

Legislative  
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# SELECT COMMITTEE ON EMERGENCY MANAGEMENT OVERSIGHT

## TENTH INTERIM REPORT

1<sup>st</sup> Session, 42<sup>nd</sup> Parliament  
70 Elizabeth II

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The Honourable Ted Arnott, MPP  
Speaker of the Legislative Assembly

Sir,

Your Select Committee on Emergency Management Oversight has the honour to present its Report and commends it to the House.

Daryl Kramp, MPP  
Chair of the Committee

Queen's Park  
June 2021



# SELECT COMMITTEE ON EMERGENCY MANAGEMENT OVERSIGHT MEMBERSHIP LIST

1<sup>st</sup> Session, 42<sup>nd</sup> Parliament

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## **INTRODUCTION**

The Select Committee on Emergency Management Oversight is pleased to present its tenth interim report. The report summarizes the testimony and discussion from the Committee hearing of April 7, 2021.

In accordance with the Committee's terms of reference, the Solicitor General for Ontario appeared as the Premier's designate to provide an oral report and respond to Committee questions.

It should be noted that the Solicitor General's testimony addressed the situation in the province as of April 7, 2021—four days after the government invoked emergency measures relating to the COVID-19 pandemic known as the Emergency Brake. Additional public health measures took effect on April 8, following the declaration of a third provincial emergency and a stay-at-home order. This report does not reflect these subsequent developments.

Further interim reports will follow. The Committee's final report will be a compilation of all interim reports.

To review the Solicitor General's full remarks and all questions posed by Committee members, reference should be made to the official *Hansard* transcript.

## **COMMITTEE MANDATE**

On July 13, 2020, the government House leader introduced a motion to appoint a Select Committee on Emergency Management Oversight. Following debate, the motion carried on July 15, 2020. The Committee was appointed to receive oral reports from the Premier or his designate(s) on any extensions of emergency orders by the Lieutenant Governor in Council related to the COVID-19 pandemic and the rationale for those extensions.

Under the *Reopening Ontario (A Flexible Response to COVID-19) Act, 2020*, the Premier, or a Minister to whom the Premier delegates the responsibility, is required to appear before and report to a standing or select committee designated by the Assembly, at least once every 30 days. This report is to address

- (a) orders that were extended during the reporting period; and
- (b) the rationale for those extensions.

Hearings consist of a report from the Premier or his designate(s), followed by questions from the Committee. The Committee is authorized to release interim reports summarizing each hearing.

The Committee's mandate is reproduced in full in Appendix A to this report.

## REPORT FROM THE SOLICITOR GENERAL

### Opening Remarks

Ontario's Solicitor General, the Honourable Sylvia Jones, appeared before the Committee on April 7, 2021.

The Solicitor General prefaced her opening remarks with the following observation:

In a one-on-one battle between COVID-19 and the vaccine, the vaccine will ultimately win out, but we're not there yet. The recent numbers of COVID cases are concerning, but much progress has been made since this committee last met.

At the heart of this progress has been the steady growth of vaccine distribution across the province since the end of 2020. At the time of the Committee's meeting in December, the vaccine rollout had just begun. When the Committee met in January, more than 150,000 doses had been administered. That number rose to more than 400,000 in February, and reached close to 950,000 in March. As of April 7, more than 2.5 million vaccines had been administered in Ontario. These numbers, the Solicitor General said, demonstrate that "the only thing limiting Ontario's capacity to vaccinate is supply."

The Solicitor General also noted that, as of the date of her appearance before the Committee, approximately 700 pharmacies across the province, as well as mass vaccination centres and primary care providers, were offering vaccinations.

At the same time, however, the Solicitor General said that the province's COVID-19 case numbers per 100,000 remain "too high," and that the faster-spreading variants of the coronavirus are putting new pressures on an "already strained" health care system and its workers.

Accordingly, the government, in consultation with the Chief Medical Officer of Health and other health experts, made "the difficult but necessary decision" to invoke the province-wide Emergency Brake on April 3, 2020. The Emergency Brake has the effect of pausing the use of the colour-coded zones within the province's COVID-19 Response Framework ("the framework").

Technically speaking, the Emergency Brake was applied through amendments to Ontario Regulation 363/20 (Stages of Reopening), made under the *Reopening Ontario Act*, which reclassified the province's 34 public health units into the Shutdown Zone of Stage 1. The amendments also implemented several time-limited public health and workplace measures.

These measures, described by the Solicitor General as more stringent than the rules stipulated under the framework's Grey Lockdown Zone, include

- prohibiting indoor organized public events and social gatherings and limiting outdoor organized public events and social gatherings to five

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persons (with exceptions for gatherings of members of the same household and gatherings of members of one household with one other person who lives alone);

- restricting in-person shopping in all retail settings, including a 50% capacity limit for supermarkets, grocery stores, convenience stores, indoor farmers' markets, other stores that primarily sell food, and pharmacies, and a 25% limit for all other retail, including big-box stores;
- prohibiting personal care services;
- prohibiting the use of indoor and outdoor sports and recreational fitness facilities, with limited exceptions;
- prohibiting indoor and outdoor dining, but allowing restaurants, bars, and other food or drink establishments to operate by takeout, drive-through and delivery only;
- requiring day camps to close; and
- limiting weddings, funerals, and religious services, rites or ceremonies to 15% occupancy per room indoors and to the number of individuals that can maintain two metres of physical distance outdoors.

At the time of the Solicitor General's presentation to the Committee, the Emergency Brake was expected to remain in place until at least May 1, 2021.

The Solicitor General also noted that in the coming weeks the Ministry of Health would be reviewing the criteria used to make decisions about the classification of health units into the various colour-coded zones of the framework. Among other things, the Ministry would be considering adding new indicators, such as vaccination coverage and prevalence of variants of concern within a zone, which will inform future decisions regarding the framework.

### **Amended Orders**

Continuing her update, the Solicitor General reviewed amendments to orders under the *Reopening Ontario Act* that had been made since the Committee last met on March 8, 2021.

Among other considerations, these amendments respond to concerns about the effect of public health restrictions on the well-being of members of various faith communities. Other changes, including new capacity limits and other restrictions applicable to restaurants, bars, and other food and drink establishments, were made to support the economic recovery.

The following amendments will apply when the emergency brake period ends and the province returns to the framework:

- *O. Reg. 82/20 (Rules for Areas in Stage 1)* — amended to increase indoor and outdoor capacity for a wedding, funeral, or religious service, rite or ceremony in the Shutdown Zone and the Grey Lockdown Zone. For indoor gatherings, capacity is increased from 10 people to 15% occupancy per room; for outdoor events (in all zones), capacity is increased from 10 people to the number of individuals that can maintain two metres of physical distance.
- *O. Reg. 364/20 (Rules for Areas in Stage 3)* — amended to increase the limits on indoor dining in the Orange Zone to 50% of an establishment's capacity, to a maximum of 100 patrons (whichever is the lesser), subject to physical distancing protocols. In addition, new seating restrictions were added, based on members of a household, with exemptions for caregivers and people living alone. Establishments would also be required to post a sign, visible to the public, stating their capacity limit. In the Yellow Zone, new exceptions to seating restrictions provide that the limit of six people per table does not apply to members of the same household.
- *O. Reg. 363/20 (Rules for Areas in Stage 2)* — amended to increase indoor dining capacity in the Red Zone to 50% of an establishment's capacity or 50 patrons (whichever is the lesser), subject to physical distancing requirements. As with the Orange Zone, new seating restrictions are based on members of a household, with exemptions for caregivers and people living alone. Establishments would also be required to post a sign visible to the public stating their capacity limit. Stand-alone restaurant patios in the Grey Zone, such as marinas, would be permitted to open for outdoor dining, subject to restrictions.
- *O. Reg. 82/20 (Rules for Areas in Stage 1)* — amendments permit outdoor fitness classes, training sessions for team and individual sports, and personal training to open in the Grey Zone for up to 10 patrons; these activities are subject to three-metre physical distancing rules; team games or scrimmages continue to be prohibited.

## **Extended Orders**

The Solicitor General then reviewed orders under the *Reopening Ontario Act* that had not been amended since the Committee last met and that were set to expire on April 20, 2021, unless extended. Orders that were to be extended are listed below in numerical order and with a brief statement of the rationale for extension.

- *O. Reg. 74/20 (Work Deployment for Health Services Providers)* — This order authorizes specified health service providers, within the meaning of the *Connecting Care Act, 2019*, to take reasonably necessary measures with respect to work deployment and staffing to respond to, prevent, and alleviate the outbreak of COVID-19, including redeploying staff to other health service providers, and to assist long-term-care homes and

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retirement homes. The order is necessary to address surgical backlogs as well as to alleviate health human resource shortages within hospitals and other health care service providers.

- *O. Reg. 76/20 (Electronic Service)* — This order allows document service in legal matters to be handled electronically instead of in person. The order is needed to continue access to justice while reducing unnecessary contact between individuals in order to slow the spread of COVID-19.
- *O. Reg. 77/20 (Work Deployment Measures in Long-term Care Homes)* — This order gives long-term care homes greater flexibility to identify staffing priorities, deal with staff shortages, and address outbreaks. It remains necessary because flexibility to recruit and reassign staff is crucial for preventing and managing outbreaks, and ensuring stability and quality in long-term-care homes.
- *O. Reg. 95/20 (Streamlining Requirements for Long-term Care Homes)* — This order provides flexibility and a reduced administrative requirement for long-term-care homes so that they can respond quickly to the care and safety needs of their residents.
- *O. Reg. 98/20 (Prohibition on Certain Persons Charging Unconscionable Prices for Sales of Necessary Goods)* — This order is in place so that consumers can continue to file complaints with the Ministry of Government and Consumer Services about price gouging with respect to the necessary goods set out in the order, some of which remain in short supply.
- *O. Reg. 114/20 (Enforcement of Orders)* — This order ensures a person is required to identify themselves by providing their name, date of birth, and address to a police officer or other provincial offences officer if the officer has reasonable and probable grounds to believe that the individual has committed an offence under section 10(1) of the *Reopening Ontario Act*. Without disclosure of this identifying information, provincial offence officers would be unable to effectively enforce orders under the Act.
- *O. Reg. 116/20 (Deployment Measures for Boards of Health)* — This order allows boards of health under the *Health Protection and Promotion Act* to take, with respect to work deployment and staffing, any reasonably necessary measures to respond to, prevent and alleviate the COVID-19 pandemic, including redeploying staff within different locations in or between facilities at the board of health.
- *O. Reg. 118/20 (Work Deployment Measures in Retirement Homes)* — This order allows flexibility for retirement home operators to recruit and reassign staff. It remains crucial for helping to prevent and manage outbreaks and to ensure stability and quality in resident care.

- *O. Reg. 121/20 (Service Agencies Providing Services and Supports to Adults with Developmental Disabilities and Service Providers Providing Intervenor Services)* — This order allows developmental service agencies and intervenor service providers to continue to have the authority and flexibility they need to redeploy staff to support critical services for vulnerable individuals.
- *O. Reg. 129/20 (Witnessing of Wills and Powers of Attorney)* — This order allows the witnessing of wills and powers of attorney to be facilitated virtually through technology. Many are still relying on this order to ensure wills and powers of attorney can be safely executed, as there are no alternative processes available.
- *O. Reg. 132/20 (Use of Force and Firearms in Policing Services)* — This order allows chiefs of police to authorize certain members of a police service to perform duties involving use of force and to carry a firearm if the member has successfully completed the required training within the previous 24 months of this authorization instead of the annual training required under the *Police Services Act*.
- *O. Reg. 141/20 (Temporary Health or Residential Facilities)* — This order exempts the construction or conversion of a building from certain requirements of the *Building Code Act, 1992*, the *Planning Act*, and the *City of Toronto Act, 2006*, where the building will be used as a temporary health or residential facility for the purposes of responding to the emergency or for health care or sleeping accommodation by or on behalf of health services providers, governments, and municipalities. There is a continued need for this provision to be in place to enable the province to respond to COVID-19 care and residential space needs.
- *O. Reg. 145/20 (Work Deployment Measures for Service Agencies Providing Violence Against Women Residential Services and Crisis Line Services)* — This order enables residential violence against women and anti-human-trafficking service providers as well as crisis lines under the Violence Against Women Support Services program to continue to have the authority and flexibility they need to redeploy their staff to support critical services for survivors of violence against women and victims of human trafficking.
- *O. Reg. 146/20 (Limiting Work to a Single Long-term Care Home)* — This order reduces the movement of employees between long-term care homes to minimize the risk of COVID-19 transmission to other homes or health care settings. The order is still necessary because limiting the number of staff moving across multiple settings is an important component of infection prevention.

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- *O. Reg. 154/20 (Work Deployment Measures for District Social Services Administration Boards)* — This order provides district social services administration boards flexibility to address staffing shortages and ensure personnel are being deployed to critical areas of need to respond to COVID-19.
  - *O. Reg. 156/20 (Deployment of Employees of Service Provider Organizations)* — This order authorizes a local health integration network (LHIN) to request that a contracted service provider organization provide health care and related social services in a setting identified by the LHIN and authorizes the LHIN to fund those services. The need for the order is based on ongoing staffing issues at long-term care homes and retirement homes.
  - *O. Reg. 157/20 (Work Deployment Measures for Municipalities)* — In response to requests from municipalities, this order was issued to provide flexibility to redeploy staff, and to ensure front-line service continues to be delivered in critical areas of need. The continuity of service delivery at the municipal level is critical to the health and safety of Ontario's communities and efforts to curb the spread of COVID-19.
  - *O. Reg. 158/20 (Limiting Work to a Single Retirement Home)* — Similar to the order for long-term-care homes, this order remains necessary because limiting retirement home staff from working in other retirement homes, long-term care homes, and health care settings is an important component of infection prevention and control practices in retirement homes.
  - *O. Reg. 163/20 (Work Deployment Measures for Mental Health and Addictions Agencies)* — This order authorizes mental health and addictions agencies to take, with respect to work deployment and staffing, any reasonably necessary measures to respond to, prevent, and alleviate the outbreak of COVID-19, and to maintain health human resource flexibility.
  - *O. Reg. 177/20 (Congregate Care Settings)* — The order has been extended so that staff movement across multiple employers in developmental services, intervenor services, violence against women and anti-human trafficking sectors will continue to be limited. This infection prevention measure protects staff and vulnerable clients.
  - *O. Reg. 192/20 (Certain Persons Enabled to Issue Medical Certificates of Death)* — This order allows registered nurses appointed as coroner investigators to complete medical certificates of death instead of a physician or a nurse practitioner, thereby giving physicians and nurse practitioners more time to focus on patient care during the pandemic.
  - *O. Reg. 193/20 (Hospital Credentialing Processes)* — This order authorizes the board of a hospital, if it is reasonably necessary to respond to, prevent

and alleviate the outbreak of COVID-19, to identify hospital staff needs and priorities and appoint a physician, dentist, midwife, or extended class nurse to any department of the hospital and determine the nature and scope of privileges assigned to them, despite any applicable credentialing processes.

- *O. Reg. 195/20 (Treatment of Temporary COVID-19 Related Payments to Employees)* — The order ensures that any temporary COVID-related payments received by employees in relation to work performed while the order is in effect are excluded from the maximum increase in compensation set out in the *Protecting a Sustainable Public Sector for Future Generations Act* during a moderation period. This includes the temporary wage enhancements for personal support workers and direct support workers currently in place until June 30.
- *O. Reg. 210/20 (Management of Long-term Care Homes in Outbreak)* — This order enables the director, under the *Long-Term Care Homes Act*, to order the placement of interim management to effectively protect residents from COVID-19. Continuing the management order allows the director to swiftly take appropriate action to reduce or alleviate harm to residents and staff in homes that are in outbreak.
- *O. Reg. 240/20 (Management of Retirement Homes in Outbreak)* — This order ensures measures are in place to allow the Retirement Homes Regulatory Authority to act quickly in case of outbreak should an operator be unable or unwilling to manage operations of the home.
- *O. Reg. 241/20 (Special Rules re Temporary Pandemic Pay)* — The order helps facilitate the implementation of temporary pandemic pay and provides clarity to employers and employees regarding eligibility for pandemic pay.
- *O. Reg. 345/20 (Patios)* — This order helps municipalities quickly pass or make changes to temporary use bylaws, allowing restaurants and bars to create or extend their patios to facilitate appropriate distancing and maintain public health measures.

Concluding her update to the Committee, the Solicitor General acknowledged the sacrifices individuals have made over the past year to protect the health and safety of all Ontarians, and stressed that continued collective action, including vaccines, personal protection practices such as mask wearing and physical distancing, as well as public health measures implemented through emergency orders, “remain our best defence to stem the rise of variants of concern and minimize the impact of the third wave.”



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## DISCUSSION

In keeping with the Committee's mandate, the Solicitor General responded to questions from the Committee.

- *Communication* — **Question:** Constituents say that government decision-making and communication during the pandemic has lacked clarity and consistency. For example, it is not clear to the average person why lockdown measures change from week to week, apparently against the advice of the government's own experts. What steps is the government taking to improve the way it communicates decisions? **Solicitor General's Response:** People "absolutely" have a right to be frustrated; however, it must be kept in mind that, given the rapidly evolving nature of the pandemic, we need to be able to pivot and act quickly to changing conditions.
- *Access to small business supports* — **Question:** MPP-sponsored surveys indicate that up to 65% of small businesses have had difficulty accessing provincial support programs. One source of frustration, for example, is the apparent inconsistency in who qualifies for assistance. Is the government taking steps to clarify eligibility for and access to these programs? **Solicitor General's Response:** MPPs are encouraged to continue to assist constituents with accessing these supports. At the same time, the government recently enhanced support for small businesses, including substantially increasing the small business support grant and ensuring that people experiencing difficulties using the province's online portal also have access to information through phone operators.
- *Additional support for small businesses* — **Question:** Public health measures have had a significant impact on businesses across the province. Is the government offering any additional support at this time for these businesses? **Solicitor General's Response:** The spring budget announced a second round of the Ontario Small Business Support Grant that was first introduced in January 2021. Recipients of support during the first round will automatically receive support equal to the amount of their first grant; they do not need to reapply. In addition, business owners who had not previously applied for assistance were given until March 31, 2021, to submit applications.
- *Equal treatment of businesses* — **Question:** A perception within the business community is that small businesses have been treated unfairly during the pandemic. What steps is the government taking to ensure that businesses of all types are treated fairly? **Solicitor General's Response:** Although we could have restricted all retail operations, we had to consider the unintended consequences of doing so, including potential shortages and longer lineups. Accordingly, the focus was very much on essential goods and services (groceries, pharmacies), so that we do not discriminate

on the basis of size. More recently, in consultation with the provincial science table, restrictions have taken the form of percentage capacities, which is a way of allowing smaller businesses to be able to continue to offer in-person services.

- *Safe schools* — **Question:** What studies or other information does the government have to support its current policies on safety in schools during the pandemic? For example, is there a study that supports maintaining existing class sizes? **Solicitor General's Response:** In fact, the vast majority of schools are staying safe. The data shows that 98% of schools have had no outbreaks and have no positivity rate. Two or three health units have issued orders under the *Health Protection and Promotion Act* to address local conditions; however, it should be noted that the Medical Officers of Health for Peel, Wellington–Dufferin–Guelph, and Toronto agree that outbreaks are not originating in schools; rather, schools reflect what is happening within communities.
- *Vaccine supply* — **Question:** How does supply affect the province's ability to distribute vaccines? **Solicitor General's Response:** The short answer is that delays in supply are "incredibly disruptive." The province (through its portal) and public health units book appointments up to four weeks in advance. They do this, not because they have four weeks' worth of inventory, but because they have been assured that they are going to get a certain amount of vaccine within that time. When supplies do not arrive, as occurred last February, clinics have to cancel. For both the province and the health units this is a time-consuming exercise that requires large numbers of staff having to call individuals to cancel and reschedule appointments.
- *Vaccine rollout (general)* — **Question:** Ontario ranks seventh among provinces in terms of per capita vaccinations, and 10th when you include the territories. Is the government taking steps to address weaknesses in the province's rollout plan? **Solicitor General's Response:** The issue is largely one of supply. As we receive more vaccines, more people will be vaccinated. Yesterday alone, over 100,000 Ontarians received a vaccine. If supplies remain constant, 40% of Ontario adults will have been given a COVID vaccine by the end of April 2021. Public health units deserve credit for stepping up and getting this job done very effectively.
- *Vaccine rollout (essential workers)* — **Question:** Where do essential workers fall within the province's vaccination rollout plan? **Solicitor General's Response:** Similar to Phase 1, Phase 2 of the plan establishes a graduated process that covers a range of at-risk populations. Individuals who cannot work from home constitute one of the groups included in Phase 2. Other groups covered in Phase 2 include those with high-risk chronic conditions; for example, hemodialysis patients and organ donor recipient patients will be eligible for vaccination at an early stage within the Phase 2

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process. It should be emphasized that the province's vaccination policy follows the advice of ethicists, clinicians, and physicians—these were not political decisions.

- *Vaccine rollout (individuals eligible in earlier stages)* — **Question:** As we move into Phase 2 of the vaccine rollout, what happens to individuals who were eligible in Phase 1 but who may still be waiting to be vaccinated? **Solicitor General's Response:** Individuals who were eligible but did not receive a vaccination during an earlier phase (for example, adults 80 years of age and older in Phase 1) will still be vaccinated. People moving into long-term care homes will still be vaccinated before they move in; and those who become nurses or PSWs during a later stage will be vaccinated when they become health care professionals.
- *Vaccine rollout (teachers)* — **Question:** Will the government commit to vaccinating teachers and other frontline school staff on a priority basis? **Solicitor General's Response:** We will continue to follow the provincial rollout plan. Under Phase 2 of that plan, employees who cannot work from home are eligible for vaccination; that includes the vast majority of teachers.
- *Vaccine rollout (pharmacies)* — **Question:** The Kingston, Frontenac, Lennox and Addington health unit (KFLA) has consistently had one of the lowest COVID-19 infection rates in the province. Why was KFLA chosen to be one of the three health units for the pharmacy vaccine pilot project last March? And now that the program is expanding, why are pharmacies in the Sudbury area still waiting to receive vaccines? **Solicitor General's Response:** Technically speaking, the pharmacy vaccination program was never a pilot—it was based strictly on the limited amount of AstraZeneca vaccine initially delivered to the province. The first three health units were chosen following a consultation process and on the basis of their willingness to participate. More AstraZeneca arrived in Ontario over the Easter weekend. Some was delivered within 24 hours to GTA communities close to the distribution centre; for northern communities it will take a little longer, due to long distances. "I can assure you that those three pharmacies [in Sudbury] will be receiving their vaccine."
- *Vaccine rollout (primary care)* — **Question:** Where in Ontario are primary care practitioners administering vaccines? **Solicitor General's Response:** Eight health units in total were part of the initial rollout for primary care practitioners. These health units were selected, in part, on the basis of their willingness to work with practitioners; however, as with the pharmacy program, the main challenge is supply. Accordingly, the program will continue to roll out as vaccine becomes available.
- *Vaccine rollout (Jane-Finch)* — **Question:** Communities like Jane-Finch in Toronto also have been hard hit during this pandemic. Will the government

commit to ensuring that these populations receive not just equal access to vaccines, but also equitable access, to reflect the unequal impact of the pandemic on those communities? **Solicitor General's Response:** From the very beginning we have been working with public health units to make sure that high-risk neighbourhoods are a priority within the vaccine rollout. More recently, health units have been using a list of postal codes, developed over the course of a year of testing, to focus their efforts on high-risk areas within their respective jurisdictions.

- *Vaccine rollout (Peel)* — **Question:** Although Peel has been one of the worst-hit areas during this pandemic, it has “consistently” received less than its “fair share” of vaccines. For example, the region was not a part of the pharmacy pilot program announced last March. Is Peel being left behind in the vaccine rollout? **Solicitor General's Response:** Peel has not been left behind in terms of vaccine supply. Moreover, the province has been working closely with Peel Region to make sure it has an appropriate plan to get vaccines into high-risk neighbourhoods. With respect to the pharmacy pilot, there were, in fact, a number of pharmacies in south Peel that participated in the pilot. As we receive the second batch of AstraZeneca, Peel will have well over 50 pharmacies providing a vaccination portal, in addition to the mass immunization clinics that have been ongoing for many months.
- *Unused vaccines* — **Question:** According to some media reports, vaccines are “sitting in freezers.” Could the Solicitor General confirm or refute these reports? **Solicitor General's Response:** It is important to note that the vaccination booking system allows individuals to book appointments up to four weeks in advance. As a result, there will be “ebbs and flows,” including increases in vaccine inventory immediately following receipt of a shipment from the federal government; however, “I can assure this Committee that, as soon as it hits Ontario soil, [vaccines are] being repackaged and redistributed through the 34 public health units [and] the 700 pharmacies across Ontario to make sure that people have access to it as quickly as [possible].”
- *Johnson and Johnson vaccine* — **Question:** Health Canada approved the Johnson and Johnson vaccine in March 2021. When will it be coming to Ontario? **Solicitor General's Response:** We have received no indication from the federal government as to when it will be coming or how much will be coming to Canada, and subsequently Ontario.
- *Task Force briefings* — **Question:** Will the Solicitor General commit to having someone from the Vaccine Task Force (1) brief the Committee at or before the Committee's next meeting, and (2) brief non-government Members on a regular basis? **Solicitor General's Response:** I am a member of the Vaccine Task Force. The Minister of Health and I lead the

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task force, and I am here to brief the Committee and answer any of the tough questions you might have.

- *Paid sick days* — **Question:** A range of public health experts, backed by “clear science,” are saying that paid sick days are important to fighting the spread of COVID-19. Will the government commit to introducing a provincial paid sick leave plan? **Solicitor General’s Response:** It is important to remember that there is a federal plan that covers up to 20 sick days. Working with our federal partners, we have ensured that instead of a four-week delay, individuals will now have access to that support within three or four days.
- *Box stores and malls* — **Question:** The premier recently expressed surprise that large crowds have been attending big box stores and malls, even though it is the province’s rules that allow these businesses to stay open. Do the government’s rules favour big business over small business? **Solicitor General’s Response:** To a certain extent, this is a matter of personal responsibility. Since the onset of the pandemic, public health officials have been telling Ontarians about the importance of social distancing, wearing a mask, and being careful about gathering indoors. It is unfortunate that we continue to see large gatherings where people ignore that advice, but at the end of the day we all have a personal responsibility to protect ourselves and others.
- *Access to residents of long-term care and retirement homes* — **Question:** Phase 1 of the vaccine rollout was successful at reducing infection rates in the long-term care and retirement home sectors. Is the government considering revoking any of the emergency orders related to these sectors specifically? **Solicitor General’s Response:** Although there is quite naturally a strong desire to ease these restrictions, it must be kept in mind that death rates remain highest among those over the age of 60. Accordingly, the Minister of Long-Term Care is working with the science table to ensure that access to residents in these settings is permitted in a measured way that continues to protect those individuals.
- *Continued lockdown* — **Question:** What is the justification for continuing the lock down for the remainder of the population? **Solicitor General’s Response:** Applying the Emergency Break last week was, unfortunately, an indication of the numbers we were seeing in the broader community. As of today the number of people admitted to Intensive Care Units (ICUs) is about 510, which is the highest number we have seen during this pandemic. Moreover, the age of individuals being admitted to ICUs is decreasing.
- *Capacity limits (religious gatherings)* — **Question:** Faith communities have been supportive of recent changes that increased capacity limits in places of worship. Could you explain the basis for these decisions? **Solicitor**

**General's Response:** Most of the decisions concerning capacity are science-based. Among other things, this includes a square-footage calculation. We do consult, and we say, "Can you make this work? Is this reasonable within your faith community?" But at the end of the day, decisions are driven by science.

- *Following advice* — **Question:** Experts have been telling us for months to take certain measures, such as closing down non-essential businesses, yet it appears that we either do not follow that advice or delay following it. Can the minister explain? **Solicitor General's Response:** Responding to developments is not as easy as throwing a switch; sometimes we have to do things gradually. Nonetheless, the Emergency Brake has been an effective tool. For example, we responded within 24 hours to requests from the Sudbury and Thunder Bay health units and as a result the case numbers in those units have gone down.
- *Race-based data* — **Question:** We know that racialized people have higher rates of infection; however, it is not clear whether race-based data is being collected, as promised. **Solicitor General's Response:** To be clear, providing this information to public health officials or others administering vaccines is optional. Nonetheless, it should be noted that health units are using postal codes to target high-risk neighbourhoods and collect data. For example, the City of Toronto is using mobile, on-site vaccination sites and collecting data on the people vaccinated in high-risk areas. That data is being sent to the province.
- *Temporary farm workers* — **Question:** Farms that employ temporary foreign workers were a source of large outbreaks in previous waves of the pandemic. What is the province doing to ensure that these workers are being vaccinated? **Solicitor General's Response:** It should be stressed that outbreaks occur in all sorts of congregate living settings, including agricultural workers housed under the same roof, group homes, seniors' homes, and jails. A number of measures have been implemented with respect to temporary foreign workers specifically. For example, the Niagara health unit has set up clinics specifically for these workers. In addition, we will be administering first vaccines to temporary foreign workers as they arrive at Pearson airport. When they go to their workplaces, the local health unit will offer a second shot.

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## **APPENDIX A: TERMS OF REFERENCE\***

That a Select Committee on Emergency Management Oversight be appointed to receive oral reports from the Premier or his designate(s) on any extensions of emergency orders by the Lieutenant Governor in Council related to the COVID-19 pandemic and the rationale for those extensions; and

That the Committee shall have a membership of up to eleven Members, comprised as follows:

- Up to seven members of the Government party
- Up to three members of the Official Opposition
- Up to one Independent Member; and

That the House Leaders of each of the Recognized Parties shall indicate in writing to the Clerk of the House, their Party's membership on the Committee; and

That the Government House Leader, in consultation with the Independent Members, shall indicate in writing to the Clerk of the House, the Independent Member on the Committee; and

That the deadline for indicating Committee Membership with the Clerk of the House shall be Thursday, August 20, 2020; and

That the Committee shall meet at the call of the Chair as follows:

- Up to 30 minutes for the Premier or his designate(s) to make an opening statement
- Up to 60 minutes for Members of the recognized Parties to pose questions to the Premier or his designate(s) in 3 rounds of 10 minutes for each Party
- Up to 10 minutes for the Independent Member to pose questions to the Premier or his designate(s) in 2 rounds of 5 minutes each
- Report writing in closed session; and

That the Clerk of the Committee shall convene the first meeting of the Committee no later than Thursday, August 27, 2020 to elect a Chair and Vice-Chair of the Committee, but no Sub-committee shall be appointed; and

That for business conducted under this order of reference, the provisions of Standing Orders 38 (b), (c), and (d) and 134 (c) and (d) shall be suspended.

That the Committee is authorized to present interim reports summarizing each hearing to the House, or deposit interim reports with the Clerk if the Legislature is not in session; and

That the Committee's final report shall be a compilation of all interim reports; and

That the Committee shall be dissolved 30 days following the Government House Leader indicating in writing to the Speaker that the Committee is no longer required; and

That the Committee's final report shall be tabled in the House, or deposited with the Clerk if the Legislature is not in session, before the Committee is dissolved; and

That if the Committee fails to meet this deadline the cumulative interim reports shall be deemed to be the Committee's final report and deemed to be tabled on the date that the Committee is dissolved; and

That an Order shall be placed on the *Orders and Notices Paper* for discussion of the Final Report of the Select Committee on Emergency Management Oversight following its presentation to the House.

*\* Votes and Proceedings, July 15, 2020, 42nd Parliament, 1st Session*