Council supports research in health sciences in Canadian universities and affiliated institutions.

In the health and welfare department, an integrated program protects the public against unsafe foods, drugs, cosmetics, medical and radiation-emitting devices, harmful microbial agents and technological and social environments, environmental pollutants and contaminants of all kinds, and fraudulent drugs and devices.

The health services and promotion branch administers federal aspects of Canada's two major health programs, hospital and medical insurance; supports health care delivery system and resource development; undertakes health promotion; and both supports and conducts research.

## 5.2.5 Provincial and local health services

Regulation of health care, operation of health insurance programs and direct provision of some specialized services rest with the provincial governments; some health responsibilities are delegated to local authorities. Although provinces generally assign primary responsibility for health to one department, the distribution of function varies. Some provinces have combined health and social services within the same department. Others maintain liaison between departments responsible for these related services.

In a number of provinces, health insurance programs are administered by semiautonomous boards or commissions, or by a separate department. Some report directly to a minister of health; others are under the jurisdiction of a deputy minister. Several provincial health insurance programs are operated directly by health departments.

In each province both institutional and ambulatory care for tuberculosis and mental illness are provided by an agency of the department responsible for health, with increasing attention to preventive services. Programs related to other particular health problems such as cancer, alcoholism and drug addiction, venereal diseases and dental conditions have been developed by government agencies, often in co-operation with voluntary associations. A number of provincial programs serve specific population groups such as mothers and children, the aged, the needy and those requiring rehabilitation.

Environmental health, involving education, inspection and enforcement of standards, is frequently shared by health departments and other agencies.

Public health or community health units are among the most decentralized. Some are responsible for local health education, school health and organized home care. Although local and regional involvement in health services has been concentrated in hospital planning and some public health aspects, several provinces have inaugurated district and regional boards.

## 5.3 Summary of provincial plans

This review of provincial health insurance plans is a summary for general information only, and is not an official description of details of the programs. It presents the main features of the plans as at September 1979. Precise current information is available from the provincial agencies responsible for administration of the plans. Provinces are listed from east to west across Canada.

**Newfoundland.** Provincial hospital and medical care insurance plans are distinct entities. The hospital insurance plan is administered by the health department and the provincial medical care plan is administered by the Medical Care Commission which is responsible to the minister of health. Both are non-premium plans covering all eligible residents. Benefits are limited to the insured services of the national hospital insurance and medical care programs.

There is an authorized charge for in-patient ward and preferred accommodation services in general and allied special hospitals of \$3 a day to a maximum of 15 days. There are exemptions from these charges for those re-admitted for the same illness within 60 days (cumulative charge \$45) and patient transfers within 15 days (cumulative charge \$45). Exemptions are also made for patients of 65 years and over and for patients certified by the social services department as being unable to pay.