leader.

HON. MICHEL SAMSON: Mr. Speaker, that concludes the government's business for today. The House will sit again on Monday, October 6th, from 7:00 p.m. to 10:00 p.m., at which time following the daily routine the government will be calling second reading of Bill Nos. 5, 6, 9, 10, 12, 14, 15, 16, 17, and any other government business that may arise.

With that, Mr. Speaker, I move that the House do now rise, to meet again on Monday, October 6th, from 7:00 p.m. to 10:00 p.m.

MR. SPEAKER: The motion is that the House now rise to meet again on Monday at 7:00 p.m.

Is it agreed?

It is agreed

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

[The House rose at 1:25 p.m.]

NOTICES OF MOTION UNDER RULE 32(3)**RESOLUTION NO. 58**

By: Hon. Christopher d'Entremont (Argyle-Barrington)

I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Doug Blades from Centreville, Cape Sable Island, won the 59th Canadian Trapshooting Championships, held in Saint-Jean-sur-Richelieu, Quebec, in June, becoming the first winner east of Quebec to win the championship; and

Whereas out of a total of 400 shots, some with two clay pigeons thrown at the same time, Doug only missed 12; and

Whereas in 2013 Mr. Blades also won the Atlantic Trapshooting Championships held in St. John's, Newfoundland;

Therefore be it resolved that all members of this House of Assembly congratulate Doug Blades on being crowned the Canadian Trapshooting Champion and wish him continued success in the future.

RESOLUTION NO. 59

By: Hon. Christopher d'Entremont (Argyle-Barrington)

I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas on Friday, June 27th, Carl's Store in Tusket held its 30th Anniversary celebration; and

Whereas Carl and Audrey Pottier opened this store in the early 80's and provided a diverse selection of products, amazing staff and a dedication to customer service as one of the last and best general stores left in the area; and

Whereas in 2010 Greg Pottier purchased the store from his parents and continues the traditions of service, product and price, with new and innovative ideas to make the store a unique and fun experience;

Therefore be it resolved that all members of this House of Assembly congratulate Carl, Audrey and Greg Pottier on their 30th Anniversary and wish them continued success in their endeavours.

RESOLUTION NO. 60

By: Mr. Tim Houston (Pictou East)

I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Pictou County Crime Prevention and Pictou County Crime Stoppers came together to show how these two volunteer groups work together in a common cause; and

Whereas both of these groups offer programs for seniors that are designed to meet the needs of seniors in their home and community and to keep them safe; and

Whereas the meeting of the two groups informed seniors about the use of the “tipster number” so they can report a crime while remaining totally anonymous;

Therefore be it resolved that all members of the House of Assembly thank Pictou County Crime Prevention and Pictou County Crime Stoppers for making our seniors safer and more comfortable in their homes.

RESOLUTION NO. 61

By: Mr. Eddie Orrell (Northside-Westmount)

I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Calvary Baptist Church in North Sydney will host the Ten Thousand Villages Fair Trade sale for the 13th year; and

Whereas this congregation has raised over \$100,000 for the non-profit organization geared primarily to helping women in the Third World countries to support their families; and

Whereas the arts and crafts of these women and their stories are marketed across North America with the sales helping to improve the livelihoods and well-being of underprivileged people;

Therefore be it resolved that all members of this House of Assembly thank the congregation of Calvary Baptist Church and the Ten Thousand Villages for their commitment to making this world a better place for all.

RESOLUTION NO. 62

By: Ms. Karla MacFarlane (Pictou West)

I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas Xander Martin of Scotsburn, eight years old, spearheaded a bottle drive to raise money for animals; and

Whereas Xander has already raised over \$1,100 that he divided between Hope for Wildlife, the Friends of Redtail Society and the Pictou County SPCA; and

Whereas Xander continues collecting bottles and hopes to raise more money this year because he really likes animals and nature;

Therefore be it resolved that all members of this House of Assembly thank Xander for his fundraising efforts to benefit animal charities.

RESOLUTION NO. 63

By: Mr. John Lohr (Kings North)

I hereby give notice that on a future day I shall move the adoption of the following resolution:

Whereas the Elsie MacGill Northern Lights Award recognizes outstanding Canadian women in aviation and aerospace industries and is named after Elsie MacGill, who achieved many first during her lifetime; and

Whereas Sandra (McDonald) Snow of Kentville was one of six Canadian women to receive this award; and

Whereas Sandra Snow is a community volunteer with a successful 20-year career with the Canadian Armed Forces, including being the first woman Avionics Technician on the Aurora and the youngest Air Force member promoted to the rank of Master Warrant Officer in peacetime;

Therefore be it resolved that all members of this House of Assembly congratulate Sandra Snow on this prestigious and much deserved award.