|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***Province*** | ***Législature*** | ***Session*** | ***Type de discours*** | ***Date du discours*** | ***Locuteur*** | ***Fonction du locuteur*** | ***Parti politique*** |
| Nouveau-Brunswick | 56e | 3e | Discours sur le budget | 27-05-2009 | Mike Murphy | Ministre de la Santé  | PL |

*(Le discours est bilingue)*

**Committee of Supply**

(**Mr. Deputy Speaker** vacated the chair, the House going into Committee of Supply.

**Mrs. C. Robichaud** took the chair at the committee table and called for consideration of the

estimates for the Department of Health.)

**Department of Health**

**Hon. Mr. Murphy,** after all items under the Department of Health had been presented:

I thank you for the opportunity, and I look forward to questions from the opposition and from the Health Critic, the member for Rothesay.

I am pleased to rise in the House today to provide New Brunswickers with the budgetary estimates of the Department of Health for the year 2009-10. Our government recognizes the need to be fiscally responsible, particularly during these times of global economic uncertainty. We also recognize that the services of the Department of Health are services that all New Brunswickers rely upon today and into the future.

À première vue, il peut sembler que les restrictions budgétaires entraînent une réduction des services de santé, mais ces deux courants d’idées, soit la responsabilité financière et des services de santé fiables, ne sont pas absolument exclusifs. En réalité, on ne peut assurer des services fiables sans faire preuve de responsabilité financière. Des investissements minutieux qui mènent à des dépenses basées sur un système de soins de santé viable et efficace ainsi que sur des résultats positifs engendreront la pérennité du système de santé assurant par le fait même à la population du Nouveau-Brunswick l’accès à des soins de santé universel aujourd’hui et à l’avenir.

L’autre option, celle des dépenses outrancières maintenant en vue d’obtenir des avantages à court terme entraînera l’érosion future de nos soins de santé, et cela est tout à fait déraisonnable pour notre gouvernement.

Permettez-moi de vous présenter les principaux investissements que le ministère de la Santé a

l’intention de réaliser au cours de l’exercice financier 2009-2010 : un financement sans précédent des soins de santé, y compris le financement de programmes de santé clés identifiés dans le *Plan provincial de la santé* ainsi que par la Commission Creaghan ; un budget d’immobilisation de 67 millions de dollars ; le financement nécessaire pour régler les déficits de l’année financière 2008-2009 cumulés par les régies régionales de la santé anciennement ; un financement pour les ressources humaines clés du secteur de la santé ; et des réductions stratégiques des dépenses, des mesures de recouvrement des coûts et une hausse des droits qui permettront au ministère de la Santé de cerner et de mettre en œuvre des efficiences, d’assurer la cohérence du système de santé du Nouveau-Brunswick avec ceux des autres provinces et territoires et de rétablir les augmentations différentielles du coût de la vie dans des secteurs négligés pendant plusieurs années.

Le ministère de la Santé a rationalisé les programmes administratifs et réaffecté les dépenses de programmes générant ainsi des économies et réduisant de 4 millions de dollars le budget du bureau central. Je suis fier d’annoncer que ces économies dans l’administration ont été réalisées sans mettre en danger les programmes et les services. Ce genre d’économie représente la priorité du gouvernement depuis son accession au pouvoir. Nous continuerons d’axer nos efforts à la réalisation de ce genre de réduction des dépenses.

As mentioned, there are instances where programs are provided to the public, and past governments have failed to address increasing costs annually. Governments have chosen to absorb the increasing costs through reduction of other programs or through deficits. Today, I must announce that the Department of Health will raise the monthly premium for New Brunswickers who opt to purchase their drug coverage under the Seniors’ Prescription Drug Program. Monthly premiums of this program are being raised from $89 to $105 per month, effective August 1. Because these premiums have not been raised since January 2002, we are forced to redress a lack of inflationary increases which were not implemented by former governments. I wish to emphasize that this does not affect seniors who are covered under the New Brunswick Prescription Drug Program.

While this represents an almost 18% increase for the total of seven years when premiums have not been increased, it should be noted that the cost of oncology drugs has gone up 17% per year and the cost of all other drugs has increased, on average, by 8% per year.

As you already know, the Department of Health is reinstating ambulance fees, effective July 1. New Brunswick has had ambulance fees in the past, but they have not been in effect for the past four years. Ambulance transport is not an insured service under the *Canada Health Act,* and this is why other jurisdictions charge for this service.

The $130.60 ambulance transport fee mirrors Nova Scotia’s and brings New Brunswick in line with other jurisdictions across Canada. The fee will not apply to interfacility transfers, clients of social development, those in foster care, or eligible clients of the extramural program. There will also be an appeals process available for those who cannot afford the fee.

The ambulance usage fee represents an approximately 25% recovery of the cost of providing land ambulance service, and this cost recovery will contribute to the continued development and enhancement of land ambulance services in the province. These cost-recovery measures, fee increases, and efficiencies represent some of the initiatives our government is implementing to ensure that we will have a sustainable health care system well into the future.

New Brunswick’s health care system, overall, will also be stronger now, in 2009-10, as a result of our ongoing implementation of the reforms outlined in the Provincial Health Plan and the implementation of recommendations made by Justice Creaghan and others.

Ordinary Account spending at the Department of Health will be more than $2.3 billion this fiscal year. This record figure represents an increase of $65 million over the revised 2008-09 estimates, an increase of 2.9%. Fiscal prudence is also a matter of ensuring that every single penny we do invest will be invested wisely.

The department’s budgetary figures provide funding for specific priority health care initiatives, including $2.5 million to support the development of a provincial trauma system, which is on time and on budget, with a candidate; and ongoing funding for the e-health initiative, which went from worst to first. The department’s forward planning has provided us with $8 million of inventory of necessary supplies in the event of a pandemic. We will continue to invest $500 000 in 2009-10 to ensure that we are prepared to care for New Brunswickers should we be faced with a pandemic.

This record total amount also includes increased funding for the New Brunswick Prescription DrugProgram; hospital services; and—I am very happy with this—an almost 14% increase in funding to mental health program services, which is long overdue.

Investments in infrastructure are among the best investments that any government can make. An amount of $67 million will be invested in capital construction projects and equipment, an increase of $9.6 million over that of 2008-09. This funding includes: $1.8 million to complete the renovation of the emergency department at Hôpital de Tracadie to alleviate overcrowding; funding to complete the construction of the central sterilization unit at the Chaleur Regional Hospital in Bathurst; $2 million to continue the installation of new sprinklers in older sections of the Moncton Hospital; $2 million to add more examination and observation rooms at the Dr. Georges L. Dumont Hospital to meet the clinical needs of medical students; $1.7 million to create work areas for medical students at the Saint John Regional Hospital; $2 million to build a new health centre in Rexton; $4 million to continue design work and start construction of a major two-storey addition to the Dr. Georges L. Dumont Hospital to address a critical space shortage; $12 million to continue the construction of a new emergency department at the Saint John Regional Hospital; and $24 million for the Dr. Georges L. Dumont Hospital and the Saint John Regional Hospital to buy radiation therapy technology and build an expansion to house the new equipment.

Altogether, these projects will constitute a major enhancement of New Brunswick’s health care infrastructure while they promote economic activity at this difficult time; help create and maintain jobs for New Brunswickers, again, at this critical time; and produce and enhance the infrastructure that our province must have in order to become and remain self-sufficient.

A central piece of health care delivery in New Brunswick is the regional health authorities. The regional health authorities will be receiving an increase of $100 million over the 2008-09 funding level. That represents almost an 8% increase, one of the biggest increases ever to the regional health authorities. I am pleased to report that regional health authorities’ deficits for 2008-09 will be funded, which are down very significantly, and that the regional health authorities’ funding will keep pace with inflation.

Our many partners within the health care system, including the regional health authorities,

Ambulance New Brunswick, and FacilicorpNB, would not be able to serve the people of New

Brunswick without well-trained and engaged human health resources. That is why this year’s budget includes funding for 25 new physicians and pay increases for emergency room physicians, which I just mentioned, from $144 to $190 per hour. It is great, great news for St. Stephen, Saint John, and all across New Brunswick.

I was not asked this question, but, for pathologists, we put forward a 15% increase of their

remuneration. We submitted that to the New Brunswick Medical Society two weeks ago. That 15% is effective April 1, 2009, and there will be another increase of 10% on April 1, 2010 so that we are able to garner more pathologists, pursuant to the Creaghan report. There will also be dispensing fee increases for community pharmacists, tuition fees, and funding to establish an Anglophone medical school.

In keeping with the commitments made in the *Charter for Change* and in the Provincial Health Plan, this government continues to be on track to issue 100 new physician positions over the next fouryear period. Simultaneously, we are examining whether the billing number system can, in fact, be improved upon toward the objective of ensuring that physicians are distributed throughout the province in order to best meet the needs of our rural and urban populations. Since October 2006, this government has added 114 net new doctors to the New Brunswick health care system, a record.

This year’s Health budget includes funding for 25 additional physician positions. This year’s budget also includes funding for emergency room physicians and pathologists, and the

government recognizes the need to address the areas of most serious concern to our health care staffing. Until now, New Brunswick was not close to being competitive with the compensation offered to the ER physicians in other jurisdictions. We are now. ER physicians will be paid $190 per hour, up from $144 per hour, a huge and significant increase. The Creaghan commission provided us with reasons why pathologists’ compensation needed to be increased, so we are doing just that. There is 15% this year and 10% next year.

This budget also includes $2.5 million to fund an increase in pharmacists’ dispensing fees. This fee does not come out of the pocket of New Brunswickers filling their prescriptions. It compensates the 201 community pharmacists across the province who dispense drugs and provide professional services to beneficiaries of the New Brunswick Prescription Drug Program.

Our provincial health care system will also be supported through our government’s enhancement of the provincial tuition rebate program. As of 2009-10, our government is doubling the maximum lifetime rebate, from $10 000 to $20 000, and the maximum annual rebate, from $2 000 to $4 000. I am confident that this strategic initiative will make New Brunswick even more attractive to individuals who have completed their studies, including all those who work or who will be working as health care professionals in New Brunswick.

Since October 2006, this government has added 140 net new nurses to the health care system. As part of the three-year collective agreement between the province and the New Brunswick Nurses’ Union, the Department of Health is continuing to fund the nursing recruitment and retention committee and is completing commitments made under the forgivable loan program targeted at graduated nurses for hard-to-recruit areas.

Health funding to medical education programs is increased by 9.9% this year, over last year’s

revised estimates. This government has brought an Anglophone medical education program to Saint John. This increase includes $2.5 million for the ongoing funding of the Dalhousie residency program. In addition, we have committed almost $5 million of capital funding to accommodate the medical education teaching program just mentioned.

As you know, the budget of the Department of Health also comprises a significant proportion of the government’s overall budget. The centrepiece of that overall budget is the largest onetime tax reduction ever introduced in New Brunswick—the largest. It is groundbreaking to have a plan that gives people, including physicians and health care workers of all professions, and businesses, including health care companies, an incentive to be here in New Brunswick. Our government has made excellent progress toward sustainability in our health care system.

(Interjection.)

**Hon. Mr. Murphy**: You can hold your applause until the end.

(Interjection.)

**Hon. Mr. Murphy**: Thank you very much, member for Rothesay. I do not want her to stand up to applaud. Applause is enough.

Certaines de nos importantes réalisations depuis octobre 2006 comprennent l’ajout de 114 nouveaux médecins et de 140 nouvelles infirmières dans le système de soins de santé, plus de 50 infirmières praticiennes exerçant partout dans la province, la poursuite contre les sociétés productrices de tabac et les restrictions sur la vente de cigarillos ainsi que l’interdiction de fumer dans les véhicules, l’établissement de six nouveaux centres de santé communautaires, la restructuration des régies régionales de la santé, la mise sur pied et l’amélioration continue d’Ambulance Nouveau-Brunswick et la création du Conseil du Nouveau-Brunswick en matière de santé et de l’agence FacilicorpNB. Ces réalisations sont remarquables.

Un rapport publié récemment par Corporate Research Associates indiquait que, de tous les

Canadiens de la région de l’Atlantique, les Néo-Brunswickois se disaient les plus satisfaits de leur système de soins de santé et encore plus de Néo-Brunswickois se disaient plus satisfaits de leur système de santé cette année par rapport à l’année dernière.

This shows the largest increase in satisfaction with the health care facilities and treatments in New Brunswick by people who have used them, since records began. It went from 78%, when we came to power, to 85%. It is the biggest jump, and we have the most satisfied clients in Atlantic Canada.

Il est évident que nous avons réalisé d’importants progrès ; toutefois, il reste beaucoup de travail à accomplir en vue d’assumer la pérennité du système de soins de santé au Nouveau-Brunswick.

En 2009-2010 et par la suite, notre gouvernement poursuivra son travail tout en favorisant la relance économique du Nouveau-Brunswick tout en assurant que la province pourra atteindre son objectif d’autosuffisance.

There are many great accomplishments in the Department of Health and the health care system of New Brunswick, which are all advanced by those who work within the system and who have risen to the occasion. We have much to rejoice about in our health care system. If there are any questions, we are available to answer them. If there are no questions, we can proceed to the vote on the budget.