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Bill 133

**An Act to provide for the development
of a health care worker support strategy respecting honours,
employment, retention, optimization and empowerment
and to make related amendments**

Mr. A. Shamji

Private Member's Bill

1st Reading June 1, 2026

2nd Reading

3rd Reading

Royal Assent



EXPLANATORY NOTE

The Bill enacts the *Health Care Honours, Employment, Retention, Optimization and Empowerment Strategy Act, 2026*. The Act requires the Minister of Health to develop and publish a health care worker support strategy. The necessary elements of the strategy are set out.

Provisions respecting reviews and reporting on the strategy are included. A financial penalty is set out if the Minister of Health fails to meet a deadline under this Act. Related regulation-making powers are provided.

The Act also amends the *Public Hospitals Act* to increase the maximum term of appointments to the medical staff of a hospital from one year to three years.

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His Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

Definitions

1 (1) In this Act,

“health care setting” means any location in which clinical care is provided to a patient, and may include the patient’s home; (“milieu de soins de santé”)

“health care worker” means an individual who provides services in a health care setting that directly impact patient clinical care; (“travailleur de la santé”)

“high-risk environment” has the meaning set out in the regulations; (“milieu à risque élevé”)

“Minister” means the Minister of Health or such other member of the Executive Council as may be assigned the administration of this Act under the *Executive Council Act*; (“ministre”)

“Ministry” means the ministry of the Minister; (“ministère”)

“prescribed” means prescribed by the regulations; (“prescrit”)

“regulations” means the regulations made under this Act; (“règlements”)

“strategy” means the health care worker support strategy required by subsection 2 (1). (“stratégie”)

Services that directly impact patient clinical care

(2) For the purposes of the definition of a “health care worker”, a service provided by an individual directly impacts patient clinical care if it is provided,

- (a) by the individual to a patient to support the patient’s clinical care; or
- (b) within a health care setting to support a patient’s clinical care, even if it does not require the individual to have an encounter with the patient.

Health care worker support strategy

2 (1) The Minister shall, on or before the day that is six months after the day on which this Act receives Royal Assent, develop and publish a health care worker support strategy respecting honours, employment, retention, optimization and empowerment that contains the contents specified in subsection (2).

Elements

(2) The strategy must contain at least the following elements:

- 1. A framework to collect the following statistics and to ensure that the statistics are publicly accessible and updated on at least an annual basis:

- i. Recruitment and attrition data on the health care work force, broken down by health care profession, health care setting, age and gender.
 - ii. Current and projected health care worker vacancies, which must be presented in a manner that will assist health care organizations and regions in planning for the vacancies and attracting health care workers to areas of high need.
2. A plan to conduct and publish the results of an annual survey of health care workers that assesses their job satisfaction, well-being, mental health, burnout risk, prevalence of burnout and job safety, which may be conducted through,
 - i. representative sampling, or
 - ii. a whole population survey conducted by the Minister or, if appropriate, the Minister acting in co-ordination with the health profession colleges or other regulatory bodies.
3. A mechanism to ensure that the data collected under paragraphs 1 and 2 inform actions that are directed towards ensuring safe staffing levels in health care settings.
4. A timeline for the Premier, the Minister or a delegate of the Minister to formally apologize on behalf of the Government of Ontario for unconstitutionally breaching collective bargaining rights by introducing the *Protecting a Sustainable Public Sector for Future Generations Act, 2019* and to provide a public re-affirmation of their commitment to uphold the collective bargaining rights of health care workers.
5. A plan to implement a system that recognizes the contributions, sacrifices and accomplishments of health care workers, which must include the following:
 - i. The recognition of a Health Professionals' Week during the third week of June in each year.
 - ii. The introduction of the following two new provincial honours and distinctions:
 - A. The Exemplary Service Award, which is to be presented to health care workers who have completed 20 or more years of service and have performed their duties in a manner that exemplifies good conduct, industry and efficiency.
 - B. The Health Care Worker Distinguished Conduct Medal, which is to be awarded to health care workers who have displayed exceptional courage, heroism, sacrifice or service that,
 1. is conspicuously above and beyond the standard or duty of care, as defined by professional or regulatory standards and by comparison with peers,
 2. has had a profound impact to patients or society, and
 3. has brought honour to their respective profession.
6. A plan to ensure the following:
 - i. The timely completion by the Minister of Health and the Minister of Finance of negotiations and retroactive payments for the wages that were unconstitutionally limited by the *Protecting a Sustainable Public Sector for Future Generations Act, 2019*.
 - ii. Progress towards wage parity for health care workers within the public system across the home care, community care, long-term care, primary care and acute care settings, with a particular focus on the need for fair compensation of health care workers employed in home care who need to travel between different sites.
 - iii. Measures to ensure wages are raised to competitive levels for all health care workers.
 - iv. Unrestricted access to good-faith collective bargaining by unionized health care workers.
7. An examination of novel approaches to employing health care workers to achieve greater worker job satisfaction and to improve the long-term sustainability of the health care sector, including consideration of the following options:
 - i. A provincial retirement compensation scheme for health care workers that provides options for phased retirements and that is designed to attract retired health care workers to return to their practice.
 - ii. Maximum patient-provider ratios to address unsafe, inconsistent and suboptimal staffing levels in health care settings.
 - iii. Alternative employment models that,
 - A. allow greater flexibility in working hours and locations, and
 - B. reduce barriers for health care workers to maintain their employment.

8. A plan to establish a program to promote fair and predictable employment within the public health care system, particularly in those regions with the greatest need, through a publicly funded and led incentive program designed to retain health care workers in underserved regions, such as northern and rural communities.
9. A plan for implementing the following mental health care measures:
 - i. Dedicated crisis lines and pathways for therapy that are fully funded by the Ontario Health Insurance Plan to address the unique needs and challenges of health care workers.
 - ii. Measures to encourage the Minister of Labour to amend the *Workplace Safety and Insurance Act, 1997* to provide that specified categories of mental illness and burnout must be treated as having presumptively arisen in the course of the health care workers' employment, based on public consultations with health care workers, health care unions and occupational health and disability specialists.
 - iii. A study to examine the causes of, and risk factors for, mental illness and burnout that are distinct to health care workers in Ontario.
10. A plan to establish a study into the impact of COVID-19 on health care worker staffing and its long-term, ongoing impacts on staffing.
11. A plan to establish the following workplace requirements for health care workers:
 - i. Standards for ambient temperature and humidity in clinical environments that meet or surpass the ambient temperature and humidity standards in the document entitled "Occupational Health and Safety Directive", prepared by the National Joint Council and dated March 1, 2022, or any later version of that document that is prescribed.
 - ii. Standards requiring access to water, purchasable food and secure, comfortable spaces for breaks, eating and sleeping, where sleeping is required, along with secure, convenient and ample storage for personal belongings.
 - iii. Safe and secure parking that is accessible during all times of the day for health care workers and that is provided to them at no additional cost.
 - iv. Minimum standards for safety equipment, personal protection and self-defence education that must be provided by the employer to all health care workers who work in high-risk environments.
 - v. Minimum standards for protecting health care workers from threats, assaults and abuse, including by,
 - A. requiring mandatory reporting on prescribed classes of criminal acts, and
 - B. advocating to establish a federal and interprovincial task force to explore Criminal Code reform to address violence against health care workers.
 - vi. Assignment of peace officers to high-volume emergency departments and other high-risk clinical environments, where appropriate, in accordance with the prescribed standards.
12. A plan to ensure fair, consistent and inclusive recruitment and promotion practices with a view to ensuring equal opportunity, fair compensation and the elimination of discrimination in the health care work force.
13. An education plan to ensure that health care workers have opportunities to expand their skills, knowledge and expertise without undue burden and that enables employers to offer protected time for independent learning or supervised training programs.
14. Measures to reduce the administrative burden of employment in health care settings, such as streamlining employment requirements, mandating reciprocal recognition of clinical privileges, standardizing orientation training and implementing measures to ease the institutional burden and requirements that relate to the scrutinization of health care worker training or credentials.
15. Any other prescribed matter pertaining to improvements to the health, well-being or safety of health care workers.

Review of strategy

(3) On or before the fourth anniversary of the day this Act receives Royal Assent and every four years after that, the Minister shall review the strategy and make any amendments to the strategy that the Minister considers necessary to ensure that the strategy best meets its stated aims.

Consultation

- (4) Before the Minister can make the initial strategy and before every review of the strategy,
- (a) the Standing Committee on Social Policy, or another standing or select committee of the Assembly, must hold public hearings into the proposed strategy or amendment, subject to any recommendations provided by the Committee; and
 - (b) the Minister must consider whatever comments and submissions that members of the public have made on the proposed strategy or amendment and, if the Minister determines it to be appropriate, amend the proposal accordingly.

Strategy to be public

(5) The Minister shall ensure that the strategy and any amended strategy are published on a website of the Government of Ontario.

Report to the Assembly on payments

3 Within one month after the day this Act receives Royal Assent, the Minister of Health shall table a report in the Assembly on the progress the Minister has made in ensuring that all retroactive payments for the amounts that were unconstitutionally limited by the *Protecting a Sustainable Public Sector for Future Generations Act, 2019* have been disbursed to health care workers.

Financial penalty for missed deadline

4 (1) If the Minister does not meet a deadline under this Act, the following rules apply:

1. The Minister shall pay into the Consolidated Revenue Fund a penalty equal to 10 per cent of the annual salary payable to the Minister under subsection 3 (1) of the *Executive Council Act*.
2. The Premier shall pay into the Consolidated Revenue Fund a penalty equal to 10 per cent of the annual salary payable to the Premier under subsections 3 (1) and (2) of the *Executive Council Act*.

Timing of payment

(2) The Minister and the Premier shall make the payments required under subsection (1) within 30 days after the deadline that was not met.

Personal payment

(3) An amount payable under this section shall be paid personally and shall not be paid or reimbursed, directly or indirectly, from the Consolidated Revenue Fund.

Regulations

5 (1) The Lieutenant Governor in Council may make regulations respecting any matter necessary or advisable to carry out effectively the intent and purpose of this Act and, without limiting the generality of the foregoing, may make regulations,

- (a) prescribing anything that is referred to in this Act as being prescribed;
- (b) governing the implementation of the strategy;
- (c) defining the term “high-risk environment” for the purposes of this Act.

Consultation before making certain regulations

(2) The Lieutenant Governor in Council shall not make any regulation under clause (1) (c) unless,

- (a) the Minister has consulted with health care workers, health care unions and occupational health and disability specialists on the proposed regulation; and
- (b) the Minister has considered whatever comments and submissions that the occupational health specialists have made on the proposed regulation and has reported to the Lieutenant Governor in Council on what, if any, changes to the proposed regulation the Minister considers appropriate.

Public Hospitals Act

6 Subsection 37 (2) of the *Public Hospitals Act* is amended by striking out “one year” at the end and substituting “three years”.

Commencement

7 This Act comes into force on the day it receives Royal Assent.

Short title

8 The short title of this Act is the *Health Care Honours, Employment, Retention, Optimization and Empowerment Strategy Act, 2026*.