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Speaker
Honourable Gary Carr
Clerk
Claude L. DesRosiers
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Exemplaires du Journal
The House met at 1330.

Prayers.

MEMBERS’ STATEMENTS

HEALTH CARE FUNDING

Mr Michael A. Brown (Algoma-Manitoulin): I want the Minister of Health to address the absolutely critical need for long-term-care beds in Algoma-Manitoulin. Not one bed has been built since this government has come to power.

Elliot Lake needs to have its allocation for beds met immediately. Before the last election, with much fanfare, the minister came to Elliot Lake and announced an inadequate allocation for beds in Elliot Lake, with promises that the number would be supplemented in the next round. It has not happened. It needs to happen. These beds were needed years ago.

Espanola needs and must have the 34 beds it requested. The proposal was rejected by the Minister of Health. The Minister of Health says in her letter, “The proposal submitted by the Espanola General Hospital was not among the highest-ranked in the Algoma service area”; the operative words are “Algoma service area.” Espanola, as all members of the House would know, is in the district of Sudbury.

What confidence can we have in a Minister of Health who believes that communities are in the wrong districts and believes that this could be a fair and equitable allocation of beds? Not one bed in the Sudbury district was allocated for the rural area. It is unacceptable.

FARM PRACTICES

Mr Ted Arnott (Waterloo-Welington): Ontario’s farmers are taking the initiative when it comes to being responsible stewards of our environment. This fact is clearly demonstrated by the efforts of farmers in my riding of Waterloo-Welington.

Mrs Deborah Whale, of Clovermead Farms in Alma, has recently brought to my attention a number of ways in which our farmers are being proactive in the implementation of environmentally sound farm practices. For example, there is the Environmental Farm Plan, a concept developed by the Ontario Farm Environmental Coalition, through which individual farmers are able to identify their strengths and weaknesses and outline a plan to improve their operations.

The rural water quality program is another strong example of farmers taking this kind of responsibility. This program provides financial assistance for practical measures that protect our valued water supply. It is a pleasure to report that this program is said to have had an impressive participation rate in Wellington county and in Waterloo region.

These environmental initiatives led by farmers, and others, like the baseline water well testing program, the nutrient management planning workshops for farmers, the grower pesticide safety course, and the establishment of the Ontario Farm Animal Council and the Ontario Farm Environmental Coalition, must be acknowledged by all members of this House for their inherent foresight and commitment to environmentally sustainable farming practices in Ontario.

Farmers are being proactive. However, I think they will be the first to admit that even more widespread knowledge, understanding and leadership are required to work towards a clean environment and thus a stronger future for Ontario’s farm families.

EDUCATION LEGISLATION

Mr Dwight Duncan (Windsor-St Clair): In a few short minutes this Legislature will have jammed through third reading of Bill 74, the so-called Education Accountability Act. This is another example of a government paying no heed to any of its critics. It didn’t listen to parents, it didn’t listen to teachers, it didn’t listen to principals, it didn’t listen to public boards of education; it has listened to absolutely nobody. We had a day and a half—not even a day and a half—of hearings on what can only be called some of the most draconian education legislation we’ve seen at least since Bill 160. But this government will be held accountable.

I want to say to members of this House, particularly members of the government, that the official opposition has listened to the parents, to the educators, to the boards of education, to the principals and to the supervisory staff, and we say that even though you will use your majority today to fundamentally undermine and further harm our education system, it will be the power of public opinion that puts a brake on you people.

You cannot continue to abuse this Parliament. You cannot continue to abuse your majority. We won’t let that happen. The third party won’t let it happen. Most import-
ant, the people of Ontario are fed up with your arrogance and the tactics you’re using against everyone in this province. You all ought to be ashamed of yourselves.

MARGARET EVE

Mr Bert Johnson (Perth-Middlesex): I rise in the Legislature today to pay tribute to OPP Sergeant Margaret Eve, who died on June 10, the first female OPP officer to die in the line of duty.

As many of you know, Sergeant Eve was remembered last week at a funeral in Chatham, which was attended by almost 6,000 people. Thousands of police officers from across Canada and the United States came to Chatham to pay their respects to their fallen comrade.

I’m also proud of the fact that the Solicitor General and our Premier were able to attend the funeral service.

Sergeant Eve is to be commended for her leadership and commitment to police service in Ontario and for contributing to the safety of our highways, our streets, our homes and our communities.

I also want to recognize Sergeant Eve, as she was originally from my riding of Perth-Middlesex. Sergeant Eve grew up on the family farm on Rural Route 2, St Paul’s, and was the daughter of Cornelius and the late Elizabeth Vink. She attended Downie Central public school and Stratford Northwestern Secondary School.

Margaret Eve went on to serve 14 years with the Ontario police service and spent time in several southwestern Ontario detachments.

I would ask my colleagues in the House today to keep Sergeant Margaret Eve in their prayers and to recognize and support the hard-working men and women who make up our police services in Ontario.

TENANTS

Mr David Caplan (Don Valley East): I rise today to bring to the attention of this House a very important report card that has been issued today.

Tenant advocates and activists have done their evaluations and recommend that housing Minister Tony Clement be transferred from his portfolio to the backbenches for some remedial studies.

Let me summarize some of the comments on the report card: In mathematics, Mr Clement has received a D for his number sense. To quote the evaluators, “He fails to grasp the significance of numbers given to him—for example, the statistics relating to the work of the Ontario Rental Housing Tribunal.”

But members may be pleased to know that he received a B+ for arithmetic operations. To quote the report card, “Tony shows a flair for subtraction—especially effectively reducing shelter subsidies and social housing starts.”

With respect to his English skills, the minister has received a below-standard grade of D for his reading ability. His report card is quite clear: “He reads slowly and without retention of meaning. He must be encouraged to complete his reading assignments.” A thorough review of the report of the Eviction Prevention Project of the Centre for Equality Rights in Accommodation comes recommended as his first assignment.

Overall, these groups have some serious concerns with his interest in the job. They say, “Tony has had some success with his extracurricular activities, but despite challenging opportunities, failed to take an interest in his work.”

These groups have prepared a light-hearted report card to highlight the very serious issue of the minister’s poor performance. The bottom line is that Mr Clement lacks the political will, skill and competence to be an effective housing minister.

I’m sending this over to the Premier in the hope that he will sign this report card, take the recommended remedial action and replace Minister Clement with someone who has a real interest in and energy to tackle Ontario’s growing housing and homelessness crisis.

Mr Dave Levac (Brant): On a point of order, Speaker: I just wanted to make sure that the member for Perth-Middlesex, along with the Solicitor General and the Premier, knows that the Leader of the Opposition and five other members from the Liberal Party attended—

The Speaker (Hon Gary Carr): That’s not a point of order.

VOLUNTEER POLICE

Mr Garfield Dunlop (Simcoe North): My statement today is a salute to 40 years of auxiliary policing in Ontario. Over 40 years ago, the volunteer auxiliary of the Ontario Provincial Police came into being, and now, over 800 strong, they come from every walk of life to assist in protecting the people of Ontario. They are held in the highest esteem and have earned our profound respect. We honour their faithfulness.

Last Saturday, I attended a couple of ceremonies—a parade in Orillia that was also attended by the Solicitor General and a banquet in Peterborough that was attended by Mr Gary Stewart as well—to pay tribute to these volunteers and to express deep gratitude for the work they perform. The role they play in policing is truly valued, as they strive to promote safety and bring peace within our communities. Most often, they participate quietly in the background, receiving little recognition for their efforts. We applaud their worthy contributions.

They assist the OPP staff in their routine duties and in emergency situations. Undaunted, they often step beyond the call of duty, thus risking their own safety. Selfless and courageous, they are willing to serve during any unforeseen disasters. We applaud their sincere commitment.

Each year they donate their time and are available for countless hours of shift work, and in fact in 1999 spent almost 200,000 hours on volunteer work. In giving of themselves, they make unending personal sacrifices, thereby missing numerous family celebrations and holidays. We thank them for their unfailing dedication.
They are stalwart ambassadors and a most professional representation of the Ontario Provincial Police. Please know how profoundly important these volunteers are to the OPP staff and to the people of this great province.

ASSISTANCE TO DISABLED STUDENTS

Mrs Marie Bountrogianni (Hamilton Mountain): I want to talk today about a number of my younger constituents on Hamilton Mountain who are not helped at all by the so-called Education Accountability Act.

Sean is eight years old, an exceptional student with a moderate learning disability. His school, Corpus Christi, provides him with a modified program and remedial assistance, and borrows an educational assistant from another student to help him. The school is forced to rob Peter to pay Paul.

Why is this? Sean’s disabilities are described as mild. In Mike Harris’s Ontario, being mildly disabled with a solid potential for success, given early intervention, isn’t good enough to get appropriate support.

This week my office has been flooded with stories similar to Sean’s. In one case, the Colantino family has had a double hit. Their nine-year-old son with Down syndrome, who has had a full-time EA since he was four, next year will receive none—no support. Their daughter, a C4 quadriplegic, the result of an accident, will only have a part-time EA. Can you imagine what this family is going through every day, and to be told this week that their children will not have the assistance they deserve to try and meet that government’s new criteria and curriculum?

Let me tell you about Justin D’Amico. He is seven years old, in grade 2 at St Teresa of Avila school. He has delays in speech and language and he has a mild to moderate learning disability. For the last two years he has had the half-time support of an educational assistant. Given this government’s dysfunctional funding formula, he will receive no assistance in September. When will this government fix this formula and allow the most vulnerable of our children to get the education they deserve?

WORKPLACE FATALITIES

Mr David Christopherson (Hamilton West): I rise today not just to bring attention to the members of the House a very tragic event that I’m sure many have seen in the news and read in the paper, that yesterday there were two construction workers killed and three injured. Darren Leon and Jose Alves were killed while working on a municipal construction site in Oakville. It was the result of a 12-storey crane collapsing and falling and killing these two workers. The Halton regional police, the Ministry of Labour and the coroner’s office are currently investigating.

On behalf of all the members of this House, I would like to introduce and congratulate all the athletes and the needs group has been granted an audience with His Holiness Pope John Paul II on August 9, 2000. This is a momentous event for all concerned, especially the athletes. The athletes will also be delivering a gift to the Pope. Artist Gerardo Colacci has recently completed a beautiful hand-painted fresco which depicts the portal of the Church of Saints Erasmo and Martino.

On behalf of all the members of this House, I would like to introduce and congratulate all the athletes and the man whose vision it was to organize this historic visit to the Vatican, and the artist who created this exquisite fresco to be presented to the Pope on August 9: Liberato Prioriello, president of Youth Bocce Canada; Gerardo Colacci, the artist; and the athletes, Marianne Tabangi, Albert Gentili, Robert Badinetti, Erica De Vincenzo, and Valentino D’Addamio.
Clerk at the Table (Mr Todd Decker): Your committee begs to report the following bill as amended:

Bill 15, An Act to regulate the discharge of ballast water in the Great Lakes / Projet de loi 15, Loi réglementant le déchargement de l’eau de lest dans les Grands Lacs.

The Speaker (Hon Gary Carr): Shall the report be received and adopted? Agreed.
The bill is therefore ordered for third reading.

INTRODUCTION OF BILLS

GOOD SAMARITAN ACT, 2000
LOI DE 2000
SUR LE BON SAMARITAIN

Bill 98, An Act to protect persons from liability in respect of voluntary emergency medical or first aid services / Projet de loi 98, Loi visant à exonérer les personnes de la responsabilité concernant des services médicaux ou des premiers soins fournis bénévolement en cas d’urgence.

The Speaker (Hon Gary Carr): Is it the pleasure of the House that the motion carry? Carried.
The member for a short statement.

Mr Steve Gilchrist (Scarborough East): You may recall that in the previous Parliament this bill was introduced. It made it all the way to third reading and unfortunately died on the order paper.
The so-called Good Samaritan Act would protect health care professionals and other individuals from liability for negligence in respect of services that they provide in certain circumstances to persons who are ill, injured or unconscious as a result of an accident or other emergency, except if they cause damages through gross negligence.

1274187 ONTARIO LIMITED ACT, 2000

Mr Young moved first reading of the following bill:

Bill Pr25, An Act to revive 1274187 Ontario Limited.

The Speaker (Hon Gary Carr): Is it the pleasure of the House that the motion carry? Carried.

Pursuant to standing order 84, this bill stands referred to the standing committee on regulations and private bills.

HIGHWAY TRAFFIC AMENDMENT ACT
(HISTORIC VEHICLES), 2000
LOI DE 2000 MODIFIANT LE CODE DE LA ROUTE
(VÉHICULES ANCIENS)

Mr O'Toole moved first reading of the following bill:

Bill 99, An Act to amend the Highway Traffic Act with respect to number plates for historic vehicles / Projet de loi 99, Loi modifiant le Code de la route en ce qui concerne les plaques d’immatriculation pour les véhicules historiques.

The Speaker (Hon Gary Carr): Is it the pleasure of the House that the motion carry? Carried.
The member for a short statement.

Mr John O’Toole (Durham): I’m following up on the very diligent work done by a previous member of this Legislature, John Parker, a former MPP for York East. The bill amends the Highway Traffic Act to allow numbered plates to be used on historic vintage vehicles in Ontario that were issued during the year of manufacture of the vehicle and, as a condition satisfactory to the minister, do not duplicate the number of any other existing permit. Historic vehicles are defined as being at least 30 years of age and substantially unchanged or unmodified from the original manufacturer’s product.
I’m pleased to support this, representing the riding of Durham-General Motors.

ONTARIO ENERGY BOARD AMENDMENT ACT, 2000
LOI DE 2000 MODIFIANT LA LOI SUR LA COMMISSION DE L’ÉNERGIE DE L’ONTARIO

Mr Wilson moved first reading of the following bill:

Bill 100, An Act to promote efficiency in the municipal electricity sector and to protect consumers from unjustified rate increases / Projet de loi 100, Loi visant à promouvoir l’efficience dans le secteur municipal de l’électricité et à protéger les consommateurs contre les hausses tarifaires injustifiées.

The Speaker (Hon Gary Carr): Is it the pleasure of the House that the motion carry? All those in favour of the motion will please say “aye.”
All those opposed will please say “nay.”
In my opinion, the ayes have it. Carried.
The minister for a short statement.

Hon Jim Wilson (Minister of Energy, Science and Technology): Mr Speaker, I’ll make a statement during ministerial statements.

MOTORIZED SNOW VEHICLES AMENDMENT ACT, 2000
LOI DE 2000 MODIFIANT LA LOI SUR LES MOTONEIGES

Mr Jackson moved first reading of the following bill:

Bill 101, An Act to promote snowmobile trail sustainability and enhance safety and enforcement / Projet de loi 101, Loi visant à favoriser la durabilité des pistes de motoneige et à accroître la sécurité et les mesures d’exécution.

The Speaker (Hon Gary Carr): Is it the pleasure of the House that the motion carry? Carried.
The minister for a short statement.

Hon Cameron Jackson (Minister of Tourism): I’m pleased today to rise and introduce an act to improve the sustainability and safety of Ontario’s snowmobile trails. Snowmobiling is an important winter recreational activity in Ontario for both residents and tourists alike. Among other benefits, it creates an economic boost to Ontario communities during the winter snowmobiling season, a time of year when the tourism industry needs that increased business.

Given the extensive network and the increased use of snowmobile trails, a mechanism needs to be developed to ensure that people continue to have access to this recreational activity into the future.

At the same time, the government is committed to improving the safety of snowmobiling and reducing snow vehicle fatalities, which average more than 30 each winter in Ontario.

Mr Speaker, this act to improve the sustainability and safety of Ontario’s snowmobile trails proposes revisions to the Motorized Snow Vehicles Act and the Trespass to Property Act. It includes a mandatory user-pay approach through a permit for users of Ontario Federation of Snowmobile Clubs trails, and significant safety enhancements.

The Speaker: Order, Minister, if you could. I’m sorry; I thought the minister was going to do that during statements. I didn’t mean to interrupt. Were you done? I apologize. I thought there was some confusion there.

HIGHWAY TRAFFIC AMENDMENT ACT
(CELLULAR PHONES), 2000
LOI DE 2000 MODIFIANT LE CODE DE LA ROUTE (TÉLÉPHONES CELLULAIRES)

Mr O’Toole moved first reading of the following bill:
Bill 102, An Act to amend the Highway Traffic Act to prohibit the use of phones and other equipment while driving on a highway / Projet de loi 102, Loi modifiant le Code de la route pour interdire l’utilisation de téléphones et d’autres équipements pendant la conduite sur une voie publique.

The Speaker (Hon Gary Carr): Is it the pleasure of the House that the motion carry?
All those in favour will please say “aye.”
All those opposed will please say “nay.”
In my opinion, the ayes have it.

STANDING COMMITTEE ON PUBLIC ACCOUNTS

Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader): I move that, notwithstanding standing order 9(c)(ii), the House shall meet from 6:45 pm to 12:00 am on Tuesday, June 20, 2000, for the purpose of considering government business.

The Speaker (Hon Gary Carr): Is there unanimous consent? Agreed.

Hon Mr Sterling: I move that, as authorized by each caucus whip, the members of the standing committee on public accounts, or their alternates, be authorized to attend the 21st annual conference of the Canadian Council of Public Accounts Committees.

The Speaker: Is it the pleasure of the House that the motion carry?
Carried.

STATEMENTS BY THE MINISTRY AND RESPONSES

MUNICIPAL ELECTRICITY EFFICIENCY

Hon Jim Wilson (Minister of Energy, Science and Technology): Today I introduced legislation to promote efficiency in the municipal electricity sector and to protect consumers from unjustified rate increases. Two years
ago I introduced the Energy Competition Act, legislation this House passed to ensure Ontarians a safe, reliable supply of electricity at the lowest possible cost. Then, as now, we identified three elements which must work together to ensure we reach our goals: first is competition in generation; second is debt reduction and, third, we need fair and stable distribution rates.

As a government, we’ve introduced competition in generation. This is spelled out in a plan which requires Hydro’s successor company, Ontario Power Generation, to reduce its current dominant position in the generation market to 35% over the next 10 years. We’ve also introduced a debt retirement plan to reduce and eliminate Ontario Hydro’s legacy of debt and liabilities.

But to bring the complete package of benefits to electricity customers, our partners, Ontario’s municipalities and their local electric utilities, must share with us the responsibility of making decisions in the best interests of those we are elected to serve. Electricity customers have no choice but to use municipal utilities’ wires. They are a monopoly, and operating a monopoly is a privilege. Therefore, it is only right that municipal utilities should deliver electricity at fair and reasonable prices. All local distribution rates are subject to review and approval by the Ontario Energy Board. That is why less than two weeks ago, I directed the Ontario Energy Board to make customer protection its first priority when deciding rate applications. I further directed the Ontario Energy Board to ask municipalities to justify their rate applications before a decision is rendered.

I remind municipalities that two years ago, when we were drafting the Energy Competition Act, the Association of Municipalities of Ontario and the Municipal Electrical Association urged the government not to force amalgamations and mergers in the electricity distribution sector. These same municipalities promised us that if we gave them the tools and incentives, they would do the right thing for customers and move to rationalize their distribution systems, find efficiencies, and ensure the lowest possible price.

Our legislation gave municipalities the tools they requested. The act clarified, for the first time, that municipalities own their electricity utilities. Local councils are the shareholders. We expect the municipalities to act responsibly. Some of them have. But, unfortunately, some municipalities have filed with the Ontario Energy Board for significant increases in local distribution rates, some by as much as 72%. This is being done without regard for the people who have already paid for their utilities, Ontario’s electricity customers.

There are more than 250 municipal electric utilities in Ontario, 10 times more than in the rest of Canada combined. Between them, they have more than $1 billion in cash and investments. Customers have already put more than enough money into the electricity system to shield them against any short-term transitional and regulatory costs brought on by electricity restructuring. As I have said many times, municipalities must earn their rate of return by squeezing efficiencies in their operations, not by squeezing customers. We cannot afford to lose the many positive benefits of electricity competition.

Let me be unequivocal. Municipalities have been given a tremendous opportunity. They can manage their utilities effectively, create innovative partnerships, merge with other utilities, whatever method they choose to maximize the benefit to their electricity customers. We have tried to work with municipalities and their utilities to make sure they understand and follow the intent of the Energy Competition Act. We have listened to their needs and provided the tools they requested. We urged that they not take advantage of consumers, and we have warned them that if they did not change their ways, legislation would be forthcoming to ensure they put customers first. Our pleas and warnings have gone unheeded. Now the time has come to act.

I have today introduced an act to promote efficiency in the municipal electricity sector and to protect consumers from unjustified rate increases, which, if passed by members of this Legislature, would prohibit municipalities from taking windfall profits out of their local electrical utilities and using these profits to justify rate hikes. This legislation will give the Ontario Energy Board powers to disallow rate increases attributable either to assets or to financing transactions and costs where money does not stay in the electricity system.

It’s unfortunate that some municipalities have kept electricity assets like surplus lands and working cash balances, and it’s unfortunate that other municipal electric utilities have refinanced, taken out loans and turned the proceeds over to their municipal owners. Our proposed legislation will put a stop to this creative bookkeeping and ensure these windfalls are not used to justify rate increases.

If the legislation is passed, the Ontario Energy Board will have the power to review and ask for detailed financial data. Assets withheld from utilities will not be allowed as justification for rate increases. After all, the ratepayers paid for their electricity systems and we believe the money should stay in those systems.

I’m sure everyone agrees that consumer protection and the lowest possible distribution rates should be our goal. That is what this amendment will do and I hope to have the support of this House to formalize this consumer protection as soon as possible.

**SNOWMOBILING**

_Hon Cameron Jackson (Minister of Tourism):_ I rise today to introduce an act to improve the sustainability and safety of Ontario’s snowmobile trails. Snowmobiling is an important winter recreational activity in Ontario for both residents and tourists alike. Among other benefits, it creates an economic boost to Ontario communities during the winter snowmobiling season, a time of the year when the tourism industry needs increased business.

Given the extensive network and the increasing use of snowmobile trails, a mechanism needs to be developed to
ensure that people continue to have access to this recreational activity now and well into the future.

At the same time, the government is committed to improving the safety of snowmobiling and to reducing the snow vehicle fatalities, which in Ontario, sadly, are on average about 30 individuals each winter.

An Act to promote snowmobile trail sustainability and enhance safety and enforcement proposes revisions to two pieces of Ontario legislation: the Motorized Snow Vehicles Act and the Trespass to Property Act. It includes a mandatory user-pay approach through a permit for users of Ontario Federation of Snowmobile Club trails, and significant safety enhancements and new enforcement provisions. These measures will ensure that the people who benefit most directly from Ontario’s organized snowmobile trails system would contribute to its upkeep. The recommended safety and enforcement enhancements would help reduce the number of incidents that occur on snowmobile trails.

These revisions were recommended by a government task force on snowmobiling which was chaired by my parliamentary assistant, the MPP for Brampton Centre, Joe Spina. Among those who were consulted were leaders in Ontario’s snowmobile industry, the Ontario Federation of Snowmobile Clubs and the joint public-private sector Ontario Snowmobile Safety Committee.

The government, in co-operation with the snowmobile community and other stakeholders, needs to take action if snowmobiling is to remain a significant winter activity in Ontario. I urge members of the Legislature to vote in favour of this bill so that we can support the development of a far safer and more economically sustainable snowmobile trail system for our province.

**The Speaker (Hon Gary Carr):** Statements by ministries? Responses?

**Mr John Gerretsen (Kingston and the Islands):** We all realize the tremendous economic impact that the snowmobilers have on our province of over a billion dollars per year. We also recognize the fact that we’ve got over 49,000 snowmobile trails in Ontario, which is much more than the road network that we have, yet it’s all basically being maintained by volunteers. The question we have is, why isn’t some of our gasoline revenue that snowmobilers pay going into the system?

What we’re suggesting to the government is that this bill be referred after first reading for public hearings in the province of Ontario. We think it’s very important to do it after first reading. There are an extremely large number of groups out there that have an opinion on this kind of legislation. We welcome the enhancement as far as the safety aspects are concerned, but on all other aspects of the bill we want to hear from the general public.

**Mr Michael A. Brown (Algoma-Manitoulin):** I want to respond on behalf of my Liberal colleagues to Minister Wilson’s statement about electricity rates.

Well, well, well, two years after we began the debate on the electricity policy of the Harris government, even Jim Wilson, the last one in the province, now admits that under his electricity policy electricity rates are going up and they’re going up for everybody. Whose fault is it? He’s playing the blame game—it’s all the municipalities’ fault—when the reality is the municipalities are only playing by Jim Wilson’s rules.

Two years ago in the committee the municipalities said, “Leave us the option of being not-for-profit local utilities.” Jim Wilson’s answer: “No, you must be for-profit people under the government’s legislation.” The evidence before the committee was that municipalities could restructure, that there were efficiencies, but nobody expected that under the Harris government’s electricity policy we were going to get a much bigger, stronger, more expensive Ontario Hydro Retail, and that’s what we’re getting. A lot of the orderly restructuring that should be happening out there, particularly in southern Ontario on the distribution side, can’t happen and won’t happen because the real monopolists here are in the Harris cabinet. They rigged the rules of this electricity policy in favour of the provincially owned Hydro.

Do you know those new ads that are out there? They are absolutely prophetic. Hydro One? Under Mike Harris’s electricity policy, it’s Ontario Hydro won—w-o-n—because we’ve got a monopoly generator where the big change has to occur, and it’s not occurring.

I have in my hand today a letter from a big industrial consumer in eastern Ontario, and there’s no municipal utility involved in their transaction. They’re being told by their supplier, Mike Harris’s wholly-owned Ontario Hydro: “Get ready this fall. Your rates are probably going to go up 20%.” That’s three million bucks on their bottom line. When these people talk to Mike Harris’s Ontario Hydro about, “Isn’t there any compassion for the
customer?” the answer is, “We are obligated under these new rules to maximize the benefit for our shareholder, the Ontario government.”

That’s what is going on out there with the direct customers of Ontario Hydro. You bet there are monopolists at work and they are the monopolists that are wholly owned by the Ontario government.

We’ve also got Hydro One, the new, bigger growing Ontario retail company. They’re out buying up municipal utilities and paying premiums of 30% and 40%. Those selfsame people restructured in the dark last year and gave themselves a commercial rate of return of 9.3%. What are Jim Wilson and Mike Harris going to do about that gouging and that monopoly?

SNOWMOBILING

Mr Tony Martin (Sault Ste Marie): I want to respond to the statement by the Minister of Tourism and say that it’s nice to see him continuing to build on the foundation we put in place when we were in government between 1990 and 1995 where snowmobiling is concerned.

We think this is good, but we have some concerns. We think it’s about time. With increased use of trails, the need to look at existing legislation and tailor it to meet tourism and safety concerns was great. A mandatory permit helps law enforcement. By making it mandatory to carry a permit and licence, it will also make it easier for police to lay charges for safe driving or trespassing infractions.

The permit fees will help pay for trail grooming. The focus has been on making new trails or building new bridges, not necessarily on ensuring proper trail maintenance. We think the helmets-and-life law is good. There are about 35 to 40 snowmobile-related fatalities each season in Ontario, so any safety features to help prevent future fatalities are obviously welcome.

We do have some real concerns, though. We don’t think it deals effectively with safety concerns. A coalition of police and government agencies is demanding stricter standards for snowmobiling to ensure safety. This group is trying to promote national standards for snowmobile safety, and Ontario should be at the forefront of that effort.

We also think that this bill should go to public hearings, because we in northern Ontario have some real concerns about the impact of this on the people who work and live in our neck of the woods.

MUNICIPAL ELECTRICITY EFFICIENCY

Mr Howard Hampton (Kenora-Rainy River): I want to respond to the Minister of Energy, and I want to remind citizens of Ontario that this is the Minister of Energy who said, “Deregulation is going to lead to your electricity rates going down.” Now he’s in here saying: “Oops, we have to re-regulate. Otherwise, the prices are going to go up.” And he’s accusing the municipal utilities of some great sin. What is the great sin? The great sin is they’re behaving like profit-making operations. They’re behaving the way your legislation says they’re supposed to work. They’re supposed to out there and maximize their profit.

But it is more insidious than that. This minister knows that all across Ontario municipalities are staggering under the downloading of this government. They don’t have enough money to protect their water systems, they don’t have enough money to treat their sewage systems because this government has withdrawn, so they’re looking for ways to find money to manage all these problems that are being downloaded on to them. One way is to do as the legislation suggests: maximize their profit from the utility. But now the government steps in and says, “No, you can’t do that.”

But the people need to know this: If a community sells their utility to a private company, the private company can go out there and float the whole thing with debt and then go before the energy board and say, “We need a 20% rate increase to cover our debt.” This regulatory legislation doesn’t cover a private company. A private company can go out there and milk the ratepayers for all they want.

So what is this government really doing? What they’re really doing is this: They’re going to force municipal utilities to privatize. They’re going to force municipal utilities to follow the agenda of the Minister of Municipal Affairs, to sell off the rates, but once they’re sold off to a private company, the private company isn’t regulated at all. It can raise rates 20%, 30%, 40%, and this government doesn’t have a thing to say about it.

That’s what’s really going on here. This is a government that said, “Deregulation is going to lower your power rates.” It’s not. The municipal utilities are only obeying your legislation. They’re trying to behave like profit-making companies, they’re trying to maximize profit—they increase rates. You say you’re protecting the consumer. You’re only going to drive municipalities to sell their utilities to private companies. This legislation won’t cover private companies. A private company will be able to walk in, finance the whole thing with debt and raise rates over and over again.

Again, to bring everybody back to reality, the minister says that rates elsewhere aren’t rising. Well, why is every paper mill, every sawmill, every mining operation—Inco, Stelco—receiving notices from Hydro, “Your rates are going to go up by 20%”? That’s going to cost us jobs. What are you going to do about that, Minister? Come in here a week from now or after the House isn’t sitting and announce again that you have to re-regulate? Your whole agenda of deregulation is failing.

VISITORS

The Speaker (Hon Gary Carr): We have with us today in the Speaker’s gallery a delegation from Bulgaria which includes members of their Parliament and their
This will be a five-minute bell.

The division bells rang from 1420 to 1425.

The Speaker: Call in the members.

The Speaker (Hon Gary Carr): The division bells rang from 1420 to 1425.

The Speaker: All those opposed to the motion will please rise one at a time and be recognized by the Clerk.

The Speaker: Those in favour of the motion will please rise one at a time.

Ayes

Arndt, Ted
Baird, John R.
Barrett, Toby
Beaubien, Marcel
Chudleigh, Ted
Clark, Brad
Clement, Tony
Coburn, Brian
Cunningham, Dianne
DeFaria, Carl
Dunlop, Garfield
Ecker, Janet
Elliott, Brenda
Flaherty, Jim
Galt, Doug
Gilchrist, Steve
Gill, Raminder
Guzzo, Garry J.

Hardeman, Ernie
Harris, Michael D.
Hodgson, Chris
Hudak, Tim
Jackson, Cameron
Johnson, Bert
Kells, Morley
Klees, Frank
Marland, Margaret
Maves, Bart
Mazzilli, Frank
Molinari, Tina R.
Munro, Julia
Murdoch, Bill
Mushinski, Marilyn
Newman, Dan

O'Toole, John
Palladini, Al
Runcoian, Robert W.
Sampson, Rob
Snoeberen, John
Spina, Joseph
Sterling, Norman W.
Stewart, R. Gary
Stockwell, Chris
Tascona, Joseph N.
Tilson, David
Tsoukou, David H.
Tumilieu, David
Wettlaufer, Wayne
Wilson, Jim
Witmer, Elizabeth
Young, David

The Speaker: Those opposed to the motion will please rise one at a time.

Nays

Agostino, Dominic
Barboulucci, Rick
Bisson, Gilles
Bontongianni, Marie
Boyer, Claudette
Bradley, James J.
Brown, Michael A.
Bryant, Michael
Caplan, David
Christopherson, David
Churley, Marilyn
Cleary, John C.
Conway, Sean G.
Crozier, Bruce

Curling, Alvin
Di Cicco, Caroline
Dombrowsky, Leona
Duncan, Dwight
Gerretsen, John
Gravelle, Michael
Hampton, Howard
Hoy, Pat
Kennedy, Gerard
Kormos, Peter
Kwinter, Monte
Lalonde, Jean-Marc
Lankin, Frances
Levac, David
Marchese, Rosario
Marlel, Shelley
Martin, Tony
McGuiny, Dalton
McLeod, Lyn
Parsons, Emie
Patten, Richard
Peters, Steve
Phillips, Gerry
Pupatello, Sandra
Ramsey, David
Ruprecht, Tony
Sergio, Mario
Smitherman, George

WALKERTON TRAGEDY

Mr Dalton McGuinty (Leader of the Opposition): My questions are for the Premier. I want you to know what they’re saying in Walkerton this week. There’s a story in this week’s Walkerton Herald-Times, and it quotes at length from one public official whose efforts during the tragedy were nothing less than heroic.

Dr Murray McQuigge, the local medical officer of health, appeared before the town council, and, Premier, I can tell you that he has taken the gloves off and he is telling it as he sees it. These are some of the things he said. He described the state of Ontario’s drinking water supply as “a bomb that was waiting to go off.” He goes on to say, “We knew for a certainty that this was going to happen.”

We have spent the last several days, in fact a few weeks now, telling you about warning after warning that you and your government officials had received. Premier, why didn’t you listen to those warnings?

Hon Michael D. Harris (Premier): In the wake of Walkerton there were all kinds of allegations and accusations. In order that we can get to the bottom of what happened and ensure that this kind of tragedy never happens again, we have set up a number of independent inquiries to see who was saying what, are they credible and did they call for this? There have always been some who will say, “We disagree with this policy,” or “We disagree with that policy.”

Let me say that I think the chief medical officer of health has done heroics there in Walkerton. We are very supportive of the early action he took, and certainly I know the people of Walkerton are very supportive of the actions we’ve taken both for short-term assistance and of course in a longer-term look.

Mr McGuinty: Premier, you didn’t listen back then and you’re still not listening today. I’m talking to you about what Dr McQuigge said about this issue. This is a man whose reputation here is impeccable, a man of the utmost integrity, who agonized over this issue and who deeply regretted the fact that he didn’t have the information he needed in a timely way so that he could have saved lives.

Listen to what else he said. The article says, “Time and time again, Dr McQuigge drew attention to the inadequacy of regulations and standards for both rural homes with wells and municipalities. McQuigge told Grey
county council last week that the switch to private labs in 1996 for water testing was regarded by medical officers of health as a bad idea right from the beginning. ‘We knew for a certainty this was going to happen,’ he said grimly. ‘This was like a bomb waiting to go off,’ he said.”

Premier, he’s telling us that this was like a bomb waiting to go off. That bomb has gone off once already; it could go off again, but you continue to refuse to listen to warnings you received in the past and to those warnings that we draw to your attention and to your minister’s attention day in and day out. Will you now take our advice and hire the 100 inspectors and enforcement officers we need out there on the ground right across the province today to prevent this kind of a tragedy from occurring again?

Hon Mr Harris: Certainly we’ve suggested that the ministry and the various inquiries and, of course, the consultant we’ve hired as well, take a look at ministry practice, listen to Dr McQuigge and review all the evidence of any who have suggestions as to how we can do a better job in the future.

Like Dr McQuigge, we too regret that information was not made available in the kind of timely fashion it ought to have been to have prevented the tragedy that occurred in Walkerton. That’s why, of course, your advice in 20-20 hindsight is very appreciated. It’s not going to change Walkerton, but we’re certainly committed to ensuring that we get best practices in place so that a Walkerton-type situation never happens again.

Mr McGuinty: Premier, as this session winds down one thing is perfectly clear and that is that your priorities are totally out of whack. Seven people died in Walkerton, potentially as many as 14. The conditions that led to that tragedy still exist, still prevail throughout the province today, yet you’re content to sit on your hands. There are things we could do today to make Ontarians safer when it comes to their own drinking water. You want to sit on your hands. You say you can’t do anything at this point but there is no money available to hire 100 new inspectors?

Hon Mr Harris: I don’t know if the member is referring to the legislation that he unanimously supported in the last campaign and going into the campaign that called for the Speaker to have an independent report. On May 16, 2000, Dalton McGuinty said: “It’s important to be done at arm’s length. We’ll wait and see what they come up with; never a right time, but I haven’t had a raise in 10 years. I think it’s appropriate to undertake a review.”

I understand that in a matter of a couple of weeks, you’ve flip-flopped on your position there. Strong leadership means you don’t flip-flop every time you think the public mood has changed.

Let me repeat that when it comes to Walkerton—

The Speaker (Hon Gary Carr): Order. Sorry to interrupt, Premier.

Hon Mr Harris: We want to get to the bottom of what happened in Walkerton. We have, since Walkerton, been very responsive and quick to provide short-term assistance. The Minister of the Environment provided clarification of the regulations within a matter of days. We have a number of inquiries, plus a management review at the Ministry of the Environment. I think most objective observers would say that we treat the matter very seriously and that we have moved very quickly.

As to the matter of your flip-flop on the independent commission, you will have to answer for that, not me.

The Speaker: New question.

Mr McGuinty: My question’s for the Premier. On this matter of the pay hike, I have been perfectly clear. A 33% pay hike is totally ridiculous. It is unacceptable, it is absurd and it is perverse. You were given the opportunity this morning, perverse—Premier—

Interjections.

The Speaker: Order. Stop the clock. Leader of the official opposition, sorry for the interruption.

Mr McGuinty: Premier, you were given the opportunity this morning to reject a 33% pay hike out of hand. You refused to do that. It’s my opinion that the people of Ontario are not at all prepared to accept a pay hike of that amount. That’s where you and I differ. You think 33% is OK and acceptable. I think it is ridiculous.

Interjections.

When it comes to Walkerton, you failed to do two things in particular—

The Speaker: Sorry to interrupt. Stop the clock. Government members come to order. We can’t continue when you’re yelling and screaming at him. I know people are laughing. We’re coming to the end of a session. We can’t continue on like this. He’s trying to ask a question. You can’t be yelling and screaming so that I can’t hear him. I would say very clearly that government benchers can be named as well. Sorry for the interruption. Leader of the official opposition.

WATER QUALITY

Mr Dalton McGuinty (Leader of the Opposition): Premier, when it comes to Walkerton, you have failed to do two things in particular: One, you have failed to accept responsibility for the problems created by your changes, your cuts, your negligence in ignoring all those important warnings; two, you have failed to start rehiring the people you let go so that we’ll have the necessary people on the ground to conduct the inspections and provide reassurance to the people of Ontario when it comes to the safety of their own drinking water.

Time’s running out on this session. Why is it you won’t do those two simple things: accept responsibility and hire the 100 inspectors?
Hon Michael D. Harris (Premier): We have accepted responsibility and do so, and also we’ve accepted responsibility for immediate assistance to the people of Walkerton. We’ve accepted responsibility to get to the bottom, with full inquiries as to the cause of Walkerton, and we accept responsibility today and into the future for insuring a Walkerton doesn’t happen again.

I might add, the main preamble to the Leader of the Opposition’s question seemed to be trying to cover up his flip-flop on the matter of supporting an independent commission. On May 16, Howard Hampton, at least to his credit, said, “I’m not in favour of any raise.” What did Dalton McGuinty say on May 16? Dalton McGuinty said: “You know, there’s never a right time, but it has been 10 years. I think it’s important to be done at arm’s length.” Again, “It has been 10 years.”

The Speaker (Hon Gary Carr): Order. The Premier’s time is up.

Mr McGuinty: You think 33% is right, you think it’s acceptable to Ontarians; I don’t. That’s the distinction, Premier.

Premier, I know that for you vacation is kind of an ongoing thing, but many Ontario families will have their first opportunity at a vacation this summer, and they’ll be flocking to summer camps, they’ll be going to trailer parks and they’ll be stopping along the way at roadside service stations. These are public places, all of which are served by private wells. The important matter here is that private wells of this nature today in Ontario are not being tested. In letter after letter, public health inspectors have been telling your government that you can’t just leave it to the owners.

One told you in February, “Self-regulation may be acceptable for some suppliers of water in Ontario, but most suppliers, I contend, do not complete the work outlined in the Ontario Drinking Water Objectives.”

Premier, now that you know, now that you understand that all these Ontario families are going to be braving the traffic and seeking respite by going to campgrounds and trailer parks and stopping at service stations along the way, all of which are supplied by private wells, and now that you know they’re not being tested, and now that you know how deadly this can be, what a tremendous risk this can present, why are you still putting Ontarians’ health at risk?

Hon Mr Harris: Nothing could be further from the truth. The rules and the regulations are there for testing water, and I can tell you that we expect those rules to be followed. I am sending that signal, and have, across Ontario. I’m happy to send it today. If there is any trailer park, if there is any gas station, if there is anybody who is providing water to the public who is not following those rules, they are going to be very sadly disappointed.

Mr McGuinty: Premier, that’s not good enough. Public health inspectors are telling us that this water is not being tested. They’ve told you that over and over and over again.
Every day we learn more and more about how your government is doing less and less to protect the quality of our drinking water. Given the warnings from the Ministry of the Environment, what is your advice to the thousands of mothers and fathers who want to take their children camping this summer in an Ontario provincial park?

Hon Mr Harris: It’s the same advice it would have been 10 years ago: If you’re concerned about the water, boil it or take your own drinking water.

Mr Hampton: In my constituency, the medical officer of health now says, and this is for the first time, that in parks like Quetico, Blue Lake, Sandbar Lake, Ojibway, Pakwash and Lake of the Woods the water is not safe to drink. This is in addition to the boil-water advisories for over 700 fishing camps.

It isn’t the Ministry of the Environment that’s doing this testing; it’s the medical officer of health who’s using his own severely restricted budget to go out there and do the testing that you’re not prepared to do, that your government has cut. What are you going to do to help people protect the quality of the drinking water? You seem to be throwing the responsibility off on to everybody else, including the citizens alone. What’s your government doing?

Hon Mr Harris: When it comes to the provincial parks that we own, we are following the procedures that have been ongoing since the 1960s and the 1970s. We test and we re-test the water in Ontario parks on a weekly basis. It’s well-established; it has been in place and is in place today. We take this matter very seriously. There is also a long-standing, well-developed public health program employing classified public health policy officers, seasonal environmental sanitation inspectors. If there are lakes where there are cottages or provincial parks, the parks are required, if there’s a notification the water is not safe to drink, to have that well posted, and it’s put forward. That’s the way your government did it, that’s the way the Liberals did it, that’s the way Bill Davis did it, that’s the way we do it.

Mr Hampton: The problem has gone beyond that; we’re now dealing with whole communities that are receiving boil-water advisories because the surface water has been contaminated.

Let’s take a community like Red Lake or a community like Vermilion Bay or a community like Hudson, and there are dozens more in the province, where they have been advised by the medical officer of health, not by the Ministry of the Environment, that they’re dealing with cryptosporidium and giardia. You might remember cryptosporidium. It made tens of thousands of people in Milwaukee ill in 1993 and killed over 100 people, and you can’t treat it with chlorine. These communities don’t have the money to put in a proper filtration system by themselves, and when they turn to your government, the Premier says, “Just boil your water.”

Premier, is that your answer to people across Ontario, just boil water or buy water, that your government isn’t responsible for anything? What is your government doing? Dozens of communities can’t drink their water any more.

Hon Mr Harris: When it comes to a remote cottage or a provincial park, I gave you the policy we follow. There are 219 drinking water systems in 106 operating parks. Eight parks receive their water from municipal systems. The park is responsible. All drinking water is disinfected using sodium hypochlorite, chlorine; free available chlorine residual measures. We test that; it’s there. If there is water, though, in these remote parks where there isn’t water provided, then in some of the areas where there are no water systems, that information is provided on whether the water is safe to drink or not.

If it comes to municipalities, as you know, we have provided $200 million to play catch-up from the mess you left us when you were in government to allow municipalities and towns to upgrade their systems. We now are looking at whether more money is required. If there are municipal systems that need upgrading, then obviously that’s something we’re going to take a look at, both through the federal-provincial infrastructure program and through our own provincial infrastructure program. Certainly if there is any town anywhere that has a system that they have concerns about, they should be putting plans in place to address that, and assistance will be available if it is beyond that municipality’s means.

The Speaker: New question, leader of the third party.

Mr Hampton: Premier, I have another question about water, and it concerns the actions of officials of your government endangering the drinking water in the township of West Perth. The township of West Perth has so little faith in your government’s ability to protect its residents’ water that it introduced a comprehensive set of local bylaws which, shockingly, your government is directly trying to overturn.

The township put a cap on the number of livestock that would be allowed on large-scale intensive farms, but your government has challenged the bylaw and has now taken the municipality to the Ontario Municipal Board. During that hearing, your staff reassured the OMB that things were in hand, but West Perth township Mayor John Van Bakel says that your government’s current system requires one farmer to complain and report another farmer. He says that it is completely reactive, that there’s nothing proactive happening.

Premier, if your government is not prepared to act to protect the surface water, why are you stopping municipalities from doing what they can to protect the surface water?

Hon Mr Harris: I think the Minister of Municipal Affairs can respond.

Hon Tony Clement (Minister of Municipal Affairs and Housing): As the honourable member might know, this is a matter that is before the OMB. I can report to this House that the government is taking a position at the OMB. We are taking a position that is consistent with the provincial policy statement, which is designed to protect environmental resources, including water.
Mr Hampton: Minister, the mayor of West Perth, who happens to be a farmer himself, says, “We’ve lost confidence in this government’s ability to enforce.” That’s a direct quote.

During the OMB hearing, the mayor, who is a farmer, said he’s simply trying to protect the township, and most of his ratepayers agree with him. The mayor says there are fewer family farms now in West Perth, but those that are there have far more livestock per acre of land than ever before. He has been worried about the effect factory farming might have on the community’s ability to protect its water. Now that Walkerton has highlighted his concerns, he says he is more concerned than ever about the township’s capacity to protect the water.

Minister, why are you before the OMB trying to strike down the bylaw of a municipality that is trying to do the job that your government won’t do?

Hon Mr Clement: As the honourable member well knows, it is the position of this government to protect the provincial interest as enunciated in the provincial policy statements and in the Planning Act. There are ways to get at the problems that he is talking about, and there are ways to do so that are perfectly consistent with the interests of the public, which is clean water, clean air and clean soil, and there are also ways that contradict that. It is our position that there are ways to get at this problem.

I can tell you that my colleague the Honourable Minister of Agriculture, Food and Rural Affairs has had a task force that has been going around to the rural municipalities to deal with intensive farming issues. There is a report due on that. Those are the kinds of things we as a provincial government can do. Those are the ways we can be helpful, not only in West Perth but throughout the province, on the particular issue the member is concerned about.

There are ways to do that, and we are doing so in a way that is protective of the provincial interest and is consistent with the general policies of cleaner air, cleaner water and cleaner soil.

COST OF ELECTRICAL POWER

Mr Sean G. Conway (Renfrew-Nipissing-Pembroke): My question is to the Minister of Energy, and it concerns electricity rates. Two years ago, you promised the consumers of Ontario that you and your colleagues were going to enact an energy policy, an electricity policy, that would have at its core a competitive marketplace that was going to bring rates down. That was your promise. Now you are attacking municipalities for what they are doing, playing by the rules of the game as you wrote them, and most people are discovering that their rates are going up.

My question to you today is very simply this: In the last few weeks, many of my colleagues with names like McLeod and Gravelle and Lalonde and Crozier have come to me, as energy critic for the Liberal Party, and asked me why it is that large industrial consumers in their communities who are direct customers of Ontario Hydro are being told to get ready for a 20% rate increase later this fall. Why is that happening from your wholly-owned subsidiary, and what specifically are you going to do to deal with that very significant and surprising rate escalation from Ontario Hydro, a company that you control?

Hon Jim Wilson (Minister of Energy, Science and Technology): First of all, in the 40 jurisdictions in the world that have introduced electricity competition, nowhere have rates gone up. Everywhere have rates gone down. Rates have gone down between 5% and 40%, whether that be the UK, Australia, New Zealand, 23 American states—40 jurisdictions in the world.

Clearly, with the cap and the freeze we’ve had on hydro rates for the five years that we’ve been in office, the best guarantee of lower rates in the future—and this is what we’ve always said—is competition and a competitive market in the generation of electricity.

Rates will go up if municipalities continue to do what they are doing. Some of them are holding the generators to ransom, because you have to use their wires to get your power to people’s homes and businesses. We cannot allow them to double and triple the distribution rates simply to take that money and pad their municipal budgets. That can’t be allowed. All the partners have to work together to make rates come down and allow us to introduce a competitive market in this province.

Mr Conway: It is a pathetic sight: Jim Wilson playing Charlie McCarthy to Bill Farlinger’s Edgar Bergen, because the government promised one thing but is delivering something quite different. They promised competition, but they are not delivering competition. If you talk to people like Falconbridge and Inco and a host of other large and small industrial and residential consumers, they will tell you they are not seeing a competitive marketplace.

It’s worse than that. Nobody expected that Ontario Hydro Retail was going to get bigger, not smaller. One of the reasons we’re not seeing the kind of restructuring that would give consumer benefits on the retail side is that Jim Wilson is giving you a bigger, not a smaller, Ontario Hydro Retail because he rigged the rules in his policy in favour of his hydro monopoly.

My question to you is, what today are you prepared to offer the consumers, large and small, in this province? What are you prepared to do to remove the unfair advantages that you gave in your electricity Bill 35 to your companies, Hydro Generation and Ontario Hydro Retail, that are in the marketplace today acting as monopolists and gouging the hell out of large and small electricity consumers?

Hon Mr Wilson: I’ll try and answer the questions here. First of all, we put in place two weeks ago a four-year transition program for those 136 companies that, by previous governments, were given special rates in the province, rates lower than Mrs Jones can get at her home in Alliston, rates lower than anyone else can get. It’s unfair, but we are prepared, and we’ve told those companies there’s a transition program in place until compe-
tion is in place and they have the ability to shop around for lower rates.

So we’re going to wean those companies off their preferred rates until competition. There is no competition yet because the starting pistol only goes off at the end of this year or when the market opens. It will take three or four years until there is competition, and then those companies will be able to shop around. Those same companies—and I dare you to find one that doesn’t agree with a competitive market—and the association of major power users in the province have urged this government to move and to move quickly to introduce competition. That’s exactly what we’re doing.

MENTAL HEALTH SERVICES

Ms Marilyn Mushinski (Scarborough Centre): My question today is for the Minister of Health and Long-Term Care. Yesterday I had the opportunity to attend the opening of Gatesview House in Scarborough. Gatesview House is run by the Rouge Valley Health System and provides housing and other supports for mental health patients in a community setting. I wonder if you could inform this House what the government has done to ensure that important services like this are available for mental health patients.

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): Our government has moved forward in order to ensure that individuals who suffer from serious mental illness have access to high-quality services right in their own community. As the member has just indicated, she did attend the opening yesterday of Gatesview House in Scarborough, which is run by the Rouge Valley Health System.

We want to make sure there is a continuum of care available for those people who suffer from serious mental illness. We did allocate a total of $45 million, and so far, $20 million has been awarded in order that we can have an additional 1,000 beds in Toronto, in Hamilton and in Ottawa. This is part of that move to provide the necessary housing for those individuals.

Ms Mushinski: Gatesview House has been made possible in part by the efforts of police officers like Community Relations Officer Barry Gyton of 42 division, who regularly deal with the mentally ill. In fact, Inspector Gary Ellis of 42 division has been working on a project that brings together front-line police officers and mental health workers. The project consists of mobile crisis units that help officers deal with mental health calls. Individuals can then get the mental health services they need, rather than being taken into police custody. What is your ministry doing to encourage community organizations to get involved to help deliver community-based mental health services?

Hon Mrs Witmer: Again, we are most anxious to ensure that there is a continuum of care provided for those individuals who suffer from mental illness, beginning with preventive care and then, of course, community-based services as well as institutional care. We have invested since 1995 a total of $150 million into additional mental health services, but particularly in the area of community-based funding, the amount of money that has been allocated since 1995 has increased by about 95%. It has gone from $239 million to $466 million. In doing so in Toronto we do work with the community-based organizations, and we’ve actually set aside $25.1 million for community-based services. We now have the ACT teams who support the seriously mentally ill in the community 24 hours a day. We have the court diversion programs, we have crisis services, we have case management, and we also have support for families.

1510

HOME CARE

Mrs Lyn McLeod (Thunder Bay-Atikokan): My question is for the Minister of Health. The Ontario Association of Community Care Access Centres released a report on the state of home care last week. The report tells us that more than 11,000 people are stuck on a waiting list for home care. They can’t get homemaking or speech therapy or physiotherapy. In fact, they often can’t even get the nursing services that are needed because people are being sent home from hospitals sooner. They are people like Judy Jordan Austin, who was sent home after a quadruple bypass and spent $6,000 to get the home nursing care that your government is not providing. If you can’t pay, you’re one of the 11,000 who get stuck on a waiting list.

Every home care agency is looking at huge increases in the need for service. They can’t even meet the existing needs, yet you put no new money into the budget for home care. Minister, the people you have made responsible for home care are telling you they can’t meet the need without more resources. How will you respond to their cry for help?

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): The member knows full well that our government has made a tremendous commitment to increasing the level of funding that is available for services in our communities. In fact, we are ahead of any other province in Canada when it comes to support of our residents in the area of home care.

Let’s take a look at Toronto, for example. In 1995, home care was receiving $110 million. I’m pleased to say that in the year 2000, home care in this city is receiving $230 million. That is an increase of $120 million and 105%.

In each and every community throughout this province since 1995 there have been tremendous increases in funding in order to ensure that our citizens get the highest funding per capita, when it comes to community services, of any province anywhere in Canada.

Mrs McLeod: What I know is what the people who take the calls day in and day out from people who need care are trying to tell you. They’re trying to tell you that there are 11,000 people today, at this point in time, who are stuck on a waiting list and can’t get the care they
need. Some of these are people who have been sent home from hospital early because of your cuts to hospitals. Without nursing care, they'll be back in hospital again, with complications, and it will cost a lot more to provide care there. Some of the people on the waiting list have had heart surgery or hip replacements, and if they can't get the physiotherapy, they're not going to recover properly. Some of them are frail elderly seniors, and without care they are going to have to go into long-term-care facilities, and you already have a waiting list of 18,000 for long-term-care beds. If those frail elderly seniors don't get the care while they are waiting for a long-term-care bed, they're going to have serious accidents, they're going to become ill, and then you'll have to provide care.

Minister, I think you know that the funding you're providing for home care doesn't meet the increased demands for care, and that's why your answer has been to ration home care. You've refused to deal with either the funding shortage or the staff shortages. I ask you again, as a start, if you are truly committed to providing care at home, will you make a commitment today to increase the home care budget to match the increased demand for services that exists now and to pay fair salaries for home care workers?

**Hon Mrs Witmer:** The member knows that we are very committed to ensuring the health and safety of all residents in the province of Ontario. I have already indicated that we spend the highest per capita in this province; it's about $115 per capita. The next highest is Manitoba, with $97 per capita. I'm also very pleased to indicate that currently we are spending about $1.5 billion on home and community services. We are also one of only three provinces that do not charge a copayment for personal care and homemaking services.

However, I understand that there is a report and I want to tell the member opposite that we will review each recommendation. We are always concerned, and if there is something more we need to do, I can assure the member that it would be our plan to continue to address those concerns, as we have in the past.

**E-COMMERCE LEGISLATION**

**Mr Doug Galt (Northumberland):** My question today is for the Attorney General. Last Tuesday you introduced the Electronic Commerce Act. I think this is indeed an excellent move by our government considering the technological advances that we’ve witnessed over the last few years. We need to make sure that our laws are up to date and accommodate our technological environment.

Minister, what are the benefits of Ontario enacting legislation to govern electronic commerce? A tough one.

**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** I thank the member for Northumberland for that difficult question. Currently the laws are not clear as to whether particular contractual requirements are met by electronic communications. This legal uncertainty can slow the adoption of electronic processes and business transactions. It is this uncertainty that reduces the efficiency of operations in government and in the private sector, hurting the competitiveness of our economy in Ontario.

That is why we’ve introduced the Electronic Commerce Act. By making it possible to bring legal effect to electronic contracts, more people will engage in on-line business. This in turn will stimulate the economy. As consumers become more confident in engaging in e-business, companies will realize profitability and increase investment in the industry.

With all these global and technological forces at work, this government is ensuring the continued prosperity of Ontario with the introduction of the Electronic Commerce Act.

**Mr Galt:** Thank you very much, Minister, for that response. That’s exactly what I was trying to explain to the opposition yesterday afternoon, but they didn’t seem to quite understand it.

Like many of my constituents, I’m concerned with the lack of documentation when making a purchase over the Internet. There’s a possibility, of course, of mistakes being made. Therefore, consumer confidence in using electronic commerce is still just a little bit shaky. How will consumers be protected by this proposed legislation?

**Hon Mr Flaherty:** The member for Northumberland has raised an important question about consumer protection in the electronic world. Consumers operating in an on-line world with no paper documentation certainly need protection. So the proposed legislation contains a special rule about mistakes made by individuals in dealing with an electronic agent; that is, an automated source like a Web site. It would allow individuals to cancel the mistaken transaction unless the merchant provided a mechanism to avoid or correct mistakes at the time of the order. This encourages merchants to design sites with confirming messages like, “Are you sure?” Thus, consumer confidence in using electronic commerce will increase.

This government is dedicated to improving the way we do business. We are proud to be taking a leadership role in electronic commerce.

**RETIREMENT HOMES**

**Ms Frances Lankin (Beaches-East York):** My question is to the minister responsible for seniors. Last week I told you that the city of Toronto’s retirement home inspection program was going to be cancelled at the end of this month unless you send them a cheque. The hotline will be cancelled; the inspectors will be laid off. You have the power to make a difference here, and you shrugged off that question.

Last October I raised this issue in the House and sent the Minister of Health a letter with proposals to address the crisis of unregulated retirement homes. You did nothing to respond to those proposals.

Then you had your parliamentary assistant carry out closed-door consultations. When we were informed last week that there would be no report from that, I asked you
to release her findings and recommendations, and you didn’t answer that question.

Today we learn that the Ottawa-Carleton Council on Aging has requested a copy of the report and has been told that in fact there is no written report. The assistant deputy minister, Geoff Quirt, told them you were given a verbal report by your parliamentary assistant.

Minister, I want to know what your parliamentary assistant heard, I want to know what recommendations she made, and I want to know why you’re sitting on this information and not making it public.

Hon Helen Johns (Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women): I’d like to thank the member opposite for the question. Let me tell you that my parliamentary assistant did go out across the province and talked to a great number of people, as did I in the office, to ensure that we understood everything—lots of information about rest and retirement homes across the province. I still continue to meet with a number of organizations about rest and retirement homes, including ORCA, the Ontario Residential Care Association. I’ve met with the city of Toronto. I’ve also met with AMO on this issue. We continue to meet to ensure that we, along with our municipal partners in this issue, work towards safety for the seniors who live in rest and retirement homes in our province.

1520

Ms Lankin: Well, if that’s the case, Minister, then you will hear what I’m hearing, which is an overwhelming cry for the province to step in and regulate.

Last fall, there was an investigation in Toronto that revealed the most horrendous abuse and neglect in some of our homes: residents left to sit in their urine and feces for hours; residents sometimes tied into wheelchairs; the same food being served several days in a row; staff not giving residents their medication.

City inspectors put in place a response with a hotline and the inspectors found that conditions in 75% of these premises were substandard. But the municipality does not have the jurisdiction to regulate standards of care, Minister.

The deputy mayor of Toronto has called on you to regulate rest and retirement homes. Other municipalities are adding their voices to that very same request, and now we’ve learned that the regional council of Ottawa-Carleton is considering a motion tomorrow to demand that your government make the parliamentary assistant’s report public.

Minister, word is out that this is all a sham and that you had already decided what you were going to do. Top health officials in this province have informed me that your government is going to proceed with self-regulation of retirement homes through the industry’s own lobby group.

Will you assure us that you will not hand over this very important job to an industry that is not capable of protecting the interests of those frail and vulnerable seniors? Will you today deny that that is your plan?

Hon Mrs Johns: What I’m very happy to confirm today is that the Harris government is very concerned about the safety of our seniors all across the province.

We’ve entered into a number of different options and important policy decisions with respect to seniors and their safety. I think about elder abuse; it’s the first time we’ve had a round table on this.

It’s a little sacrosanct here today to think about what happened in the time of the NDP and the Liberals with respect to retirement homes. In 1987, the Liberals set up an advisory committee to look at this issue, and they did nothing. Early in the NDP mandate, the government appointed a commission to examine options for the regulation of retirement homes and, surprise, surprise, the report did not support provincial regulations or inspections, and yet here today, when both of those parties had the option to do something, they ask me what we’re doing.

We continue to work towards ensuring that seniors in retirement homes are safe. We continue to work for alternatives that allow me, with the municipalities, to ensure that seniors are safe in their homes, and I continue to say that municipalities have a role here to ensure that they enforce bylaws that allow seniors to be safe in their retirement homes.

WASTE DISPOSAL

Mr James J. Bradley (St Catharines): I have a question for the Minister of the Environment.

Minister, as you would be aware, the city of Toronto is allowed right now to have its improperly treated waste from sewage treatment plants spread on farmland in Ontario. Even though it’s against the Ministry of the Environment guidelines, you’re allowing that. But today I want to ask you about another potentially life-threatening issue regarding hauled sewage, which is the untreated waste from holding tanks, from portable toilets and from septic tanks. Knowing that it impacts on water, what assurance can you give the people of rural Ontario, in places like Hillsburgh and Mount Albert, that hauled, untreated sewage dumped on farmland does not pose a threat to the drinking water and the safety of drinking water in those areas and to public health?

Hon Dan Newman (Minister of the Environment): I can tell the member from St Catharines that we on this side take the protection of the environment very seriously, be it the protection of the water in this province, be it the protection of air or be it the protection of the land in the province. I can tell you that whatever decisions are made here, the protection of the environment is utmost in our minds.

With respect to the application and treatment of bio-solids, we have the strictest standards in Canada, and the application of sewage bio-solids is environmentally safe. It’s of value to agricultural production as long as strong environmental standards are maintained.

Mr Bradley: You can have the strictest standards in all the world, but if you’re not enforcing those standards,
if you don’t have the staff and resources to do it, it’s useless.

It reminds me of the treated waste, in this case—maybe untreated waste in some cases—the sludge that is produced from an area where there was a most virulent kind of E coli, Walkerton. What are you doing with the sludge, the treated and untreated waste, that has accumulated from Walkerton now, that has that most virulent strain of E coli? What are you doing with that, and what do you intend to do with it?

**Hon Mr Newman:** I can assure the member opposite that each application is reviewed on a case-by-case basis prior to the issuing of a certificate of approval to ensure that it meets the strict requirements for protection of the environment and human health. Certificates of approval contain specific requirements controlling all aspects of material shipment and application to land, including separation distances from groundwater and surface water, quality of bio-solids and application rates.

**LANDFILL**

**Mrs Tina R. Molinari (Thornhill):** My question is also for the Minister of the Environment. I read in the newspaper today that there is a report going around indicating a possibility that the Keele Valley dump could remain open as late as 2006. My constituents of Thornhill and the constituents of the member for Vaughan-King-Aurora have indicated time and again that they do not want this dump to stay open any later than 2002. They have had to deal with having this dump in their backyard far too long. As the Minister of the Environment, what do you have to say about this report?

**Hon Dan Newman (Minister of the Environment):** From my understanding, this report was a staff-to-council report and is nothing more than advice to council. No decision has been made either way on the closure of the dump. The city of Toronto is well aware of the concerns of the residents of Vaughan and the surrounding areas. I will be encouraging the city to respect the wishes of these residents and to close the dump by 2002.

**Mrs Molinari:** Minister, there are some Toronto councillors out there responding to this report suggesting that keeping this dump open is good for the city of Toronto’s bottom line. Surely this isn’t a matter of dollars and cents. I would hope that these councillors would come to their senses and reassure the people of my riding and the surrounding ridings that keeping the dump open for another three to five years is unthinkable. Minister, what will you do if the city of Toronto refuses to close the dump by 2002?

**Hon Mr Newman:** The member for Thornhill is correct. Keeping the Keele Valley dump open for an additional three to five years is a bad idea. There are numerous reasons why environmentally it is the wrong thing to do. Fortunately the province does have legislative options to ensure that the Keele Valley dump is not extended beyond 2002. Let me reassure the member and her constituents that the province’s support is behind them on this issue.

**MINISTRY OF THE ENVIRONMENT**

**Mr Jean-Marc Lalonde (Glengarry-Prescott-Russell):** My question is for the Minister of the Environment. I have with me today a copy of a letter written to you by the mayor of Cumberland on March 13. In this letter to you he explained that he is very concerned about the complaints received from his residents that there is discharge of septic effluence in ditches and water ponds. He also was very concerned about the quality of drinking water in his community, so he called the MOE rep to check out the problem. After discussing the situation with the MOE rep, it was determined that many wells in this community were contaminated with coliform.

He then wrote to your office and asked for help under the provincial water protection fund. Like the township of Russell and the village of Casselman, who also had requested funding under this program, they were turned down by you. I must sadly tell you that in the village of Cumberland today there are 20 families having to boil their water, and they have been doing so for over a month.

Can you tell me, Minister, when can the mayor of Cumberland expect the necessary help and funding from your ministry to do the EA study and help to correct the water situation in the village of Cumberland? Or do the people of Cumberland not matter to you, like the people of Walkerton didn’t matter to you? Does the mayor have to beg or can I tell him that help is on the way?

**Hon Dan Newman (Minister of the Environment):** In fact, we care about all the people in Ontario. That’s what this government does. We care about the environment of this province and the people of this province.

I want to say to the member opposite that there are inspections being conducted of each water facility in our province. This year 630 facilities will be inspected by the end of the year. We’re also ensuring that each and every certificate of approval for those facilities is reviewed and that there is only one certificate of approval in place for each facility. Beyond that, certificates of approval will be reviewed every three years thereafter, and that will include all the communities in the member’s riding.

**Mr Lalonde:** Minister, this is exactly the type of answer I expect to hear from you. In your letter of May 11 to the mayor of Cumberland, you said you had no time to meet with him to discuss the village of Cumberland’s water problems, and you told him to seek alternate sources of funding. The staff in your office have learned your message well. You are passing the buck. They have told me that the mayor should contact the Minister of Agriculture, Food and Rural Affairs, as he possibly could help them because he has $120 million under the Ontario small town and rural fund or, if that doesn’t work, they suggested the mayor of Cumberland should contact the Minister of Finance, as funding for
CORRECTIONAL SERVICES

Mr John O’Toole (Durham): My question is to the Minister of Correctional Services. Constituents of mine in Durham have been bringing to my attention the fact that there has been improper release of inmates from some provincial institutions. As members of the House will know, an inmate who has not properly been released has not fully paid their debt to society.

I believe public safety should be a focus of our government’s policy, as you know it is. The Blueprint document outlined measures to show how seriously we take the matter of street and community safety. Minister, how concerned are you on the occasion when inmates are released early from prison?

Hon Rob Sampson (Minister of Correctional Services): I’d like to thank the member for Durham for the question. He rarely gets an opportunity to raise questions in the House, and I know that when he does it’s a very important question to him and a very important question to the people he very dutifully represents.

I, of course, take this matter quite seriously, as frankly do all people in our ministry. Any number of improper releases, no matter how they occur or where they occur, is totally unacceptable, which is why in 1997 this government made the effort to start to track and measure these statistics and why we are now embarking as a ministry on a series of performance standards that will apply across all institutions in this province, no matter who will be running them, so that we can map very quickly and very carefully, and monitor very carefully, the performance of these institutions that relate to the very important issue of public safety.

Mr O’Toole: Thank you very much for both the compliment, Minister, as well as the opportunity to ask a supplementary question. On a more serious nature, with your opinion of improper releases, it’s clear to me that you are on the side of community safety. The people of Ontario would like assurance that improper releases will not continue to be a problem in the future.

Minister, what concrete measures has your ministry taken to ensure me and my constituents and the people of Ontario that improper releases will not happen in the future?

Hon Mr Sampson: We’re taking a number of steps, a number of initiatives. One which I spoke to in the first part of the question was of course the establishment of standards which were desperately lacking in the system and which will help us track performance and accountability in the system. The other, frankly, is a far more automated, integrated justice system that will allow us to make sure that ministry staff at the front line are spending less time filling out paperwork and more time doing their job and supervising the individuals under their care and custody. We’re going to simply use technology to help us do a better job, something the previous governments were not prepared to do but that we’re prepared to invest in.

PETITIONS

MUNICIPAL RESTRUCTURING

Mr Michael Gravelle (Thunder Bay-Superior North): The forced amalgamation of Greenstone—the communities of Beardmore, Longlac, Geraldton and Nakina, as well as Caramat, Jellicoe and other communities—is very upsetting to a lot of people. Petitions keep coming in. I have 400 signatures here from the town of Longlac. The petition reads:

“To the Legislative Assembly of Ontario:
“Whereas commissioner Bob Gray felt that the amalgamation of the towns of Longlac, Geraldton and the townships of Beardmore and Nakina would be better served as one municipality; and

“Therefore we, the undersigned, petition the Legislative Assembly to ensure that the corporation of the town of Longlac becomes the ward of Greenstone in the province of Ontario.”

The petition is signed by 400 people.

SAFE DRINKING WATER LEGISLATION

Ms Marilyn Churley (Broadview-Greenwood): The petitions are already pouring in in support of my private member’s bill, the Safe Drinking Water Act. It reads:
“To the Legislative Assembly of Ontario:

“Whereas the people of Ontario have the right to receive clean and safe drinking water; and

“Whereas clean, safe drinking water is a basic human entitlement and essential for the protection of human health; and

“Whereas the people of Ontario have the right to receive accurate and immediate information about the quality of water; and

“Whereas Mike Harris and the government of Ontario have failed to protect the quality of drinking water in Ontario; and

“Whereas Mike Harris and the government of Ontario have failed to provide the necessary financial resources to the Ministry of the Environment; and

“Whereas the policies of Mike Harris and the government of Ontario have endangered the environment and the health of the citizens of Ontario;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

“(1) immediately restore adequate funding and staffing to the Ministry of the Environment; and

“(2) immediately pass into law Bill 96, the Safe Drinking Water Act, 2000.”

I completely agree with this petition and will affix my signature.

DURHAM COLLEGE

Mr John O’Toole (Durham): I’m again presenting a whole bunch of petitions here from my riding of Durham. This one is from the Lions Club of Newcastle, along with Albert Maxwell and Jeannie Carter and a number of other constituents. In fact, all of Durham probably supports this.

“Whereas we request the Legislative Assembly to support Durham College in their bid for university status; and

“We, the undersigned, petition the Legislative Assembly as follows:

“We feel for the economic well-being of Durham a university is necessary. We strongly support the bid by Durham College to achieve this status in the immediate future.”

I bring this to the attention of the House and to Minister Cunningham, who is here today.

SAFE STREETS LEGISLATION

Mrs Leona Dombrowsky (Hastings-Frontenac-Lennox and Addington): I have a petition to the Legislative Assembly of Ontario.

“Whereas Bill 8, the squeegee bill, was never intended to prevent Ontario charities from holding roadside toll events as fundraisers; and

“Whereas local police departments and municipalities do not have the right to supersede legislation and give permission for these events to take place; and

“Whereas many Ontario service clubs and charities have traditionally used roadside toll events to assist them in meeting their charitable commitments; and

“Whereas Bill 8, the squeegee bill, now prevents these worthy causes from benefiting from these fundraising activities; and

“Whereas Bill 64, An Act to amend the Safe Streets Act and the Highway Traffic Act, will rectify this situation;

“We, the undersigned, petition the Legislative Assembly of Ontario to support Bill 64.”

I very happily have signed my signature to this petition and will give it to Maria Dombrowsky, the page.

KARLA HOMOLKA

Ms Marilyn Mushinski (Scarborough Centre): I have a petition addressed to the Legislative Assembly of Ontario that reads as follows:

“Whereas Karla Homolka and Paul Bernardo were responsible for terrorizing entire communities in southern Ontario; and

“Whereas the Ontario government of the day made a deal with the devil with Karla Homolka resulting in a sentence that does not truly make her pay for her crimes; and

“Whereas our communities have not yet fully recovered from the trauma and sadness caused by Karla Homolka; and

“Whereas Karla Homolka believes that she should be entitled to passes to leave prison with an escort; and

“Whereas the people of Ontario believe that criminals should be forced to serve sentences that reflect the seriousness of their crimes;

“Therefore we, the undersigned, respectfully petition the Legislative Assembly of Ontario as follows:

“That the government of Ontario will:

“Do everything within its power to ensure that Karla Homolka serves her full sentence;

“Continue to reform parole and make it more difficult for serious offenders to return to our streets;

“Fight the federal government’s plan to release up to 1,600 more convicted criminals on to Ontario streets; and

“Ensure that the Ontario government’s sex offender registry is functioning as quickly as possible.”

I’m pleased to affix my signature to this petition.

HIGHWAY 138

Mr John C. Cleary (Stormont-Dundas-Charlottenburgh): I have a petition from many residents of Ontario.

“Whereas Highway 138 is the responsibility of the province. The highway is currently in disrepair, with numerous ruts and potholes. Motorists who drive all types of vehicles have noticed the poor state of the highway. These deplorable conditions have made driving a hazard and must be repaired to avoid tragic accidents.
“We, the undersigned, petition the Legislative Assembly as follows:

“That the government of Ontario provide more provincial funding for the repair and maintenance of Highway 138.”

I’ve also signed the petition.

FARMFARE PROGRAM

Mr David Christopherson (Hamilton West): I have petitions that read as follows:

“To the Legislative Assembly of Ontario:

“Whereas the government of Ontario introduced farmfare on September 21, 1999, to supplement their workfare program, forcing social assistance recipients to work on farms for their benefits;

“Whereas the Harris government of Ontario has not provided for any consultation or hearings regarding this initiative;

“Whereas the Harris government has excluded agricultural workers from protections under the provincial labour code by passing Bill 7;

“Whereas this exclusion is currently being appealed under the Canadian Charter of Rights for infringing on the right of association and equal benefit of law;

“We, the undersigned, petition the Legislative Assembly of Ontario to retract the farmfare program until hearings have been held and to reinstate the right of agricultural workers to allow them basic human rights protection under the labour code of Ontario.”

I proudly add my name to those of these petitioners as I am in support of this petition.

LORD’S PRAYER

Ms Marilyn Mushinski (Scarborough Centre): My petition reads as follows:

“How the Lord’s Prayer, also called Our Father, has been used to open the proceedings of municipal chambers and the Ontario Legislative Assembly since the beginning of Upper Canada in the 18th century; and

“Whereas such use of the Lord’s Prayer is part of Ontario’s long-standing heritage and a tradition that continues to play a significant role in contemporary Ontario life; and

“Whereas the Lord’s Prayer is a most meaningful expression of the religious convictions of many Ontario citizens;

“We, the undersigned, petition the Legislative Assembly of Ontario as follows:

“That the Parliament of Ontario maintain the use of the Lord’s Prayer in its proceedings, in accordance with its long-standing established custom, and do all in its power to maintain use of this prayer in municipal chambers in Ontario.”

I’m pleased to affix my signature to this petition.

NORTHERN HEALTH TRAVEL GRANT

Mr David Ramsay (Timiskaming-Cochrane): “To the Legislative Assembly of Ontario:

“Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

“Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

“Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

“Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north which creates a double standard for health care delivery in the province; and

“Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical locations;

“Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislative Assembly to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities.”

LORD’S PRAYER

Mr Garfield Dunlop (Simcoe North): “Whereas the Lord’s Prayer, Our Father, also called the Lord’s Prayer, has always been used to open the proceedings of municipal chambers and the Ontario Legislative Assembly since the beginning of Upper Canada under Lieutenant Governor John Graves Simcoe in the 18th century; and

“Whereas such use of the Lord’s Prayer is part of Ontario’s long-standing heritage and a tradition that continues to play a significant role in contemporary Ontario life;

“Whereas the Lord’s Prayer is the most meaningful expression of the religious convictions of many Ontario citizens;

“We, the undersigned, petition the Legislative Assembly of Ontario as follows:

“That the Parliament of Ontario maintain the use of the Lord’s Prayer in its proceedings, in accordance with its long-standing established custom, and do all in its power to maintain use of this prayer in municipal chambers in Ontario.”

I’ll sign my name to that as well.
WATER EXTRACTION

Mrs Leona Dombrowsky (Hastings-Frontenac-Lennox and Addington): I have a petition to the Legislative Assembly of Ontario:

"Whereas we strenuously object to permits to take water being issued by the Ministry of the Environment without adequate assessment of the consequences and without adequate consultation with the public and those people and groups who have expertise and interest;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"We request a moratorium on the issuing of permits to take water for non-farm, commercial and industrial use and the rescinding of all existing commercial water taking permits that are for bulk or bottled water export, outside of Ontario, until a comprehensive evaluation of our water needs is completed. An independent non-partisan body should undertake this evaluation."

This petition is signed by hundreds of people from my riding, and I very happily sign my name to this petition. I will be handing it to the legislative page Stephanie.

The Acting Speaker (Mr Tony Martin): Further petitions, member for Thunder Bay-Superior North—sorry, the member for Hamilton West.

Mr David Christopherson (Hamilton West): I'm going to get one of those rotating lights and a siren over here.

Mr Bart Maves (Niagara Falls): We thought you were gone already.

Mr Christopherson: Yes, I didn't leave, you know; I decided to stay.

SAFE DRINKING WATER LEGISLATION

Mr David Christopherson (Hamilton West): “To the Legislative Assembly of Ontario:

"Whereas the people of Ontario have the right to receive clean and safe drinking water; and

"Whereas the people of Ontario have the right to receive accurate and immediate information about the quality of water; and

"Whereas Mike Harris and the government of Ontario have failed to protect the quality of drinking water in Ontario; and

"Whereas Mike Harris and the government of Ontario have failed to provide the necessary financial resources to the Ministry of the Environment; and

"Whereas the policies of Mike Harris and the government of Ontario have endangered the environment and the health of the citizens of Ontario;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"(1) Immediately restore adequate funding and staffing to the Ministry of the Environment; and

"(2) Immediately pass into law Bill 96, the Safe Drinking Water Act, 2000."

I add my name to those of these petitioners.

MUNICIPAL RESTRUCTURING

Mr Michael Gravelle (Thunder Bay-Superior North): I have many more petitions in very strong opposition to the amalgamation of Greenstone. The petition reads:

"To the Legislative Assembly of Ontario:

"Whereas the corporation of the township of Nakina is an incorporated municipality; and

"Whereas the corporation of the township of Nakina has continued to operate as a community in its own right since 1923; and

"Whereas amalgamation with other distant communities could prove to be detrimental to the individualistic lifestyle associated with living in the township of Nakina; and

"Whereas the economic justification for the creation of Greenstone no longer exists, and its creation may result in a loss of local services and an increased tax burden on the residents of Nakina; and

"Whereas the residents of the township of Nakina would like to continue to be the municipality known as the corporation of the township of Nakina;

"Therefore we, the undersigned, petition the Legislative Assembly to ensure that the corporation of the township of Nakina continues to be a separate municipality in the province of Ontario.”

This is signed by almost every resident in Nakina. I’m pleased to add my name to the petition.

SCHOOL CLOSURES

Mr John C. Cleary (Stormont-Dundas-Charlottenburgh): I have another petition to the Legislative Assembly of Ontario.

"Whereas the Kinsmen/JS MacDonald school is slated for closure,

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"To direct the Upper Canada District School Board to remove the notice of closure for the Kinsmen/JS MacDonald special school facility.

"Since 1963 the special education facility has adequately served the needs of those students requiring special education programs and services throughout Stormont-Dundas-Charlottenburgh.

"Presently, the Kinsmen school meets the needs of 45 children ranging from minor learning disabilities, behavioural to more complex multi-challenges.”

I have also signed the petition.
ORDERS OF THE DAY

BRIAN’S LAW (MENTAL HEALTH
LEGISLATIVE REFORM), 2000
LOI BRIAN DE 2000
SUR LA RÉFORME LEGISLATIVE
CONCERNANT LA SANTÉ MENTALE

Mr Clark, on behalf of Mrs Witmer, moved third reading of the following bill:

Bill 68, An Act, in memory of Brian Smith, to amend the Mental Health Act and the Health Care Consent Act, 1996 / Projet de loi 68, Loi à la mémoire de Brian Smith modifiant la Loi sur la santé mentale et la Loi de 1996 sur le consentement aux soins de santé.

Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader): On a point of order, Mr Speaker: We have been attempting to reason out the clock tonight, and because we’ve gone into debate late it has been more difficult than we had thought.

The government would like to ask for unanimous consent to have 20 minutes for the government to speak, 10 minutes by the leadoff speaker and 10 minutes by the Minister of Health to sum up, and the rest of the time split between the other two parties, which would give 55 minutes each to the other two parties. I would ask for consent to have no questions or comments after speakers minutes each to the other two parties. I would ask for consent to have 20 minutes for the government to speak, and the rest of the time

Mr Dwight Duncan (Windsor-St Clair): On a point of order, Mr Speaker: We have been attempting to reason out the clock tonight, and because we’ve gone into debate late it has been more difficult than we had thought.

The government would like to ask for unanimous consent to have 20 minutes for the government to speak, 10 minutes by the leadoff speaker and 10 minutes by the Minister of Health to sum up, and the rest of the time split between the other two parties, which would give 55 minutes each to the other two parties. I would ask for consent to have no questions or comments after speakers and I would ask further consent to extend the clock beyond 6 o’clock to give both of the opposition parties the opportunity to speak for 55 minutes each.

The Acting Speaker (Mr Tony Martin): Do we have unanimous consent?

Mr Dwight Duncan (Windsor-St Clair): On a point of order, Mr Speaker: My understanding was that the government had agreed to allow the third party to have an hour’s time, and I can certainly appreciate their desire to have that. My understanding is that the government, since that arrangement was made, has reneged on their undertaking to the third party. The other point to bear in mind is that the government made the rule changes that have allowed this situation to crop up.

That being said, it is our desire to get this bill finished tonight, and I’m prepared to accept that provided we retain our full hour. We’re prepared to go the extra time. We have enough members in our caucus who need and want the opportunity to speak. You’re asking for another 20 minutes after 6 o’clock. I think that’s a fair compromise on everybody’s part.

Hon Mr Sterling: I think the delay, in fairness, was caused by the demonstration and clearing of the gallery. That probably delayed us by 15 or 20 minutes today.

Therefore, I seek unanimous consent for the government to take 20 minutes: 10 minutes leadoff by Mr Clark and 10 minutes summation by the Minister of Health. I seek consent that each other party have 60 minutes to debate the issue and I seek consent to extend the clock beyond 6 of the clock to complete the debate as outlined.

Ms Frances Lankin (Beaches-East York): Are you going to defer the vote?

Hon Mr Sterling: If you want to defer the vote, that’s fine by us as well. The consent also included no questions or answers with regard to the debate after each person. So we will be deferring the vote as well.

Mr David Christopherson (Hamilton West): Just on this, Mr Speaker, since we’ve got into a little bit of dialogue on it, I want the record to reflect the fact that we do not have time allocation on this. It was sent out after first reading. I think it’s only the second bill we’ve done that with. My critic the deputy leader of the NDP has spent an incredible amount of time, and I think members, when they’re speaking today, will probably—I wouldn’t be surprised—reflect on that from the other benches.

We have worked as co-operatively as we possibly can because of the importance of this issue and the sense we had from the government that they were not seeking to ram something through, but were looking for a thoughtful review on a most important issue.

Having said that, one of the few things we said we definitely had to have at the end of the day was our opportunity, especially in the third party where sometimes, depending on the rotation and how things turn out, we can end up with little or no time whatsoever. There was a request that at the very least we would receive our hour on third reading so that our critic would have an opportunity to put our position forward.

There’s been a little bit of discussion here. We’re prepared to accept further amending of the understanding, providing we have that hour and providing the vote will not take place, because we have members who are on standby to vote at 5:55 and they need to be released from that. With that understanding and with a short review of how we got to this point, even though the majority of our caucus will be opposing the bill at the end of the day, I think there has been a great deal of co-operation between the three parties in looking at the issues. As long as we end things right here, because we’re not giving up another inch, we’ve got an agreement.

The Acting Speaker: Taking it for granted that after that the House will adjourn until 6:45. Is that correct? Unanimous agreement? OK.

The member for Stoney Creek.

Mr Brad Clark (Stoney Creek): As we’ve indicated in the agreement, the minister will be sharing my time. She’ll have 10 minutes to summarize at the very end.

This has been an interesting process for all of us, especially for me as the parliamentary assistant. We began this process with a document called The Next Steps, which was a proposed discussion paper in terms of how we were going to amend the Mental Health Act and the Health Care Consent Act.

We took that document on the road for consultations across Ontario. We heard from 300 participants. We received over 100 written briefs. We then came back and drafted the legislation and the legislation was brought into the Legislative Assembly for first reading, and then it was brought out under a very unusual circumstance to
Today, at 26, my son is unemployed. He hasn’t com-
both of us, requiring that I go to the justice of the peace
were a family in our neighbourhood.”
He began thinking there was a widespread conspiracy
being tormented by messages on the radio and television.
son began experiencing paranoid delusions. He began
graduation....
student. ... That summer he had a summer job in a field
science degree in environmental studies. He was an A
years old and began his fourth year at York University.
My son had his first psychotic episode in September
15. He’s going to be discharged” this coming Friday.
I’m a single parent and he’s my only child. My son lives
stitute decision-maker for my son who has schizophrenia.
hearings themselves, a mother:
“With a bill like this, we’re trying to help people who are violent as a result of their mental illness, who suffer
victimized as a result of their mental illness, who become
targets, people who are suffering from serious mental illness. It
has been about the people who commit suicide, who are
has been about the people who commit suicide, who are
victimized as a result of their mental illness, who become
violent as a result of their mental illness, who suffer
greatly as a result of their mental illness. That’s whom
this bill is about. That’s whom we’re trying to help.
I’d like to read into the record, from the actual
hearings themselves, a mother:
“I’m speaking as a mother, primary caregiver and sub-
stitute decision-maker for my son who has schizophrenia.
I’m a single parent and he’s my only child. My son lives
with me at home but has been in the hospital since March 15. He’s going to be discharged” this coming Friday.
“My son is not homeless or on the street. He does not
lack social services. My son is ill and he needs treatment.
My son had his first psychotic episode in September 1996, three and a half years ago. At that time, he was 23
years old and began his fourth year at York University.
He was looking forward to graduating with a bachelor of
science degree in environmental studies. He was an A
student. ... That summer he had a summer job in a field
that promised to lead to professional employment after graduation....
“But in September of 1996 everything changed. My
son began experiencing paranoid delusions. He began
being tormented by messages on the radio and television.
He began thinking there was a widespread conspiracy
against him, that the people in control of the conspiracy
were a family in our neighbourhood.”
“The last four hospitalizations have been traumatic for
both of us, requiring that I go to the justice of the peace
for form 2 and call the police to take him to the hospital.
Today, at 26, my son is unemployed. He hasn’t com-
pleted his university degree. His friends no longer call,
and many of our family members avoid contact.”
That’s the reality of serious mental illness. Those are
the people we’re trying to help. This bill does that.
I’d like to read into the record again from the hearings.
“Our youngest son became seriously ill with schizo-
phrenia in 1985. Over the next 12 years he was admitted
to hospital a dozen times and spend a third of his time as a
psychiatric patient, either in Ottawa hospitals or at
Brockville. We faced countless obstacles, many of them
stemming from the Ontario mental health law, in secur-
ing appropriate care for our son. We are fortunate that
today he has his own apartment, has daily assistance with
medication, and this support is succeeding in keeping
him of hospital. Nonetheless, we cannot help feeling the
12 years our son spent going in and out of the hospital,
the revolving door, could have been drastically reduced
or even eliminated if legislation like Bill 68 had been in
force.
“Our story is typical of many families where someone
in the family begins to show the symptoms of schizop-
phrenia. At first we thought our son was just suffering
from adolescent growing pains. A psychiatrist who saw
him regularly for a year failed to identify his illness. It
took three years.
“Then what? Under our Mental Health Act, our son
was considered well enough to leave hospital, though his
illness was not yet under control.” He continually had
problems to the point where he was living in a roaming
house in Toronto, and ended up trying to get to Pennsyl-
vania, where an alert border guard at the United States
border stopped him. “I should say that because of our
son’s condition, we could not, while we were both work-
ing, leave him in the house on his own.... The security
risks were too great.”
The individual I’m talking about who spoke was
Michael Cassidy, the former leader of the New Demo-
cratic Party.
He went on in these hearings to state that back in
1976, when he was originally debating the Mental Health
Act, he didn’t understand what they were truly doing at
that time. He didn’t realize the impacts it was going to
have later in his own life.
I think most of us do our very best to hear from
people, we do our very best to hear from the experts, but
we do our very best to hear from the families that are
suffering, the families that have children who are hurting
and the families that need help. That’s our job as legis-
lators, to try to develop that balance.
I think in Bill 68 we have developed that balance. It
has not been an easy task, as most of us on the committee
know, because there are disparate views across Ontario. I
can state with complete certainly that across Ontario
today there is not unanimous opinion regarding commu-
nity treatment orders from everyone who lives in the
province, that there are disparate viewpoints, that it is
highly contentious. But our job is to recognize—working
with the experts, working with the families to develop a
balance—a balance of individual rights, a balance from
the Constitution to make sure that societal rights and individual rights are balanced.

We have that responsibility. The Supreme Court of Canada has stated we have that responsibility. No Parliament would be denied the right to develop a balance between societal rights, protection and safety and laws against individual rights to freedom. As a result of that, we have come together with a bill that would allow people who are seriously mentally ill, who are a danger to themselves or a danger to others, to get the help they truly need.

From the hearings we heard the following statement:

“When you review Bill 68 and make your recommendations to the Legislature, we ask you to think of young people just beginning to suffer from serious mental illness, like our son was 15 years ago. Must these young people stay in the revolving-door syndrome for 12 years because Ontario puts so much emphasis on their civil rights that it effectively denies them needed treatment? Or will you proceed with Bill 68 and offer the hope that in future, people in our son’s situation will have the chance of early, effective and continuing treatment, and not suffer the waste of years and of talent that we have seen with our son?”

Again, that is the former leader of the New Democratic Party, Michael Cassidy, and I think he sums up very clearly where we are today. We have done our job as a committee, and I give great credit to Richard Patten, Lyn McLeod, Frances Lankin and Marie Bountrogianni, who helped me, sitting on the committee and working this through. It was an unusual experience. I think we all agree that it was a very unusual experience, trying to put our partisan hats aside and recognizing that this legislation has to go ahead and that we have to improve it to the best of our abilities. I willingly worked with the opposition to try and improve it, to try and bring in the amendments that would make the bill better. We didn’t always agree, but we did so respectfully and we brought the bill back to the House.

At this moment I really would like to encourage—and I heard there are some members in the House who still have concerns. We all have concerns. We are looking at the bill and we’re saying it’s time to try and bring in a balanced legislation, but at the end of the day I hope we can all sit down and vote in favour of this bill, unanimously in this House, so that we send a very clear message that the Ontario Legislative Assembly wants to improve the mental health system in Ontario once and for all.

Mrs. Lyn McLeod (Thunder Bay-Atikokan): I’ll be sharing my time with the members for Hamilton Mountain, Ottawa-Vanier, Kingston and the Islands and Ottawa Centre.

I had an opportunity in second reading debate on this bill to present my views, both my support for the intent of the bill and also my very real concerns about whether the bill, as it’s set out, can and will be implemented in accordance with that intent. So I’m not, in the somewhat limited time I have available today, going to reiterate my broader views of the bill.

I want to focus a little bit on the process we’ve been through as a committee since second reading. The member for Stoney Creek has said we’ve been through an unusual process, where we held the consultation hearings prior to second reading and then went into clause-by-clause consideration of the bill with the benefit of having heard those consultations and with a very real willingness, as the member for Stoney Creek has said, to really look at ways in which the bill could be improved.

I feel good about the fact that the government agreed to some amendments that we felt were important, which in fact incorporated elements of our amendments into amendments that they put forward. For example, one of the very important amendments was the addition of a purpose clause which sets out very clearly the intent of the community treatment order and who would be subject to a community treatment order. I think it’s important to read this amendment, which says: “The purpose of a community treatment order is to provide a person who suffers from a serious mental disorder with a comprehensive plan of community-based treatment or care and supervision that is less restrictive than being detained in a psychiatric facility. Without limiting the generality of the foregoing, a purpose is to provide such a plan for a person who, as a result of his or her serious mental disorder, experiences this pattern: the person is admitted to a psychiatric facility where his or her condition is usually stabilized; after being released from the facility, the person often stops the treatment or care and supervision; the person’s condition changes and, as a result, the person must be readmitted to a psychiatric facility.”

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The importance of including this clause in the bill is that it makes very specific that the people who are most likely to be helped by community treatment orders—in fact probably the only people who can be helped by community treatment orders—are those who are caught in what has been referred to as the revolving door syndrome, and who simply cannot sustain a treatment plan on their own.

I think it’s important that the privacy provisions have been tightened in the bill, as have the requirements to inform patients of their rights to consult a rights adviser and to a hearing before the Consent and Capacity Board. I appreciate the fact that the community treatment order portion of the bill is not going to be proclaimed until December 1, 2000. Our assumption, and we take it on good faith, is that this delay in the proclamation of the community treatment order portion of the bill is in order to take what will have to be very rapid action to put community supports in place. Because of course the gist of this bill is that without the community supports it cannot be beneficial and in fact, we would argue, legally cannot be implemented.

Lastly, there were other amendments, but the other amendment that we agreed to that I wanted to stress is that we have been able to build in a review of the com-
munity treatment orders within the third year after the community treatment orders are implemented, and then with subsequent reviews every five years, and with those reviews to be made public. To me, this is absolutely crucial because I share the concerns, probably of most members of this House, that although the intent of the bill is to take a significant step forward in having people with serious mental illness access treatment sooner, it will not be possible to fulfill that intent without the community supports being in place. This provision for a review will ensure that in a public way there will be an opportunity to hold the government to account and, indeed, future governments to account, to ensure that the intent of this bill is being fully satisfied through the provision of adequate treatment, support and resources.

I do want to note that there were some amendments which our party put forward that were not accepted by the government. It’s important for me to put these on the record. We had attempted in two amendments to set out principals that we think underlie the bill that we wanted to see recognized in law, and secondly, to include a bill of rights. Either one I think would have achieved the same objective. The government has put forward the argument that they are bringing forward a comprehensive patients’ bill of rights. We will look forward to that bill coming forward, but I quite frankly don’t believe that was a reason to preclude putting a bill of rights for those with mental illness into the Mental Health Act, just as there is a bill of rights in the Long-Term Care Act.

We argued very strongly that the term “community treatment order” should be changed to “community treatment agreement” because that would be a way of assuring those who feel this is a way of forcing treatment and of using force that the approach is to be one of consent, whether with a consenting individual with mental illness or a substitute decision-maker, but that without the consent of caring and responsible adults who are acting in that substitute decision-maker role, the community treatment order could not, in fact, be applied.

I had asked for the added recognition through amendment in law that the community treatment order could not authorize or require the use of physical force. I mention that because, again, it was for reassurance to those who have powerful images of people being held up against the wall and administered medication. Those images are so real for many of the psychiatric survivors’ groups that I felt it was important to have some further reassurance that this bill is not about the use of force. I do not believe that the bill is about the use of force. I do not believe that compliance with community treatment “orders,” since we weren’t successful in having “agreement” amended in the bill, is intended to be through the use of physical force. I respect that in the bill, but I was looking for some further assurance.

Lastly, on this issue of amendments—and there were, as the member for Stoney Creek said, a great many amendments—another one I wish we had been able to achieve was to have the establishment of a mental health advocacy office so there would be an independent body in a position to advise the minister on an ongoing basis about the needs that exist in providing treatment and support to those with mental illness in our communities.

Having addressed the amendments, I again want to recognize—and it’s not often in this House that I will say this—that the government’s intent in putting forward this bill is one of a sincere desire to provide treatment earlier to those with serious mental illness. I certainly respect the work that was done by the parliamentary assistant, the member for Stoney Creek, in working with the opposition parties and wanting to address our concerns, which we believe we were expressing on behalf of those who have very real concerns about the bill, and who has spoken to us both privately and in the committee setting.

The sincere concern is to provide care to those who can’t access treatment because of their illness and to restore them to life, as representatives of the Schizophrenia Society so often said to us. If there’s one reason why I stand today in support of the bill despite many concerns I have about its implementation, it’s because I can’t not hear the pleas of family members who have seen their loved ones deteriorate to the point where they become either dangerous to themselves or to others or who in fact simply have no life at all. If we can provide treatment to step in at a time when those individuals can indeed be restored to health and to life, I think we have to take the chance of moving forward.

But I want to recognize that there is potential here for misuse, not abuse. I’m satisfied from the committee hearings and from the amendment process that the criteria for this expanded involuntary treatment are sufficiently stringent that it will not lead to abuse of those with mental illness. If I felt any concern about the potential for abuse being greater than the potential for health, I could not support this bill today. But I still think there is potential for misuse. It would be misuse in failing to meet the intent to provide that access to treatment earlier in the course of illness and ensure a comprehensive treatment plan is provided and that those who get caught in the revolving door can stay on their treatment plan. That’s the intent. The onus will be on every member of this Legislature who supports this bill today to keep the government and future governments accountable, to make this bill work to the very real benefit of those with serious mental illness.

That means there must be enough beds for those who need hospitalization. The CTOs, the community treatment orders, must not become a dumping ground for those who simply from time to time cannot function in the community and need access to a hospital bed. We do not have that access today, and that must be part of providing comprehensive support and treatment. The community treatment order plans must be comprehensive. They cannot and must not be simply about enforcing medication, or everything that those of us who have anguished over this bill have put into it will be forfeit to a loss of the real intent of the bill. If there’s going to be a comprehensive plan, it means there has to be an adequate number of psychiatrists. That means this government
must deal with the fact that we have a physician shortage in this province, and the psychiatric shortage is one of the most critical indicators of that shortage.

There was a very tragic incident in Ottawa just recently with a suicidal teen. The suicidal teen, it says, was not able to access treatment on time because of a shortage of psychiatrists. That suicidal teen would not be helped by this bill, which is one of the reasons we have to look beyond just the comprehensive supports for community treatment orders, to look at whether or not there is comprehensive support for the other 95% of people who are not being addressed by this bill.

The shortage of psychiatrists is going to be a problem for the implementation of community treatment orders. It will be even more critical for providing timely treatment for those who are not the focus of Bill 68. If there is going to be comprehensive care both for those on community treatment orders and for the other 95% of people with serious mental illness, we have to have trained health care providers and community support workers able to provide support in the community. They have to be not only trained, but trained in a way that they’re sensitive to the needs of this vulnerable group of people. I will look to the regulations to ensure that this kind of training is put in place for all those who will be part of providing care and support under a community treatment order.

There further must be housing. We heard this over and over again, that there has to be housing that is affordable for those who are living in the community, and there has to be supported housing for those who need support in that housing setting.

I want to repeat that it would be a tragedy if, while we could help 5% of those who are the focus of this bill, the other 95% somehow got bumped, faced longer waiting lists for treatment because the priority was to meet the legal requirements of the community treatment orders. I want to reiterate my concern that our focus has to be not only on the comprehensiveness of supports for the community treatment orders, which are the focus of our review, but also on being very diligent in understanding that community supports have to be in place for all those with mental illness.

I’m concerned that the most likely outcome of the passage of this bill is that it won’t make any difference at all because there aren’t beds for those who need to be admitted, that it might not make any difference at all because there are no community supports to put community treatment orders in place in the comprehensive way that the bill demands.

But I also believe this bill could bring about significant benefits to those with mental illness. It could bring about the most benefits to all of those with mental illness if we do take our responsibilities in passing this bill seriously. If we do, then the needs of the mentally ill will not ever again be put on to a backburner, which is where I feel the needs of those with mental illness have been through successive governments over far too many years, with far too many studies and far too little action. We will not allow government to say, “In passing Bill 68, we have now dealt with mental illness.” It is just a first step. I think everyone who presented to our committee and people who are here from the Schizophrenia Society today would agree in ringing tones that this is only a first step and that the supports have to be there for it to work.

I do want to conclude in my last moment by going back to the testimony that was given to the committee by Alana Kainz, who is the widow of Brian Smith. She said: “This could easily be called Jeffery Arenburg’s law. Jeffery was a victim of a mental health law that failed him, too, when he shot Brian. There has been a small amount of opposition to naming this legislation after Brian. A handful are afraid that it sends a message that all people who are mentally ill are murderers. First of all, Brian was not murdered. I have come to terms with that. There were two victims here. Naming the law after one of the many victims puts a human face on the legislation and reminds us of its purpose. This is not about reacting to a serious event. It’s about preventing one. This is not about the many people with borderline, very manageable illnesses. This is about the most seriously ill and the severe consequences of them being left untreated for a period of time.”

Her testimony was important and should be influential in our thinking about the bill, as was the testimony from David Goldbloom and Robert Zipursky, physicians-in-chief dealing with the seriously mentally ill, who said to us—and I’ll just paraphrase—that this bill will not eliminate violence. It won’t eliminate homelessness. It won’t eliminate non-compliance among the mentally ill. But it does have the potential to help a small number of severely ill patients to live in the community with a level of help that would not otherwise be possible for them.

On the note of that intent, I will be lending my support to this bill.

The Acting Speaker: Further debate? The member for Hamilton Mountain.

Mrs Marie Bountrogianni (Hamilton Mountain): Thank you, Mr Speaker, and thank you to my colleague from Thunder Bay-Atikokan for allowing me to share her time.

I’ve been biased towards this bill from the beginning. I admit that and I confess that, which is why the process was so important to me and is why having a keen mind like Lyn McLeod substitute for me and be objective throughout this process was very important. We all owe her thanks for that.

I have to thank my colleague from Stoney Creek, Brad Clark. Although I wasn’t integral to this particular process, we have worked together before, I find him to be objective and with the right goals and intents in mind and, at least for these issues, agree with him and respect him. It was great working with you, Brad.

I get very upset when I hear people speaking against Bill 68, because of my bias, because of my professional background in dealing with kids or trying to help kids
people are psychiatric patients. I wonder where those people are when parents like Mrs Voukelatos, who has been here from the beginning, are chasing their kids through the alleyways, out of the garbage cans, out of the jails. Where are those people? Where are the supports? Where are the laws to protect those families and those patients when something like this isn’t in place? I get very emotional and very subjective, so I put that on the table up front.

There are, though, some inconsistencies with the positive intent of Bill 68 and this government’s record with health care. It has improved somewhat in the last few weeks, at least in my community, but I have to set that bias aside for now and remind this House about how much was cut back from health care in the first mandate by the fact that their social housing stopped completely with this government’s first mandate and did affect these very people we’re trying to help now. In fact, the people who come to my office whom I can never help, ever, are the people looking for social housing, and many of those people are psychiatric patients. I know I can’t use the word “hypocrisy,” but that inconsistency is still there.

Hon Cameron Jackson (Minister of Tourism): It is for Beth Phinney too, because they cancelled the program.

Mrs Bountrogianni: I’m not going to make any apologies, member opposite, for the federal government. I’m just stating the facts for this government. This is the Legislative Assembly that I belong to, that I’m accountable for.

With the amendments to Bill 68, it makes it, I hope, a much more agreeable bill to those mental health advocates who were against it to begin with. For example, as my colleague mentioned, the purpose clause has been added, which sets out clearly the intent of the community treatment order and who is subject to a community treatment order. This was very important, because there was fear out there that people would be swept off the streets willy-nilly into hospitals and jails. There was a real fear, and we saw the fear in those people’s eyes. This provision will help to avoid that.

The privacy provision is very important. In other words, patients will have to be advised of their rights. When our psychiatric outpatient clinic in the Henderson hospital on Hamilton Mountain closed earlier this year, I went to that meeting. It was a closed meeting, but I was invited by the patients, and I went to that meeting. I think even the hospital administrators were quite surprised at the intelligence of the patients. Mental illness does not mean unintelligent people; it means mental illness. So to be advised of their rights is very important, and that has been added on.

The evaluation part, that at the third year after implementation there will be an evaluation, is crucial. If something is wrong, then we can either try our best at that point, with a new election, to have it a campaign issue and repeal the law or change the law.

Also, it’s heartening to know that the community treatment order portion of the bill will not be proclaimed until December 1. It’s still a huge task, though, until December 1 to get all those supports in place that we need. All power to the government if they do it. I’m a little wary of that, but we do need those supports, as my colleague has stated. Otherwise, it’s very much like diagnosing someone with cancer and not having radiation therapy for them. It’s very unethical. So we can’t just tell people what their problem is and not have a resource there to deal with it.

I would have liked a bill of rights to be included in the Mental Health Act, and I sure will reserve judgment until the patients’ bill of rights has been developed. However, mental health is much more complex. The diagnoses are much more complex, the treatments are much more complex and individualistic and the legal implications for those particular diseases are much more complex. I don’t think one should have precluded the other. However, we will reserve judgment until the comprehensive patients’ bill of rights is developed.

The change in the criteria that we wanted was for a community treatment order to ensure that only involuntary hospitalization is considered in determining if a patient can be placed on a CTO. Right now, there must be two previous admissions to a hospital for a mental illness and then you qualify for a CTO.

Let me tell this House, if they don’t know, that out of every 100 people, 15 people have psychiatric problems—maybe in this place more, given that it’s not a random sample. But for every 100 people, 15 people have psychiatric difficulties and may have visited a psychiatric clinic or a psychiatrist. So that should have been more stringent, and I hope—

Mr Christopherson: We don’t have 15 sane people.

Mrs Bountrogianni: “We don’t have 15 sane people,” the member for Hamilton West says. Quite seriously, this involuntary hospitalization would have been a better criterion, because more people than you know—executives out there, but they’re on their medication—are schizophrenic and have visited the hospital.

As well, the amendment for the physical force is a very difficult one. I know this from working in the school system with psychiatrically ill kids who are difficult to control. There’s special training for people on how to hold these kids without getting hurt and without hurting them, which is physical force. The basic rule is that you avoid it as much as you can. We just have to keep vigilant on how this is being implemented and then in three years, with the review, perhaps implement this amendment that got missed this time.
As well, both the Liberals and the NDP proposed the creation of a mental health advocacy office. Right now the government is saying they’re going to try to make the current advocate’s office more accountable. Well, I hope you do that, but I share the concern that Dean Voukelatos’s mom shares about the patient advocacy office itself. Where was that office when he wasn’t admitted to a hospital when he wasn’t taking his medication? I have heard this. Actually, I’ve had personal experience with this office with patients, and it’s human rights above all. But human rights also include the right to live and to be well and to be healthy, and this particular office often errs on the other side and not on the side of life, of being alive. This particular patient threatened not only his own life but his parents’ lives and his sister’s life. This is a person who had an above-average IQ before he got ill. This particular office did not help him. Until you face those facts, we may have difficulties even with this bill.

I agree with my colleague from Thunder Bay-Atikokan that this isn’t going to solve all the problems but it is a first step, and I support any first step towards solving mental health issues and problems. But there are again some inconsistencies, and they have to do with the school system. Mental illness often starts at a very young age, and with early intervention you can at least control, if not cure, a lot of mental illness.

With our funding formula, special education has been affected. I hear numbers that have increased and numbers that have decreased. All I’m saying is that there are fewer special-education services today, at least in my board, than there were five years ago. The one classroom on which we did research which showed an excellent prognosis for kids as far as finishing regular high school work was concerned was the class for the conduct-disordered students. All the others were borderline effects as far as taking them away from the mainstream was concerned. But this particular group of kids, the conduct-disorder kids, actually did better, dropped out less, finished more normal credits and finished regular high school more than those who were integrated. So for that particular group of kids with those high-risk behaviours, those classes were their only hope for mental illness prevention in the future. We have very few of those in Hamilton right now, and this will lead to problems later on. Prevention is key; resources are key. I’ll support this bill as a first step but keep very vigilant in observing that the resources are there to support it.

Mrs Claudette Boyer (Ottawa-Vanier): It is with great pleasure that I join my colleagues on both sides of the House in support of Bill 68, Brian’s Law. It has become clear to me that a new law is needed to deal with some of the tragic consequences of severe mental illness, both to the afflicted individual and to the community at large. I want to make it clear, though, before I begin, that I have certain reservations about supporting the bill. I say this because the individual’s freedom to choose or to decline medical services is now being put at a certain risk. But we must recognize, however, the reality of this situation. At times, when they are ill, mentally challenged people fail to realize the seriousness of their illness and do not recognize the importance of receiving professional help.

Even when their loved ones are involved, they may be unable to come to a rational decision, mostly because of their emotional involvement. As a result, they may not demand the proper medical attention, and thus remain untreated. When this happens, it is not uncommon for mentally challenged people to have episodes where they become a real danger to themselves and to others. There is no doubt in my mind that the incident that ended with the tragic death of Brian Smith happened during such an episode.

To prevent this from happening, we have to accept that government has a responsibility to find the balance between the individual’s right to accept treatment and the community’s right to a safe and secure environment. What the Legislative Assembly of Ontario has produced, as my colleague from Ottawa Centre has said, is a non-partisan bill that reflects a strong commitment to the crucial democratic principles of individual rights and public interests. Responding to the voices of those who know the realities of mental illness, the government, supported by the official opposition, has taken the proper steps to ease the pain of those whose lives have been affected by the consequences of mental illness.

The Edgewood Residence, a care provider in my riding, is a provider of domiciliary hostel care. Based on its experience in caring for mentally challenged populations, they feel that this bill is a positive step for several social programs. We have to come to the conclusion that a large percentage of the homeless population often consists of mentally challenged individuals. They feel that this bill will contribute to reducing homelessness by providing this population with the stability they need to function in a group setting. It is often the only requirement missing for their facilities to be able to provide them with a place to live and services to enhance their future.

Brian’s Law allows for greater participation of those whose loved one requires professional help. It allows for families and doctors to help those in need during the initial stage of the illness. This law will allow people who have a history of mental illness to receive the care they deserve before their situation worsens.

This bill is important, but it must not be accepted as the end of discussion on the issue of mental health. The provincial government will have to follow through on its commitment to provide sufficient resources to community treatment plans and to care providers to assist these individuals and give them a chance to improve their lives. Without the proper funding, this bill could be useless. If the money is not there, the goals of this bill cannot be reached.

It is very important to repeat a point made earlier by some of my colleagues: This bill should not be seen as an indication that the Legislative Assembly of Ontario is emphasizing the potential for dangerousness of the mentally ill. We already know that the mentally ill are more
dangerous to themselves than they are to their communities. This bill is aimed specifically at a small minority, estimated at 5% of mentally ill individuals, whose conditions are most serious and potentially dangerous.

Most importantly, this bill allows for the mentally ill to receive the proper treatment within their communities. This means that certain people with serious mental disorders will be dealt with individually, without having to be placed in a hospital or mental health clinic.

Mr John Gerretsen (Kingston and the Islands): I too will be supporting this bill, but before doing so I would like to mention a couple of brief points that I think may already have been mentioned but bear repeating.

Number one, I think a lot of the tribute ought to go to the member from Ottawa Centre. It’s my understanding that he has brought at least three private member’s bills forward on this issue, going back to 1996. It was through his perseverance that we are seeing action on this now. I’ve also got to pay tribute to the member for Stoney Creek and the member for Beaches-East York for making this truly a non-partisan event.

It’s kind of interesting that this bill went to committee after first reading, before individuals and parties had staked out their positions, which normally happens on most legislation, which goes to committee only after second reading when the die is already cast. This is a perfect example of how, in my opinion, legislation should be dealt with by the House.

There are many other situations in which there are truly non-partisan bills for the good of the people of Ontario that could be dealt with in exactly the same way. It’s through our process of only referring bills to committee after second reading that we in effect make much of the legislation we deal with in this House on a day-to-day basis much more partisan than it needs to be.

Yet there are many concerns about this bill. I come from a community in the Kingston area where I’ve lived very close to a psychiatric hospital. My mother still lives within about two blocks of the Kingston Psychiatric Hospital. She has lived there for the last 45 years. As I mentioned during one of the earlier readings, I’m very concerned that this kind of initiative not be primarily used by the government, under the guise of deinstitutionalization and reintegration back into society, merely to get people out the door.

I can well recall some 15 or 20 years ago when this happened and everybody was in favour of deinstitutionalization and getting people back into their communities. Many of the same people I used to meet on a day-to-day basis walking the streets of the village of Portsmouth, which is the portion of Kingston where I’m from, were left in absolutely deplorable circumstances and conditions, in substandard housing, four or five to a room, without any kind of community supports, without any kind of mental health supports. I said to myself, and many others, wouldn’t it be better at least for these people to be in an institution where they had a roof over their heads and where they had three square meals a day? I’m skeptical that perhaps the government has moved on this in order to save costs and not provide the necessary community treatment facilities and programs that have to be out there.

It’s kind of interesting. I attended a conference in Kingston about two weeks ago, and they asked me to sit on a panel. It was the first annual Schizophrenia Society of Ontario conference that was held at city hall in Kingston. To tell you about the interest in this particular issue, on the very first night of the conference, when one would not expect to see a lot of people at a conference because normally it takes people perhaps a day to get there etc, there were over 300 people in our city hall who were deeply concerned about this issue and particularly what Parliament was doing with Brian’s Law. I was very deeply moved by a lot of the stories I heard not only that night but also from our own society in the Kingston area over the last four to five years. There are some horrendous stories out there as to how this affects not only the individuals who suffer from mental illness but also their family members, and how these people are sometimes in a complete and total state of despair because they don’t know where to turn to get help. Hopefully this legislation will provide the help, but only—I would like to repeat again—if the necessary funding is there.

It’s kind of tragic that when you look at our budgets, we spend something like $2.5 billion per year on mental
health services. Compare that to 70 or 80 years ago. It’s my understanding that the province then spent almost one fifth of its entire budget on mental health services. I know circumstances have changed, conditions have changed, but certainly even if you look at it within the confines of the health budget, the amount of money we’re spending on mental health services is probably about 8% or 9% or 10% of the total health care budget. When you look at the community health aspect of that, we’re only spending something like $450 million per year in that area.

Different organizations and different individuals have taken different approaches to this bill and to what it may do. The Canadian Mental Health Association estimates that if you want to put this into effect and provide the services out there for the individuals, the health care system needs to be boosted by $320 million per year, and yet it’s my understanding that in the last budget estimates there was absolutely no inclusion of additional money that is required in order to put this bill into effect and to make sure people have the necessary services. I have a great concern about that.

I have a great concern over the fact that neither the federal government nor the provincial government is doing anything about social housing in this province, about supportive housing. You can go into community after community, and the available housing not only for individuals who are afflicted with mental illness but for the people at the bottom rung of the economic scale is getting less and less because nobody’s building affordable housing. So it’s necessary for the government to get involved not only in the health care services that are required for people who will be out in the community, but for other ministries of the government to get involved in it as well, such as the housing ministry.

I would urge, and I have urged on many occasions in the past, that it’s absolutely necessary for the two senior levels of government to get involved in the housing scene once again, or more and more people at the bottom end of the economic scale, particularly people who suffer from mental illness, are going to be affected on a day-to-day basis, as we see right around this building. The number of people who are sleeping on park benches and in corners of buildings outside has been increasing just over the last three to four years that I’ve had the privilege of being here.

We have many concerns. I can well understand the individuals out there who have a great fear of this legislation because their individual rights may be affected. I would hope that by coming up with this bill on sort of a joint basis with the co-operation of all the parties in the House, we’re really putting the government to the test: Will you now do the right thing and put the necessary resources into the mental health field?

What I like about the bill is that one of the amendments that was moved says a review has to be done after two to three years. I think probably all legislation of a very controversial nature like this should have that included in it. This will allow not only the parliamentarians but obviously also the various staff people within the ministry to take another hard look at whether this legislation is really doing what we all in this House intended it to.

I would urge the government to say yes, this was a great effort on the part of all parties involved, but this is only the beginning. The way it can show that it really means what it says is to start putting back into the health care system the much-needed funds, particularly for mental health services.

Mr Richard Patten (Ottawa Centre): I’m happy to join my colleagues in the Liberal Party to speak on this bill. I’m extremely pleased to be here at this particular stage to participate. I’ve always said that I consider this issue to be a non-partisan issue, and I will carry on in that vein.

I would like to acknowledge the efforts of the Chair of our committee, the standing committee on general government, who perhaps is not known for this kind of reputation, for the fairness that he demonstrated in this situation and for the way in which he worked very hard to see that the views of all parties indeed were considered in procedure and in time for debate.

I want to particularly acknowledge the efforts of Brad Clark, the minister’s parliamentary assistant from Stoney Creek, who led public consultations prior to the tabling of the bill and who took charge in seeing Bill 68 through the legislative process, including first, second and now third readings, and the very extensive public hearings that we had on this. We heard a range of presenters, both those who were for the bill and those who were against the bill. This allowed the committee, of course, at that stage to digest the points made during hearings and use points made in the depositions from witnesses in formulating their reaction at second reading. I think that’s truly the role of public hearings. I find that there’s a great deal of wisdom that is shared and a great deal of meaning in hearing from people who will be affected by this particular bill. I applaud all of those who took the time to speak to us.

I would make one recommendation in this process, and that is that the advisers from the Premier’s office actually participate somehow in the hearings, to have a sense of the flavour and the points that have been made on all sides of the issue so that when it comes time for the persons at the committee table to incorporate and actually make decisions on amendments, they have a better understanding of the intent of the proposed amendments. I hope someone from the Premier’s office is listening, because I think some of the committee members on the government side certainly would appreciate that.
I’d like to thank the government, however, in spite of that, for the House leader, who sent the bill to committee prior to second reading and for not time-allocating or putting closure in on this bill. I say, see? It can happen. This is a great example of that, where all parties can work together. I’m not saying all parties can work together in this fashion perhaps on every single issue, but it certainly is, in my opinion, an example that it can be done.

Finally, I’d like to acknowledge legal counsel from the ministry and the hard work and efforts they put in on being helpful to all the parties.

I do want to say, though, that I have a few disappointments. At the end of the day, I will be supporting this particular bill, but I have some disappointments, things we wanted to see that weren’t done—and I’m going to address a few of them.

A patients’ bill of rights, for example. We are advised that there will be a patients’ bill of rights that will come, and it will include, certainly, those who are in the mental health category.

We didn’t get a statement of principles, but there was an attempt to acknowledge that we had to address that in one fashion.

A change in terminology from “community treatment order” to “community treatment agreement,” which I believe this truly is. The government said: “Listen, we wanted a consensual medical model. This is not a court order, a legalistic order, as it were, from the courts. This is an agreement. It must be agreed to by a particular patient or a substitute decision-maker.” Therefore, I still feel that way, that it is an agreement, and that truly would be more reflective of it than using the term CTO.

A change in the criteria for issuing a community treatment order to ensure that only involuntary hospitalization in a psychiatric facility is considered in determining if a person could be placed on a community treatment order.

The establishment of a mental health advocacy office: My colleague from Thunder Bay-Atikokan already dealt with that.

We are supporting the bill, at least most of our members. I must tell you that most of us have agonized in trying to arrive at that balance and that feel for the ensuring of human rights yet at the same time making sure people also have a right to treatment. I refer to one of my colleagues, George Smitherman, the member from Toronto Centre-Rosedale, who has been going back and forth on this issue literally in terms of whether he would or whether he wouldn’t support the bill because of his worry that perhaps there are some things here that could be abused. I believe that at the end of the day, when we do get to a vote, he will be supporting this as well.

I’d also like to say that the government has accepted a number of our amendments and incorporated them into government amendments prior to either second reading and prior to the debate we had. Although a statement of principles originally proposed as a preamble was not incorporated, the principle that stated who community treatment orders are intended for was included in a new purpose clause. This was very important for us and this has taken place.

The other amendment that was included was of course the review. We’ve already talked about that and I won’t repeat it, except to add that of course it is important and we would have review of this program within a three-year period.

My colleague Lyn McLeod has reviewed a number of the amendments. I have mentioned the term “agreement.” There was a second amendment I wanted to mention that we felt strongly about, that the criteria for consideration for CTOs should be two previous involuntary admissions in a psychiatric hospital. The province of Saskatchewan uses this as a test. It seems to have worked well there, so I was disappointed to see that it wasn’t incorporated.

The community population we’re talking about in the purpose clause is that they lack insight into their illness and their need for treatment. They therefore remain untreated in the community and deteriorate. This is the group we’re talking about. Voluntary patients don’t need a CTO; they can make any arrangements they wish with their physician regarding a particular plan. This happens all the time and will continue to do so. Again, the government was firm on their position, although the rationale was not so clear. The intent of CTOs is for involuntary patients, I suggest, and it says so in the bill. This is how it operated in other jurisdictions and in the United States, where every state Legislature contains some sort of provision for mandated outpatient treatment.

I would like to thank the Schizophrenia Society of Ontario, and the Ontario-Carleton branch in particular, for bringing the issue of the seriously mentally ill who are part of the revolving-door syndrome to my attention. They did this during the election in 1995, some five years ago. It was at that time that I decided that, if elected, I would introduce my private member’s bill on this issue. I said I would not give up. Indeed, I am delighted and proud and pleased to be here today to see that sometimes if you keep at it, some good things can happen.

But in the memory of Brian Smith, we have heard the words—I’m going to repeat part of them because I think they’re worth repeating: “Brian’s bill.” I’d like to acknowledge Alana Kainz, the widow of Brian Smith, after whom this law is named. One thing she expressed in testimony in Ottawa, very heart-wrenching testimony indeed—she said, “Jeffrey,” the man who shot her husband, “was a victim of a mental health law that failed him too when he shot Brian. There has been a small amount of opposition to this. ... This is not about reacting to a serious event. It’s about preventing one.”

She says: “First of all, Brian was not murdered. I have come to terms with that. There were two victims here. Naming the law after one of the many victims puts a human face on the legislation and reminds us of its purpose.” I take those words as very meaningful, and I think many members do.

I’d also like to acknowledge someone who certainly helped me through much of this time, and that’s Dr
Heather Milliken, the associate professor and director of continuing education at the department of psychiatry at Dalhousie University and thank her for her support. When I introduced my first member’s bill, Bill 111, amendments to the Mental Health Act, Dr Milliken was a psychiatrist at the Royal Ottawa Hospital and she took a great deal of interest in this bill. She is in a hospital as we speak, suffering from breast cancer; otherwise, I’m sure she would want to be here. As a clinician working with the seriously mentally ill and their families for over 19 years in four provinces and as a research and educator in the field of schizophrenia and related psychotic disorders, she’s kept me updated on the latest scientific knowledge regarding serious mental disorders and given me important advice and comments on the issue.

Of all the advice she has provided, there are two points that have resonated that are particularly salient to the population. The first one is that the duration of untreated psychosis, that is, the length of time someone is psychotic before receiving appropriate treatment, is the strongest predictor of outcome even when one controls for all other variables. The average duration of untreated psychosis is two years in many studies.

With each relapse, the time to respond to treatment is longer and a greater percentage of individuals do not in fact recover their prior levels of functioning. There is a risk of further deterioration.

There is evidence to suggest that once an individual develops a psychotic illness, such as schizophrenia due to an underlying biological vulnerability, the psychosis has a further neurotoxic effect on the brain. In other words, the longer someone is ill before receiving treatment, the greater the chance of poorer outcome.

This is not in dispute. There are over 30 studies that have come to the same conclusion. For these reasons, the prevention of relapse must be a fundamental component of the treatment of individuals suffering from mental disorders, and this is what this bill is all about.

The second point relates to the major advances in the pharmacological treatment of individuals with schizophrenia and related psychotic disorders. In the past, one of the biggest problems was the side effects from the older medications. There is increased evidence that the second-generation anti-psychotics are more effective and have fewer side effects. As well, there has been the introduction of Clozapine, which has been shown to be effective in the treatment of individuals who have previously failed to respond to any drug treatment whatsoever. We now have available effective and safer treatment for these disorders.

The rationale for identifying individuals suffering from these disorders as soon as possible following onset of the illness and for initiating treatment as soon as possible is no different from the rationale for other chronic medical conditions—the sooner treatment is initiated, the better the outcome.

Finally, I want to reiterate a point made by so many at the hearings, the only point that virtually everyone agreed on: When we talk about long-term services, what do we mean? Unless there are substantial further resources put into the community, this bill will not be able to function. As a matter of fact, it’s part of the bill’s structure that there must be the community resources in order for this bill to take effect. That’s one check on this happening. Therefore, it acts as an enabling and stimulating factor for the government and all future governments to respond appropriately.

When we talk about community resources, we have to talk about that for everyone, not just for those who may be on a community treatment order. This is not going to work if that doesn’t happen.

Community services can include appropriate housing, family support, psycho-education, counselling, training in social skills and stress management, and assertive outreach and case management by a multi-disciplinary team. These community services will not be available in all communities—I understand that—but the good thing is that these amendments, particularly the CTO provisions, will be enabling and they will flush out what is needed and enable the government to respond appropriately.

The aim of Brian’s Law is to provide access to treatment for the seriously mentally ill. I’m proud to have been associated with the process that has culminated in this bill, and I’m convinced that it will result in a better life for many people who are seriously mentally ill and their families. This will touch the lives of hundreds of thousands of people in this province and eliminate much of the enormous suffering that many people have endured.

The target group has been said, and I will repeat this: “The purpose of a community treatment order is to provide a person who suffers from a serious mental disorder with a comprehensive plan of community-based treatment or care and supervision that is less restrictive than being detained in a psychiatric facility. Without limiting the generality of the foregoing, a purpose is to provide such a plan for a person who, as a result of his or her serious mental disorder, experiences this pattern: The person is admitted to a psychiatric facility where his or her condition is usually stabilized; after being released from the facility, the person often stops the treatment or care and supervision; the person’s condition changes and, as a result, the person must be readmitted to a psychiatric facility.”

I suggest that when we know we can help people and when we have the treatment to be able to help a person to not continue to disable themselves, because surely that is what happens, we are helping and making a contribution to the quality of life of individuals, families and the community. I’m very proud to be in support of this bill and I thank you very much for the opportunity.

Ms Lankin: I’ll be sharing my time with the member for Hamilton West.

It has been an extraordinary experience working on Bill 68. It’s been a number of years in this Legislative Assembly since I’ve had the opportunity to work collaboratively on a bill, where the government has seen fit to do what I think should be a more common experience
in this place, which is to involve all members of the committee in a process of discovering, understanding and learning the intent of the legislation and working together to ensure that the best piece of legislation possible comes forward.

In that vein, I want to pay tribute to the minister, who is participating in this debate today, because I believe very strongly, and this is perhaps from my own experience of having once sat in the chair she sits in both figuratively in this chamber and literally in terms of the office, that it is only with the instruction, direction and support of the minister that this kind of process could have happened.

Your parliamentary assistant, Brad Clark, was absolutely superb in his effort to work collaboratively. He said earlier in this chamber that in paying tribute to the process and to the work of opposition critics, he believes the bill is a better bill as a result of the work done. I share that view with him. I also, however, believe that many of the amendments that were not passed have left the bill wanting.

I find myself in a curious situation listening to the Liberal health critic, agreeing with much of what she said, but coming to a different conclusion with respect to my own personal ability to support the bill. But that doesn’t take away from the fact that I believe the process has improved the bill. It is also important, given the spirit of what we have done collectively, that there is a record of dissent with respect to the ability of this bill to meet the needs of the population we speak of and the actual intent of the government. There I think we have come to a unanimity of agreement, with respect to the intent, and that in and of itself is a little bit of a remarkable occasion in this legislative chamber in these days.

I just want to take a minute on this because I want to get to the substance of some of the things that I hope I can encourage the ministers to think about in the future in terms of where I think the bill has fallen short of meeting its intent.

On the process, on the good and the bad side: On the good side, for a bill like this—which is not a bill based on ideology; it’s a bill based on intent for better public service and intent for getting treatment to people who need treatment—to be referred out after first reading is a very positive step because it allows legislators to reach out and listen without the bias of having party positions on record. It would be the same no matter who was in government. It has freed government members from a simple line and allowed them to take a second look at aspects of the bill which, irrespective of which party is in government, has not often happened when hard lines have been taken through second reading debate.

One of the faults that occurred coming out of those hearings was the very quick turnaround time within which it was back into the House for second reading. I think that in better circumstances, both the minister and parliamentary assistant would have liked to have seen a bit of time for people to absorb it.

We were still receiving the final written submissions and trying to read through volumes of things while we were taking positions in second reading debate. I believe that most of the issues have been canvassed. I don’t believe that was a serious detriment to the actual end quality of this bill. But in terms of a process that we’re attempting to establish of doing things in a different way, it was one of the shortcomings.

We then moved from second reading, again very quickly, into clause-by-clause, such that people were scrambling in terms of trying to develop amendments. One of the things that happened in that interim period—this was something I supported and often engaged in with work with my parliamentary assistant and opposition critic when I was minister, and this minister has done the same thing—was the process by which we met together with legal counsel from the ministry to talk about the amendments to see where we could find agreement, and hopefully then to have the wording of that agreement drafted by ministry counsel in a way that was consistent with the drafting style of the bill, so that we weren’t arguing about words later on, so that we were actually getting to the intent.

That was quite positive, but then to turn that around into actual amendments—extraordinary work on the part of ministry counsel. There was also extraordinary work on the part of legislative counsel working with the two opposition parties in a very short time. It was too short a time. I think some of the amendments didn’t pass because of the inability to reach agreement around wording that might have been facilitated by a lengthier process. I think some of the wording that we did pass falls short of the high standards of legislative quality, but we did our best in the time period that was there.

I will mention that we received all the amendments around 2 or 2:30 in the afternoon, in the middle of question period on the day we were to commence the clause-by-clause. There was a little bit a temper tantrum on my part. I can see the parliamentary assistant sitting back there. I’m sure he’ll remember. I got 45 minutes’ recess to go away and go through some 70-odd amendments and try to be in a position to respond intelligently, with knowledge and with facts. We did our best but that time frame was not good.

In the process of clause-by-clause I think we all felt rushed, but it was a self-imposed process of trying to meet the government’s goal of having this bill passed by the end of this session. However, there was some interesting and incredible give-and-take during that period of time. We actually drafted some language on the fly in the middle of the clause-by-clause, some of it better than others. But there was a give-and-take, so that was good.

On the bad side again, we come out of clause-by-clause and immediately here we are in third reading. We had to give unanimous consent to proceed with third reading without the bill being printed. It only arrived today. Nobody has seen the results of the clause-by-clause recreated and reprinted in the bill. Second, the Hansard record of the committee hearings on clause-by-
clause will not be ready until Thursday. So no one has
the record of the debate that went on to be able to point to
the areas of agreement or dissent. Yet here we are today
dealing with the bill. That falls short of the standard we
should set for ourselves. But enough said on that, because
I want to pay tribute to the good things that have
happened in this process and to just place on the record
some concerns and suggestions on how we can improve
the process in the future.

In terms of the content of the bill, there are a few
amendments I would like to go through and talk about in
a bit more detail. One of the most important things that I
think the government did that in the end was negotiated
and put forward was an amendment to the purpose clause
of the community treatment order provision. I think we
all listened very carefully during the hearings and heard
over and over again that this provision, the community
treatment order, as contentious as it is, as was acknowl-
edged earlier by the parliamentary assistant, is really only
intended to meet a very small part of the community
suffering from mental illnesses.

I’ve had the opportunity to be guided in my thinking
and my development around this bill by some pretty
important people whose life experiences have led them to
believe that their family members would be so well
served by having an opportunity to access a community
treatment plan that has elements in it of compliance and
support brought together in a professional way where the
family is involved with the individual, the care providers
and the community. In fact, there are a couple of them
who are here today, one of whom I think missed only two
meetings; the other one missed only one—were you in
Ottawa too? OK, just one that you missed—and have
been here throughout all of the debate. The commitment
that they demonstrate is because of the life struggle they
have experienced in attempting to reach the services for
their family members. They have been so instrumental in
deepening my understanding of the need for a better
system of treatment. They’ve also been very tolerant of
the issues I’ve brought forward in terms of concerns I’ve
raised, and in fact supportive in terms of some of the
amendments to try to ensure that we have adequate
services and that we have systemic advocacy around the
system itself, because they know first-hand that there is a
lack in the system as it is now that this legislation, on its
own, is not going to address. So it’s been a very import-
ant relationship.

But the change in the purpose clause that the govern-
ment brought forward actually, which is an attempt to in
a sense clinically narrow the application of community
treatment orders, is designed to address much of the con-
cern in the community of people who have suffered from
mental illness and who have survived the psychiatric
system and who feel a threat by the concept of com-
munity treatment orders as it has been imported in our
understanding from the US court-based order system.
The attempt here to clinically narrow is a positive step
and it does not go as far as I believe it should.

But I’m very pleased that the government made this
effort, in particular where they talk about the pattern of
life experience of the individual, the person who is
admitted to the psychiatric facility, where his or her
condition is usually stabilized. After being released from
this facility, the person often stops the treatment or care
and supervision, the person’s condition changes and, as a
result, the person must be readmitted to a psychiatric
facility.

That’s not a very in-depth description, but a descrip-
tion of the loved ones and family members of the individ-
uals who have helped me as I’ve come through my
understanding of these provisions. So that’s a positive
thing.

On the other hand, we put forward an amendment to
talk about the right to mental health services, because
many have raised concerns about the volumes of people
out there who voluntarily seek services and who cannot
get access to the services they need. We talked about the
types of services a person has the right to receive and the
way they should be dealt with by a service provider. We
talked about the fact that a person has the right to be
informed about community services, the number of
families who come who are not provided with good
information about what is available and/or what could be
available if services were organized differently. We also
talked about the person having a right to receive mental
health services in a timely fashion, the right to receive
timely treatment, because we heard so often over and
over that early intervention can make all the difference in
terms of the lifelong experience of that individual and the
prognosis for health of that individual. That amendment
was defeated by the government. A similar amendment
put forward by the official opposition with respect to
issues of patient rights was defeated by the government.

Something that I argued for from day one was the
absolute need to create an office of mental health adva-
cocy. I want to tell you, before I go into what was propo-
sed in the amendment, that I am not just talking about
the Psychiatric Patient Advocate Office that exists now.
That’s an individual patient advocacy representative
currently within our psychiatric facilities, and it will be
broadened and the mandate is under review right now. I
am talking about systemic advocacy for the mental health
system. I’m talking about people like officers of the
Legislature, like the Environmental Commissioner, like
the Ombudsman, like the Freedom of Information and
Privacy Commissioner, who have a special role we have
given to them to oversee a system of public services, in
this case mental health services.

I contend, from my time in the Ministry of Health and
from my experience over the years, that mental health
services have become the poor cousin within the myriad
of our collective expectation of the health care system in
this province. When there are backlogs in emergency
rooms, the government hears about them and there are
front-page headlines. When there are backlogs in access
to cancer treatment, there are front-page headlines. When
there have been and continue to be, and into the foreseeable future will be, huge waiting lists for access to mental health treatment, there’s a silence that is deafening. We need to take the collective step to elevate our understanding and our perceptions and our accountability with respect to the community that is in need of mental health treatment and mental health services.

Other jurisdictions have introduced this concept. During the hearings I referred to and brought information from some of the US jurisdictions. Here in Canada, in British Columbia, they have established the office of the mental health advocate. That office has just recently issued a report which was a systemic review of the system, about what’s happening in facilities and communities, where the gaps were. If we want an integrated system, we need to examine it as an integrated system and we need to have that kind of oversight. They are currently placing the authority for that position in legislation in BC.

I proposed legislation similar to that and similar to what exists in Ontario with the office of the child advocate, who does systemic advocacy on behalf of children’s issues, contained within the Ministry of Community and Social Services. I contained this provision within the Ministry of Health—I tried to do it in the least threatening way possible to the government—an office that would conduct a systemic review of the mental health system and its ability to meet the needs of those who receive or seek approved services, including a review of the adequacy of the level of service delivery, a review of the effectiveness of the implementation of services, a review of the community treatment orders and their effectiveness, a review of the use or lack of use of community resources; reports that would come to the minister, to the Legislature and to the public in the form of annual public reports.

I’m not going to go on about this except to say that the government simply defeated this, and with only comments that the Psychiatric Patient Advocate Office mandate was being reviewed. I beg you to separate the roles of individual patient advocacy, for which there is a need. The office exists and the mandate needs to be reviewed as you shift the location of where treatment is provided. Please keep that role separate from the concept of an office of a mental health advocate that looks at the system and does systemic review.

Let me move on to a couple of other amendments that I felt were very important. I proposed an amendment with respect to the role of the public guardian and trustee. Part of this legislation with respect to community treatment orders is based on the consent of substitute decision-makers. There are people in this community who will be affected who do not have trusted substitute decision-makers or have no substitute decision-makers at all. They can, by power of attorney, appoint a power of attorney for personal care. But if there is no one in their life who can take on that role, their only recourse is to go to the office of the public guardian and trustee.

Currently, while that office is authorized to take on that role, they are not required to do that. It would take resourcing to provide them with the necessary levels of support for them to take on this role. In fact, it’s why they’re reluctant to, although on some recent occasions they have actually agreed to take on this role. It’s not a consistent role. It needs to be resourced. It needs to be mandated. That amendment was defeated by the government.

We put forward an amendment with respect to the definition of “mental disorder” that looked to other jurisdictions, copied the wording from other jurisdictions, attempted to give a clearer sense of what we are talking about. The current definition in the legislation is very vague. It just talks about a mental disorder being any disease or disability of the mind. We believe there was a need to give greater definition to that. We think that would have strengthened the bill in many ways in terms of, again, who the bill is designed to address in our community.

Some of the concerns that have been raised here were not by psychiatric survivors but by representatives on behalf of the homeless who are concerned about the broadened criteria for involuntary committal. We believe that a clearer definition of “mental disorder” would have brought greater clarity and would have brought relief to the concern that some have, and that I share, with respect to how some of these provisions will actually be implemented in the real world.

Similarly, there were concerns raised during the hearing about some of the vague and ill-defined criteria in the section of the bill dealing with broadening powers for involuntary committal. I believe this is an area that the government truly fell short of addressing simply because of the timeframes that were imposed on us as a committee.

One of the things that we’ve heard very clearly, for many years, about the need to remove the word “imminent” from the criteria for involuntary admission was that it was too hard for people in the community—the justices of the peace, police officers, the general practitioners, the family doctors—to give real meaning to what “imminent” means. Did it mean in five minutes? Did it mean in 24 hours? Did it mean within a week? The courts gave definition to it, talking about meaning within roughly three months.

I’m sorry but I’m very sympathetic to the people who said, “That doesn’t make a lot of sense.” As a lay person, I would never think of “imminent” having a definition as long as three months. The people who were concerned about the removal of the word “imminent” and who said, “All we need to do is educate people better,” pointed to the court decision. Rather than simply eliminating the word “imminent,” if we’re all comfortable with the time period of three months, why don’t we put that in the legislation? Why can’t we be clear about what it is our expectations are? Why is that we create legislation with vague words that we leave to people to interpret and then
The result of a voluntary admission—to start the clock in psychiatric treatment—even when that experience was not significant or three things—I quibble with the time periods. That eligibility for a community treatment order, there are two things that the government defeated that amendment.

I sought to have an amendment to ensure that individuals who were seeking treatment for mental illness did not require a community treatment order as a precondition to getting comprehensive community-based services. One of the concerns we heard over and over is that someone with a community treatment order in place would bump other people out of the system—those people voluntarily seeking services. I don’t believe that’s the government’s intent. But again, if you don’t have clarity in the bill, how it gets implemented in the community, how scarce resources get allocated is a very significant issue. We have seen, and I have to point to things like how services, not in providing equitable access to services. I believe it’s outside of the professional capacity of the police, that we should have left that section more evidentiary-based. However, that will play out in time. We’ll see what kind of education is being provided to the JPs and how they are able to cope with that section and whether that section will become frequently relied upon or used by justices of the peace.

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Surely the last thing we want to do is stop people from getting help on a voluntary basis. It doesn’t matter at the end of the day where you fall on the issue in debate with respect to community treatment orders. Everyone knows that there have been two communities out there with opposing views. No one can deny the strength of concern, the level of concern, that has come from some parts of the psychiatric survivor community with respect to this provision. I think we do what we can to allay their concerns, while continuing with putting the best legislation in place to meet the concerns of those family members who seek to get community treatment orders for their families and their loved ones who suffer from mental illnesses like schizophrenia.

I don’t understand the government’s reasoning on this. Surely the last thing we want to do is stop people from getting help on a voluntary basis. It doesn’t matter at the end of the day where you fall on the issue in debate with respect to community treatment orders. Everyone knows that there have been two communities out there with opposing views. No one can deny the strength of concern, the level of concern, that has come from some parts of the psychiatric survivor community with respect to this provision. I think we do what we can to allay their concerns, while continuing with putting the best legislation in place to meet the concerns of those family members who seek to get community treatment orders for their families and their loved ones who suffer from mental illnesses like schizophrenia.

Why the government would leave in place a provision that has a chilling effect on seeking voluntary treatment, I don’t know. And that, to me, is such a significant fault in this legislation. I fear for what it means in terms of individuals’ lives out there. I fear that we are trading individuals, and that’s not what anyone wanted, certainly not the people who endorsed this concept and endorsed the thrust and the intent of this legislation.

A couple of other things: We looked to US jurisdictions where, in fact, there is a process for an independent second medical opinion with the respect to the content of community treatment order plans. Some things that we know are that not everyone has the same level of training in terms of putting together a comprehensive base plan and not everyone has the same opinion in terms of which medication is better for an individual. The ability for a family, for an individual to seek a second opinion, as a right in the process, was defeated by this government, and yet it’s in place in US jurisdictions that we can point to.

It will eventually be in place here, because in some of the US jurisdictions it was as a result of appeals to the courts about their legislation and it was as a result of higher court decisions on appeals that these provisions have been put in place, either as a matter of common law or, in some cases, as a matter of statute now.
We will inevitably have that happen here. Again, I think it was very short-sighted for that not to be dealt with in a very upfront way and built into the legislation in a way that was not cumbersome to the system but that complemented the system that the government was putting in place.

This is a more minor concern, more minor in that it is a small concern that would have taken a small fix, but for some individuals it will be significant. There is a provision in the bill where a physician, if they need to leave for some reason, can hand over the supervision of a community treatment order to another physician, with the agreement of that other physician. We wanted to suggest that the individual, or the substitute decision-maker, if the individual is not the one making the decision, should also be consulted and agree to which physician this is being referred to, or being handed over to. That was defeated. Some of these were very hard for me to understand in terms of where the government came from.

One of the very significant amendments that I put forward that the government also defeated was an amendment to introduce mandatory community services and standards for community services. One of the submissions, from the Registered Nurses Association of Ontario, addressed this very clearly when they said that “the absence of a mandated basket of services, with established service standards, is a significant and glaring omission in this bill.”

Under section 11 of An Act respecting Long-Term Care, 1994, which is a bill that was brought in during the time that I was in government and I had much to do with in the early days when I was the Minister of Health—although it was my successor minister that brought it into the Legislature—we included requirements for mandatory services, what was the minimum list of services that had to be available in every community in the province. We’ve heard many people speak to the fact that there is such glaring inequality. Let’s address that as legislators. We spelled out the list of services, in terms of nursing services, personal care services, home care services, actually listed the services right in the law. That law was not acted on by this government and they’ve gone a different way and passed their own law, which is without that basket of services.

Perhaps it shouldn’t have been a surprise when they defeated my amendments, but I want to tell you the lengths I went to. We didn’t even spell out the list of the services in the legislation, because we knew it would be very hard to reach agreement among the three parties on what those services should be, so I constructed the amendment in such a way that the minister shall establish a list of mandatory community treatment services to be provided by all regions as prescribed in regulation, so the minister could set it out in regulation. She could take the time to develop that list, but the goal would be clear and the intent of the Legislature would be clear and the accountability of the government would be clear, that there would be a minimum list of services in all regions.

Similarly, there would be standards for those services set out in regulation.

Those are two very simple clauses that would have given me so much more confidence that the possibility of implementing what the government says it intends to do with this legislation was real, and the possibility of beginning down the road of meaningful development of integrated services for those suffering from mental illness was real. That was dismissed out of hand and rejected. It leaves me feeling that this bill is significantly lacking in some of these key areas: the list of services, the standards, the mental health advocacy systemic review and some of the other points that I made.

I will indicate that one of the things we worked together very hard on was to bring forward an amendment that had a provision for a review of the effectiveness of community treatment orders. It was tough to get to the end place, but I credit the parliamentary assistant with the work he did with ministry counsel and the opposition parties in developing that language. We now have a process where there will begin, within about two years of proclamation of that section, a process for reviewing the effectiveness of community treatment orders and a five-year review thereafter. That’s important, but what this section’s missing is a link back to the Legislature, linking a sense of independence of the review. It’s a review that will be conducted by someone the minister appoints. It could be within the ministry, and there’s no provision for it to go anywhere other than to the minister.

The proposal I had made was that the review come back to the Legislature so that we could confirm that the language we passed was right and correct and was doing the job or that it was lacking and needed to be addressed. The folks out there who want these legislative amendments will tell you how many years they have been fighting to get government to open up this legislation. It only gets opened up every—what?—15 or 20 years in this province, it seems the history is. If there are problems with the community treatment orders, if they do not meet the goals and expectations of the community, and if they live up to the concerns of some other parts of the community and don’t meet the intent of the government, it will be a long time before this legislation is back in this House and open for that to be addressed.

That’s unfortunate that that link back to the Legislature wasn’t made, but let me give credit to the government for putting in place that review. That’s really important, and I know the parliamentary assistant felt that was a reasonable proposal and he worked hard to work that through the system.

A small but very important amendment that the government carried—I’m not going to say that it took arm-twisting, but boy, it was a tense moment or two there—was a little, tiny clause about privacy of health information. Privacy of health information has been a hot subject in this Legislature before and will continue to be in the future, I’m sure. There have been ministers of health who have stepped down from their portfolios as a
result of inadvertently violating provisions of health information privacy.

I was very concerned about a clause within the bill that compelled individuals who were party to the community treatment plan, members of regulated health professions who have professional standards that they have to meet with respect to health privacy, to share that information with others who were part of the community treatment plan, which could be community agencies that have no legislative requirements on them at all not to divulge private health information.

We didn’t see eye to eye for some time in the debate back and forth on this, but at the end of the day the government did pass a simple amendment which put the prohibition in place for those individuals who are not covered by other legislation from divulging that information outside of the group that is involved in community treatment plan.

I have to be honest with you: I do not know whether the language we passed does the job. I’m very distressed that through that process there wasn’t proper consultation with the Information and Privacy Commissioner. It would have been a simple thing for us to do. I have considerable faith in the ministry counsel and the group of them together who put forward this provision in the end, and I hope we’ve done the job together. I don’t know, and time will tell.

There are many things to be said about the experience of having gone through the hearings on this and of the many discussions that took place in communities, in my own constituency and within my own caucus. It’s interesting how people can experience very similar situations and come to very different conclusions.

On a light note, as I indicated, the Liberal critic and I are probably in complete agreement with respect to what we support and what we don’t support in the bill and where our concerns lay, and yet she finds herself compelled to vote in favour. I find myself compelled to vote against and to have some record of dissent as we go forward collectively to hold ourselves as a Legislature accountable for the appropriate implementation of this bill.

In discussions with some of my colleagues, two of whom have had very personal experiences in their family lives with individuals who suffer from schizophrenia. Both of them have had very similar experiences with the tragedy of the waste of life that can occur, with the struggle to get the right services for the person at the right time in the right way, with the pain of the family trying to cope with that. Yet both of those individuals have a very different perspective on this bill and whether this bill meets the needs of their family and their loved ones. They’re going to vote in different ways. We’ll be deferring this vote until tomorrow, but when we vote on this, one of them will be voting in favour and one of them will be voting against. Go figure.

What it does is speak to the complexity of the life experience that we’re trying to deal with in some ways with simplicity of laws. Laws, in and of themselves, are not going to fix this problem. It is incredibly important to have the right legislative framework and I don’t want to take away from that. As I said in the beginning, at the end of the day, having supported this bill through first and second reading and at third reading finding the bill wanting and wanting to have a clear record of dissent as we go forward does not take away from the fact that people worked hard and did, in the end, improve this legislation. I say that again on the record because I think that is critical. The experiences that people have had and what solutions work and where they seek to find the help and how their experience in various communities of the various different levels of support have shaped their views has been, I think, an amazing challenge for legislators, to find their way through the road here to come up with the better and/or the best legislation. I think the legislation is better; I don’t think it is the best.

There are a few people I want to thank on the record before I make my final remarks on the bill. I want to indicate that I’ve already spoken to and given my thanks to the minister and to the parliamentary assistant.

I want to also thank Ms McLeod and Mr Patten. I believe that the group of us working together on this bill struggled with many complex issues and many difficult challenges and worked collaboratively, the way legislators should, to try to find the right path, to find the best legislation. I admire the dedication and the commitment that Mr Patten has brought to this. I don’t agree with him on all aspects as we’ve gone through this, but I believe on most, and I think that’s true of all of us. I think on 90% of what we heard and what we talked about we have a common understanding and common agreement, we have a common intent, and I think we even share common concerns with the parliamentary assistant as we go forward. That’s an amazing degree of consensus that only comes from people of goodwill working together to do the best for the public in Ontario. I applaud them. I envy them the resources they had to help them through this process—

Mrs McLeod: It was only me.

Ms Lankin: Oh, it was only Lyn. OK, well I envy you the capacity that you have, Lyn. I appreciate that and I want to say thank you. I think that has contributed greatly to this bill and I hope that I held up my end in this process as well.

I want to thank the clerk’s office and legislative counsel, those people who work behind the scenes who don’t often get seen: legislative counsel, who sat through all of our hearings, who helped opposition members draft their particular amendments; legislative research, who got sent away on a myriad of research projects during the course of this, trying to answer numerous questions from all of us. I think these people and the clerk himself and his staff did a tremendous job for us.

It has been mentioned that Mr Gilchrist did an admirable job chairing, and that is true, and facilitating the process of subcommittee meetings and agreement about process. I think that was helpful to the process.

Ministry counsel, who I think were under incredible pressure in terms of the initial production of the bill and
in terms of drafting amendments and also dealing with the last-minute negotiations and amendments as we were in clause-by-clause—I thank all of them. I thank them for the time they spent personally briefing me on the legislation and working with myself and the opposition critics and the parliamentary assistant to arrive at a bill.

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Now, I did make some comments at the end of clause-by-clause, which, if I had the Hansard from clause-by-clause, if it were ready, I would read into the record here. I’m sure I can’t recreate them in their entirety, but I want to take a moment at this time to put directly on the record of the Legislative Assembly my own personal thanks, and I believe the thanks of all the committee members, to Gilbert Sharpe. Gilbert has spent many years as counsel in the Ministry of Health and for the last number of years has been head of the legal department in the Ministry of Health. He has, as I said at the time of clause-by-clause, worked with governments of all three political stripes and ministers of many different dispositions and tempers and has always been someone who made a value-added contribution to our work as legislators and has worked through on this bill. I pay tribute because he, partway through this bill, abandoned ship. No. Gilbert’s sitting back there. He didn’t. He has gone on to private sector law, but stayed behind and worked with the government and ministry counsel on this bill to see it through to its fruition. He’s here this afternoon to see the bill complete third reading.

I suggested at the time that I hope the Ministry of Health had deep pockets so they could continue to bring Gilbert back, because he’s going to cost you a heck of a lot more. You had a deal and you didn’t know it.

But I know all of us from all parties who have worked with him over the years will miss him very much. The public often doesn’t know the contribution people behind the scenes make. There are thousands and thousands of them. Rarely do we have an opportunity to pay tribute. In this case, my thanks to all the ministry counsel, but my particular tribute and thanks to Gilbert, as he leaves public service, for his spirited commitment and for what he has done for many people over the years to provide dedicated service to the public service. We will miss you, Gilbert. I appreciate having that opportunity to put that on the record.

I’m going to wrap up by saying, as I did perhaps on second reading and at the beginning of this, that I find myself in complete agreement with the intent that the parliamentary assistant has set out as the government’s intent. I find myself grateful for the way in which the minister has approached having the parliamentary assistant and ministry staff work with the opposition to try to reach the best bill possible. I find myself sorely disappointed that the long arm of the backroom operatives somehow within the government and most obviously, to us, from the Premier’s office closed down the possibility to make this the best bill it could have been.

Short of that, the process had many merits. In the end, we will be passing historic legislation about which we will only find out down the road if we have been able to create the right balance, have been able to set in place a system that will demand that the resources meet the needs out there. We have failed to put those assurances within the legislation, and for that reason I record my dissent. A number of my colleagues will vote with me, but there will be colleagues who will vote in favour of it because, as I have said, the intent is one that all of us as legislators, I believe, see as a common goal.

Again, I appreciate the experience that this bill has provided. My tribute to the parliamentary assistant, and I look forward to working over the next few years to hold the government accountable to ensure that that intent is realized.

Mr Christopherson: Let me begin where most of the members have started and finished in terms of the process, and I won’t belabour it. It shouldn’t become more important than the bill and the issue before us, but I think we do need to underscore—and I would particularly ask the government to listen to the tone, to the level of debate, to the comments that are being offered from this side, because what we’re saying to you is the other side of what we say when you ram things through and don’t listen to anyone, and that is that this place can work. It is possible for us to work, albeit as three distinct parties, as one body of 103 representatives of the entire population of the province of Ontario. It is possible. This could always have been made better, but I’ll tell you, this process was a far sight better than what we’re used to around this place. It’s so rare that anybody gets an opportunity to say anything, let alone enter into a process where the government acknowledged a willingness and a desire to work with their parliamentary colleagues on the other side of the House, as well as the public, as well as experts in the field. That really is why this place was set up the way it was originally, and although you have to change somewhat with the times, the essence of it is still the same. There are times for us to be partisan, but there are certainly more times than we avail ourselves of where we ought to be working together as one group, and I think that has happened.

It’s also very positive, again in terms of a process and in terms of the importance of this law, because at the end of the day we are talking about people’s rights and whether or not the state ought to, under certain conditions, intervene and remove those rights, given the fact that in the cases we’re talking about here, in many cases no crime has been committed, other than that someone is ill. So this is extremely sensitive, crucially important legislation that we’re dealing with here today.

To that end, in closing now, let me just say that I would also compliment my Hamilton colleague, who is the member for Stoney Creek. I just finished heckling him earlier for voting in favour of Bill 74, where I think it’s going to do harm to the education system, but I also want to stand in my place and offer up support and recognition and acknowledgement where it’s deserved. I think in this case, through you, Speaker, to my friend across the way, you’ve done an admirable job, Brad, and
I think you’ve done us proud and our part of the province. A job well done, and thank you for that.

Hon Robert W. Runciman (Minister of Consumer and Commercial Relations): He’ll put that in his newsletter.

Mr Christopherson: My friend the Minister of Consumer and Commercial Relations has said he should put that in his brochure. Now, why would he do that? Where would you get an idea like that, Bob? Anybody who’s been around a while will know why Bob has made that comment.

The member for Hamilton Mountain—and not because it’s Hamilton necessarily, but because she has a PhD, I believe in psychology, as well as being an MPP, so there’s an area of expertise built into this place that has been given a voice and an opportunity, and I think it’s helped all of us. My friends from Ottawa Centre and Thunder Bay-Atikokan in the Liberal caucus have played a leading role in this.

Lastly, but certainly most importantly to me, I want to acknowledge my colleague, our deputy leader, our health critic, the member for Beaches-East York. I can tell you, she has done all the work you’ve seen publicly at committee and in this place and five, 10 times more in the background, usually on her own, doing the research, bringing it to caucus, wrestling with these amendments. So you can appreciate her disappointment when some of these amendments, which she believed sincerely were not partisan in any way and might have actually brought her to this point where she could vote for the bill today, were not adopted and how disappointing for her given the amount of work. I can tell you that she brought it to our caucus in a way that always spoke of building and creating the best kind of legislation we can, not, you know, “How can we stick it to the government on this one?” This was very much meant to be a process of serving the people. It was treated that way in our caucus. I have to imagine that it was treated that way in all of the caucuses.

That’s why I think that at the end of the day when we take the vote, it’s interesting that my colleague—and I’m going to read a quote from her second reading debate, by the way, just before I leave that. She will obviously be voting opposed to it. As much as I appreciate everything she has done, I’m going to vote in favour of the legislation, for reasons that I will outline while I am on my feet. I think that’s healthy. I don’t say this in a provoking kind of way, but it’s a shame that the government almost didn’t declare it a free vote, because basically that’s what it’s turned into in the Liberal caucus and in the NDP caucus. We didn’t label it that way, but de facto it became a free vote, because you are going to see at least myself and perhaps one or more who will vote with the government on this and others who will vote opposed.

What’s positive about that is that it shows there is a balanced consideration or recognition that there is not an easy answer to this, no clear right and wrong and no distinction between black and white that allows us to say, “Yes, there’s where the angels are on this issue and that’s where I’m going to go and stand.”

Very much, this is an issue of experience of your heart, of your conscience and what you bring as an MPP, whether you believe this is the right way to go or not. It comes down to a question of, do you believe the glass is half full or half empty? As we all know, that is different between all of us and can change from issue to issue.

I think it’s healthy that there won’t be necessarily unanimity on this side. I would just say it probably would have been all the more healthy had the government declared it a free vote, in case there are some members of the government who feel similar to my colleague from Beaches-East York.

However, having said that, I want to make reference to the member from East York’s last words in second reading. She said, and I quote directly from Hansard: “I commit to my colleagues to continue to work in that manner to try to achieve that”—meaning the best bill possible. “I commit to those who will be most affected by this legislation, those who have lived with mental illness, who are living with mental illness and the family members, to do the very best we can to bring about a law that will work for all those affected and that will strike the right balance between public safety and the right to caring, compassionate and effective treatment.”

I suspect that the member for Beaches-East York, in saying this, speaks for all of us in terms of our motivation towards this bill.

Moving to the substantive issue of Bill 68 itself, I don’t bring the level of expertise that the parliamentary assistant can now bring to this issue, having spent all of those hours and days and days and weeks immersed in the details of this law and the proposed changes, nor can I reach anywhere near the level of expertise that my colleague from Hamilton Mountain brings to this. But I have had a fair bit of life experience in this regard, to the extent that when I was an alderman in Hamilton I chaired two task forces, one on care for the psychiatrically disabled and another on second-level launching homes, which is of course the evolved, supportive housing that is unregulated—I would remind the government again, and remind all of us, because none of us has been able to wrestle that to the ground—but unregulated supportive housing to actually house those people whom the member for Ottawa Centre referenced when he talked about the deinstitutionalization in the 1970s and early 1980s that took place right across the province.

Specifically in Hamilton, of course, we have the Hamilton Psychiatric Hospital—at least so far we do—which has a much broader catchment area than just the immediate city of Hamilton. Therefore, the demand for these services has been very acute in our community and I think we’ve evolved into one of the leading communities for dealing with that, recognizing that ours is still nowhere nearly sufficient and yet it’s one of the better ones, shared with a few other communities. That again speaks to how much more we have to do in this area.
As the Minister of Correctional Services you’re not in that portfolio long before the fact is brought to your attention that anywhere from 30% to 50% of the people in our provincial correctional institutions, in jail, have a history of mental illness. You begin to see the revolving door of people being incarcerated, released into the hospital, released on the streets, back into jail, and it goes on and on. For some people in some families, that cycle, that revolving door, literally goes on for decades, decades of pain, decades of hurt. Certainly, as coroners’ inquests and coroners’ juries are part of the Solicitor General’s portfolio, I’ve dealt with a lot of them there.

Two more: Like many in this place right here, probably some I’m looking at right now, I have a family member who had a history of mental illness. Beyond the pain it caused my family member, all of that is also spread among the rest of the family. So I’ve experienced that and I understand it from that perspective.

But probably the strongest thing that I bring to this is the experience, the unfortunate experience, of being the MPP for the Antidormi family. I’m sure people will recall that on March 27, 1997, Zachary Antidormi, the two-and-a-half-year-old son of Tony Antidormi and Lori Tiano-Antidormi, was murdered by someone who was ultimately found to be innocent by virtue of not being responsible for their actions.

I don’t think we ought to do this just for those extreme cases alone, but we also can’t ignore them, by using that same argument. That doesn’t give us the legitimate right to say that the huge headline stories can’t be factored in. One of the things the jury said at the coroner’s inquest, and I quote from their report, which was published in the Hamilton Spectator on October 22 of last year, was: “There can be no greater tragedy than the death of an innocent child, especially when it is surrounded by tragic and violent circumstances. It is imperative that the recommendations from this inquest be taken seriously and implemented where feasible in order that the death of this 2½-year-old boy, Zachary Antidormi, is not in vain.”

Out of 60 recommendations, recommendation number 27 reads as follows, “The Ministry of Health should study existing mental health legislation including the Health Care Consent Act to consider whether or not legislative changes are required to permit compulsory treatment of individuals with diagnosed mental illness living in the community who do not have the capacity to consent to treatment.” We’ve taken an important step in this regard here today.

It’s for all of those personal experiences, and being the MPP for the Antidormi family, that I feel compelled to see the glass as half full with Bill 68. I agree with my colleagues who say it is incumbent upon every one of us, especially in the opposition—you’re whipped to do what you’re told. I’m voting voluntarily with you, which scares me half to death, but I am voting with you on this. I believe I bear a great responsibility to hold your feet to the fire to make sure that those supports are in place, that the beds are in place, that all of the community services that will make this work and will not turn people who are ill into victims, are provided. That is my part of the responsibility when I cast my precious vote in favour of this legislation, which I believe at this time is the right thing to do, based on my experience, my family, and representing my constituents.

The Acting Speaker: Further debate?

Hon Elizabeth Witmer (Minister of Health and Long-Term Care): The bill dedicated to the memory of sportscaster Brian Smith was introduced into this House on April 25 of this year. Today, almost two months later, I am pleased to see that this historic bill, this monumental bill, is presented for third reading, hopefully to become law tomorrow.

We are responding to the very strong recommendations of coroners’ juries, the expert advice of mental health care professionals and the voices of families who have at times felt very helpless in the face of their loved one’s suffering. Across the province, we have heard about the importance of education, public education to fight the stigma of mental illness and specialized training for professionals to meet demands of a new community-based mental health system. There has been much praise for the success of our current education initiatives, which have been very successfully led by Michael Bay, and there has been strong encouragement for us to build on that momentum with further educational initiatives.

We have heard the voices of mental illness talk about the importance of advocacy, of making rights advice more accessible and of improving the process of case review. All of this was vital to our work of creating legislation that would balance the rights of the individual with the safety of our community. We have heard the importance of continuing to invest in mental health initiatives. This government has already committed an additional $150 million to mental health care and I can assure you that we will continue to make additional investments in the coming months and years.

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The consultation process has been very thorough. It has been widespread and it has provided all of us with a wealth of information and a wide array of perspectives on mental health. I would like to most sincerely and warmly thank all of the individuals and the associations who have participated in the consultations and the committee hearings. Their words and their experiences have improved the legislation before us today.

We’ve all heard members from all parties talk about the process that was used in the development of this legislation, and I think we all appreciate that as a result of the process that was used and the input we’ve been able to receive from the other two parties, we really do have a bill which at the end of the day is much better because of the consultation, the compromise and the very thoughtful deliberations that have taken place.

I would like to thank Brian Smith’s widow, Alana Kainz, and her family.

I would like to thank Lori and Tony Antidormi, parents of Zachary Antidormi, for their strength, their
calls for action and their support throughout what I know has for them been a very long process.

I would like to also thank most sincerely my colleague Richard Patten for his many, many years of hard work for effective mental health legislative reform. Fortunately, his advocacy and his hard work have paid off, culmination in the legislation we have before us. Thank you very much, Richard.

I’d also like to thank my critics Frances Lankin and Lyn McLeod for their contribution. This has been an outstanding process in that we have been able to discuss, examine and compromise. I know we’re all going to continue to do what we can to ensure that this legislation continues to be the best it can be. I would like to thank the members on all sides of the House for the all-party support they gave this bill on second reading.

I would also like to say a very special thank you to our legal counsel at the Ministry of Health, in particular Gilbert Sharpe for the outstanding leadership he has provided on mental health legislation for many, many years. Well done.

Let me say thank you to the other members of the Ministry of Health staff who have worked for more than 18 months to bring this comprehensive vision of community-based mental health care to fruition. I would like to thank in particular my policy assistant Lori Turik for her sincere commitment and dedication to ensuring this legislation could and will be the best it can be.

I want to thank Ontario’s chief coroner, Dr Jim Young, for working with us to respond to the recommendations that have been echoed too many times in too many inquests since 1995.

Of course, I want to thank my parliamentary assistant Brad Clark for a job exceptionally well done. He has been tireless in his efforts to ensure that there has been appropriate consultation. He has been tireless in his efforts throughout the committee hearings to ensure that all voices and all opinions from across this province be heard as we drafted this very important legislation.

Today we have attempted to respond to those needs and to those voices, the voices of individuals who are caught in the storm of mental illness. Today we are starting down the path that will save lives and prevent further tragedies. Today we begin to improve the life prospects for thousands of mentally ill Ontarians who once had nothing to look forward to but life in an institution. Today we take the most significant steps forward in mental health reform in approximately 25 years, with legislation that will shape our vision and our understanding of mental illness for another 25 years and beyond.

In conclusion, let me again express my sincere appreciation to people throughout this province who have participated in the consultations. Let me again thank my colleagues on all sides of the House, and in particular Brad Clark, for a job extremely very well done.

The Acting Speaker (Mr Michael A. Brown): In accordance with the agreement of the House earlier today, the question is deemed to have been put on the motion by Mr Clark for third reading of Bill 68. A recorded vote is deemed to have been demanded and the vote is deemed to have been deferred until deferred votes tomorrow.

This House now stands adjourned until 6:45 of the clock.

The House adjourned at 1816.

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Une liste alphabétique des noms des députés, comprenant toutes les responsabilités de chaque député, figure dans les premier et dernier numéros de chaque session et le premier lundi de chaque mois.
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