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of Ontario**

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**Wednesday 13 April 2005**

**Mercredi 13 avril 2005**

Speaker  
Honourable Alvin Curling

Président  
L'honorable Alvin Curling

Clerk  
Claude L. DesRosiers

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## LEGISLATIVE ASSEMBLY OF ONTARIO

Wednesday 13 April 2005

## ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mercredi 13 avril 2005

*The House met at 1330.  
Prayers.*

### MEMBERS' STATEMENTS

#### EASTERN ONTARIO DEVELOPMENT

**Mr. Norman W. Sterling (Lanark–Carleton):** Later today, I will introduce a bill entitled the Eastern Ontario Economic Development Fund Act. This bill creates a special fund to assist all communities, except for the city of Ottawa, to the east of the greater Toronto area, which have historically lagged behind the rest of the province in growth, development and relative wealth.

Municipal governments in eastern Ontario have the same needs as or even higher needs than other parts of our province but do not have either the local tax base or the personal wealth of their citizens to provide for an adequate infrastructure. The Eastern Ontario Economic Development Fund Corp. would be mandated to invest in municipalities and businesses in eastern Ontario where the need is greatest. The local tax base, average annual income, and slower population growth statistics would determine the priorities of the corporation.

Like northern Ontario, most of eastern Ontario has not benefited from the significant growth experienced by the rest of our province. It is time for the government to recognize this fact and assist the municipalities in rebuilding their infrastructure and attracting new industry and jobs to this most important part of our province.

#### ROYAL CANADIAN LEGION

**Mr. Wayne Arthurs (Pickering–Ajax–Uxbridge):** I rise in the House today to acknowledge the 75th anniversary of the Royal Canadian Legion Branch 170 in Uxbridge. In 1926, 14 World War I veterans from the Uxbridge area applied for a charter with the Canadian Legion, and in May 1930 a charter was granted.

In the beginning, they held their meetings in the old post office and above retail stores in Uxbridge. With more veterans joining after World War II, it was decided Uxbridge would build their own Legion. With approximately 100 members, branch 170 was built by volunteers in 1950, and rebuilt after a fire in 1953.

Over the next few decades, the Legion members became more active in the community, and membership climbed to 300 by the late 1980s.

I recently attended the 75th-anniversary celebrations, and Branch 170 is eager to let the community know how far they have come since those early years.

Youth theatre, poetry readers, and the cadets use the facility.

Their ladies' auxiliary will also be celebrating their 75th anniversary this year.

Formed in 1967, Uxbridge Branch 170's pipes and drums continues to be a teaching band sponsored solely by the branch.

Branch 170 has just paid tribute to four 55-year members and five 60-year members.

I would invite all members to join me, on behalf of the riding of Pickering–Ajax–Uxbridge, in congratulating Royal Canadian Legion Branch 170 and its president, Jack T. Ballinger, on this impressive milestone.

#### DOCTOR SHORTAGE

**Ms. Laurie Scott (Haliburton–Victoria–Brock):** I rise today to draw the attention of the House to a problem facing many of my constituents. As I've mentioned before, doctor shortages are a serious problem in the riding of Haliburton–Victoria–Brock. One of the problems that residents face when doctors retire or close their practices is what happens to the medical records of their patients and how expensive it is for patients to retrieve those records when they do finally find a new doctor.

In Minden, one of the doctors recently retired, and his patients have had to find new physicians in Bancroft and Bracebridge. When they try to have their medical records transferred, they find there's a huge cost associated with this.

This is something that Georgina Parkes found out. She had to pay \$122 to have her 50-page file transferred. That is \$2.40 per page. Patrick Scadden, another of my constituents, found out that it's going to cost him \$175 to transfer his records.

Haliburton county has the second-lowest average income in the province. A lot of seniors live in my riding. This is a significant cost for Gillian Frudenberg and other seniors to bear.

It's also hard for families. Lisa Farr has been told that it will cost \$300 to transfer the files for her family.

All of these people have had to find doctors outside of their communities, and in many ways, they are the lucky ones. But what is going to happen when Minden finally gets another doctor—and they will—and they are able to go to a doctor in their own community? Will they be hit with this charge again?

I would ask the minister to look into this matter on behalf of the many people across the province who cannot afford this extra expense.

I'd like to recognize John and Dana Aruda, and Tyson Sangster, whose birthday is tomorrow, who are up from my riding.

#### BLUE MAN GROUP

**Mr. Rosario Marchese (Trinity–Spadina):** On March 31 of this year, the Canadian Actors' Equity Association, the Toronto Musicians' Association—Local 149 of the American Federation of Musicians—and the International Alliance of Theatrical Stage Employees, Locals 58 and 822, announced the launch of a consumer boycott of Blue Man Group tickets. They were forced to do this because Blue Man Group producers have repeatedly ignored attempts to negotiate contracts with unions specifying base pay, benefits and defined working conditions.

As we all know, actors and musicians live on very little and their work is never stable and hardly ever permanent. Toronto actors, musicians and theatrical stage employees demand and deserve—and I agree with them—fair working conditions and decent wages.

Blue Man Group must respect labour standards if they want to produce in Canada. They are investing to put up and market the show. They now must invest in the performers and craftspeople. They are the show.

I ask the public to support this boycott and write to the producer, Blue Man Group, and demand that negotiations commence immediately.

#### TOURISM

**Mr. Jeff Leal (Peterborough):** Last year, the Greater Peterborough Area Economic Development Corp., with the help of a \$150,000 grant from the government of Ontario's Tourism Recovery Office of the Ontario Tourism Marketing Partnership Corp. and the Ministry of Tourism, launched what would be a spectacular advertising campaign called "A Million Miles Away is Just Down the Road."

This campaign was designed to attract tourists from within Ontario to Peterborough and the Kawarthas and to assist with tourism recovery after SARS impacted the 2003 tourism season. Using a mix of television, radio, billboard and magazine advertisements, we targeted our campaign to our identified demographic, women ages 35 to 55.

On February 9, 2005, the Ontario Economic Development Awards took place at the Toronto Marriott Downtown Eaton Centre hotel. The Greater Peterborough Area Economic Development Corp. took top honours in the tourism advertising campaign category for the A Million Miles Away is Just Down the Road campaign. Congratulations, Peterborough.

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I'm very happy to announce that up until the flood, which has only sidetracked us for a moment, the Greater

Peterborough Area Economic Development Corp. had a 20% increase in tourism inquiries as a direct result of this campaign. The generous grant from the province of Ontario and the financial and undivided commitment from the city and county of Peterborough are the largest tourism promotional campaign since the launch of Peterborough and the Kawarthas Tourism.

The Peterborough and Kawartha area is a four-season, five-star tourist destination. I'm proud to promote and help spread this message in any way I can.

#### HEALTH CARE

**Mr. Robert W. Runciman (Leeds–Grenville):** Over the last two weeks, the Premier and his ministers, no doubt on the advice of their high-priced guru Warren Kinsella, have been playing fast and loose with the facts around their illegal health tax.

People in good faith believed Dalton McGuinty when he looked into the camera during the last election and said, "I will not raise your taxes." But in his first budget, he broke that promise. Since then, he has broken many more. From his solemn pledge to fund the treatment of autistic children to his pledge that he would freeze hydro rates, the Premier has demonstrated that he simply can't be trusted. Each day he comes in here and plays the people of Ontario for fools.

The Premier's lack of a plan for health care has put the system the people of Ontario depend on in jeopardy. Just a week ago or so, his health minister said that hospitals will offer fewer services in the future, farther from home. This government is spending their illegal health tax dollars this year alone on fewer hospital services, firing nurses, and on buying back MRIs that were already providing services to patients with an OHIP card.

John Tory has made a commitment to return the money that has been taken illegitimately from the people of Ontario. John Tory will not take one cent out of health care. John Tory has promised to spend health care dollars wisely and get down to the real work of finding waste in government, something this Liberal government refuses to do. John Tory and the Ontario PC Party will replace your illegal health tax with a competent government that has a plan for health care.

#### MOHAWK COLLEGE

**Ms. Jennifer F. Mossop (Stoney Creek):** I would like to take a moment today to talk about the enhancement of apprenticeship programs at Mohawk College on the Hamilton Mountain. Hamilton is proud of its tradespeople, who have been, and remain, a dedicated part of the Ontario workforce, providing the backbone of Ontario's economy.

For my community, this government announcement will mean over \$2.1 million for modernizing and upgrading equipment at the college. We need to ensure that our colleges and universities are able to provide the best resources for our students, and this funding will help

our colleges achieve that goal by allowing students to train and study on current and relevant technology and equipment.

There is also an additional \$1.1 million in funding for the apprenticeship enhancement program. It's good news for the people of Hamilton and future apprenticeship students at Mohawk College. The announcement of additional funding for apprenticeship programs, both in Hamilton and across this province, demonstrates our government's commitment to Ontario's apprentices and our province's future, and to its future economic success.

I want to applaud the good work being done at Mohawk College to train and educate the next generation of hard-working tradespeople in Hamilton and across Ontario. Young people who consider a career in a skilled trade have a prosperous future ahead, and I'm proud to say that I represent an area that has produced so many of those great workers over the years.

These initiatives demonstrate a commitment to our tradespeople and to creating a more inclusive workforce for a strong economic future.

#### VAISAKHI

**Mrs. Linda Jeffrey (Brampton Centre):** I rise today to recognize an important day in the Canadian Sikh community. April 13 marks the 306th anniversary of Vaisakhi. It is one of the most important festivals in the Sikh religion, which was founded more than 500 years ago. Vaisakhi began as a harvest festival in the Indian state of Punjab. However, it gained another dimension when the 10th and last guru, Guru Gobind Singh, founded the order of Khalsa in 1699.

The Sikh religion has a worldwide following of over 20 million people and is ranked as the world's fifth-largest religion. Sikhism preaches a message of love, understanding, devotion, remembrance of God, truthful living and equality of mankind.

The first Sikh pioneers settled in Canada over 100 years ago, and since then, the Sikh community has become an integral part of Canadian society. Today, more members of the Sikh community call Brampton home than any other municipality in Canada.

To celebrate this occasion, gurdwaras across Ontario have organized various events, such as parades in Malton and Toronto. In fact, tomorrow I will attend official ceremonies at local gurdwaras in Brampton and the surrounding areas.

I encourage all members of this House to join me in celebrating this rich culture and important religion.

#### FEDERAL-PROVINCIAL FISCAL POLICIES

**Ms. Deborah Matthews (London North Centre):** Our Premier and the Liberal government have taken a bold stand for Ontario. We are fighting for a new deal for this province. Closing the \$23-billion gap will facilitate this new deal.

Today, we launched a Web site that lays out our cause in black and white. It's at [strongontario.ca](http://strongontario.ca). I encourage the people of London North Centre and indeed all Ontarians to check out that Web site—[strongontario.ca](http://strongontario.ca)—to obtain a better understanding of the challenges Ontario faces because of the \$23-billion gap.

For example, Ontario welcomes 57% of all Canadian immigrants, but we get only 34% of the federal funding. The McGuinty Liberals want to help newcomers to Ontario, because everyone deserves a fair start. Newcomers to Ontario deserve equal access to opportunities.

Furthermore, everyone deserves fair and equal access to post-secondary education in Ontario. Closing the \$23-billion gap will help us to provide funding for post-secondary. This will help Ontarians move forward toward better jobs and a better future. This is the type of investment we are committed to, because we believe in the future of this province.

This is a message to the people of Ontario: You deserve a better deal. Contact your federal member and ask them why they are shortchanging Ontario. Why is a first-rate province getting second-rate service from the federal government? We deserve better and we'll stand for nothing less.

#### REPORTS BY COMMITTEES

##### STANDING COMMITTEE ON GOVERNMENT AGENCIES

**The Speaker (Hon. Alvin Curling):** I beg to inform the House that today the Clerk received the report on intended appointments dated April 13, 2005, of the standing committee on government agencies. Pursuant to standing order 106(e)(9), the report is deemed to be adopted by the House.

##### STANDING COMMITTEE ON SOCIAL POLICY

**Mr. Mario G. Racco (Thornhill):** I beg leave to present a report from the standing committee on social policy and move its adoption.

**The Clerk-at-the-Table (Mr. Todd Decker):** Your committee begs to report the following bill as amended:

Bill 118, An Act respecting the development, implementation and enforcement of standards relating to accessibility with respect to goods, services, facilities, employment, accommodation, buildings and all other things specified in the Act for persons with disabilities / *Projet de loi 118, Loi traitant de l'élaboration, de la mise en oeuvre et de l'application de normes concernant l'accessibilité pour les personnes handicapées en ce qui concerne les biens, les services, les installations, l'emploi, le logement, les bâtiments et toutes les autres choses qu'elle précise.*

**The Speaker (Hon. Alvin Curling):** Shall the report be received and adopted? Agreed.

The bill is therefore ordered for third reading.

## INTRODUCTION OF BILLS

### REGIONAL MUNICIPALITY OF PEEL ACT, 2005

#### LOI DE 2005 SUR LA MUNICIPALITÉ RÉGIONALE DE PEEL

Mr. Gerretsen moved first reading of the following bill:

Bill 186, An Act respecting the composition of the council of The Regional Municipality of Peel / Projet de loi 186, Loi traitant de la composition du conseil de la municipalité régionale de Peel.

**The Speaker (Hon. Alvin Curling):** Is it the pleasure of the House that the motion carry? Carried.

Mr Gerretsen?

**Hon. John Gerretsen (Minister of Municipal Affairs and Housing, minister responsible for seniors):** To ministerial statements, Mr. Speaker.

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### EASTERN ONTARIO ECONOMIC DEVELOPMENT FUND ACT, 2005

#### LOI DE 2005 SUR LE FONDS DE DÉVELOPPEMENT ÉCONOMIQUE DE L'EST DE L'ONTARIO

Mr. Sterling moved first reading of the following bill:

Bill 187, An Act to establish the Eastern Ontario Economic Development Fund Corporation / Projet de loi 187, Loi créant la Société de gestion du Fonds de développement économique de l'Est de l'Ontario.

**The Speaker (Hon. Alvin Curling):** Is it the pleasure of the House that the motion carry? Carried.

**Mr. Norman W. Sterling (Lanark–Carleton):** This bill recognizes that the area of eastern Ontario, east of the greater Toronto area, with the exclusion of the city of Ottawa, has not benefited from the significant growth and the wealth and the prosperity that the rest of the province of Ontario has. It provides, like the northern Ontario heritage fund, special help to municipalities and businesses to grow the economic development of eastern Ontario.

I urge all members to support this very vulnerable part of our province. They need help in renewing their infrastructure, and they need help in attracting new businesses and jobs to this important area of our province.

### CHILDREN'S LAW REFORM AMENDMENT ACT, 2005

#### LOI DE 2005 MODIFIANT LA LOI PORTANT RÉFORME DU DROIT DE L'ENFANCE

Mr. Craitor moved first reading of the following bill:

Bill 188, An Act to amend the Children's Law Reform Act / Projet de loi 188, Loi modifiant la Loi portant réforme du droit de l'enfance.

**The Speaker (Hon. Alvin Curling):** Is it the pleasure of the House that the motion carry? Carried.

**Mr. Kim Craitor (Niagara Falls):** Shortly after my election as the MPP for Niagara Falls, I was approached by a number of grandparents, many of whom are here this afternoon in the members' gallery. They are grandparents who are concerned, they're caring, and they had difficulty in securing legal access through the courts to their grandchildren. I have since received hundreds of e-mails, letters and personal contacts with loving grandparents who find themselves in this tragic situation.

I am pleased to introduce a bill that would give recognition to the rights of grandparents where, in the opinion of the courts, this would be in the best interests of the child. My proposed legislation, if passed, will amend the Children's Law Reform Act to emphasize the importance of children's relationship with their grandparents.

## STATEMENTS BY THE MINISTRY AND RESPONSES

### ELECTRICITY SUPPLY

**Hon. Dwight Duncan (Minister of Energy, Government House Leader):** As you know, the McGuinty government is setting the pace as the only jurisdiction in North America that is committed to replacing coal-fired generation with clean, reliable and sustainable power. We are doing this because we want to protect the best interests of Ontarians by reducing harmful emissions and cleaning up the air we breathe.

As we move forward to clean up our air, our government is ensuring a reliable supply of energy to power our homes, schools, hospitals and businesses, because a reliable supply of electricity is what fuels Ontario's economic engine.

You may recall that, back in June, our government launched a request for proposals for 2,500 megawatts of new, clean generation and demand-side projects in order to help our government meet our commitment to replace coal-fired generation while ensuring a reliable, efficient and affordable supply of electricity. We took a new and innovative approach to this RFP by not only looking for proposals to build new generation capacity, but also by looking for proposals that would conserve electricity. We believe that a megawatt saved is every bit as good as a megawatt built.

We were extremely pleased by the enthusiastic response we received to our call for proposals. In total, we received 33 proposals representing over 8,800 megawatts of new capacity, more than three times the amount we were looking for. The RFP process ensures the most cost-effective projects are selected for the ratepayers of Ontario.

I'm pleased to announce today that Ontario will soon benefit from four new electricity projects representing 1,675 new megawatts of clean electricity, enough to power over 650,000 homes across this province. We are in the process of addressing outstanding contract issues with other selected proponents and will have more to say in the coming weeks.

The four new projects break down to include a highly efficient cogeneration project, two new combined-cycle natural gas-fired generating plants and an innovative conservation project put forward by Loblaw Properties, Ontario's third-largest consumer of electricity. All the projects announced today are expected to be in service by the end of 2007.

I'm also extremely pleased with the value for money that Ontario ratepayers will realize as a result of this highly competitive procurement process. While I cannot give specifics on prices until all the contracts are finalized with the other selected proponents, I can tell you that the generation projects we are announcing today are among the most efficient gas-fired plants currently operating in North America. No longer will the risks of developing new generation facilities in Ontario be borne squarely on the shoulders of Ontario's ratepayers and taxpayers, which in the past has resulted in tremendous debt that our government continues to deal with.

The process we have just completed has brought some new players onto Ontario's electricity scene. The successful outcome of this process is a strong sign that, on our government's watch, investors are regaining confidence in Ontario's electricity sector. The selected projects I am announcing today are expected to bring an estimated \$1.1 billion of new capital investment to Ontario. That means more jobs and significant spinoff economic benefits to our province. Indeed, this is good news for Ontarians.

Perhaps most significantly, the new electricity projects will address a significant portion of our government's commitment to replace coal-fired generation in Ontario, and that means significantly cleaner air for all Ontarians to breathe. The two projects near Sarnia will be sufficient to replace most of the capacity of the Lambton coal-fired generating station. We have already taken measures to ensure that the Lakeview generating station, the first of the five coal plants to be shut down, will close safely later this month. Our plans for the remaining three coal-fired plants will be announced shortly.

This is the second RFP process our government has concluded. In November, we concluded a request for proposals for 300 megawatts of clean, renewable energy. As a result of that process, shovels are going into the ground for 10 new renewable energy projects representing 395 megawatts of green power. These projects represent \$700 million of new investment in Ontario and will increase Canada's current installed wind capacity by a staggering 80%.

I'm proud of our government's record to build a clean, reliable supply of electricity, a supply that doesn't in-

clude coal. Replacing coal-fired generation with cleaner sources of energy will reduce emissions equal to taking eight million cars off our roads. In fact, by closing Ontario's five coal-fired stations, we would have to take off every passenger vehicle and every small truck in Ontario to get a similar reduction, particularly in greenhouse gas emissions. It will mean cleaner air, less smog and clearer skies. It will mean a better quality of life for Ontarians, for our children and for their children, and it will mean that Ontario will lead the way to show others around the world that indeed it can and will be done.

## REGION OF PEEL

**Hon. John Gerretsen (Minister of Municipal Affairs and Housing, minister responsible for seniors):** To further the McGuinty government's commitment to building strong communities across Ontario, I'm pleased today to introduce a bill that aims to bring more fairness of representation to the governance of the region of Peel. This bill, if passed, would also better balance the interests of the three lower-tier municipalities in Peel.

For decades, Peel has been one of Ontario's most effective and efficient regions. It is the first municipality in Canada to achieve the silver level in the Awards For Excellence from the National Quality Institute, the first government in Canada to be certified at level three in the institute's progressive excellence program.

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Today's proposed legislation would ensure that Peel has the tools it needs to continue to succeed in the future. Our government is working to help Peel's upper- and lower-tier governments work toward even greater service delivery efficiencies. Toward that end, the legislation I'm introducing today is designed, if passed, to help Peel regional council more realistically represent the population distribution of Peel region. In doing so, it will help to promote more balanced representation on regional council by all three municipalities. What is more, it will do so without unnecessary restructuring or the dismantling of the region.

Let me give you some background for our proposed legislation. The region of Peel is made up of three lower-tier municipalities: the city of Brampton, the town of Caledon and the city of Mississauga. In 2004, Brampton's population was approximately 380,000, Caledon's population was 55,000 and Mississauga's population was 689,000. With the current number of seats that each of these lower-tier municipalities has on Peel regional council, the distribution works out to an average of 63,000 people per regional councillor for Brampton, 69,000 people per regional councillor for Mississauga, and 11,000 people per regional councillor for Caledon.

Our proposed legislation, if passed, will help to make regional representation fairer for the people of Peel. Our proposed legislation would give Brampton one additional seat on regional council and Mississauga two additional seats. Average regional representation therefore would

work out to 54,000 per regional councillor for Brampton, 57,500 per regional councillor for Mississauga, and 11,000 people per regional councillor for Caledon.

As the numbers show, our government's proposal for Peel governance offers a fairer, more balanced approach to representation by population. Furthermore, it ensures that no single lower-tier municipality has voting control or a majority of the regional council. Our goal is to provide the certainty and resolution on governance issues that the municipalities in Peel region need. Our goal is to help those municipalities get on with what they do best: delivering services that help maintain a quality of life in Peel.

In conclusion, I want to thank the four heads of council—Mayor Morrison, Mayor Fennell, and Mayor McCallion, as well as Chairman Kolb—for their professionalism and co-operation throughout the process.

**The Speaker (Hon. Alvin Curling):** Responses?

#### ELECTRICITY SUPPLY

**Mr. John O'Toole (Durham):** Today's announcement really adds more smog to Ontario. Why would I say that? Clearly, their plan is not to replace the 7,000 megawatts of coal generation that is currently being taken off-line with their promise.

This announcement does nothing to answer four principal questions. Will you keep your election promise to cease coal production in 2007? The answer is no. Will you have an adequate, reliable source of electricity into the future? No. Will electricity be affordable for the people of Ontario? No. Do you have a plan? No.

There's nothing in this plan for the city of Toronto. There's no mention of the Portlands project. This means that jobs and the economy are at risk for the city of Toronto.

Perhaps, as the minister said, the most significant statement here is, what is the bottom line, the price to consumers of the province of Ontario?

The real mystery overall and the real fog here is that there's a code language statement called the net revenue requirement, the NRR. Pay attention to this language. It is code language that the government is going to—I should say, it's the consumers who are going to subsidize these investments.

The minister's announcement today isn't even collaborated by one of the bidders. If you look at the Calpine Web site, you'll see that even though the minister in his announcement committed that this power would come on-line by 2007, the Calpine announcement on their Web site shows they'll begin the project in 2005 and the commercial operation won't begin until 2008.

The minister has admitted here today that Nanticoke and the cessation of the use of coal as a generating power source is not on. It's another broken promise.

The consumers should be put on notice that there are higher prices in the future.

#### REGION OF PEEL

**Mr. Tim Hudak (Erie—Lincoln):** I'm pleased to respond to the statement and the introduction of legislation from the Minister of Municipal Affairs and Housing. When it comes to municipal policy in this province of Ontario, the government says one thing and does the complete opposite. The Brampton Guardian has an expression for that. In their editorial they're calling that "Pulling a McGuinty." Certainly on this file, Premier McGuinty has taken a number of different positions.

In June 2004, the Premier said that his government would not be making any restructuring changes in Peel. In July 2004, the Orangeville Banner reported that the finance minister, Greg Sorbara, confirmed that municipal restructuring was not on the government's agenda. In fact the minister himself, in August 2004, then backtracked and said, "OK, restructuring is now on the table, but it must be based on a consensus of those involved." But in October 2004, the minister changed his mind once again and said that they're going to hire a facilitator to mediate a solution on restructuring. December 2004, the esteemed Justice Adams brought forward his report to give Mississauga two councillors and Brampton five. Well, they didn't flip-flop on the issue for three months, but they sat on it for three months and then again changed their minds and decided that after all, Dalton knows best and he is going to bring in his own solution.

We know that Brampton MPP Linda Jeffrey had affirmed in March of this year that the government would do nothing unless all three mayors agreed. Well, I guess she got overruled or didn't know what the minister was really thinking. Strangely, the members from Bramalea—Gore—Malton—Springdale, Mr. Kular, and Brampton West—Mississauga, Mr. Dhillon, are nowhere to be seen on this file. I think they're waiting to get their speaking notes from David MacNaughton and Don Guy. Then they will know what to say to the paper, but so far they have ducked it all.

*Interjections.*

**The Speaker (Hon. Alvin Curling):** Order.

**Mr. Hudak:** Here are the risks. The risk by this flip-flopping, this saying one thing and doing another, is the erratic signal it sends to municipalities. It will beg the question in areas like the region of Niagara, whether they are switching to a population-based system at the same time. Truly, by failing to find a consensus solution and going back and forth, Dalton McGuinty has prolonged and expanded a deep divide on council, taking considerable energy away from improving regional services like police and roads. In fact, the most recent scheme risks turning Peel council from what is considered to be a model council to a model of Dalton McGuinty himself: deadlocked, dithering and unable to make tough decisions.

**The Speaker:** Order. Before I ask for responses from the third party, I would like the same courtesy extended to the members who are responding as to the ministers who gave the statement. There is a lot of talk on the

government side. I now recognize the member from Beaches–East York.

**Mr. Michael Prue (Beaches–East York):** This minister has a very sorry record when it comes to dealing with municipalities. We saw first of all what you did to the people of Kawartha Lakes by completely rejecting their democratic vote after promising to obey what they had to say. Now we see how you completely ignore the recommendations of Mr. Justice Adams, who determined, I think quite rightly, that there were problems in Peel, but that your solution has gone nowhere to address them. He recommended that Mississauga and Brampton were both underrepresented, but his solution was far different from yours. He said to redress this he would give Mississauga two additional seats and Brampton five additional seats. You're OK with giving Mississauga their two—and I don't know why they can get their two—but you have completely underrepresented the people of Brampton, by 80% on what this learned justice had to say.

We don't understand why you're doing this, except that there must be some political pressure, either from your members from Mississauga who overruled the ones from Brampton, or perhaps from Mayor Hazel, who has more clout in your caucus than Mayor Fennel.

I want to tell you, you gave and the Premier gave Mayor Fennell of Brampton an unqualified statement that there would be no restructuring of Peel. You have gone back on your word. The people of Brampton participated in good faith and they have now been shafted by you, just as you shafted the people of Kawartha Lakes.

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#### ELECTRICITY SUPPLY

**Mr. Howard Hampton (Kenora–Rainy River):** I want to respond to today's embarrassing announcement by the Minister of Energy, and I want to point out why I think it's embarrassing.

With great fanfare back in September, the Minister of Energy said he was calling for 2,500 megawatts of new generation or demand-side measures. Then in December, with even more gusto and fanfare, he said there were 33 proposals for 8,800 megawatts. What do we see today? Well, you can barely make 1,500 megawatts. The McGuinty government couldn't even get enough respondents to meet the proposal of 2,500 megawatts, and this is their plan?

I also want to refer to the other embarrassment. The minister, when asked, "Will this result in the shutdown of a coal-fired station?" tried every which way to slide around that question, because the answer is no. He referred to Lambton. Lambton provides 1,950 megawatts. What did the minister announce today? Not 1,950 megawatts; barely 1,500 megawatts. No plan here to shut down a coal station, either.

What is this power? This is privatized power, privatized electricity. It is very expensive power, and when you read the fine print, it turns out to be overwhelmingly

American power. These are corporations some of which got into a lot of trouble in California. For example, the biggest provider of power in the McGuinty plan will be Calpine Corp.

This is what we consumers in Ontario need to know about Calpine. This is a public report. Calpine was at the absolute centre of the California deregulation storm. They calmly walked away with a fortune while California consumers re-mortgaged their homes and filed for bankruptcy in response to electricity rates that jumped, in some cases, up to 3,500%. In California, during the worst of the crisis of 2000, Calpine's profits soared 240%. Calpine earned 23% of total revenue from, ah yes, their partner Enron and their shared accountants, the infamous Arthur Andersen.

Minister, Calpine Corp. should be going to jail. Instead, the McGuinty government is going to bring them to Ontario as part of the McGuinty government's electricity plan. This is very expensive electricity. It's at least 10 cents a kilowatt hour wholesale. When you add on transmission charges, distribution charges and all the other new fees and profits, it's 14 cents a kilowatt hour retail. What does this mean to hard-pressed consumers? The hydro bill goes up. What does it mean for the pulp and paper industry and thousands of workers? It means the McGuinty government's going to put them out of work, because their hydro rates aren't going to come down; they're going to go up even more.

#### VISITOR

**The Speaker (Hon. Alvin Curling):** May I draw all members' attention to the members' gallery. In the west members' gallery, we have a former member from the 46th and 47th Parliaments, Doug Galt, from Northumberland. Let's welcome him.

**Interjection:** Who's that beside him?

**The Speaker:** By popular demand, the member beside him is from Lanark–Carleton.

#### DEFERRED VOTES

##### LABOUR RELATIONS STATUTE LAW AMENDMENT ACT, 2005

##### LOI DE 2005 MODIFIANT DES LOIS CONCERNANT LES RELATIONS DE TRAVAIL

Deferred vote on the motion for second reading of Bill 144, An Act to amend certain statutes relating to labour relations / Projet de loi 144, Loi modifiant des lois concernant les relations de travail.

**The Speaker (Hon. Alvin Curling):** Call in the members. There will be a five-minute bill.

*The division bells rang from 1414 to 1419.*

**The Speaker:** Would all members take their seats, please. All in favour, please rise one at a time and be recognized by the Clerk.

#### Ayes

Arthurs, Wayne	Flynn, Kevin Daniel	Patten, Richard
Bartolucci, Rick	Fonseca, Peter	Peterson, Tim
Bentley, Christopher	Gerretsen, John	Phillips, Gerry
Berardinetti, Lorenzo	Hoy, Pat	Pupatello, Sandra
Bountrogianni, Marie	Jeffrey, Linda	Racco, Mario G.
Bradley, James J.	Kennedy, Gerard	Ramal, Khalil
Brotan, Laurel C.	Kwinter, Monte	Ramsay, David
Brownell, Jim	Lalonde, Jean-Marc	Rinaldi, Lou
Cansfield, Donna H.	Leal, Jeff	Ruprecht, Tony
Caplan, David	Levac, Dave	Sergio, Mario
Chambers, Mary Anne V.	Matthews, Deborah	Smith, Monique
Colle, Mike	Mauro, Bill	Smitherman, George
Cordiano, Joseph	McGuinty, Dalton	Sorbara, Gregory S.
Craitor, Kim	McNeely, Phil	Takhar, Harinder S.
Crozier, Bruce	Meilleur, Madeleine	Van Bommel, Maria
Delaney, Bob	Mitchell, Carol	Watson, Jim
Di Cocco, Caroline	Mossop, Jennifer F.	Wong, Tony C.
Dombrowsky, Leona	Orazietti, David	Wynne, Kathleen O.
Duncan, Dwight	Parsons, Ernie	Zimmer, David

**The Speaker:** All those against, please rise one at a time and be recognized by the Clerk.

#### Nays

Arnott, Ted	Jackson, Cameron	Prue, Michael
Baird, John R.	Klees, Frank	Runciman, Robert W.
Barrett, Toby	Kormos, Peter	Scott, Laurie
Bisson, Gilles	Marchese, Rosario	Sterling, Norman W.
Chudleigh, Ted	Martel, Shelley	Tascona, Joseph N.
Churley, Marilyn	Miller, Norm	Tory, John
Flaherty, Jim	Munro, Julia	Witmer, Elizabeth
Hampton, Howard	Murdoch, Bill	Yakabuski, John
Hardeman, Ernie	O'Toole, John	
Hudak, Tim	Ouellette, Jerry J.	

**The Clerk of the Assembly (Mr. Claude L. DesRosiers):** The ayes are 57; the nays are 28.

**The Speaker:** I declare the motion carried.  
Shall the bill be ordered for third reading?

**Hon. Christopher Bentley (Minister of Labour):** I would ask that the bill be referred to the standing committee on social policy.

**The Speaker:** So ordered.

### LAW ENFORCEMENT AND FORFEITED PROPERTY MANAGEMENT STATUTE LAW AMENDMENT ACT, 2005

### LOI DE 2005 MODIFIANT DES LOIS EN CE QUI CONCERNE L'EXÉCUTION DE LA LOI ET L'ADMINISTRATION DES BIENS CONFISQUÉS

Deferred vote on the motion for second reading of Bill 128, An Act to amend various Acts with respect to enforcement powers, penalties and the management of property forfeited, or that may be forfeited, to the Crown in right of Ontario as a result of organized crime, marijuana growing and other unlawful activities / Projet de loi 128, Loi modifiant diverses lois en ce qui concerne les pouvoirs d'exécution, les pénalités et l'administration

des biens confisqués ou pouvant être confisqués au profit de la Couronne du chef de l'Ontario par suite d'activités de crime organisé et de culture de marijuana ainsi que d'autres activités illégales.

**The Speaker (Hon. Alvin Curling):** Call in the members. This will be a five-minute bell.

**Interjection:** Same vote?

**The Speaker (Hon. Alvin Curling):** It doesn't seem so. Same vote? No.

*The division bells rang from 1423 to 1428.*

**The Speaker:** Mr. Kwinter has moved second reading of Bill 128. All those in favour, please rise one at a time and be recognized by the Clerk.

#### Ayes

Arnott, Ted	Gerretsen, John	Parsons, Ernie
Arthurs, Wayne	Hardeman, Ernie	Patten, Richard
Baird, John R.	Hoy, Pat	Peterson, Tim
Barrett, Toby	Hudak, Tim	Phillips, Gerry
Bartolucci, Rick	Jackson, Cameron	Prue, Michael
Bentley, Christopher	Jeffrey, Linda	Pupatello, Sandra
Berardinetti, Lorenzo	Kennedy, Gerard	Racco, Mario G.
Bisson, Gilles	Klees, Frank	Ramal, Khalil
Bountrogianni, Marie	Kormos, Peter	Ramsay, David
Bradley, James J.	Kwinter, Monte	Rinaldi, Lou
Brotan, Laurel C.	Lalonde, Jean-Marc	Runciman, Robert W.
Brownell, Jim	Leal, Jeff	Ruprecht, Tony
Cansfield, Donna H.	Levac, Dave	Scott, Laurie
Caplan, David	Marchese, Rosario	Sergio, Mario
Chambers, Mary Anne V.	Martel, Shelley	Smith, Monique
Chudleigh, Ted	Matthews, Deborah	Smitherman, George
Churley, Marilyn	Mauro, Bill	Sorbara, Gregory S.
Colle, Mike	McGuinty, Dalton	Sterling, Norman W.
Cordiano, Joseph	McNeely, Phil	Takhar, Harinder S.
Craitor, Kim	Meilleur, Madeleine	Tascona, Joseph N.
Crozier, Bruce	Miller, Norm	Tory, John
Delaney, Bob	Mitchell, Carol	Van Bommel, Maria
Di Cocco, Caroline	Mossop, Jennifer F.	Watson, Jim
Dombrowsky, Leona	Munro, Julia	Witmer, Elizabeth
Duncan, Dwight	Murdoch, Bill	Wong, Tony C.
Flaherty, Jim	O'Toole, John	Wynne, Kathleen O.
Flynn, Kevin Daniel	Orazietti, David	Yakabuski, John
Fonseca, Peter	Ouellette, Jerry J.	Zimmer, David

**The Clerk of the Assembly (Mr. Claude L. DesRosiers):** The ayes are 84; the nays are 0.

**The Speaker:** I declare the motion carried.  
Shall the bill be ordered for third reading?

**Hon. Monte Kwinter (Minister of Community Safety and Correctional Services):** Mr. Speaker, I ask that the bill be referred to the standing committee on justice policy.

**The Speaker:** So ordered.

## ORAL QUESTIONS

### HOSPITAL SERVICES

**Mr. John Tory (Leader of the Opposition):** My question is to the Premier. In an effort to listen directly to the people of Ontario, we have invited Ontarians to submit questions, through our Web site, that they want answered by you and by your Liberal government. Many of those writing to us have already written to you, and

they've received back exactly the kinds of non-answers we're used to every day, so they can be welcomed to the club.

Ruthie Zaionz of Thornhill writes: "How exactly [does] Premier McGuinty intend to fulfill his promise to shorten the backlog for knee/hip replacement surgery? At the moment, it is a nine-month wait."

Premier, how do you respond to Mrs. Zaionz?

**Hon. Dalton McGuinty (Premier, Minister of Intergovernmental Affairs):** My compliments to the writer of the question. I would argue that she's putting in doubt the writers of my colleague's questions.

Let me just say that we have, for the first time as a government in the history of this province, decided to move forward on reducing wait times. No government has ever taken that on. We started by commissioning a report which gives us some good, reliable baseline information. That has now been made available. That information indicated, by the way, that wait times got worse under the Tory government.

What we have done now, to begin, is invest \$107 million. Part of the return on that investment has been 1,680 more hip and knee replacement surgeries already.

**Mr. Tory:** I'm sure that Mrs. Zaionz is sitting at home, sympathetic to the fact that you gave me a lot of very interesting facts but didn't address, to any extent whatsoever, what has happened with the wait list for her. She has already had to wait four months to get a consultation, and now she has been told that she will have to wait another nine months for the knee replacement surgery.

*Interjection.*

**The Speaker (Hon. Alvin Curling):** Minister, I'd like you to come to order.

**Mr. Tory:** Her surgeon, who is the head surgeon at a major hospital in downtown Toronto, told her he is only allowed five hours of operating room time per week.

Premier, Ontarians like Mrs. Zaionz simply don't see any improvement in wait times, despite all of your talk and despite your illegal health tax. Given that hip and knee replacement is one of your priority areas, why does Mrs. Zaionz have to wait over a year for her surgery? Where's the improvement you talked about?

**Hon. Mr. McGuinty:** The honest answer is that it takes a long time to turn around the mess we inherited from a government that refused to dedicate itself to getting wait times down.

With respect to the issue of consultations, we've heard that in many instances, that was the result of a cap on the fees we were paying through OHIP to our specialists. The member will know that as a result of our new agreement with Ontario doctors, we are lifting that cap. That's going to result in a more rapid response to consultations.

Again, I would say to my friend, how is he going to help this particular individual by taking \$2.4 billion out of health care? How is that some comfort and satisfaction? You've got to make some tough decisions in this job. One of those is making an investment of \$2.4 billion. We've made that investment. It wasn't an easy thing to

do, but we believe it is the right thing to do. My friend may decide that he's going to take \$2.4 billion out of the system, but—

**The Speaker:** Thank you. Final supplementary?

**Mr. Tory:** I'd say the one who has some explaining to do is the Premier, who made one set of your so-called tough decisions to get yourself elected and then had another completely different set of decisions to make when you got here. It's a complete disgrace.

I would say to you that Mrs. Zaionz doesn't think it's right that she's being forced to pay your illegal health tax and then is told she's going to have to wait for more than a year to get her knee replacement surgery.

*Interjections.*

**The Speaker:** I would ask the members to come to order. I'm having difficulty hearing the leader of the official opposition.

**Mr. Tory:** The Canadian Medical Association released benchmark wait times for hip and knee replacements last week.

*Interjection.*

**The Speaker:** Order. When I stand up and have made an order, I'd like it to be respected. I don't want the heckling of the member.

**Mr. Tory:** The Canadian Medical Association released benchmark wait times for hip and knee replacements last week. When I asked you about those, you refused to commit your government to achieving those wait times. They recommend a total wait time, including the consultation and everything else, of nine months for routine cases and no more than 90 days for semi-urgent cases. Premier, will you commit to meeting those recommended wait times by the end of your mandate, for the sake of people like Mrs. Zaionz—yes or no?

**Hon. Mr. McGuinty:** I can tell you that there are a number of bodies that have been forthcoming with respect to their particular take and their particular advice when it comes to wait times. We will take that advice into consideration.

Let me tell you about some of the commentary that we have already received because of our work on wait times.

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Dr. Robert Bell, from Princess Margaret Hospital, said, "What would have been an eight- to 10-week wait for cancer surgery, wait for MRI scan and wait for an initial consultation and diagnosis have been reduced to less than three weeks."

Joe de Mora, president of Kingston General Hospital, says, "The new equipment means we will be able to serve patients through quicker processing while producing clearer images that will result in more rapid diagnoses, thereby reducing wait times."

Julia Dumanian, CEO of Cambridge Memorial Hospital, says, "The current waiting time of three months for outpatient elective scans will be eliminated."

We are making progress. We'd like to move more quickly, but given the terrible state of the foundation we inherited, it is unfortunately taking longer than we would have liked.

**The Speaker:** New question.

**Mr. Tory:** I have no idea whatsoever how the Premier can claim that there's any improvement taking place when he couldn't even answer last week where he started on the wait lists. Premier, your plan for reducing wait times looks like no plan at all. Last week, your Minister of Health said, "Hospitals will not be operating with as broad a range of services as they're tending to right now."

Premier, why are people paying your huge, illegitimate tax increase and yet being offered less service at the hospitals?

**Hon. Mr. McGuinty:** Again I say to the member, I don't understand, and neither do the people of Ontario, how taking \$2.4 billion out of Ontario's health care system is going to make our health care better for the people of Ontario. Let me say that so far, with respect to hospital funding, we have invested another \$1.7 billion. In total, we've invested in health care close to three billion additional dollars.

With respect to wait times, we've done something that is without precedent. We have commissioned a study to give us baseline information. Beyond that, we are also putting in place a health quality council that will report to Ontarians on an annual basis as to our progress. We've already put in place 1,680 more hip and knee replacements, 1,700 more cancer surgeries, 7,800 more cardiac procedures and 2,000 more cataract procedures. We are making progress, and we are determined to do more.

**Mr. Tory:** Doesn't it just tell Mrs. Zaionz and everybody else that you have done something without precedent—you've commissioned a study? Fantastic.

We heard some talk yesterday about Mr. Martin being out of touch. When you talk about the \$2.4 billion, what people out there are wondering is why they're paying your \$2.4 billion illegal health tax and yet getting less service. You've already cut out funding for eye exams, for physiotherapists and for chiropractors. In every single sense in the health care system, people are paying more and getting less.

Premier, last week your minister said, "We don't need to do hip and knee replacements in 57 different hospitals." Can you tell us which hospitals will be cutting out hip and knee replacement operations?

**Hon. Mr. McGuinty:** I think people want to know that if you take \$2.4 billion out of health care, what are the consequences of that? That is the solemn, unwavering, unequivocal commitment of Mr. Tory, and I think they're entitled to know what it means. It means shutting down 10 large hospitals. It means firing 6,000 nurses. It means shutting down 49 hospital MRIs. It means 5,000 fewer hip replacements, 6,000 fewer knee replacements, 5,000 fewer cardiac surgeries, 3,000 fewer cataract surgeries and 2,000 fewer radiation treatments. It means that 50,000 children will not receive their vaccinations, and it means shutting down, in short order, 20,000 long-term-care beds. That's what it means.

We've invested \$2 billion overall in health care; \$1.7 billion into our hospitals. We've reduced wait times,

we've increased volumes, we're rolling out our family health teams shortly and we've put in place funding for more than 3,000 new nurses. We've done a lot, and this is just the beginning.

**Mr. Tory:** The Premier obviously believes that the more times he reads that list, it might actually become true. It's totally preposterous and you know it.

Ruthie Zaionz has already waited over a year to have her knee replaced, and now—

*Interjection.*

**The Speaker:** Minister of Health, could you come to order, please.

**Mr. Tory:** Ruthie Zaionz is already waiting over a year to have her knee replaced, and now your health minister says there will be fewer hospitals offering the service. How does this fit with your plan to reduce wait times? It sounds like you're making it up as you go along. I want you to stand in your place today and guarantee Ruthie Zaionz that wait times will not increase for hip and knee replacements. Can you do that, that they will not increase? Guarantee it.

**Hon. Mr. McGuinty:** Of course. What we're talking about here is finding a way to bring about more efficient use of our limited health care dollars. We're finding a way to do so that does not compromise accessibility to health care, and we're finding a way to do it so that we can continue to reduce wait times.

I don't understand how my friend opposite could be against us finding a way to consolidate services and improve efficiencies. He wants to take \$2.4 billion out of health care. He wants to introduce more private health care. I mean, there's a clear, sharp, stark contrast. The people of Ontario should understand that.

We made a difficult decision to put \$2.4 billion more into their health care system. We put \$3 billion more into health care overall, \$1.7 billion more into hospital funding. We put in place funding to hire 3,000 more nurses. I have listed the thousands of additional volumes we found for surgeries. They want to take \$2.4 billion out of health care. They want to introduce more private health care. Therein lies the contrast for Ontarians to consider.

## ELECTRICITY SUPPLY

**Mr. Howard Hampton (Kenora–Rainy River):** My question is for the Premier. During the election, Premier, you promised ordinary Ontario families, "Your hydro will remain in your hands." You said, "We're going to build generation in the province of Ontario." Who? Ontario Power Generation, like we did for 50 or 60 years. That was the people's choice, Premier.

Today, you unveiled your so-called plan for future hydroelectric generation in the province of Ontario, and it clearly wasn't the people's choice. It's obviously President's Choice: private power, expensive power, American power and, unbelievably, public money for Loblaw's Corp. Premier, tell hydro consumers in the province, who are already paying for your broken promises, just how

much this private, expensive American power is going to cost them on their hydro bill.

**Hon. Dalton McGuinty (Premier, Minister of Intergovernmental Affairs):** The Minister of Energy.

**Hon. Dwight Duncan (Minister of Energy, Government House Leader):** Today we announced the ability to close down the Lambton coal-fired plant in a cost-effective, efficient and safe way.

Number 2, the member doesn't want companies like Loblaws to turn down their power at peak time. He doesn't understand what demand response is. That's because his government cancelled all conservation programs. What happens with that proposal is that, when the power peaks at peak times, Loblaws will save 10 megawatts, savings which will accrue to every ratepayer in Ontario. There will be a net savings to them. It's good public policy. It will result in lower prices for consumers in the short term and in the long term, and as Mr. Gibbons of the Clean Air Alliance said today, this is a very cost-effective way of bringing cleaner, more reliable energy on to Ontario's grid in a responsible fashion.

**Mr. Hampton:** I think it's clear now why the Premier ducked the question. He doesn't want to admit how expensive this power is going to be, and he doesn't want to admit that there's not enough new electricity supply here to shut down even the Lambton coal generation station, never mind Nanticoke coal generation station.

Premier, last summer, you promised 2,500 megawatts of new electricity. There's barely 1,500 megawatts of new electricity here. During the election, you guaranteed people. You said, "We will keep the rate of electricity at 4.3 cents a kilowatt hour." Now you've already raised it by 34%. Today your energy minister refused to answer the question: How much is this going to cost consumers, businesses, industry? So I'm going to ask you, Premier, again, how much is this going to cost hard-pressed industries like the pulp and paper industry, businesses and hydro consumers? How much is it going to drive up their hydro rate even more?

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**Hon. Mr. Duncan:** Again, I reject the presupposition in the question. First of all, hydro rates for the average consumer have gone up between 6% and 7%, not 34%, as he would have you believe. Wholesale market prices have gone down fully 19% since we assumed office.

I announced this morning, and I said again in my statement to the House today, that there are contracts, the final wording of which is being finalized with additional proponents. I expect that those announcements will be forthcoming very shortly and at that time we will provide the price information that was requested.

I would suggest that this project to bring on cleaner, more reliable forms of power as we move forward ought to be the thing that this province celebrates as we clean up our air, move to secure our supply of electricity and ensure that this province's electricity future is well managed. We are doing that, unlike the member opposite.

**Mr. Hampton:** The reality here is that even wholesale, this electricity is going to cost 10 cents a kilowatt

hour. The reason you weren't able to announce more generation today is because the other bids that you got are for even higher rates, and you don't want to admit to the people of Ontario how high this is going to drive the electricity bill. I repeat again, this won't even allow you to shut down the Lambton coal-fired station, never mind the big polluter, Nanticoke.

But what today really shows is that you haven't learned a thing from the deregulation fiasco in California. Who was at the centre of that? Calpine Corp., in partnership with those crooks at Enron and the crooked accountants, Arthur Andersen. And whom are you inviting into Ontario now as your saviour? Calpine Corp., after they racked up 240% profits in California while people were being gouged.

I say again to the Premier, you owe it to the hydro consumers of Ontario; you owe it to the paper mill workers who are already losing their jobs: How much more is this going to force up the price of electricity in Ontario?

**Hon. Mr. Duncan:** Again, the member opposite only gives half-truths in his statement. First of all, Calpine Corp., for members who are interested, operates—

*Interjections.*

**The Speaker (Hon. Alvin Curling):** Order. There was some unparliamentary language and I'd ask you to withdraw it.

**Hon. Mr. Duncan:** I will withdraw.

The member opposite doesn't provide the whole story. Calpine operates in 21 US jurisdictions and three Canadian jurisdictions. Calpine is part of the Standard & Poor's 500 Index. It has more disclosure requirements than any public utility in Canada. Calpine was caught up in the California situation, as was, by the way, BC Hydro. Subsequent to the member's diatribe, we just confirmed that in fact, after the crisis, Calpine came into the California market and brought on 3,500 megawatts of power very quickly.

The process we set up ensures that, unlike the NUGs agreement they entered into 10 years ago, which consumers are starting to pay for this year to the tune of two cents a kilowatt hour, they won't be stuck with the same kind of bill the NDP have left them well into the future.

**The Speaker:** New question?

**Mr. Hampton:** For the Premier again: One of the things you promised was a culture of conservation. But what did we get today? Public money for Loblaws Corp. Here's the story from the insider's report: In the third quarter alone of last year, Loblaws had a profit of \$258 million. Today, hydro ratepayers found out that they are going to be subsidizing Loblaws Corp. on their hydro bill. No subsidy for low-income people who can't pay their hydro bill, nothing for paper mills and pulp mills that are closing, but Loblaws Corp., with a quarterly profit of \$258 million, is now going to get a subsidy from hydro ratepayers. Premier, is this what you meant by a culture of conservation? You funnel money from hydro ratepayers to wealthy corporations like Loblaws.

**Hon. Mr. McGuinty:** The Minister of Energy.

**Mr. Duncan:** The problem with a question like that is that no one's ever done this before.

*Laughter.*

**Hon. Mr. Duncan:** They laugh, but you know, they don't laugh when we're at peak demand times. They don't laugh when prices—and that's when prices are highest.

The Loblaws proposal is an outstanding example of what some of our large industrial users can do to contribute to solving some of our electricity supply challenges, not through the building of new generation facilities, but through innovative load shifting at critical times of peak demand that will benefit all ratepayers. I believe that if the member understood what he was saying, he would not have asked the question. Given the member's history and given the fact his party cancelled all conservation and demand-side initiatives, we shouldn't be surprised at how ill-informed the question is and how wrong its supposition is. This is a good proposal that shifts demand from peak time to less peak time, and will lower prices for all ratepayers in Ontario.

**Mr. Hampton:** It's the Premier who has been waxing on about a culture of conservation, and he wouldn't even answer that question. I want to say to the Premier, there must be a problem with your culture of conservation, because you've been telling people and you've been telling the media that as you raise electricity rates, hydro consumers and businesses will engage in conservation to save electricity and save money. Well, here is a very wealthy corporation that has the money to do it themselves, and yet you have to take money out of the pockets of hard-pressed hydro consumers to subsidize them. Premier, there must be something wrong with your theory. There must be something wrong when raising hydro rates by 34% doesn't drive Loblaws Corp. to engage in conservation. Instead, you have to take money out of the pockets of ordinary Ontarians and give it to a very profitable Loblaws. What is wrong with your theory, Premier?

**Hon. Mr. Duncan:** There's nothing wrong with the theory of demand-side management. The only thing the member doesn't understand is how it works. By shifting demand from peak time to low peak time, it saves money for all consumers because prices are highest at peak time. The NDP has been all over the board on this. As recently as March 2005, Marilyn Churley in a press release said the government should show leadership in promoting energy conservation and sustainability. Everyone agrees that this kind of proposal is exactly the kind of demand-side initiative we ought to be engaging in. It is just as efficient to save a megawatt of power as it is to build a megawatt of power. They don't understand it; they don't get it; we do. This is part of Ontario's future. It saves small consumers money time over time.

**Mr. Hampton:** I understand the need for electricity efficiency and conservation. I understand the low-income family that has a refrigerator that is not electrically efficient, that uses three times as much electricity as a

new modern refrigerator, and that that family could use a low-interest loan so they can take that old clunker in and buy a new electricity-efficient fridge.

I understand that paper mills and pulp mills that are laying off workers and shutting down have come to your government and said, "There's something wrong here. The Hydro dam down the river from us produces electricity for a cent and a half a kilowatt hour. Why are we paying six-and-a-half cents a kilowatt hour?" They need a plan. I'll tell you, Premier, Loblaws, with a quarterly profit last year of \$258 million, doesn't need public money. According to your strategy, they should be doing conservation on their own. I say, Premier, where is the conservation plan for low-income Ontarians? Where is the conservation plan for small businesses? Where is the conservation plan for school boards?

**Hon. Mr. Duncan:** The member opposite forgets that a year ago we passed Bill 100 and we incented local distribution companies a quarter of a billion dollars to implement those precise programs, and they're being set up all over the province. What did that member and his party do? They voted against it. They voted against the most sweeping conservation program in the history of the province of Ontario, and worse yet, when they were the government, they cancelled every conservation program that the old Ontario Hydro was operating. That member voted against the most sweeping program in the history of this province, one that will benefit low-income consumers and small businesses.

They are all over the board. They've got old, tired ideas that have been relegated to that side of the House for a long time. We are dealing with a major problem in a responsible way that benefits small and large consumers and will ensure this province's economic viability and competitiveness for years to come.

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#### MAGNETIC RESONANCE IMAGING

**Mr. John Yakabuski (Renfrew–Nipissing–Pembroke):** My question is for the Minister of Health. Minister, you promised the people of Ontario that you would reduce wait times for MRIs and that you would set maximum wait times for this procedure. However, the Ontario Association of Radiologists states that for 94% of patients, that wait time is inappropriately long, and 90% of radiologists say that you have made little or no progress in reducing those wait times.

Minister, what is an acceptable length of time for a patient to wait for an MRI in Dalton McGuinty's Ontario?

**Hon. George Smitherman (Minister of Health and Long-Term Care):** I find it interesting that the honourable member, who represents a party that was part of a government that left the Champlain district behind when it came to MRIs, would have the audacity to ask a question like that.

Which government in the province of Ontario has introduced two new MRIs in the Ottawa community for the constituents that the honourable member represents?

It's this government, led by that honourable member. Since we came to office, we've increased access to MRIs by 20%. Currently in Ontario hospitals, we're replacing seven MRIs and an astonishing 28 CT scans to further enhance capacity.

On the issue that the honourable member speaks about, wait times and what is appropriate, as the Premier said in answer to a question earlier, there is no established, agreed-upon wait time. But this weekend, working with all health ministers from across the country, we're working to deliver on the promises made at the first ministers' meeting after the Premier went and got us some extra money.

**Mr. Yakabuski:** I'd like to draw the minister's attention to a letter I received from a constituent of mine, Mr. Edward Evans from Arnprior. I might point out that you also promised to treat our seniors with respect and dignity. Mr. Evans is a senior and a World War II veteran who gave five years in service to this country.

An MRI for Mr. Evans was ordered at the end of February, and he is expected to wait until December 5 for this procedure at the Queensway Carleton Hospital. On top of that, Mr. Evans, a senior veteran, is paying \$544 in the McGuinty government's punitive health tax.

Mr. Minister, is this how you treat seniors and World War II veterans in Ontario with respect and dignity?

**Hon. Mr. Smitherman:** In answer to the honourable member's question, I am proud to stand and defend our government's record as it relates to seniors. The reality for any Minister of Health in our country is that the patients are our consumers, our customers, and the obvious reality is that those are disproportionately seniors. If you look at the investments we've made—the \$107 million that the Premier spoke about, hips and knees, cataracts, cardiac, cancer, access to the important diagnostic services of MRIs and CT scans—who are these services targeted at but our seniors? Add to that a \$200-million investment in long-term care to clean up a real big mess that you fellas left behind, and, in addition to that, \$103 million for enhanced service to home care, \$29.2 million for things like community supports, Meals on Wheels, drives to local appointments and all of that.

We are the government that is dedicated to improving the quality of health care for our seniors, exactly because of the emotion that the honourable member brought in his question.

#### DOMESTIC VIOLENCE

**Ms. Marilyn Churley (Toronto–Danforth):** I have a question for the Minister of Community Safety. Almost six months ago, Wyann Ruso walked into a Toronto police station, told them her husband was threatening to kill her and presented them with the gun she found. The police told her not to go home and that they would arrest him, but they never did get to it that day. Hours later, she was attacked with an axe and a hammer, and her husband has been charged with attempted murder. Then-police chief Fantino, now your emergency commissioner, publicly admitted mistakes were made and said the

matter would be investigated, but to date there is no evidence of that happening. Will you call for an investigation so we can find out what went wrong that day, so we can remedy it and make sure it never happens again?

**Hon. Monte Kwinter (Minister of Community Safety and Correctional Services):** I thank the member for the question. You should know, and I'm sure you realize, that we as a government have really done a lot to deal with women in abusive situations. We've introduced ODARA, the minister has programs that are there, and we certainly understand the problem.

Having said that, in this particular case there are remedies that are out there. The police are conducting an investigation. I understand that the investigation has been completed. The results have not been released. The people representing the particular person—and I don't want to get involved with specific cases—have the opportunity of querying the police as to what the results of that investigation are. If they don't get a satisfactory answer, they can go to the Toronto Police Services Board and ask them. If they don't get a satisfactory answer there, then there is also the provision to go to OCCPS. All of these things are available and they're available without my intervention.

**Ms. Churley:** Minister, this was a very, very serious attack, and you're standing there and saying that there was an investigation and you don't know anything about it? Miss Ruso knows nothing about it. Her lawyers know nothing about it. Tell that to Miss Ruso today.

Under the Police Services Act, you can direct the Ontario Civilian Commission on Police Services to investigate matters you deem important. It's been almost six months since Wyann nearly lost her life, and she still doesn't have any answers. She has not heard from the police. She joined me in a press conference this morning and here's what she said: "I thank God I survived, and I will do anything I can to make sure no other woman has to go through what I did."

Minister, there is wide-spread concern that this is a systemic problem across the province. We need answers, and we need them from you, the minister responsible. I ask you again, will you call an investigation so we can get answers and Wyann Ruso can get answers?

**Hon. Mr. Kwinter:** Under section 25 of the Police Services Act, I have the ability to request, not to direct. I can't direct anybody to do anything under that act. I can request that they do it. But there are several other steps before I could even consider that. I've laid those out to you. You're asking me to supersede all of the procedures that are in place. You're asking me to make a decision based on information that is not available to me, and I'm saying to you there is a process in place. It is there and we are watching it very closely, but the parties have the ability to get redress before I have to make that request.

#### ELECTRICITY SUPPLY

**Ms. Caroline Di Cocco (Sarnia–Lambton):** My question is for the Minister of Energy. Today you an-

nounced four successful proponents in the government's request for proposal for 2,500 megawatts of new generation. Two of these projects, totalling 1,575 megawatts of new generation, will be built in my riding of Sarnia-Lambton. I know that the Premier and this government are committed to putting Ontario's electricity supply on a reliable and secure footing. Minister, what kind of impact will these two new plants have on the generating capacity of electricity in the province of Ontario?

**Hon. Dwight Duncan (Minister of Energy, Government House Leader):** Our government, under the leadership of Premier McGuinty, is moving forward to protect the interests of all Ontarians by ensuring a reliable, safe and adequate supply of electricity.

The 1,675 megawatts we announced today will allow us to close the Lambton coal-fired station and allow us, indeed, to help begin to clean up the air in this province. There will be \$1.1 billion invested in Ontario as a result of these four projects, which will create literally hundreds of jobs during the construction phase. There are unique cogeneration demand-side management programs in this successful RFP, which will benefit all consumers, especially small consumers, as Jack Gibbons of the Ontario Clean Air Alliance said today. So we're going to have lower-cost power and a much more reliable source of power, and all cost overruns will now be paid by private investors, not by electricity consumers.

We welcome his support of this initiative. We welcome the \$1.1 billion in investment in new, clean electricity, and we're glad that the people of Sarnia-Lambton are joining with us in support of cleaning up our air and land.

1510

**Ms. Di Cocco:** Minister, the Premier and our government have an ambitious plan to phase out coal-fired generating stations. Today's announcements will go a long way toward helping the government achieve our targets for reliable supply, while leading to cleaner air and a healthier Ontario. What other projects are currently in the works that will continue to help this government meet its commitment?

**Hon. Mr. Duncan:** After years of inaction, we have acted swiftly to bring new supply and conservation to Ontario. First, we completed a renewables RFP by signing contracts for 395 megawatts of renewable energy, an 85% increase in Canada's wind capacity. We announced the first four winning bids for a second RFP of 2,500 megawatts of clean energy and demand management. We approved the refurbishment of Pickering A unit 1, which as of today is on time and on budget. We approved the construction of the Niagara tunnel, a \$700-million project that will increase the capacity at Niagara Falls. We've announced a number of conservation initiatives, including a plan for smart metres, which will be in place in this province by 2010. Through my colleague, the Minister of Natural Resources, we announced a waterpower site release policy to encourage new hydro development, something neither the Conservatives nor the NDP did.

This government is now bidding on the lower Churchill, again to bring clean, renewable, sustainable electricity to

Ontario. This government is moving quickly and positively to address our energy situation.

### GREENBELT

**Mr. Tim Hudak (Erie-Lincoln):** A question to the Minister of Municipal Affairs and Housing. Thomas Kugler is a Niagara-on-the-Lake farmer who wants to purchase a 22-acre plot of land to farm grapes. He has invested funds in new vines, and he has a commitment from Strewn Winery to purchase the grapes. But do you know what he found out when he went to the Niagara-on-the-Lake town council? Your greenbelt plan stops him from growing grapes and moving forward with his project. He still needs to level the land, do the tile draining and plant in time for June to grow his crop. Can you guarantee us today that your greenbotch scheme will not prevent this farmer from turning a fallow field into grape production?

**Hon. John Gerretsen (Minister of Municipal Affairs and Housing, minister responsible for seniors):** Once again, I would like bring to this member's attention the fact that we're not stopping anyone from doing agriculture on the greenbelt. The land he's talking about can be farmed immediately.

What we have done, and what we have said in order to protect good agricultural land for farming in the future on the greenbelt, is put certain limitations on the number of acres into which properties can be divided. The acreage in the greenbelt area, in the tender fruit belt area of Niagara, is 25 acres minimum. We have the best advice on that from the Ministry of Agriculture, from the agricultural advisory committee, who basically said you should not have property holdings of less than 40 acres in order to be viable economic farming entities.

But there's absolutely nothing about the land this gentleman or the member is talking about that it can't be farmed on the greenbelt, which is what we want to have happen there.

**Mr. Hudak:** A bit of a puzzling response from the minister. No doubt, this farmer, among others, will probably wonder, if he had a \$10,000 cheque for a fundraiser, would he receive a different answer?

Minister, you just said that the severance size must be 25 acres. Unless you've changed your policy and haven't announced it—your policy, as I understand it, is 40 acres. Fair enough.

Len Troup from the tender fruit growers, Ray Duc from the grape growers, Mayor Burroughs from Niagara-on-the-Lake, Mayor Hodgson from Lincoln, Peter Partington, chair of the region, grape growers and farmers have all said that the minimum acreage should be 25 acres or less. If they all said that, upon what scientific basis did you arbitrarily say it should be 40 acres?

**Hon. Mr. Gerretsen:** As a matter of fact, the member is correct. It's 40 acres. If I said 25 acres, I was mistaken; it's 40 acres. That's what's in the plan right now. The recommendation was 50 acres, but as a result of meeting with the various councils of the area, that's the number

we agreed upon so that viable farming could continue to be done within the tender fruit land areas.

What this member doesn't understand is that he's against the greenbelt. His party voted against the greenbelt. He doesn't want the greenbelt, but we are very proud of the fact that we've added a million acres of land to the greenbelt area so that it can be preserved for natural resource purposes and for agriculture in the future. But if the sizes of the farms simply become too small, on the best advice of the Ministry of Agriculture and of the advisory committee for agriculture that was set up, farming will simply become no longer viable. That's why we agreed it was going to be 40 acres in that particular area of the greenbelt.

#### ENERGY ASSISTANCE FUND

**Mr. Michael Prue (Beaches–East York):** My question is to the Premier of Ontario. Today your Minister of Energy announced big new plans to help private electricity providers make scads of extra money. In contrast, last year you created the emergency energy fund, a paltry \$2-million pot for Ontario's working poor to assist them when rising prices prevent them from paying their utility bills.

Premier, the Ministry of Community and Social Services Web site states that you will "provide help to low-income Ontarians, including social assistance recipients and people with fixed incomes, facing energy-related emergencies." Today my office called the city of Toronto, which administers the fund for residents of this city, and was told that social assistance recipients do not qualify. Social assistance recipients have had a 30% decrease in their real income since 1990, and they do not qualify. The working poor are not getting the money either. We need to know—

**The Speaker (Hon. Alvin Curling):** Time has run out. Premier.

**Hon. Dalton McGuinty (Premier, Minister of Intergovernmental Affairs):** The Minister of Energy.

**Hon. Dwight Duncan (Minister of Energy, Government House Leader):** I'm going to refer that to the Minister of Community and Social Services.

**Hon. Sandra Pupatello (Minister of Community and Social Services, minister responsible for women's issues):** I appreciate the question from the member opposite, because it's important to note that in our government, for the first time, we understand that a policy shift in one area of the government may well impact on another part of the government. It's important that we prepare for that.

When we began looking at electricity policies, we started a year ago with the development of several features to help people of low income. The emergency energy fund was an important piece of that so that we can prepare in case people need additional help. Moreover, in my Ministry of Community and Social Services we have also expanded the definition so that people who are

working on the front line in our welfare offices and with our municipalities can get additional help, so that discretionary funds, for example, can today be used for things that will help mitigate the potential for people to be evicted because of high costs.

**Mr. Prue:** Madam Minister, we've heard today that Loblaws is going to get millions upon millions of extra dollars—a company that doesn't need it. But from your answer, it's quite clear that social assistance recipients are getting nothing from your fund. They do not qualify; they get nothing from the fund. They need the money so that they can pay the hydro, pay the rent and feed their kids. When are you going to let them in on this gravy train you're giving to Loblaws? When are you going to provide real assistance for our lowest-income families to pay for the hydro bills, instead of giving the money to private corporations that simply do not require it?

**Hon. Ms. Pupatello:** I appreciate the interest, because I believe this member does truly care about people who struggle. But can I just say very clearly: He is dead wrong. Let me just say today that what we have done is to develop an emergency energy fund to help people with higher costs who are low-income. Not just those on social assistance, but others as well.

Secondly, we announced a \$10-million provincial rent bank, right across the province, so that people could access assistance before they end up on the street.

Thirdly, we changed the definition of our discretionary fund to help people in advance of them ending up on the street. So don't come in the House and tell me—unless you've got the facts to back you, because we are telling you that we are preparing for people who need assistance.

Fourthly, for the first time in 12 years we have raised the ODSP rates and the OW rates by 3%.

1520

#### HEALTH CARE

**Mr. Dave Levac (Brant):** My question is for the Minister of Health and Long-Term Care. Minister, as of today, in breaking news, Mike Harris and Preston Manning issued a report from that right-wing conservative Fraser Institute, and it calls for the abolition of the Canada Health Act and allowing for privatization of health care. Minister, a very simple question: Where do we stand?

**Hon. George Smitherman (Minister of Health and Long-Term Care):** We came to learn at 2:55 today on Canada NewsWire that Preston Manning and Mike Harris have come clean, that they have established what the Conservative agenda is. This government stands in favour of the Canada Health Act. We stand as a government that moved forward the bill, the Commitment to the Future of Medicare Act, that affirms those principles. We're a government that seeks to build on the excellent work of Roy Romanow, as will be plenty evident when we launch our family health teams within just a few days.

What we have coming from Ottawa today is more evidence—while the Conservative agenda in Ottawa is no longer a hidden one, we ask a question to the Leader of the Opposition: When will you come clean on your agenda to privatize health services, more like the 407 and for your \$2.4-billion promised cut to health care?

**Mr. Levac:** Minister, I can only say to you, thank you very much, and thank you to Dalton and thank you for the Liberal government for supporting health care in the province of Ontario. Thank you for moving our ship in the right direction in the developments that you've created, and the fact that we're going to have that great health care.

I'm concerned that this report, combined with Mr. Tory's commitment to rip that \$2.4 billion out of Ontario's health care system, would point that ship in the back direction that we were coming from. Can you tell the Ontarians what the McGuinty government has done to protect the public health care system, reduce wait times and ensure that our citizens get the right health care that they deserve?

**Hon. Mr. Smitherman:** Ours is a government that this year has invested nearly \$3 billion in improvements to the Ontario health care system, in contrast to the commitment of the leader opposite to reduce health care spending by \$2.4 billion. We brought in a bill that strengthens the protections for medicare, that makes it less possible to have queue-jumping and two-tier medicine—things supported by the honourable member opposite.

The reality is that there are two contrasting positions in this Legislature: the position of our government as brought forward by the Premier, who spent so much time in his leadership role on the Council of the Federation, building consensus in the land and seeking additional resources for wait times. We're delivering on those promises made by the first ministers. This weekend we're working with health ministers from across the country, building on this great gift, the best expression of Canadian values—medicare—in contrast to Mr. Tory's \$2.4-billion cut.

#### FISHING LICENCES

**Mr. Jerry J. Ouellette (Oshawa):** My question is for the Minister of Natural Resources. As you're currently aware, Bill 155 is before the House, and let me make it perfectly clear that anything that would help children receive their entitled funds is something that is needed, and we support that. Minister, in regard to this legislation, certain individuals who are in contravention of the legislation will have their fishing licence suspended in the same fashion a driver's licence is. The difference here is that a police officer, when he checks a driver's licence, does a check on his computer in the police cruiser to find out if the licence is suspended. What happens in the case of a conservation officer who's on a lake checking a licence? How will they know, and how will the conservation officers enforce the legislation?

**Hon. David Ramsay (Minister of Natural Resources):** How this is going to work is, there'll be communication between the Ministry of Community and Social Services and the Ministry of Natural Resources so that we will be informed as to those people who are no longer in compliance. Therefore, that will go into our records so our conservation officers will know that those people are no longer entitled to hold that licence.

**Mr. Ouellette:** How will a conservation officer in the field know whether that licence is under suspension? Once a suspension goes through, there's no enforcement in there that says that the licence has to be resubmitted to the ministry. So a CEO will take a look at it and find the date is OK, and he'll have no way to call in to verify whether it's going to be allowed or going to be under suspension.

**Hon. Mr. Ramsay:** Of course, as the member knows, I instituted the on-line issuing of licences. This is now all electronic data, through our Peterborough head office. So we have an electronic record and trail of all these licences. Also, our conservation officers, as you know, are linked by satellite communications in the field. There's two-way communication from our Sault Ste. Marie office. So all that information can be downloaded to the conservation officer in the field.

#### HYDRO RATES

**Mr. Peter Kormos (Niagara Centre):** To the Premier: Across Ontario, workers and their families are suffering because of your private, for-profit hydro policy. You see, they're losing their jobs because industries that are major power consumers are shutting their doors, not just across northern Ontario, but in the south as well.

Niagara Centre: Atlas Specialty Steels—gone; St. Catharines: Ferranti-Packard—gone; Erie-Lincoln: Fleet manufacturing—gone; Niagara Falls: Carborundum—gone. These are good-paying, value-added manufacturing jobs that rely upon inexpensive hydroelectricity. They can't afford the McGuinty for-profit energy prices. What are you going to do about it?

**Hon. Dalton McGuinty (Premier, Minister of Intergovernmental Affairs):** To the Minister of Economic Development and Trade.

**Hon. Joseph Cordiano (Minister of Economic Development and Trade):** I can tell the member that, in fact, investors are giving us a vote of confidence, and I can tell you who's been adding investment to this province. Quite the contrary to what the member is saying, we have a long list. So please listen.

Ritz-Carlton today announced that it's building a \$300-million complex in Toronto, creating 1,500 new construction jobs and 500 permanent jobs. Great Wolf Lodge is investing \$200 million to build a resort in Niagara Falls, adding hundreds of new jobs. Bell Security Solutions is adding 200 jobs, divided between Ottawa and Toronto. NOVA Chemicals is investing \$260 million to modernize its operations in Corunna. Harmony Logistics is investing \$96 million in a Pickering facility,

increasing employment by 130 jobs. The Sutherland Group is hiring 250 new staff in Sault Ste. Marie.

The economy is proving to be resilient. There are challenges, no doubt, but new investments are being made all the time. Ontario is a positive place to invest.

**Mr. Kormos:** Twenty service sector jobs don't make up for one value-added manufacturing job, those wealth-creation jobs that are part of our traditional industrial base. I repeat again, in Niagara alone, Fleet manufacturing of Erie-Lincoln—gone; Ferranti-Packard, St. Catharines—gone; Carborundum, Niagara Falls—gone; Atlas Specialty Steels, the only stainless steel manufacturer of its quality in Canada—gone—because of your electricity policy, because of your unaffordable electricity prices.

Ontario's major power consumers can't afford your electricity policy. So I'm going to ask you once again, what are you going to do about the hit the Ontario industry is taking because of your government's hydro policies? Time's running out.

**Hon. Mr. Cordiano:** I can tell you that Suzuki, bringing the CAMI plant up to full production, is here to stay, creating hundreds of new jobs and, as a result, that facility is going to be fully operational and working at full capacity. Stackpole: 350 jobs are being created in Ancaster, so they're coming to Ontario. Polymer, based in Cambridge, is working with the University of Waterloo on new products in the auto sector; Meikle Automation of Kitchener is increasing its workforce.

There are countless, numerous examples of investments being made in Ontario and, dare I say it, new investment in the auto sector: \$1 billion from Ford last fall, the \$2.5-billion investment made by GM. These are all votes of confidence in the province of Ontario and our economy, and many new jobs are to come. That's right. There were 500 new jobs announced at the GM plants, and many new jobs are being created all the time.

1530

## CONSUMER PROTECTION

**Mr. Peter Fonseca (Mississauga East):** My question is for the Minister of Consumer and Business Services. Protecting consumers and my constituents from fraud is a priority for me and for our government. Many of us have had first-hand experience with negative-option billing—I know the Leader of the Opposition is a big fan of negative-option billing—fly-by-night salespeople and fine print on contracts that hides the true cost of a transaction. I am told the Consumer Protection Act will come into force this July and will finally put an end to these practices. Minister, how is our government working with the business community to ensure that the laws outlined in the Consumer Protection Act are met?

**Hon. Jim Watson (Minister of Consumer and Business Services):** The preamble from the honourable member for Mississauga East about negative-option billing—given the pummeling the leader of the Conservative Party received today, it's not even sporting to talk about negative-option billing, so I'll pass on that comment. But I am very proud of the Consumer Protection Act and the

legislation that will come into effect, I'm pleased to announce, on July 30 of this year.

What we have been doing since the legislation received royal assent is notifying stakeholders. We've had consultations with hundreds of business organizations and consumer groups across Ontario. Tomorrow, I'm very proud that I will be participating, along with officials from our ministry, in a live Webcast at 10 o'clock in the morning that will allow business and community groups and residents of Ontario to fully understand the implications of the new consumer protection laws in Ontario. It's tomorrow at 10 a.m. at our Web site, [cbs.gov.on.ca](http://cbs.gov.on.ca).

**Mr. Fonseca:** Thank you, Minister, for that wonderful information. It's great to hear that all the measures are being taken to ensure consumers are fully protected. I recall when Bill 70 was being passed, way back in November, some members of the opposition over there even questioned the need for this legislation. I'll let you know that many of the constituents in my area, in particular the seniors, have said that they've been solicited by these fly-by-night companies, and something had to be done. I'm so happy to hear you're pushing for this type of protection. Minister, when will this much-needed legislation come into force, and how will my constituents and consumers across this great province of Ontario be informed of their new rights?

**Hon. Mr. Watson:** As I indicated, July 30 is the proclamation date of the Consumer Protection Act. I want to outline for the member from Mississauga East, who has had a particular interest in consumer protection issues, that the act, once proclaimed, will lengthen and create new cooling-off periods, allow for heavier penalties for dishonest activity, make full-cost disclosure of leases mandatory, especially important for the payday lending industry, which I know my colleague from Toronto is interested in, and outlaw negative-option billing and the unilateral amendment of consumer contracts by business. This is a piece of legislation I'm looking forward to proclaiming. It's part of the McGuinty government's program to ensure that consumers in Ontario have the best and strongest consumer protection legislation in the entire country.

## PETITIONS

### ANTI-SMOKING LEGISLATION

**Mr. Bill Murdoch (Bruce-Grey-Owen Sound):** I have a petition from Cathy Gibson and the Owen Sound Legion. I have quite a few petitions here.

"To the Legislative Assembly of Ontario:

"Whereas the current government has proposed province-wide legislation that would ban smoking in public places; and

"Whereas the proposed legislation will also prohibit smoking in private, non-profit clubs such as Legion halls, navy clubs and related facilities as well; and

“Whereas these organizations have elected representatives that determine the rules and regulations that affect the membership of the individual club and facility; and

“Whereas by imposing smoke-free legislation on these clubs disregards the rights of these citizens and the original intentions of these clubs, especially with respect to our veterans;

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

“That the Parliament of Ontario exempt Legion halls, navy clubs and other non-profit, private or veterans’ clubs from government smoke-free legislation.”

I’ve also signed this petition.

### PHYSIOTHERAPY SERVICES

**Mr. Brad Duguid (Scarborough Centre):** I’ve got a petition here signed by a number of people who have gone to Scarborough Hospital for services. It reads as follows:

“As a person who has used or has had a relative or a friend use the outpatient physiotherapy and occupational therapy department at the Scarborough Hospital general campus, we’re very concerned that the hospital is considering closing the physiotherapy and occupational therapy outpatient department. There’s a shortage of this calibre of services in our community. We feel that the therapy department must be kept open for the following reasons:

“(1) It has served the rehabilitation needs of patients in the Scarborough community for over 40 years, and it continues to provide therapy services in acute areas such as fractures, trauma, joint surgeries, plastic surgeries and sports injuries;

“(2) It provides a high-quality standard of care, with excellent accessibility to the surgeons, the specialty clinics and the rest of the hospital;

“(3) It provides immediate rehabilitation care, which allows for decreased hospital stays; and

“(4) It provides expertise and treatment for patients from infancy to geriatrics.”

I’m pleased to read this petition, and I’ll certainly add my name to it.

I’m also pleased to say—which will be of interest to you, Mr. Speaker—that I’ve just come from Scarborough Hospital, where we made a \$30-million announcement for their emergency and acute care centre.

### LANDFILL

**Mr. Toby Barrett (Haldimand–Norfolk–Brant):** This is entitled “Halt Edwards Landfill.”

“In regards to the proposal to amend the fill rate for the Edwards landfill site on lot 24, Brooks Road, in Cayuga, Ontario, to 500 tonnes a day...,

“Whereas there has been improper notification and input from adjacent landowners and concerned citizens; and

“Whereas there exists a high probability of contamination of Pike Creek and Oshwego Creek, which feed eventually into Lakes Erie and Ontario; and

“Whereas there will be considerable negative impact on breeding birds and rare wildlife that live in the surrounding north Cayuga slough forest; and

“Whereas the county of Haldimand sees no benefit to this proposal;

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

“Halt the plans to develop the Edwards landfill site for landfill purposes.”

I sign my petition.

### ANAPHYLACTIC SHOCK

**Mr. Bob Delaney (Mississauga West):** I’ve got a petition here signed by some members of the Penfold family on Harvey Crescent in Erin Mills. It reads as follows:

“Whereas there are no established Ontario-wide standards to deal with anaphylaxis in Ontario schools; and

“Whereas there is no specific comment regarding anaphylaxis in the Ontario Education Act; and

“Whereas anaphylaxis is a serious concern that can result in life-or-death situations; and

“Whereas all students in Ontario have the right to be safe and feel safe in their school community; and

“Whereas all parents of anaphylactic students need to know that safety standards exist in all Ontario schools, be it therefore resolved that

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

“That the government of Ontario support the swift passage of Bill 3, An Act to protect anaphylactic students, that requires that every school principal in Ontario establish a school anaphylactic plan.”

I’m in support of this petition. I’ll sign my name to it and ask Jean to carry it for me.

### VOLUNTEER FIREFIGHTERS

**Mr. John O’Toole (Durham):** Thank you very much for the opportunity to present this petition on behalf of my constituents in the riding of Durham.

“To the Legislative Assembly of Ontario:

“Whereas many volunteer fire departments in Ontario are strengthened by the service of double-hatter firefighters who work as professional, full-time firefighters and also serve as volunteer firefighters on their free time and in their home communities; and

“Whereas the Ontario Professional Fire Fighters Association has declared their intent to ‘phase out’ these double-hatter firefighters; and

“Whereas double-hatter firefighters are being threatened by the union leadership and forced to resign as volunteer firefighters or face losing their full-time jobs, and this is weakening volunteer fire departments in Ontario”—and indeed in my riding of Durham—“and

“Whereas Waterloo–Wellington MPP Ted Arnott”—who is here today—“has introduced Bill 52, the Volunteer Firefighters Employment Protection Act, that would uphold the right to volunteer and solve this problem concerning public safety in Ontario;

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

“That the provincial government express public support for MPP Ted Arnott’s Bill 52 and willingness to pass it into law or introduce similar legislation that protects the right of firefighters to volunteer in their home communities on their own free time.”

I’m pleased to sign and endorse and support this petition and indeed Bill 52, which is important in my riding of Durham.

1540

#### ANAPHYLACTIC SHOCK

**Mr. Kim Craitor (Niagara Falls):** I’m pleased to introduce the petition on behalf of NASK in my riding.

“To the Legislative Assembly of Ontario:

“Whereas there are no established province-wide standards to deal with anaphylactic shock in Ontario schools; and

“Whereas there is no specific comment regarding anaphylactic shock in the Education Act; and

“Whereas anaphylactic shock is a serious concern that can result in life-or-death situations; and

“Whereas all students in Ontario have the right to be safe and feel safe in their school community; and

“Whereas all parents of anaphylactic students need to know that safety standards exist in all Ontario schools;

Therefore, be it resolved that we, the undersigned, demand that the McGuinty government support the passing of Bill 3, An Act to protect anaphylactic students, which requires that every school principal in Ontario establish a school anaphylactic program.”

I’m pleased to sign my name to support this petition.

#### OPTOMETRISTS

**Mr. Ted Arnott (Waterloo–Wellington):** I have a petition to the Legislative Assembly of Ontario, and it reads as follows:

“Whereas the last funding agreement between the Ministry of Health and Long-Term Care and the Ontario Association of Optometrists expired March 31, 2000; and

“Whereas the optometric fees for OHIP-insured services remain unchanged since 1989; and

“Whereas the lack of any fee increase for 15 years has created a crisis situation for optometrists; and

“Whereas fees for OHIP services do not provide for fair or reasonable compensation for the professional services of optometrists, in that they no longer cover the costs of providing eye examinations; and

“Whereas it is in the best interests of patients and the government to have a new funding agreement for insured services that will ensure that the most vulnerable

members of society are able to receive the eye care they need;

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

“That the Ministry of Health and Long-Term Care resume negotiations immediately with the OAO and appoint a mediator to help with the negotiation process in order to ensure that optometrists can continue to provide quality eye care services to patients in Ontario.”

It’s signed by a significant number of our constituents in Waterloo–Wellington, and I’ve affixed my signature as well.

#### HEALTH CARE FUNDING

**Ms. Laurie Scott (Haliburton–Victoria–Brock):**

“To the Legislative Assembly of Ontario:

“Whereas the federal Income Tax Act at present has a minimum amount of medical expenses for which a taxpayer is entitled to claim a non-refundable income tax credit;

“Whereas the health and medical expenses of every citizen in the province of Ontario, great or small, affect their overall net income;

“Whereas the Ontario Liberal government moved in their 2004 budget on May 18, 2004, to delist publicly funded medical services such as chiropractic services, optometry examinations and physiotherapy services;

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

“That the Income Tax Act remove the present minimum amount of medical expenses for which an Ontario taxpayer is entitled to claim a non-refundable income tax credit.”

**Mr. Tim Hudak (Erie–Lincoln):** I’m pleased to bring forward petitions on health care signed by folks here in Beamsville, Jordan and St. Anns, in the riding of Erie–Lincoln, that read as follows:

“To the Legislative Assembly of Ontario:

“Whereas the Dalton McGuinty Liberals promised a health care system that gives us all the care we need when we need it; and

“Whereas chiropractors, optometrists and physiotherapists provide the necessary health care to the people of Ontario to maintain healthy and active lifestyles;

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

“The Dalton McGuinty Liberals should keep their promise to invest in health care and restore funding to cover optometry, physiotherapy and chiropractic care under OHIP.”

In support, my signature.

#### ONTARIO FARMERS

**Mr. John O’Toole (Durham):** It’s my pleasure to present a petition to the Legislative Assembly of Ontario on behalf of my constituents in Durham.

“Whereas thousands of Ontario farmers and rural Ontarians have been forced to take their concerns directly to Queen’s Park due to a lack of response from the Dalton McGuinty government; and

“Whereas the Rural Revolution believes that rural Ontario is in crisis due to lost property rights and crushing regulatory burden”—and they have been demonstrating their resolve and determination at Queen’s Park during March;

“Therefore we, the undersigned, ask the Legislative Assembly of Ontario to consider the issue of municipal jurisdiction brought forward by the Rural Revolution’s resolutions to respect property rights and prosperity as follows:

“Resolution number 5: Municipal governments shall be constituted to take control and jurisdiction over matters that pertain to their constituents.

“Resolution number 9: All municipalities forced or coerced with amalgamations shall hold a binding referendum on de-amalgamation at the next general election.”

There are a number of other concerns, and I will sign this in support of the work done by rural Ontario and my constituents.

#### CHIROPRACTIC SERVICES

**Mr. Ted Arnott (Waterloo–Wellington):** I have another petition to the Legislative Assembly of Ontario, and it reads as follows:

“Whereas,

“Elimination of OHIP coverage will mean that many of the 1.2 million patients who use chiropractic will no longer be able to access the health care they need;

“Those with reduced ability to pay—including seniors, low-income families and the working poor—will be forced to seek care in already overburdened family physician offices and emergency departments;

“Elimination of OHIP coverage is expected to save \$93 million in expenditures on chiropractic treatment at a cost to government of over \$200 million in other health care costs; and

“There was no consultation with the public on the decision to delist chiropractic services;

“We, the undersigned, petition the Legislative Assembly of Ontario to reverse the decision announced in the May 18, 2004, provincial budget and maintain OHIP coverage for chiropractic services, in the best interests of the public, patients, the health care system, government and the province.”

It’s signed by a number of my constituents, and I have affixed my signature as well.

#### STUDENT SAFETY

**Mr. Jim Flaherty (Whitby–Ajax):** I have a petition to the Legislature of Ontario.

“Whereas the Ministry of Education has failed to ensure that students are protected from individuals whose past behaviours have directly harmed children; and

“Whereas the Ministry of Education has chosen to ignore the children’s aid society’s recommendation that certain individuals not work with children; and

“Whereas the introduction of a ‘volunteer’ into the school system must not be solely at the discretion of the principal; and

“Whereas the Liberal government promised to ensure that school boards provide strong local accountability and decision-making;

“We, the undersigned, petition the Legislative Assembly to amend the Education Act to place restrictions on the eligibility of persons who act as volunteers in schools, and to include as a formal requirement that volunteers be subject to the approval of the school board and parent council.”

I have affixed my name.

#### PIT BULLS

**Mr. John O’Toole (Durham):** I’d like to present yet a third petition on behalf of the riding of Durham.

“To the Legislative Assembly of Ontario:

“Whereas aggressive dogs are found among any breed or crossbreed; and

“Breed-specific legislation and breed bans are not effective solutions to the problem of dog attacks; and

“The problem of dog attacks is best dealt with through a comprehensive program of education, training, and legislation encouraging responsible ownership of all breeds;

“We, the undersigned, petition the Legislative Assembly of Ontario to refrain from enacting”—it’s unfortunate; this is already done—“provincial animal control legislation that is breed specific, and instead implement a comprehensive bite prevention strategy that encourages responsible ownership of all breeds.”

I’m sad to tell the people of Ontario that this petition is too late, but the sentiment is still true.

#### CHIROPRACTIC SERVICES

**Mr. Tim Hudak (Erie–Lincoln):** I’m pleased to present a petition signed by Kevin McNeil from Beamsville and Paul and Willie Matthews of South Grimsby Road 18 that reads as follows:

“To: Legislative Assembly of Ontario

“Re: Support for chiropractic services” under OHIP:

“Whereas,

“Elimination of OHIP coverage will mean that many of the 1.2 million patients who use chiropractic will no longer be able to access the health care they need;

“Those with reduced ability to pay—including seniors, low-income families and the working poor—will be forced to seek care in already overburdened family physician offices and emergency departments;

“Elimination of OHIP coverage is expected to save \$93 million in expenditures on chiropractic treatment at a cost to government of over \$200 million in other health care costs; and

“There was no consultation with the public on the decision...;

“We, the undersigned, petition the Legislative Assembly of Ontario to reverse the decision announced in the May 18, 2004, provincial budget and maintain OHIP coverage for chiropractic services, in the best interests of the public, patients, the health care system...”

And in support, my signature.

1550

## OPPOSITION DAY

### HOSPITAL FUNDING

**Mr. John Tory (Leader of the Opposition):** I move that the Legislative Assembly call upon the government,

To ensure Ontario's hospitals are given adequate, stable, multi-year funding to meet the needs of patients as promised by the Liberal Party of Ontario in the 2003 election and again promised in the McGuinty government's May 2004 budget, and

That hospitals are provided with funding allocations within the first month of the fiscal year so they can properly plan to meet the government's deadline for balanced budgets by March 31, 2006, and

That no nurses will be fired as a result of budgetary constraints for the remaining term of office of the McGuinty Liberal government, and

That waiting lists for medical procedures in hospitals under any circumstance will not increase as a result of the Ministry of Health's approved balanced budget plans for hospitals.

I think it's agreed upon by people on all sides of the House that we owe it to the people of Ontario to provide the best health care system possible. But a good health care system has to be a stable health care system. Many of us would not find it acceptable to go and have surgery and have the surgeon just kind of open you up with the scalpel and then sort of go inside and make it up as he or she goes along. It's just what appears to be happening in the health care system right now. The surgery that's being done is, make the incision and then make it up as you go along. That's the way they're dealing with the system.

There is no plan. This is not an opinion as much as it's an observation, and it's not an observation being made by me or by members on this side of the House alone; it's one, more importantly perhaps, that is being made by doctors, nurses, hospital workers, patients, administrators and those who write about health care issues.

Let's just talk about a couple of examples, if we can. Last year, the Liberal government refused to tell the hospitals of Ontario how much money they would be getting until 11 months had gone by in the fiscal year. I wonder whether anybody in this assembly or anybody watching at home or anybody operating a business or any family in Ontario could manage their own lives or manage their own financial plans if they weren't told

what their income would be until the end of the year. That is exactly how this McGuinty Liberal government is managing hospitals and, by extension, the thousands of lives that are dependent upon our hospitals across the province of Ontario.

On top of all of that, of course, we ended the fiscal year just a few days ago with the hospitals having accumulated \$330 million in deficits, for which the Liberal government has no answer whatsoever as to whether they're going to do anything or something, or anything in between. There's just no answer. This, of course, totally ignores the fact that this is borrowed money. This is borrowed money that is ultimately going to have to be repaid by those hospitals. It's borrowed money that has used up their lines of credit, and it is borrowed money that they simply have to pay back. They're going to rely, to some extent at least, on having some word from this government as to how they're going to go about doing that.

When a hospital administrator at Sick Kids Hospital complained about this way of going about the business of running our hospitals, trying to do it in the right way, the responsible way, the sensible way, the government created a climate of fear. That person, as I recall, lost their job, and it led to the Ottawa Sun writing the following: "If the top executives at Sick Kids can be silenced, then no hospital is immune—not CHEO, not the Ottawa Hospital, not the Monfort, not the Queensway Carleton—to what many are now describing as political thuggery." That's what the Ottawa Sun said. You know, they talked about the Ottawa hospitals; they might just as well have been talking about every hospital in this province, because as I've gone about visiting many of them, there is no question that there is an environment of intimidation about speaking up and being heard on these kinds of things.

There is also a very strong feeling on the part of all of them that they just don't have the answers they need. They don't know what funding they're getting for this year. In some cases, they still don't know what funding they're getting for last year. They don't know what is being done about their accumulated deficits. It just goes on and on. Nobody could describe this manner of operating the health care system as being at all sensible or businesslike.

Here we are now 13 days into the new fiscal year, two weeks into the new fiscal year, and no word from this government whatsoever on how much money these hospitals will have to work with through the course of this year. What kind of planning does that promote? What kind of advanced planning and careful work does that promote in terms of budgeting and being able to make some of the tough decisions the Premier spoke so proudly about this afternoon? He should have made a lot more tough decisions, I would suggest, before the election last time, instead of pretending to make them now.

So the result we have is \$330 million in accumulated deficits, 757 nurses and counting who have lost their jobs

and a continuing kind of uncertainty that just doesn't allow for any of the kinds of improvements that the government and others talk about so frequently.

I was having a look at the health care platform of the Liberal Party of Ontario. Talk about something that's going to cause illness in the province, that's one to really make you wonder. On page 2, they said the Conservative government of the day "believes in better access for those who can afford to pay," while saying that the Liberals "have a plan for better health care—for everyone." Except when they got into office, as with so many other areas—we've seen it in so many other places—they did exactly the opposite. Eye examinations, physiotherapists, chiropractic examinations: Those services are now for those who can afford to pay.

On the subject of being able to afford to pay, we have the Liberal government of Dalton McGuinty charging the average Ontario family \$1,000 more for health care, in total, through the so-called health tax and the various other measures they've introduced. Some of the people of Ontario might have said—I don't think very many—after they were betrayed in this manner in terms of what they were told during the election, "Well, if we got a lot better care, a lot more care, a lot faster care," maybe there would have been a few who would have said, "I'll get over the betrayal." But in fact what are they getting? They're paying more, which they were told they would not have to do, and they're getting less: no eye exams, no chiropractors, no physiotherapists, waiting lists that are at best the same and probably longer in many cases, and the list goes on and on.

On the same page—I'm not even off page 2—of the Liberal health platform, they said they would "protect and improve universal public medicare." Well, we know, like so many other things they said, and in particular so many things this Premier said during the course of the election campaign, it didn't happen. We know it didn't happen because they delisted chiropractic services, physiotherapists and eye examinations. That's number one.

Number two, they promised to "shorten waiting times." When we ask a straightforward question about how long the waiting lists were when they started to try and shorten them, which they haven't done, they can't even tell us where the waiting lists started. They can't even tell us that. It is absolutely impossible to manage when you don't have the information.

I heard the Premier say today that it was one of the great days in Ontario health care history when they commenced a study to design a Web site.

#### *Interjections.*

**The Acting Speaker (Mr. Michael Prue):** Please, there's a lot of heckling going on here. I would ask that you pay attention.

**Mr. Tory:** Mr. Speaker, it causes me to reflect from time to time on whether it's the Premier who is instructing these people to heckle or whether he just can't control them, but that's a subject for another day. We'll talk about that another day.

In the same platform, they said they're going to "provide better care at home, in hospitals and communities," which did not happen and is not happening, and all you have to do there is ask any doctor, any nurse, any hospital or any patient. It's just not happening.

I want to address, in conclusion, perhaps the biggest irony of all—and I'm not even off Dalton McGuinty's introductory note to his health care platform yet, although it did make me queasy just getting that far along in it—and that is that in the message it had the following quote: "We will make the health care system answer to you." That's what Mr. McGuinty said. So on March 29, I thought, "Well, he said he's going to make the health care system answer to you"—I knew he didn't mean me; I knew he meant the people of Ontario. So I got up on March 29, my first day here in this place, with two days left in the fiscal year, and I asked him a very straightforward question on behalf of beleaguered hospitals. I asked if he would simply tell the hospitals of Ontario what their budgets would be so they could begin planning in a responsible, businesslike manner.

Did the Premier on that day make the health care system answer to the hospitals? No. He refused to answer the question. I'm not sure why he refused. I'm not sure, because every time he refuses to answer, which is all the time, I would suggest there can only be two explanations: Either he doesn't know, which is very scary, or he refuses to answer, which to me is in contempt of the people of Ontario and flagrantly opposite to what he said he would do.

Being a patient man, I got up again on April 4, stood in this chamber and asked the Premier another very simple question: Would he, by the end of his mandate, ensure that breast cancer patients not wait longer than 10 days, as the Canadian Medical Association recommends? Again I asked the question, did the Premier "make the health care system answer" to the women across this province suffering from breast cancer? Again he refused to answer the question, and again the answer as to why he did that can only be one of two choices: Either he doesn't know, or he just refuses to answer.

#### **1600**

The very next day, April 5, I stood up in the House and asked the Minister of Health why the Liberal government was planning to spend \$400 million on a casino expansion, and untold other money that they seem to be seeking approval for from the Ontario Lottery and Gaming Corp. for some sort of gondola for the casino, while 750 nurses—I think it's 757 and counting, actually—are being fired under their watch and the hospitals of Ontario finished their fiscal year with an accumulated deficit of \$330 million.

Did the McGuinty Liberal government make the health care system answer to patients stacked up in the hallways of emergency rooms in this province, wondering why we're spending \$400 million, why this McGuinty Liberal government can find, let alone spend, \$400 million for a casino or a gondola instead of putting it into the hospitals of Ontario or health care, not to men-

tion farmers, small towns and various other places? The answer to that question is no. They refused to answer the question.

Of course, we could go on and talk about every day since, up to and including today when I asked a question on behalf of Mrs. Zaionz. She sent it in with her story about her situation, where she's going to have to wait a total of more than a year. Of course, we'll see her comments on the news tonight, because she has her own description of what we saw today, which was just another non-answer.

The reason we put this motion forward for debate today is because we passionately believe, as Progressive Conservatives, that there is a better way. We believe that it is necessary to actually have real plans pursuant to which you can run the health care system, that you don't start the surgery and, once you get the patient opened up, make it up as you go. We just don't think that's the right way to do things. We think it's disrespectful of the taxpayers, disrespectful of the taxpayers' money and disrespectful of all kinds of people who rely on the health care system.

Look at the example, just speaking of disrespect for their money, of the government flowing money to the health care system for new equipment in February and saying, "Oh, by the way, you have to spend that money by the end of March." Instead of doing it in a sensible way that was respectful of the taxpayers' money, which could have saved millions of dollars that then could have been used to hire more nurses or buy more equipment or do many other things in the health care system, they said, "Oh, no, our political timetable is more important. It is much more important that we actually get this money spent by the end of March so we can include it in this year's program. That's more important than allowing hospitals to go out and use their purchasing power jointly to make sure we get better value for the taxpayers' money."

That's really what we're here to do: to get better value for the taxpayers' money, not just to accommodate some plan they might have to try to cover up all the other excesses they're going to try to explain when budget time comes.

We need to have real plans. We need to actually know and have confirmed the funding for the current fiscal year not later than the first month of the year. I live in hope. They still have 17 days left, not all of them days on which this House is sitting, but there are still 17 days left in the month, during which time, if they had any semblance of thinking in a sensible way, allowing hospitals to plan, any semblance of respect for the taxpayers' dollars, they would tell the hospitals of Ontario how much money they're going to get for this current fiscal year. If they know right now there's money that's going to be made available for hospital equipment this year, announce it now and give people the rest of the year to go out and band together, use their purchasing power and really get those suppliers down in terms of price, save that money and use it to really hire some more nurses in this province.

But you know, they're never going to do anything like that because that's just not the way they operate. They operate on the basis of exactly what we have seen from day one of this government: Promise anything you want and don't really care about what you do when you get here; don't do what you say you're going to do; disrespect for the taxpayer's money; don't worry about it—if you run out of money, there's always more; you just have to go to the taxpayers and say, "Send us more."

They measure what they're doing in health care totally by how much they're spending. They get up and read the same shopping list every single day. That's the only result they can refer to: the fact that they're spending more. They can't tell us there are really as many more nurses as they said. They can't tell us the waiting lists are reduced. They can't tell us the hospitals are run better than they were before. They can't tell us any of those things, so they read this tired, shopworn shopping list every day that they have in a canned briefing book that they get up and do.

I think it's disrespectful of the taxpayers. It's disrespectful of the opposition and of the purpose of this place. That is why we wanted to move this motion today, so we could have a discussion here about what should be going on in the health care system in terms of paying respect to the taxpayers' money, paying respect to the patients, the doctors, the nurses, the people who work in hospitals across this province, and actually having some semblance of organization to what they do, and last but not least—a real, big change for this government—focusing on results: first, getting some, and then being held accountable for them. They don't have any results so far and they're completely lacking in any sense of accountability, and I just reject that completely, as does our party.

**The Acting Speaker:** Further debate?

**Mr. Rosario Marchese (Trinity-Spadina):** I want to declare my affection for the new leader of the opposition, and to say that I agree with the resolution they've got, but I'm going to attack them just a tad, for balance. This doesn't detract from my affection for John Tory, but I do want, for the record, to say this: You understand that the Conservative party is the party that claims to be fiscally responsible, great managers of our money, right?

*Applause.*

**Mr. Marchese:** Thank you, John Baird. But these very people who are so fiscally responsible, people who would manage your money and wouldn't get into your pocket, wouldn't cause a deficit, certainly, were the very ones who—nothing to do with the current leader, because he wasn't here, but his party left us a fiscal mess.

Now how do Tories do that? How do Tories, who are such great managers of our money, leave—in a good economy, not a bad one—a \$4-billion mess, otherwise known as a deficit. You can manipulate that figure. Close to \$1 billion was taken from the Hydro file and shrugged off as a deficit number to their numbers—in the area of \$4 billion, and adding a couple of million extra in that regard. How do Tories do that? If you are good at

managing money, you wouldn't, in a good economy, leave us with a mess. Why do we have a mess? They took—and they're proud of this—close to \$12 billion to \$14 billion out of our provincial coffers. You see, they have a strong affection for tax cuts, and they cut taxes to individuals and corporations to the tune of \$12 billion to \$14 billion.

So much for the Tories. That's the mess they left us, and we all know this. I want to go after the Liberals now, because I have a great affection for the Liberals. The Liberals and ourselves, we bond so well, right? And I want to leave enough room to attack my Liberal friends as best as I can, but I needed those three or four minutes to show my real affection for the Conservatives as well.

You recall that the Liberals, before the election—and Gerry Phillips is so embarrassed when you put it out. He goes something like this, and sometimes he gets angry and says, "No I didn't," and he gets really worked up, and I love to see him do that. In committee, he said, "The Tories are leaving close to a \$5-billion"—what's the term he uses?

**Ms. Shelley Martel (Nickel Belt):** Risk.

**Mr. Marchese:** "—risk." Now, don't misunderstand Mr. Phillips. He didn't say "deficit," he said "a \$5-billion risk." We know what he's talking about. So he gets worked up when we New Democrats point out that before the election the Liberals knew the problem we had; they knew. Then they get into government and they get the Minister of Social Services or whatever title she's got, but you know who I mean—it's still ComSoc?

**Ms. Martel:** Yes, Community and Social Services.

**Mr. Marchese:** It is Community and Social Services, God bless. She's standing up and saying, "We didn't know," and, "When we came, we found the fiscal mess," blah, blah, blah. She's not the only one. You've got Liberal ministers and others standing up and saying, "When we got here and we discovered there was such a fiscal problemo, we just couldn't keep our promises," although they don't say that. They are not keeping any of the promises, small or big, that they campaigned on. And all of a sudden, they come here and say, "It's the Tories, and we are faultless because we didn't know." I've got to tell you, it sickens me when they do this. It does sicken me; it isn't just that I feel disappointed. So when people say, "You get so rowdy at Queen's Park, and you're so noisy," why are we noisy on the other side? Because it's so hard to take. What's a polite term for what they do? The balderdash—it's a polite term that doesn't mean anything—the crapola that comes from the other side, right? It is so hard to take. So when they say—

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**The Acting Speaker:** I'm not sure the word was parliamentary. I think it should be withdrawn.

**Mr. Marchese:** Which one? I withdraw the word "crapola."

**Interjection:** It's not even a word.

**Mr. Marchese:** I'm not quite sure it means anything. It's like me saying it's a problemo and it's not a word. Nevertheless, you know what I'm talking about.

So when the Liberals stand up and blah, blah and cry, how can you sit there on the other side, saying, "Oh yeah, we understand," and be polite the way John Tory asks us to be on this side? How can you be polite when you listen to that "pola" stuff? It's hard.

Look at this issue we're dealing with. Why do we support this resolution? We support it because when we look at the numbers, the new fund specifically targeted to health care that is flowing from the federal guys, the Liberal guys they're beating up on now because they can't get a meeting with Martin—Joe Volpe is trying really good, but they don't want a meeting with Joe Volpe. They're going to now bypass Joe Volpe, because he's just a barrier, it seems, and they want to get to Paul Martin, right?

These funds that are flowing to the provinces amount to approximately \$10.9 billion in the next four years. Already, what we're getting from the feds is 825 million bucks. We're talking big bucks. It's not pennies, it's not nickels, it's not dimes, it's not dollars; we're talking millions, \$825 million. Where is that money going? Into the Liberal abyss. It's going everywhere, because they're disbursing that \$825 million wherever they can under the guise of health care. They have disbursed \$200 million for sewers, because they made a logical connection to health.

The Minister of Tourism delivered three million bucks for regular participation kind of stuff: "Let's get out there and walk and, you know, exercise." Three million bucks coming from the feds.

**Ms. Martel:** It was the health tax.

**Mr. Marchese:** That was the health tax. I'll get back to that in a second. It's the same problemo. It's the same "pola" stuff.

So it troubles me. We're talking about 11 billion bucks coming from the federal government, with this year's contribution being close to \$1 billion. In the next three years, they're going to get 10 billion bucks. Where is the money going?

Then let's talk about the Ontario health tax, which has become a premium, which has become a tax, and it bounces back and forth so embarrassingly for this government that didn't want to call it a tax when they introduced it, because it was a broken promise. Then they called it a premium; now they call it a tax.

You don't know what the Liberals stand for. They vacillate so often, it's hard to pin them down. It's like this. You can't pin them down ever, and they're collecting, as of this year, \$2.4 billion out of that unfair tax. Now, why is it unfair? Because it taxes low-income people. That's why it's unfair. If we went after Marchese, who's got an \$85,000 salary, I would feel better. If we went after John Tory, in spite of my affection for him, who's got a few more bucks than I do—and Sorbara, by the way, because Sorbara's got a few more bucks than I do. He's a millionaire, as far as I know, and he's my buddy too. If we went after Sorbara types and John Tory, both of whom I like, who have deep pockets, unlike Marchese, but unlike those who earn \$25,000 or \$30,000

or \$40,000, that would be OK by me, that would be fine, but for Liberals to go after those income earners who earn 25,000 bucks, you've got to be nuts.

How could you then say, "We Liberals have a heart"? Where is that heart when you tax individuals only on 25,000, 30,000, or 40,000 bucks? What kind of Liberals with a heart are you when you can do that and not feel bad? They're raising \$2.4 billion, not going after the very wealthy who've got high incomes, those who earn anything over, including me, \$85,000, those who earn over \$100,000. You go after those people who in this economy are hurting. There are a lot of people in this economy, mostly immigrants these days, who are barely keeping up beyond the poverty line. That's hurtful, and we're taking money away from them. Take that argument apart or put that aside.

Two point four billion dollars from this health tax broken promise, \$825 million from the feds this year alone—we got over three billion bucks for health. Where is it going? Why do we still have such huge problems in our health care system, when you've got all this money flowing every year? Ten point nine billion dollars from the feds in the next three years, when you include the one billion, more or less, they give this year, and another \$9.1 billion in the next three or four years under this health tax broken promise going after the poor. Combine those and we've got billions of dollars in our pockets, and it's still not able to address our health care needs. How do you do it? How does a Liberal government do that?

Your government—yes, your government—forced the hospitals to lay off 2,000 people, 2,000 working men and women. How can you feel good, you Liberals, that we fired 2,000 people last year—2,000 people alone—health care workers that we desperately need, with all that money flowing in: your health tax, and your federal Liberal cousins giving you \$825 million? Where is it going? Layoffs: nurses, orderlies, infection control specialists.

Talking about infections, did you see the CBC series just a couple of weeks ago? Thousands of people are dying, just picking up infections from wherever, just touching some chair, just touching some toilet seat, just touching anything in the hospital. Thousands of people are dying. More people are dying of infections than died of SARS. How do you people live with that day in and day out? Where is our money going? Thousands of people are dying just by picking up lethal infections because we don't have enough people to properly clean our hospitals. How can you feel good about that? These cuts have a direct impact on the quality of care that the patients are receiving.

Our hospitals are saying this: The cost of providing patient care is predictable. And what is predictable? They say we need 8% a year to be able to deal with the following: serving the health care needs of a population that is growing by almost 150,000 people each year; providing care to our elderly and their more complicated health needs; paying for increases in modern surgical supplies and equipment to keep up with the changes in

treatment; drug costs and all the attached percentages; physician payment increases; utilities; insurance; food equipment; depreciation; with the balance for increases to hire more health care professionals, including full-time nurses, health and safety initiatives, as well as increases in wages, salaries and benefits. Eight per cent a year alone to deal with these kinds of needs, let alone things they didn't mention. And we've given 200 million bucks.

What the people in the field are saying, the hospitals in particular, is that they stress that even with the new one-time funding announced a while ago of \$200 million and even after making these cuts, the 2,000 cuts, hospitals will begin the new fiscal year with a \$440-million shortfall. Without a significantly revised multi-year funding plan, their shortfall will grow to \$760 million by the end of 2005-06. This will leave hospitals with no choice but to cut core patient services, and up to 8,700 additional jobs next year will disappear in order to balance the budget. We're talking about 8,700 more people who will not have jobs in the hospital sector. And if you thought laying off 2,000 people was bad—i.e. nurses, orderlies, infection control specialists and others—when they're going to have to lay off 8,700 more staff this year alone, what do you think is going to happen? Where is our health care money going? It's certainly not going to health care. It's going into a whole lot of other places. That's why they are going to McGuinty, pleading with him.

1620

The new leadership style of McGuinty: pleading with the federal government to give him the money because he is too afraid to tackle the problems that the Tories left us; that is, that we have \$12 billion to \$14 billion less because of corporate and individual tax cuts, and we're unwilling to deal with that and unwilling to go after the people who have the money to get it. Because McGuinty is unwilling to do this, he is pleading, begging. The new leadership style of McGuinty—I can see him on his fours, on the ground, pleading with Martin: "Give me some money. Help me out. I'm in trouble. I know you're in trouble too; I know you're about to go down. I understand that, but please don't bring us down with you. Give us the money." That's what he's saying. It's pitiful. What a pitiful vision: Mr. McGuinty on his fours, pleading with Martin to give him the money under the guise of an imbalance. Please.

You, McGuinty, have a good economy. You, McGuinty, have the fiscal tools and the fiscal capacity to deal with your own problems, and you are not dealing with them. All you've got is Harper pleading your case up there at the federal level, saying, "We will help you."

**Mr. John R. Baird (Nepean—Carleton):** I'll help.

**Mr. Marchese:** And John Baird, when he gets elected, will help. Oh, yeah; he'll help you. You think Harper is going to deliver the \$5 billion? He ain't gonna do that. Uh, uh. And as much as I like John Baird on a personal level, he ain't gonna do that either. No, sirree. Ontario will bleed unless McGuinty has the intestinal fortitude to say, "We've got the fiscal capacity to solve our problems,

and we can do it in a good economy.” If we can’t do it now, when?

McGuinty, don’t wait for a recession. If a recession comes, we are in trouble. If our services were decimated under a Conservative government and you are operating within the same fiscal conservative framework, all you can do is continue to cut services in every area, including the ones you claim to be so mostly connected to, i.e., education and health.

I love to see Kennedy play this game of manoeuvring the little players on the chess board. They announced \$100 million for special ed last July and then they clawed back \$100 million at the same time the next month. He says, “We are giving more than ever before,” and he says, “By the way, we stole \$100 million, but we are going to give \$50 million back and you’re going to have to fill out an application.” That was last November. We are in April: no application and not even the \$50 million, short of the \$100 million he took away.

I predict this, and I say this often in the House: If people are watching, and many are, they will know that Kennedy is likely to announce at the end of June another \$100 million for special ed, the \$100 million he stole that he didn’t put back. He will reannounce it as new money. That’s Kennedy. That’s the new Liberal politics. That’s what they do. They move money around. They announce money that never comes, that never goes, that you never see; it’s just announcements of money. That’s the Kennedy style of politics, and that’s the Liberal style.

In the same way that the Tories announced an innovative fund for apprenticeship programs a couple of years back and made their first instalment, I believe—or the Liberals; I don’t know which—last year, the Liberals promised \$20 million more for apprenticeship programs, and not one cent was delivered; not only that, not only the \$20 million they promised, but not even the extra few bucks the Liberals had promised from their \$90-million fund ever got delivered this year.

Do you see what I’m saying? That’s the way the Liberals play politics. I detest that kind of politics. I abhor it. How could people live with that kind of politics? I don’t know. All I can hope is that people see it through these debates, as they tune in, and say, “My God, we didn’t know that. We’ve got to get rid of these Liberals as quickly as we can.” That’s all I can hope.

The poor nurses. They’re going to fire 750 nurses. And when we say it in this House—they probably did; I don’t know if they’ve completed it.

**Ms. Martel:** It’s underway.

**Mr. Marchese:** It’s underway. When you say it, the Liberals say, “Hmm? No.” But it’s on the record that they are firing, laying off, 7,500 nurses, give or take a couple, the very ones about whom McGuinty said, “Oh, no, we need them.” When he makes reference to his mother being a nurse—I can’t find it because I have such a long list, and I’ve got to let Shelley Martel speak as well. There are so many quotes of McGuinty talking about how much he loves nurses and how many nurses he was going to bring back into the system, if you believe

him. We’re going to have all these thousands and thousands of nurses that he’s firing, 7,500 nurses, gone.

**Ms. Martel:** It’s 757.

**Mr. Marchese:** Yes, 757. Did I say thousand? That’s a lot. I beg your pardon. It’s 757 because, you know, you add an extra couple of zeroes—that’s the way I see the Liberals, right? Well, next year there will be a couple of more. You’re going to keep on adding zeroes as we go, right? “Watch me. Just wait. Don’t you worry. McGuinty will be there for you when we’ve got to make the serious cuts.” It’s coming.

It’s a serious problem we’ve got on our hands. We’ve got money from the feds coming; we’ve got money from the health tax—close to three billion bucks. Where is that money going? It’s going somewhere. It’s not in my pocket. It’s not in your pockets. It’s going somewhere in government expenditures, and it’s not health.

Hopefully we won’t face a recession. You think the cuts the Tories have imposed on us and the cuts that these Liberals are imposing on us with their 5% to 10% or 15% cuts in all the ministries except, they say, for education and health, are bad? Compound the cuts the Tories made, compound the cuts these guys are making, and should there be a recession—God willing, there won’t be—we are in serious doo-doo. I don’t wish it on this province.

I thank you for the attention. Shelley Martel will follow me in the next round.

**The Acting Speaker:** Further debate?

**Mr. Peter Fonseca (Mississauga East):** I have to tell everybody in this room and across Ontario today—you probably saw the headline. Here’s what came across the wire: Mike Harris, former Premier of Ontario, calling for Canada to “get out of medicare.” Medicare is one of the greatest values that bind this country, the value that makes this country so great.

I have to say that Mr. John Tory, the Leader of the Opposition, is playing games with this House. He’s playing games of hide-and-seek, trying to hide from the past record of that previous government over there. There are members sitting across the way right now who were there when Mike Harris said, “Let’s slash those nurses. Let’s close those hospitals. Let’s destroy our health care system. We don’t believe in it.” That’s what they said.

Mike Harris is the true voice of that Progressive Conservative body over there, the voice that wants to destroy our health care system here in the province of Ontario. The Leader of the Opposition can run and hide, but he can’t hide for long. He can huff and puff about what he has to say about health care, but the truth is that what they’ve done in the past is what they will do in the future. One thing we know is that past behaviour most likely will be future behaviour, and the future behaviour of that government is clear for everybody to see.

Mr. Tory and his party have said, “We will cut \$2.4 billion out of our health care system.” What will that do? Is he going to close another 28 hospitals? Is he going to slash another 8,000 nurses? What will he do?

I can tell you what we will do. What we’re doing is rebuilding our health care system here in this province.

We want to make sure that it's strong and sustainable. We are committed to medicare in this province, to universal health care across this land, through Bill 8. That is something that we can't say about the opposition across the way.

1630

The Leader of the Opposition will tell you that he cares for health care, but the truth will come out when he tells us, when he finally tells the province of Ontario, where he's going to cut that \$2.4 billion. Will he be slashing doctors, nurses, community support care service providers or community home care? Where is he going to slash that \$2.4 billion? We would all like to know.

Do you know what I think? He's left the room right now, and I think he has maybe gone to meet with Mike Harris. Maybe he's calling Mike Harris up right now to say, "Mike, what should we do? What hospitals should we close, Mike? Where should we start slashing? How can we cripple this system a little bit more than you did when you were here in government from 1995 to 2003?"

Yes, I realize that the member will often cite that he wasn't around at those times, but we know he was in the backrooms. He was in the backrooms working with the big boys, telling them, "You know what? Here's where we can bring in privatized care." I know that, like Mike Harris, Mr. Tory is looking at a two-tier system. How can he bring privatized care into the system and bring US-style health care into Ontario? That's not what we want. We are committed to universal health care here.

Looking at players like Mr. John Tory and big business players in the United States, here's what I can tell you happens to people in the United States. Working-class families across this province will not want to see this happen: Half of all personal bankruptcies in the United States happen because people cannot pay their medical bills. That's a shame. That's not something we want to see here in Ontario or in Canada. Mr. Tory, we don't want to see that brought over here. I know that you'd want to back up Mike Harris—your former friend and Premier of Ontario, somebody I'm sure you had a lot of conversations with—in terms of a two-tier system or bringing privatized health care into this province. That's something that we do not want.

Mr. Tory will often try to deflect that and say that he was not part of that government. Well, I never heard you, Mr. Tory, stand up—

**The Acting Speaker:** You have repeatedly called the member by his name. That is not parliamentary. You can refer to him as the Leader of the Opposition or as the member from Dufferin–Peel–Wellington–Grey.

**Mr. Fonseca:** I'm sure the leader of the official opposition, during the 1990s and during former Premier Mike Harris's stay in this province, had a lot of conversations with him in terms of the cuts that were being made to health care.

**Mr. Kevin Daniel Flynn (Oakville):** He was his mentor.

**Mr. Fonseca:** He was his mentor, yes, as he was grooming him for this job.

Let's talk about what our vision is for health care here in Ontario. We have a vision of teamwork, a vision of compassion, a vision of integration, a vision of making health care systems sustainable within the province of Ontario. This is happening by working in partnership with all the people who deliver health care services within the province.

We've made sure that we have created over 3,000 full-time nursing positions in hospitals, long-term-care homes and community agencies. We've made significant investments in education, mentoring programs, bed lifts and safety equipment designed to make the job of nursing a safer and more rewarding one. Nurses are the heart and soul of this system, and they deserve to be treated with respect, as we are treating them with respect.

In regard to hospitals, my friend demands better treatment for hospitals. He wants to make sure that we fund them properly. What I can tell you about that government is that they allowed hospitals to hold \$700 million of deficits on their books, which was off the books, so the people of Ontario would not be able to see the massive deficit they were holding this province to.

Twenty-eight hospitals closed. It strikes me as a little rich that they should lecture us about hospitals, leader of the official opposition, when they eliminated 5,000 public hospital beds in their first two years alone and more than 7,000 over their time in office. The leader of that party cut \$557 million from hospitals in their first two years. The kind of stability they're recommending will provide the most unstable system Ontario will ever have seen. That's what that party specializes in: disruption, crisis, anarchy, instability.

What we are doing is making sure that we right this ship, that we bring fiscal responsibility to our system, to make it sustainable and to give it the funds it needs to be able to build a system, something the previous government had no inclination to do. It's a pleasure to speak about the great things our government is doing to make our health care system one that will be here today and for many years to come. We are making Ontarians healthier. We are getting better access to doctors and primary care. We are shortening wait times. Unlike the previous government that cut vaccines for children, we've made sure all children in the province will be vaccinated for chicken pox, meningitis, pneumococcal—unlike the previous government that downloaded much of the services on the municipalities, we made sure we're investing in public health and we have uploaded the public health sector to the province of Ontario, so that we are now picking up 75% of the cost.

Under the Ontario Liberal government, Premier Dalton McGuinty and Minister of Health and Long-Term Care George Smitherman, we will make sure we have a health care system that is second to none.

**Mr. Baird:** I rise to talk about some important health care issues in my community that are cited in this resolution. We're asking for two things that affect hospitals. One, would they agree to tell hospitals what their budget is now that the fiscal year has started? Ray Hession, the

president of the Ottawa Hospital, asked for that and still hasn't heard. We're entering the beginning of the third fiscal year of this government and still haven't got a sense of what their budget is. They have to give six months' notice for the layoffs the McGuinty government forced them to make and they just want to know what their budget is. The Premier promised to do this, not just in his election campaign document, but he also promised to do this in his first budget.

The other issue affecting hospitals comes to me from a visit. As an MPP and as health critic, I went to work at the Queensway Carleton Hospital. I spent five hours there, shadowing nurses in the emergency ward. From the triage area to working in the more acute area of the emergency ward, I talked to the nurses there. They're not just concerned about themselves and their patients; they're concerned about the future of the health care system. The motion here calls for a moratorium on the provincial government, on Dalton McGuinty, firing nurses. They've criticized the previous government for laying off nurses, but apparently that wasn't enough. They want to lay off even more. It's not enough. Apparently Mike Harris didn't lay off enough nurses. They want to add another 757 to that list.

That's unfortunate, because I want every single nurse at the Queensway Carleton Hospital—the people, the men and women I worked with—to put all their energy to worrying about their patients, not to worrying about health care cutbacks by this government.

I challenge the Liberal members to vote for the platform. Vote for your platform in here. I worked hard to get the Ottawa Hospital the biggest funding increase of any hospital in Canadian history. Number one—no hospital has ever got a bigger budget increase than the Ottawa Hospital under the previous government. I wish this government would be as committed to hospitals as they should be.

1640

**Ms. Martel:** I'm pleased to participate in the debate. I'll repeat at the outset, as my colleague from Trinity-Spadina has already said, that we will be supporting the motion.

I just want to focus on two of the bullet points this afternoon: the first bullet point, "To ensure that Ontario's hospitals are given adequate, stable, multi-year funding to meet the needs of patients as promised by the Liberal Party ... in the 2003 election and again promised in the ... May 2004 budget," and the third bullet point, "That no nurses will be fired as a result of budgetary constraints for the remaining term of office of the McGuinty Liberal government."

Let me deal with "ensure that Ontario's hospitals" have "adequate, stable, multi-year funding," because the reality is that with the announcement that was made by the Liberal government in the 2004 budget, we don't have adequate, stable funding for hospitals. Indeed, we already have a situation that in the first year of funding from the Liberal government, we have seen 2,000 hospital staff laid off, and, if nothing changes with

respect to the allocations that were announced in the 2004 budget, we are going to see some 8,700 people lose their jobs in the hospital system in this fiscal year, 2005-06. So we didn't get stable funding from the Liberal government as they promised in the election, as they stated in the budget. In reality, we have a situation where there is an enormous crisis facing the hospital system now: people being laid off, many more to come, and a dramatic, negative impact on patient services right across Ontario.

I don't understand what it is about hospital funding that the Liberals don't get. I think the OHA and other hospitals have been very clear. There are pressures facing the hospital system that don't go away from one year to the next. There are ongoing budgetary pressures and those are in the order of 8%, year in and year out. They include serving an increased population, and a population that has much more complex health care needs; paying for care for the elderly and their more complicated needs; paying for modern surgical equipment to keep up with the changes in treatments—and we want those things to occur; drug costs that go up; physician payment increases for those who are on alternate payment plans in the hospital system; utilities—we know a lot about hydro, and it's only going to get a whole heck of a lot worse; insurance; food; equipment; not to mention the legitimate wage increases that are bargained for and should be provided to those who provide care in our hospital system. I'm talking primarily about the front-line workers who are providing care. I don't want to talk about executive salaries. That would make me cross, especially at the Sudbury Regional Hospital right about now. I'm talking about salaries for front-line workers—nurses, CUPE staff, SEIU staff—who are there day in and day out, providing direct patient care, making sure our hospitals are clean and that infection is not rampant. Some 8% every year is the estimated cost to deal with those costs, which the hospital can do nothing about.

What did the government provide in the 2004 budget? Well, in the 2004 budget they provided 4.3%. The projected allocations in the hospital system for the next couple of years are: 2005-06, 2.1%; 2006-07, 2.2%; and 2007-08, 3.1%. That's the projection that was announced in the budget. So we've got costs at around 8% and we've got allocations that run from 4.3% downward—downward—for hospitals to use to cover their costs. Let's look at the 4.3%, because that can be a very misleading figure. Not every hospital—indeed, most hospitals didn't get a 4.3% increase, which would have represented half of the money they needed to deal with their expenditures. In fact, because most of that money was one-time, individual Ontario hospitals received an average operating funding increase of 1.8%, not 4.3%. Many received 1%. So we are moving from a situation—you can see how big this gap is, and it's a gap that's just going to grow. An 8% need, with hospitals, on average, in 2004-05 getting 1.8%. In the out years, the government is going to provide just 2.1% this year, 2.2% next year. That means some hospitals are going to get average

increases of 0.6%, 0.5%, 0.4%. That gap is just going to grow when their costs are around 8%.

You have, at the same time, the government saying that by 2006, as a result of Bill 8, hospital deficits will have to be balanced, and haven't we seen some of the negative consequences of that. You've got 2,000 workers who have already lost their jobs as a result of inadequate hospital funding in the fiscal year 2004-05. Under the cover of night—it was either December 23 or December 24—the Ministry of Health sent a letter to hospitals agreeing to a first round of cuts, which resulted in layoffs to over 2,000 staff, and 757 of those are full-time nurses.

That's what we've got happening this year. What's going to happen in the out years, as this government tells hospitals they have to balance their budgets by 2006, and as this government allocates funding to hospitals that is totally inadequate to meet their increasing expenditures?

Let's look at what's going to happen this fiscal year. Even though a number of hospitals have worked for months to try and find additional savings, they couldn't balance their budgets at the end of the fiscal year 2004-05. In fact, at the end of the fiscal year 2004-05, even with the \$200-million bailout given by the government in January, the hospital deficits were in the order of \$440 million. So we are starting a new fiscal year, 2005-06, with hospitals in deficit to the tune of \$440 million, projected to get 2.1% as a funding increase for this fiscal year.

If nothing changes in this plan, if there is no additional allocation to base funding, not one-time funding but allocation to base funding, hospitals in this province will be in a deficit position at the end of the fiscal year to the tune of about \$760 million. If hospitals with a total deficit of \$760 million are forced to balance their budgets by the end of the fiscal year 2005-06, I can tell you we'll probably have more than 8,700 layoffs, and I can tell you, as clearly as I stand here today, that will have a dramatic negative impact on patient care.

When the minister talked about the 2,000 layoffs early in January, and I was at the press conference and I heard him, he talked about the fact that 757 nurses were going to be laid off. At the same time he talked about that, he tried to say that the 2,000 layoffs his government authorized were for administrative positions and were not going to have impact on hospital services at all. I can tell you that the nurses who were at that press conference who spoke to the media after made it very clear that of the 757 nurses who were going to be laid off—it's more than that because those are full-time equivalent positions, and because so many nurses still work casual and part-time, they said it's going to be more than 757 bodies. They made it very clear: These were nurses who were working in cardiac care; these were nurses who were working in the emergency department; these were nurses who were working in the neonatal department; on the acute psych. floor. These were nurses that providing direct front-line service. They are not administrative positions and their loss means very negative impacts on patient care.

That's what we have got just as this fiscal year wraps up. If the government wants to hold to the multi-year plan it announced in the 2004 budget, we are going to see that problem magnified a thousandfold.

It's interesting that there hasn't been a change, and we wait and perhaps in the budget we will see a change, because it's very clear that we already have a significant problem and it's going to get worse. I think that's part of the reason the OHA, in its prebudget consultation, urged the government to take a second, sober look at how it funds hospitals. They said very clearly that the 2005 budget should commit to implement a plan to move to prospective multi-year service-based funding, and secondly, that the rate charged for services should be independently reviewed and validated by experts and clinicians to ensure equitable and appropriate funding. I think that's a good idea. I think that's a reasonable idea. I think that would go a long way to really ensuring that hospitals are appropriately and adequately funded with respect to the services they are providing, because there are many hospitals providing many different services, and we should recognize that, but we don't now, in terms of the funding formula that's in place.

**1650**

They also said in the pre-budget consultation that there should be transitional funding to hospitals "to accommodate the needs of their patients until additional community-based alternatives to hospital care are in place. Without" that, many "communities may lose critical patient services now offered only by their local hospitals."

You see, I've heard that government say again and again that hospitals should shed a number of the programs they offer and they should only deliver core services because the community services are in place to pick up the slack. I've got to tell you, community services aren't in place to pick up the slack and, in far too many communities, the hospital is the only health care game in town. If the hospital sheds some of those services and deals only with the core services as defined by government, thousands of people will have no place to access health care in the way they do now, because those services are not in place in the community.

The government hasn't made its announcement on family health teams. It's supposed to this week. It's been 18 months, and we still have no announcement about family health teams.

The amount of money that the government actually allocated to long-term care was \$116 million, not \$191 million. So there hasn't been any significant change there.

I can tell you, in my own area, people are still lining up for physiotherapy and occupational therapy through a community care access centre. So whatever allocation went there to deal with that wait list hasn't made a difference for those people who are waiting for all of those services.

The fact of the matter is that community supports aren't in place. You can't tell hospitals to trim their bud-

gets by cancelling or cutting out or getting rid of some of those services because they're in the community, because they just aren't. If hospitals did that, I can tell you that would cause all kinds of negative consequence for patient care in our communities as well.

Let me focus on the second point that had to do with nurses. I said earlier that, although the minister tried to say the 2,000 jobs lost in fiscal year 2004-05 in the hospital system were administrative positions only, he was quickly contradicted, most effectively contradicted, in his statement by nurses who were at the press conference that day, who said that those positions represented direct front-line positions in cardiac care, in psychiatric care, in emergency care, in neonatal care, and the list goes on.

Let me just give you one community that is suffering nursing loss. This is a press release from Sault Ste. Marie, March 16:

"Sault Area Hospital ... registered nurses are warning that patient care will be severely impacted if the planned layoff of 20 nurses (13 full-time and seven part-time) goes ahead by the target date of May 14.

"The layoffs, along with a substantial reduction in nursing patient hours by April 1, will have a devastating impact on SAH patients. We are already facing tremendous challenges because of workload pressures, high patient acuity requiring more nursing care, and understaffing," said Glenda Hubley, who's the RN, local coordinator and bargaining president for ONA.

"We are currently operating at base staffing levels—there is just no fat in the system to trim if we are to sustain proper patient care.... Since January of this year, we have filed 23 workload complaints because of inadequate staffing levels," and they are still unresolved.

So that's just one community where nurses are being laid off at the same time as the government and the Minister of Health tell this House that 3,000 new nursing positions have been created. In Sault Ste. Marie, we've got layoffs at the hospital, and they aren't the only hospital that's laying off nurses.

Here's a press release from February 14. The president of ONA came to Queen's Park that day. Linda Haslam-Stroud said the following:

"Ontario nurses have lost confidence in the McGuinty government's commitment to restore nursing and protect patients," said President Linda Haslam-Stroud today.

"The McGuinty government has done a 180-degree turn from its stated commitment during the election to protect patient care and hire 8,000 full-time registered nurses," said Haslam-Stroud.

"On January 17, the government told Ontarians they can expect 757 nurses to be laid off this year and possibly thousands more next year, as hospitals struggle to balance their books by March 2006. Nurses feel betrayed by this government."

Here are some comments that were made by the Registered Nurses Association of Ontario. They came to the pre-budget consultations on January 19. It was Doris Grinspun who spoke on behalf of RNAO that day and

made some very pointed comments with respect to the government's announcement. She said:

"Given the Minister of Health's announcement on Monday, I must turn instead to an issue that I truly believed we would not have to address during the term of this government, an issue that the profession desperately needed a break from: cuts in nursing services."

She went on to say very clearly that, "Providing incentives for nurses to retire means acceleration toward retirement by those 10,000 nurses already expected to retire.... It means the loss of expert nurses." She made it very clear that it wasn't just 757 bodies that were going to be lost but more than that, because so many workers still continue to work part-time, still continue to work casual.

"In his announcement, the minister said there would be a reduction in nursing. Hospitals would be cutting the equivalent of 757 full-time nurses. Because of the still unacceptably high level of part-time and casual positions, this means that far more than 757 nursing bodies will be affected—many more nurses than that number. We are not comforted by the minister's statement that some of these losses will be absorbed through attrition, early retirement and reductions in sick time, casual employment and overtime."

She said, as she ended her speech that day:

"For all these reasons, we urge the government to reverse its decision and send an urgent message to the nurses of this province. We urge the government to revisit this issue and come up with a solution that protects both quality patient care and nurses."

She also said, "The announcement has sent a message to nurses that has chilled the profession."

Before the election, the government promised 8,000 new nursing positions. We are in a situation now where, as a result of inadequate funding to hospitals, we are seeing massive layoffs of nurses: 757 full-time equivalents, even more in terms of real, live bodies, just as the fiscal year 2004-05 ends. That number of nurses and employees who are going to be lost is only going to grow if this government doesn't come forward in the budget and put in place an adequate, sustainable, multi-year funding plan for hospitals.

**Ms. Laurel C. Broten (Etobicoke-Lakeshore):** I'm pleased to stand and respond to the opposition day motion. I guess I stand in the Legislature today and I ask why the opposition would try to scare Ontarians with what they are raising. I suspect the answer is that when you don't believe in or want to protect and sustain our public health care system, you want to lead Ontarians to believe that private health care and two-tier health care is the only way of the future. To get Ontarians to embrace that two-tier health care, especially if your plan is to cut \$2.4 billion more from that system, you want Ontarians to believe that it is impossible to sustain our public health care system.

I'm very proud to be part of a party that is willing to do the real work and the hard work that has been identified by Roy Romanow, the work that we need to do to

transform our public health care system into one that is truly public, one-tier, universal and sustainable for generations to come.

That is what this opposition day motion is about. It's about distinguishing between the opposition and the government in how we approach health care. We are prepared to invest in our hospitals and in our communities to transform a health care system, because we believe in that system, we want to protect that system, and many of us put our name on the ballot to come here and do that hard work. We're ready to roll up our sleeves and do that work and truly put Ontario patients first.

I want to tell you what the transformation is doing in a community like mine, Etobicoke–Lakeshore. In Etobicoke–Lakeshore, we have a wonderful health care facility, Trillium Health Centre. Our plan to transform health care is about taking medicare to its necessary next steps, creating a comprehensive and integrated system of care that is shaped with the active leadership of communities and driven by the needs of patients. When I go to Trillium and I talk about the needs of patients, the people who work at Trillium each and every day to make sure that hospital is a pacesetter hospital in our system understand the needs of patients. The Queensway site, located in Etobicoke, part of the Trillium centre, continues to emerge as a benchmark facility for the delivery of innovative ambulatory care services, a 14-hour urgent care centre, a mental health service, the Betty Wallace Women's Health Centre, all of which I have had the privilege of touring and which are doing some incredible, innovative work.

**1700**

I want to tell you that there's a lot of misinformation that comes into this Legislature about what is happening on the front lines of health care. In 2004-05, Trillium Health Centre's approved operating allocation was \$271 million. The hospital received a total of \$14.4 million from the new funding allocation, and Trillium Health Centre was provided with 100% of their funding. They brought forward a balanced budget—in fact, a surplus budget—in 2004-05, and in 2005-06 they brought forward another balanced budget, with no clinical service reductions. They are an institution that we are rewarding for their innovation in bringing forward leadership, engaging community members in dialogue, talking about the future of our health care system, integrating with our community health centres. They are a part of our strategy, for example, on wait times. Trillium Health Centre will be doing 108 new hip and knee replacements, 170 new cataracts and 110 of the cancer allocation surgeries. They are part of the solution to health care, and I'm proud to represent that hospital here today.

I also want to talk about bringing it into the community. We heard something about, "You can't work in our communities if you don't invest in community health care." In Etobicoke–Lakeshore, we're investing in a pacesetter hospital. They're part of an innovation strategy supportive of the transformation agenda that our government is bringing forward. And at the same time, we've

given \$840,000 to the Lakeshore Area Multi-Service Project, LAMP, which is going to develop a new health care centre in Mississauga and Etobicoke; \$265,000 for ongoing, and almost \$500,000 to build that new centre. So we're investing in hospitals, investing in communities and, for the first time in Etobicoke–Lakeshore, there's availability at the community health centres if you need a doctor.

Bring the community around. Be somebody who wants to build. Show leadership to transform this health care system. That's the government that I'm part of, that I'm proud to stand here and support, and that's not what I see in the opposition motion today.

**Mr. Frank Klees (Oak Ridges):** I want to take this opportunity to thank our leader, John Tory, for bringing this motion to the floor of our Legislature. It speaks volumes that the Leader of the Opposition should take this opportunity, his first opposition motion, to speak to the importance of health care in our province, and to challenge the government to do what it said it would do, and that is to ensure long-term, multiple-year funding for our hospitals and to support our health care system. The truth is that that is not happening.

Everyone who has observed this government since its election has observed the lack of integrity when it comes to saying one thing and doing another. In this House, even the speaker just before I rose to my feet made the comment that John Tory and the Ontario PC Party would cut \$2.4 billion out of health care. For the record, and I want people who are watching this debate today to know, that is the farthest statement from the truth that anyone could ever make. It has never been said by John Tory; it has never been said by anyone in our party. It is not true. If anything, what John Tory has said is that health care is a priority for him and will be for our party; that not one penny will be cut from the health care budget but that we will do things in an efficient manner.

Here is the problem that we have. I cannot, because of our standing orders in this House, say that a member of this House is telling an untruth. I cannot say that they are lying by saying that. So what I have to say is, in the very carefully selected terms that I can: This is the farthest from the truth that either the Premier, the Minister of Health or any member of the Liberal Party could say.

I say to people watching, when you hear the Premier or any Liberal member of this Legislature make that statement, be careful. This is one more challenge of the integrity that this government is lacking. It is one more example of politicians saying whatever they need to say to undermine confidence in the business that is being carried on here.

I am proud of the position the leader of our party has taken in defence of health care. I am proud that he is bringing this motion forward this afternoon, and I look forward to the opportunity to work with him to strengthen health care in the province of Ontario.

**Mr. Phil McNeely (Ottawa–Orléans):** I would like to take this opportunity, during debate of the opposition motion, to bring to your attention the situation of our

health system in the Champlain district in Ottawa—it's one and the same; Ottawa is probably over half of it—when we took over governing this province. Information from the ICES wait times report is now available. Something that was of concern to me during the campaign and in the early months of our government was the inequity of health care funding across this province.

News has it that the health critic could be heading to Ottawa, so I believe it is important for us to see where he, as senior minister for Ottawa with the Harris government, brought our city in terms of health care.

The word on the street during the campaign suggested that health care funding for Ottawa was about 85% of the provincial average. One figure I recall was that Ottawa had 50% of the MRIs per capita that Toronto had, and the recently released figures support that; that is what ICES has shown. Did Mike Harris call the Nepean–Carleton minister and say, “Cut health care in Ottawa”? It seems his answer may have been, “How much, Mike? How much do we want to cut in Ottawa?”

The rate of MRIs per 100,000 people in Toronto was 1,957, compared to 1,302 per 100,000 people in Ottawa in 2002-03—50% less availability. We were buying them in Gatineau and Montreal because they were not available. That's where our health critic had taken the situation in Ottawa.

I recall the member for Nepean–Carleton and his buddy Lowell saying that was OK, we had enough MRIs. Of course, if you do an MRI, you might have to do an operation that will cost the system money. In Ottawa the wait time for an MRI was over a year, and it's still about that. It's going to take time to change that. The ministers for the Ottawa area said that was OK as well, and that was in our press.

I've studied the stats. In the case of bypass surgery, wait times were near the top, thanks to Dr. Keon. Everything else was below average, and a lot of them were right at the bottom. Listen to this. Here are some of the stats from the ICES report, which the member from Nepean–Carleton should be aware of:

Radical prostatectomy: We were 14th out of 14. We were last.

Urgent angiography: We were 14th out of 14. We were last.

Elective angiography: 14th out of 14. We were last.

Hip replacement: We were 14th out of 14. We were last.

Knee replacements: We were great. We were 13th out of 14.

That's what we were left in health care in Ottawa by the member from Nepean–Carleton. The health critic was a senior Ottawa minister. Now he may be going to Ottawa. That's shocking, since he would not fight for our city.

You wanted to close a great hospital, the Montfort, and Gisèle Lalonde beat you in court. The Montfort is one of the best-run hospitals in the province of Ontario. You tried to close the cardiac unit of the Children's Hospital of Eastern Ontario. You almost succeeded, but

thank goodness you were kicked out before you did it. You brought in a supervisor for the Ottawa Hospital. You did close the Grace and you closed the Riverside. You accepted underfunding of our health system in Ottawa at much below the provincial average.

You betrayed our health system in Ottawa, yet you have the audacity to support this motion today. I would think that your legacy of accepting less than our due in Ottawa would make you ashamed of your dismal record and the dismal record of your government. In fact, the only time the health critic, John Baird, ever proposed more funding for health care in Ottawa was in opposition. That was last year, on October 14, when he brought in a motion. Now that he is in opposition, he's got lots of money.

Times have changed. Minister Smitherman is not afraid of telling the truth, of publishing wait times and other information on hospitals. He has told us that we will have equity across the province, something that government over there never had and did not even want to measure. The McGuinty government is bringing a managed approach to our hospitals. The Provincial Auditor, for the first time, will be able to review the expenditures of hospitals, something that government would never do when they were in power.

When you talk about taking \$2.4 billion out of the health care system every year, or \$10 billion over four years, you'll bring back the mess you created in eight years of slash-and-burn governing. I say to the opposition that the good people of Ontario will not give you the chance to ever do that. It seems that whether it's Harris, Tory or Harper, we can count on the member from Nepean–Carleton to try to cut services in Ottawa far beyond the call of duty.

I don't think it was a coincidence that today the Harris report to the Fraser Institute came out in support of private health care—where that party wanted to take us when they were government and where they want to take us today.

1710

**Mr. John Yakabuski (Renfrew–Nipissing–Pembroke):** We don't have a lot of time to speak today because we have so many people anxious to speak to this motion, because it's one that we can support wholeheartedly.

The sad part about this present government is the great promises they brought to the campaign of 2003 and how quickly they retreated from those promises—the promise that they would not raise your taxes, and shortly after, in their very first budget, they brought in a health care tax, a punitive tax.

Let me tell you what that has done to people. They brought it in so they could reduce wait times for procedures in the province of Ontario. Well, a constituent of mine, Mr. Evans from Arnprior, tells me that he's going to be waiting nine to 10 months to get an MRI—a World War II veteran waiting nine months to get an MRI. But what's he doing? As he writes here, “I'm paying \$544 to McGuinty's health tax. What for? I believe it was just

another” blank “from this government.” That’s what Mr. Evans says. There is nothing. There is no plan.

Last week the minister announced a plan to centralize surgeries or procedures. The plan for this government is this: “Every week we’ll make a new announcement. Stay tuned next week for a new plan.”

**Mrs. Carol Mitchell (Huron–Bruce):** I’m very pleased to stand today and to speak on this opposition day motion, but I must say that I do find it very interesting that the member from Dufferin–Peel–Wellington–Grey is bringing this forward, as if he doesn’t seem to understand why the state of our health care—so I say to the members, why is that? But your government is pleased to bring forward the answers today.

The McGuinty government, I believe, is doing an excellent job in turning things around. We are working very hard to provide the health care that Ontarians want and certainly need. We have funded our hospitals with \$11.3 billion in 2004–05, and might I say that that is \$700 million more than the previous government.

Not only are we providing funding for hospitals, but we are helping hospitals to get their budgets under control. I am very pleased to say that the seven hospitals from my riding of Huron–Bruce have all submitted balanced budgets. I know that this is just another step in the process of providing the health care, but I say to you that the hospitals have worked very hard to get to the stage they are at today. They understand that what people want and need is not only a health care system that will meet their needs, but a system that is accountable to the people of Ontario.

I just would like to take this opportunity to quote a couple of articles from the hospitals within my riding and things they have said about the funding that has flowed through, whether it be for medical equipment or for state of repairs, budgets etc. So if you would indulge me:

“This money will help the residents of west Huron come to a hospital that has state-of-the-art equipment without having to travel great distances.”

It was the CEO who said this. “It recognizes the need to provide health care as close to home as possible. That’s particularly necessary on a day like today when it would be difficult to get patients to other hospitals.” This is from the Alexandra Marine and General Hospital. The board chair also went on to talk about the weather, because that day, as you know, Mr. Speaker, in my riding there was about an inch of ice all around and you couldn’t go anywhere. But the diligent MPP that I am, I did make it.

I would also be pleased to say that, “Local hospital board members are breathing a collective sigh of relief after receiving a provincial commitment for half of the hospital’s upcoming fire and safety line improvement costs.”

These are just two quotes from our local papers, from some of my seven hospitals within the riding of Huron–Bruce.

The McGuinty government has been working very diligently to create a better health care system by

focusing on the health of Ontarians. We will be reducing wait times and we will also be increasing the number of doctors.

As you know, I come from a very rural riding, and access to doctors is very important, not only—

**Mr. Richard Patten (Ottawa Centre):** How rural is it?

**Mrs. Mitchell:** The most rural in Ontario. Thank you.

In my riding of Huron–Bruce, over 90% of my riding is designated underserved. That is what we bring to the table: seven hospitals, and a designation of being underserved throughout the riding. So when we talk about the new initiatives to have more of our family doctors come forward in Ontario, it’s very important to rural Ontario, and the fact that the training spots for international medical grads has risen from 90 to 200 and residency positions have increased, and the agreement with the OMA. Those are all things that are very important to our rural communities.

I am so pleased about our family health teams: 150 across Ontario. I can tell you that rural communities are anxiously awaiting the announcements on the health teams. I would like to take the opportunity to quote the chief of staff from Seaforth about family health teams and what his thoughts are: “The big payoff of family health teams will be improved health and less need for hospital services. It is more preventative and it will have benefits locally.” I can say to you that our commitment to the health teams from the rural communities remains solid.

Making Ontarians healthy is also a key health initiative of our government. We have renewed our commitment to public health. We are vaccinating two million children free of charge against pneumonia, chicken pox and meningitis, and we have introduced a smoke-free Ontario.

The health care system will not be fixed overnight, but I am proud to say that this government is committed to delivering quality health care services and to the health of Ontarians. We are striving for a dependable system and one that will be there for generations to come. In the short time that we have been in government, we have accomplished a great deal, but far more exciting, I believe, is what will happen over the next two and a half years. The people of Ontario are anxious for that to come forward.

**Ms. Laurie Scott (Haliburton–Victoria–Brock):** I am pleased to rise today to speak on the motion by the opposition to ensure that Ontario hospitals are given adequate, stable, multi-year funding. Hospitals are having a difficult time coping with the demands that this government has made on them. On the one hand, they are making more cutbacks—the minister has asked them to—with a whole new set of rules. But this minister has not committed to providing hospitals with the one thing the hospitals have been asking for, and that is, they want to know when they are going to receive the funding, when it is going to be.

In my riding, the hospitals are stretched to the limit to meet the needs of their patients. The Peterborough

Regional Health Centre recently announced 75 layoffs in order to meet the fiscal targets they were given. People are lying on stretchers in the hospital hallways. I know our leader has visited there and has seen it first-hand. They need to know what support they can expect from this provincial government, and they need to know it now. They need to know what they are providing in funding so they can keep their nursing staff. Statistics show that if you decrease the number of nurses, you increase patient mortality. The ONA put out a press release: "Nurses feel betrayed by the McGuinty government."

1720

The Liberals have promised to reduce wait times across the province for a variety of procedures, but we are worried that this is nothing more than rearranging existing resources and that while wait times for some procedures may go down, others not on the Liberals' protected list may go up. I don't think this is what Ontarians want to see. Hospitals should not have to make choices regarding which procedures will face increased wait times.

Another concern I have is the government's report on LHINs. The recent report on wait times compares times within each of the 14 new LHINs that are coming out. My LHIN, central east, the largest one in Ontario, includes Scarborough as well as Haliburton. I'm not convinced this is the best way to measure wait times for the communities in my riding, when you compare them to communities like Scarborough. It's vital that the government rely on measures that give them an accurate picture of where the delays are and where they need to focus their resources.

I think it's time for the government to commit to the people of Ontario that they will not shortchange hospitals or nurses, or trade one type of wait time for another. I urge the members of the opposition to stand up and support this motion today.

**Mr. Bob Delaney (Mississauga West):** I'm pleased to speak on this resolution by the opposition, which I would like to call the "We're trying to wash our hands of our own past" resolution.

How come Ontario's hospitals didn't have stable, multi-year funding until our government took office in 2003? Because the previous Tory government, the Harris-Eves regime, fired nurses, slashed budgets, closed hospitals, increased wait times, decreased access to doctors, chased away good managers and began the drift toward privatization, a drift that has now become a torrent with the issuance today of a joint report by Preston Manning and Mike Harris calling for the federal government to get out of medicare, abolish the Canada Health Act and let the provinces privatize health care.

What a difference an election makes. Well-run hospitals, like our own Credit Valley Hospital in Mississauga West, are now being rewarded rather than penalized for their managerial competence. Credit Valley has received nearly \$1.3 million in new money to enhance organ donation and ease service pressures.

Credit Valley has received \$2 million in new money for an MRI-compatible physiologic patient monitor. Credit Valley has received more than \$163,000 of new money for patient-lifting equipment, and more than \$275,000 in new money for the purchase of new sterilization equipment and to control infectious diseases. For the citizens of Mississauga, Meadowvale, Streetsville, Churchill Meadows, Erin Mills and Lisgar, that's meant shorter waiting times.

Premier McGuinty and I stood at Credit Valley last year with many of the 50 new nurses hired by the Credit Valley Hospital. That's responsiveness. That's good government. That's 180 degrees different from the mismanagement and incompetence of the Tory Party in the Harris-Eves years.

Soon we will have our second provincial budget in about 11 months. Hospitals are receiving their allocations earlier. Bill 8, which John and the Tories opposed, offers Ontario's hospitals the multi-year stability they need to manage effectively. John and the Tories want the government to micromanage hospitals. They say, "Make sure no nurses are fired." Well, this government isn't going to emasculate hospital managers and shackle their human resources management.

To paraphrase the member from Leeds-Grenville, a Tory is a Tory is a Tory. Preston Manning is a Tory, and he's in favour of privatizing health care. Mike Harris is a Tory, and he tried to privatize health care. The opposition leader is certainly a Tory, and he's big insurance's next blue hope.

Ontarians cherish their health care. They don't want the bankruptcies that Tory-style privatizations will entail. Ontarians rejected the Mulroney boondoggles and the scandals of that era. They rejected the Harris confrontation and the Eves bungling. Ontarians will vote down this latest Tory albatross every time.

Ontarians want reliable, publicly funded, publicly delivered, responsive and modern health care, now and in the future. That's why their government in Ontario has delivered just that for a year and a half, and that's where Ontario is going to continue to go in the years to come.

**Mr. Toby Barrett (Haldimand-Norfolk-Brant):** I'd like to take just one minute to address the motion on the floor with respect to this government's trail of mismanagement, misdirection and promise-breaking, as we've just heard in the health care sector. I don't think I'm revealing any secrets when I say that government—indeed, leadership—is all about management and planning. It's about gathering all the information about the resources available to you and developing a sustainable spending plan. You have to plan. You have to ensure that your expenses don't outstrip your bank account. That's what we do every year at budget time. I should say, that's what some of us do every year at budget time, and I'm sure the public will find out soon enough that, when it comes to managing and planning a budget that doesn't dip into the red, this government, yet again, will not be up to the job.

The issues of management and planning are the same issues faced by hospital boards—in my area, Norfolk

General, Tillsonburg, West Haldimand, War Memorial Hospital, Brantford General—boards that are being told by this deficit-ridden Liberal government to “do as I say, not as I do.”

**Mr. Jean-Marc Lalonde (Glengarry–Prescott–Russell):** I’m pleased to stand in the House today and comment on the official opposition leader’s speech and also the comments made by the member from Renfrew–Nipissing–Pembroke.

It’s exactly what we expected from this former government, the Tory opposition people. One, we heard the grenade that came down from Ottawa today, the grenade that came from Mike Harris and Preston Manning. It certifies that these people are looking for a two-tier health care system. Why am I saying that? Because they said that, at the present time, people are waiting eight to nine months to get an MRI, but I wonder if they are not the people who created the eastern Ontario MRI on the Hull side. The government was extremely pleased to see our people move to the other side and get an MRI within three days at \$675.

Also, waiting time for knee replacement: Let me tell you, I have a Mr. Marion from Marionville—same name; he has waited 18 months to get a knee replacement. It’s a shame, really, what you have.

Today, we have invested for the future of our people, and we don’t believe in two-tier health care.

Another position: On the Hull side, they opened up a clinic—whoever wants to go—and they are going to expand. Do you know how much it costs to go over there? This is what I call a two-tier health care system. It is costing \$225 for a person to go and see a doctor on the other side. They are going to expand—now they’re coming, we should have that in Ontario. You know what that means? Seniors wouldn’t have access to any doctors because the doctors at the present time get something like \$28.50 per visit, which lasts about 10 minutes. In this case, they would get \$225, no matter if people are going for this.

Another case: When I look at what was going to happen under the previous government, when they said to the people, “We will cap the hydro, the electricity, at 4.3 cents,” again, we never got the right story. It did cost the taxpayers of Ontario over \$1 million, because you didn’t figure out how much it was costing. No wonder nobody wants to establish or open up a generating station in Ontario.

**Mr. Ted Arnott (Waterloo–Wellington):** I’m glad to have this chance to speak briefly in support of the motion being put forward on hospital funding. I must take this opportunity to inform the House of the exciting work that’s being done in Centre Wellington to raise money to redevelop Groves Memorial Community Hospital in Fergus, which will serve the health needs of our community for the next generation.

Mrs. Janet Vallery, the chair of the Groves Hospital Foundation, and her team of volunteers and staff have spearheaded an enormously successful fundraising effort

which has raised \$14.3 million—approximately 96% of their targeted goal of \$15 million.

**1730**

We were very encouraged recently by the visit to the Fergus hospital of the Ministry of Health’s director of capital planning, Bill Bailey. Our capable executive director, Carolyn Skimson, has been working closely with ministry staff to obtain approval for the next stage of the redevelopment project, which will allow the hospital to commence functional planning and design planning.

There is a strong sense of anticipation in our community, given the success of our local fundraising effort, and we are now waiting for the provincial government to do the right thing and allow us to move ahead. The minister can be assured that if our area is not treated fairly, he will hear from its member of provincial Parliament.

In conclusion, I will be supporting this motion to hold the government to account for its campaign promises on hospital funding, nurses and waiting lists, and I call upon the government to redouble its efforts to deliver the quality health care services Ontarians claim as their right.

**Ms. Kathleen O. Wynne (Don Valley West):** I’m happy to join in this debate. I think it’s a very serious issue.

I understand the job of the opposition, which is to hold the government to account. The Leader of the Opposition talked about disrespect of this place. One of the things that I think is disrespectful of this place is an opposition that, yes, tries to hold the government to account, but has no ideas, has no memory of how we got to where we are in this province and isn’t able to come up with suggestions that could actually provide for a debate that would allow some creation of a better solution.

When I look at this motion, it’s really a hollow shell. It doesn’t lay out what the plan could be or what the suggestions could be. So I don’t know what Mr. Tory stands for—except, as my colleague talked about today, we know for sure that the Conservatives in this country are not interested in public health care; they’re interested in privatizing. The Leader of the Opposition is on record as being supportive of private health care. I think we have to hold that in mind as we go ahead and implement our plans.

The Leader of the Opposition talked about us having no plan. I think we are nothing if not a government that has a plan. We have a plan to pull together the services across this province into local health integration networks and to coordinate the delivery of service. We have a plan, which over 200 communities have applied for, to put family health teams in place that will leverage the ability of our family practitioners to deliver service in this province and provide the access to a family practitioner that many people across the province don’t have at this point. In fact, during the previous regime, people lost access to family doctors.

So I think that to accuse us of not having a plan is really a hollow sort of accusation. The reality is that

we're the first government in many decades, I would suggest, that has actually looked at the health care system and has said, "OK, these are the pieces that we need to retool, and we're not just going to talk about retooling them." So we're not just going to close health care beds and hospital beds and not put home care services in place. We're actually going to increase home care, which is needed especially among our seniors. We've increased services to people who are staying in their homes.

We understand that in order to deal with the patient boom—Mr. Tory is a little bit younger than I am, but I'm part of the patient boom. I'm the baby boom that's going to become the patient boom. If we don't have a different way of delivering medicine in this province, we are not going to be able to deal with the problems that many of my colleagues and I are going to bring to the health care system.

The Leader of the Opposition talks in his motion about the delivery of funds to hospitals so they can plan. That isn't what happened in the previous regime. In the previous regime, hospital boards had to wait past their deadlines and in fact had to plan based on previous years' budgets. They didn't have access to their funds.

The Leader of the Opposition attempts to distance himself from the record of the Harris-Eves government, and I suppose that's the only strategy he can come up with at this point. But because this province needs to know what this opposition party has in store for them, the question I have to ask is, when they take \$2.4 billion out of the health care budget, what are they going to do?

We can't actually look back on the Leader of the Opposition when all the Harris decisions were being made, because he was very silent. Where was the Leader of the Opposition between 1995 and 2003? He's a well-connected Toronto person. Where was he when the Harris-Eves government was ripping the heart out of this province? He was silent. He was in a back room. He was not taking a stand.

So what we can look to this party for is an attack, but we can't look for a plan. We can't look for substance. We can only look for political gamesmanship, and that's not what this province needs. This province needs people who are thinking about the fact that family practitioners and surgeons need guidelines. They need to understand how they're going to deal with all the people like me who are aging, when there are more and more procedures available to them.

We need a plan in place, and that's what we are doing. We don't know where this man stands. We know that it's for private health care.

**Mr. John O'Toole (Durham):** After that outrage from the member from Don Valley West, I want to change the tone to patient focus. I can only think, with the rage that was being demonstrated here by the last speaker, of the hard work that's been done by Lakeridge Health, the hospital board, the volunteer board. This Thursday night, at this very time, the hospital is dealing with—

*Interjections.*

**The Acting Speaker:** Order, please.

**Mr. O'Toole:** —an \$18-million deficit. This inevitably means, under this government, cuts to services.

I can stand here today and tell you that I'll be supporting John Tory's resolution. With all the muster I can gather, I ask the members of government to listen and support this resolution. It's the right thing to do.

**Mrs. Julia Munro (York North):** I'm pleased to join in this opposition day motion today. Having sat here and listened to the members of the government try to provide revisionist history, it requires a response: \$10 billion increased spending on health care during the period from 1995 to 2003; a change from 11 cents on the federal contribution to 14. These are the facts that provided the kinds of changes we had in health care.

In supporting this motion, I phoned my local doctor and asked him about the kinds of situations he sees as a practitioner. He can tell me that emergency services now require a wait of eight to 10 hours, even for those patients who are significantly ill. Waiting after a radiologist's test means that a patient who was seen in emergency on March 20 has to wait until May 15 for a CAT scan. For the kinds of things we discussed, I asked him if things were worse than last year, and he said yes. He said that both doctors trying to see patients and hospitals trying to serve through the emergency services are overwhelmed.

When we look at the nature of the motion we are debating here today, I think there is clear evidence that the effects of the lack of planning of this government are very obvious in my community.

1740

**Mr. Cameron Jackson (Burlington):** First of all, I'd like to say that this isn't the first time that I and members of our caucus have been on their feet bringing to the attention of members of this House the concerns in our communities with respect to hospital funding. I can say that in the 21 years I've been in this Legislature, my hospital has stated publicly that this is the first year they've had to carry over a deficit. Even through the periods of time of a former Liberal government and a former NDP government, this is the first time they have had to carry these deficits.

Secondly, it has resulted in severe cutbacks. The total number of beds that were allocated under the restructuring commission for our community was 85 beds. Not only did we not get the 85 beds, but 25 beds have been shut down. They're there; I was there looking at them the other day. What happens when you don't fund, as a government, 24 beds in a community that's growing as rapidly as Burlington? You force the cancellation of surgeries and you force longer waiting lists. We've had more surgery cancellations at Joe Brant hospital in the last three months than in the entire last 10 years. This matter is serious. Quite frankly, the issue of resourcing our hospitals is growing to a critical level, especially in the growth areas of the 905.

I want to put on the record how vitally important this is to our community and communities all across Ontario, that our hospitals get resourced properly. I know we need

to get more money from the federal government. We know we need to look at our priorities and re-examine better ways to make them efficient, but the bottom line is, people are living longer. They are coming with more acute illnesses. The technology to serve them is more expensive. The availability of doctors is down. These are the challenges. In the short term, until the master plan, whatever it is, is revealed to us, the fact is, we're going to need more money in order to ensure that these services are done properly.

I wanted to put that on the record. I support my leader and the fact that health care is such a priority for all members of this House, but particularly on this side of the House.

**Mr. Jim Flaherty (Whitby–Ajax):** I'm honoured to have a few minutes to speak to this motion, which is vitally important for the people of Ontario. It's certainly vitally important for the people of Durham region.

Lakeridge Health, in its many sites in Durham region, was created following the idea that a regional hospital would provide better service for people, and people sacrificed all across Durham region to create the regional hospital. They gave up on some of their local services. The whole idea was that a regional hospital system would serve the people better, and in fact it has. More than that, the volunteer board of directors of Lakeridge Health, a multi-site hospital health centre, balanced the budget. They bit the bullet. They made the difficult decisions that Premier McGuinty talked about today, making difficult decisions. They made those decisions. Their reward has been their increase this year—this is after they did the right thing. Lakeridge Health received less than a 1% increase, when our costs are going up by 8%.

What does that mean for the people of Durham region? The highest growth area, not just in the province of Ontario but in our entire country, is Durham region. A tremendous number of young families, a multi-site hospital—I asked the Minister of Health about additional funding for multi-site hospitals because it's more expensive to run a multi-site hospital, and he said that was something they were going to look into. They haven't done it. Huge growth, multi-site, many young families—less than 1%. The consequence of that tomorrow night will be released in Port Perry when the hospital officials, including the CEO, will be obliged to follow through on layoffs, including layoffs of nurses.

So thank you very much, Liberal government. Thank you for what you've done to the people of Durham region. The highest growth area in the entire country, all of the young people, all of the children, all of the hard-working taxpayers; what they get, once their board of directors did what it should have done and the administration balanced the budget, is a slap in the face: higher taxes and less service. Thank you, on behalf of the people of Durham region, for treating them with such disdain in terms of health services.

**Mrs. Elizabeth Witmer (Kitchener–Waterloo):** I'm pleased to join the debate on the motion that has been put forward by my leader today. I believe that if the Liberal government and Premier McGuinty vote against this

motion today, it will send a strong signal to health stakeholders and the people in this province that when they introduced Bill 8, there was indeed a hidden agenda to cut programs and to cut services—and we're seeing that.

Last fall, hospitals were asked to submit their balanced budgets—balanced budgets that would mean that if they were going to be balanced, there would be program cuts, program reductions and the need for firing staff. Well, we saw this Liberal government in action in the winter of this year when they announced there would be \$91 million given to hospitals to fire staff—787 nurses. Unbelievable. This from a government that in the election promised people that they were going to hire an additional 8,000 nurses. Can you imagine the shock of people in this province, the shock of people in the hospitals to see this firing of 700-plus nurses? Unbelievable—and it gets worse.

Last week this minister of health mused—and again, we now know there is a hidden agenda. They have refused to release the balanced budget proposals from the hospitals despite the fact that they talk about democratic renewal and despite the fact that they talk about transparency. Now we see this minister muse about the fact that he's going to consolidate services.

Does this mean that the people in Georgetown, who had thought that they were going to lose their obstetrics unit, are again going to have to fear its removal? Does this mean that we're going to see cancer, radiation and chemotherapy services removed from hospitals and moved to other communities? Do people now have to live in fear that cardiac services and dialysis are going to be taken out of their community, services that our government worked so hard to bring close to home? I would suggest to the people in the province of Ontario that that is exactly what is going to happen. We are going to see the consolidation of services. We are going to see the reduction of programs and services in rural communities and small communities throughout Ontario. There is a hidden agenda, and the agenda is, despite the fact that people are paying \$2.4 billion more in an illegal health tax, they are going to see fewer services, we are going to have fewer nurses and we're going to have fewer health care professionals. So if you vote against this motion today, it confirms that this government has a hidden agenda to reduce health services for people in the province.

**The Acting Speaker:** It now being 5:50 of the clock, it's time to call the question. Mr. Tory has moved opposition day number one. Is it the pleasure of the House that this motion carry?

All those in favour of the motion will please say "aye."

All those opposed will please say "nay."

In my opinion, the nays have it.

Would you please call in the members; a 10-minute bell.

*The division bells rang from 1748 to 1758.*

**The Acting Speaker:** All those in favour will please stand and be recognized by the Clerk.

**Ayes**

Arnott, Ted  
Baird, John R.  
Barrett, Toby  
Chudleigh, Ted  
Flaherty, Jim  
Hampton, Howard  
Hudak, Tim  
Jackson, Cameron

Klees, Frank  
Kormos, Peter  
Martel, Shelley  
Miller, Norm  
Munro, Julia  
Murdoch, Bill  
O'Toole, John  
Ouellette, Jerry J.

Runciman, Robert W.  
Scott, Laurie  
Sterling, Norman W.  
Tascona, Joseph N.  
Tory, John  
Witmer, Elizabeth  
Yakabuski, John

Brownell, Jim  
Cansfield, Donna H.  
Caplan, David  
Colle, Mike  
Crozier, Bruce  
Delaney, Bob  
Dombrowsky, Leona  
Duguid, Brad  
Flynn, Kevin Daniel  
Fonseca, Peter  
Gerretsen, John

Matthews, Deborah  
Mauro, Bill  
McNeely, Phil  
Meilleur, Madeleine  
Mitchell, Carol  
Mossop, Jennifer F.  
Oraziotti, David  
Parsons, Ernie  
Patten, Richard  
Peterson, Tim  
Phillips, Gerry

Ruprecht, Tony  
Sandals, Liz  
Sergio, Mario  
Smith, Monique  
Smitherman, George  
Sorbara, Gregory S.  
Van Bommel, Maria  
Wong, Tony C.  
Wynne, Kathleen O.  
Zimmer, David

**The Acting Speaker:** All those opposed will please stand and be recognized by the Clerk.

**Nays**

Arthurs, Wayne  
Bartolucci, Rick  
Bentley, Christopher  
Berardinetti, Lorenzo  
Bradley, James J.  
Broten, Laurel C.

Hoy, Pat  
Jeffrey, Linda  
Lalonde, Jean-Marc  
Leal, Jeff  
Levac, Dave  
Marsales, Judy

Pupatello, Sandra  
Qadri, Shafiq  
Racco, Mario G.  
Ramal, Khalil  
Ramsay, David  
Rinaldi, Lou

**The Clerk of the Assembly (Mr. Claude L. DesRosiers):** The ayes are 23; the nays are 50.

**The Acting Speaker:** I declare the motion lost.

It now being after 6 o'clock, this House stands adjourned until 6:45 this evening.

*The House adjourned at 1801.*

*Evening meeting reported in volume B.*

**LEGISLATIVE ASSEMBLY OF ONTARIO**  
**ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO**

Lieutenant Governor / Lieutenant-gouverneur: Hon. / L'hon. James K. Bartleman  
Speaker / Président: Hon. / L'hon. Alvin Curling  
Clerk / Greffier: Claude L. DesRosiers  
Deputy Clerk / Sous-greffière: Deborah Deller  
Clerks-at-the-Table / Greffiers parlementaires: Todd Decker, Lisa Freedman  
Sergeant-at-Arms / Sergent d'armes: Dennis Clark

Constituency Circonscription	Member/Party Député(e) / Parti	Constituency Circonscription	Member/Party Député(e) / Parti
Algoma–Manitoulin	Brown, Michael A. (L)	Hamilton Mountain	<b>Bountrogianni, Hon. / L'hon. Marie</b> (L) Minister of Children and Youth Services, Minister of Citizenship and Immigration / ministre des Services à l'enfance et à la jeunesse, ministre des Affaires civiles et de l'Immigration
Ancaster–Dundas– Flamborough–Aldershot	McMeekin, Ted (L)	Hamilton West / Hamilton-Ouest	Marsales, Judy (L)
Barrie–Simcoe–Bradford	<b>Tascona, Joseph N.</b> (PC) First Deputy Chair of the Committee of the Whole House / Premier Vice-Président du Comité plénier de l'Assemblée législative	Hastings–Frontenac–Lennox and Addington	<b>Dombrowsky, Hon. / L'hon. Leona</b> (L) Minister of the Environment / ministre de l'Environnement
Beaches–East York / Beaches–York-Est	Prue, Michael (ND)	Huron–Bruce	Mitchell, Carol (L)
Bramalea–Gore–Malton– Springdale	Kular, Kuldip (L)	Kenora–Rainy River	Hampton, Howard (ND) Leader of the New Democratic Party / chef du Nouveau Parti démocratique
Brampton Centre / Brampton-Centre	Jeffrey, Linda (L)	Kingston and the Islands / Kingston et les îles	<b>Gerretsen, Hon. / L'hon. John</b> (L) Minister of Municipal Affairs and Housing, minister responsible for seniors / ministre des Affaires municipales et du Logement, ministre délégué aux Affaires des personnes âgées
Brampton West–Mississauga / Brampton-Ouest–Mississauga	Dhillon, Vic (L)	Kitchener Centre / Kitchener-Centre	Milloy, John (L)
Brant	Levac, Dave (L)	Kitchener–Waterloo	Witmer, Elizabeth (PC)
Bruce–Grey–Owen Sound	Murdoch, Bill (PC)	Lambton–Kent–Middlesex	Van Bommel, Maria (L)
Burlington	Jackson, Cameron (PC)	Lanark–Carleton	Sterling, Norman W. (PC)
Cambridge	Martiniuk, Gerry (PC)	Leeds–Grenville	Runciman, Robert W. (PC)
Chatham–Kent Essex	Hoy, Pat (L)	London North Centre / London-Centre-Nord	Matthews, Deborah (L)
Davenport	Ruprecht, Tony (L)	London West / London-Ouest	<b>Bentley, Hon. / L'hon. Christopher</b> (L) Minister of Labour / ministre du Travail
Don Valley East / Don Valley-Est	<b>Caplan, Hon. / L'hon. David</b> (L) Minister of Public Infrastructure Renewal, Deputy House Leader / ministre du Renouvellement de l'infrastructure publique, leader parlementaire adjoint	London–Fanshawe	Ramal, Khalil (L)
Don Valley West / Don Valley-Ouest	Wynne, Kathleen O. (L)	Markham	Wong, Tony C. (L)
Dufferin–Peel– Wellington–Grey	Tory, John (PC) Leader of the Opposition / chef de l'opposition	Mississauga Centre / Mississauga-Centre	<b>Takhar, Hon. / L'hon. Harinder S.</b> (L) Minister of Transportation / ministre des Transports
Durham	O'Toole, John (PC)	Mississauga East / Mississauga-Est	Fonseca, Peter (L)
Eglinton–Lawrence	Colle, Mike (L)	Mississauga South / Mississauga-Sud	Peterson, Tim (L)
Elgin–Middlesex–London	<b>Peters, Hon. / L'hon. Steve</b> (L) Minister of Agriculture and Food / ministre de l'Agriculture et de l'Alimentation	Mississauga West / Mississauga-Ouest	Delaney, Bob (L)
Erie–Lincoln	Hudak, Tim (PC)	Nepean–Carleton	Baird, John R. (PC)
Essex	<b>Crozier, Bruce</b> (L) Deputy Speaker, Chair of the Committee of the Whole House / Vice-Président, Président du Comité plénier de l'Assemblée législative	Niagara Centre / Niagara-Centre	Kormos, Peter (ND)
Etobicoke Centre / Etobicoke-Centre	Cansfield, Donna H. (L)	Niagara Falls	Craiton, Kim (L)
Etobicoke North / Etobicoke-Nord	Qaadri, Shafiq (L)	Nickel Belt	Martel, Shelley (ND)
Etobicoke–Lakeshore	Broten, Laurel C. (L)	Nipissing	Smith, Monique M. (L)
Glengarry–Prescott–Russell	Lalonde, Jean-Marc (L)	Northumberland	Rinaldi, Lou (L)
Guelph–Wellington	Sandals, Liz (L)	Oak Ridges	Klees, Frank (PC)
Haldimand–Norfolk–Brant	Barrett, Toby (PC)	Oakville	Flynn, Kevin Daniel (L)
Haliburton–Victoria–Brook	Scott, Laurie (PC)	Oshawa	Ouellette, Jerry J. (PC)
Halton	Chudleigh, Ted (PC)	Ottawa Centre / Ottawa-Centre	Patten, Richard (L)
Hamilton East / Hamilton-Est	Horwath, Andrea (ND)		

Constituency Circonscription	Member/Party Député(e) / Parti	Constituency Circonscription	Member/Party Député(e) / Parti
Ottawa South / Ottawa-Sud	<b>McGuinty, Hon. / L'hon. Dalton (L)</b> Premier and President of the Executive Council, Minister of Intergovernmental Affairs / premier ministre et président du Conseil exécutif, ministre des Affaires intergouvernementales	Stoney Creek Stormont–Dundas– Charlottenburgh Sudbury	Mossop, Jennifer F. (L) Brownell, Jim (L)
Ottawa West–Nepean / Ottawa-Ouest–Nepean	<b>Watson, Hon. / L'hon. Jim (L)</b> Minister of Consumer and Business Services / ministre des Services aux consommateurs et aux entreprises	Thornhill Thunder Bay–Atikokan Thunder Bay–Superior North / Thunder Bay–Superior- Nord	<b>Bartolucci, Hon. / L'hon. Rick (L)</b> Minister of Northern Development and Mines / ministre du Développement du Nord et des Mines Racco, Mario G. (L) Mauro, Bill (L) Gravelle, Michael (L)
Ottawa–Orléans Ottawa–Vanier	McNeely, Phil (L) <b>Meilleur, Hon. / L'hon. Madeleine (L)</b> Minister of Culture, minister responsible for francophone affairs / ministre de la Culture, ministre déléguée aux Affaires francophones	Timiskaming–Cochrane	<b>Ramsay, Hon. / L'hon. David (L)</b> Minister of Natural Resources / ministre des Richesses naturelles Bisson, Gilles (ND)
Oxford Parkdale–High Park	Hardeman, Ernie (PC) <b>Kennedy, Hon. / L'hon. Gerard (L)</b> Minister of Education / ministre de l'Éducation	Timmins–James Bay / Timmins–Baie James Toronto Centre–Rosedale / Toronto–Centre–Rosedale	<b>Smitherman, Hon. / L'hon. George (L)</b> Minister of Health and Long-Term Care / ministre de la Santé et des Soins de longue durée Churley, Marilyn (ND) Marchese, Rosario (ND) <b>Sorbara, Hon. / L'hon. Greg (L)</b> Minister of Finance / ministre des Finances
Parry Sound–Muskoka Perth–Middlesex Peterborough Pickering–Ajax–Uxbridge Prince Edward–Hastings Renfrew–Nipissing–Pembroke Sarnia–Lambton Sault Ste. Marie Scarborough Centre / Scarborough–Centre Scarborough East / Scarborough–Est	Miller, Norm (PC) Wilkinson, John (L) Leal, Jeff (L) Arthurs, Wayne (L) Parsons, Ernie (L) Yakabuski, John (PC) Di Cocco, Caroline (L) Oraziotti, David (L) Duguid, Brad (L)	Toronto–Danforth Trinity–Spadina Vaughan–King–Aurora	<b>Arnott, Ted (PC)</b> First Deputy Chair of the Committee of the Whole House / Premier Vice-Président du Comité plénier de l'Assemblée législative Flaherty, Jim (PC) Zimmer, David (L) <b>Pupatello, Hon. / L'hon. Sandra (L)</b> Minister of Community and Social Services, minister responsible for women's issues / ministre des Services sociaux et communautaires, ministre déléguée à la Condition féminine <b>Duncan, Hon. / L'hon. Dwight (L)</b> Minister of Energy, Chair of Cabinet, Government House Leader / ministre de l'Énergie, président du Conseil des ministres, leader parlementaire du gouvernement
Scarborough Southwest / Scarborough–Sud-Ouest Scarborough–Agincourt	<b>Chambers, Hon. / L'hon. Mary Anne V. (L)</b> Minister of Training, Colleges and Universities / ministre de la Formation et des Collèges et Universités Berardinetti, Lorenzo (L)	Waterloo–Wellington	<b>Windsor West / Windsor-Ouest</b>
Scarborough–Rouge River	<b>Phillips, Hon. / L'hon. Gerry (L)</b> Chair of the Management Board of Cabinet / président du Conseil de gestion du gouvernement	Whitby–Ajax Willowdale Windsor West / Windsor-Ouest	<b>Windsor–St. Clair</b>
Simcoe North / Simcoe–Nord Simcoe–Grey St. Catharines	<b>Curling, Hon. / L'hon. Alvin (L)</b> Speaker / Président Dunlop, Garfield (PC)  Wilson, Jim (PC) <b>Bradley, Hon. / L'hon. James J. (L)</b> Minister of Tourism and Recreation / ministre du Tourisme et des Loisirs	Windsor–Wellington	<b>Windsor–St. Clair</b>
St. Paul's	<b>Bryant, Hon. / L'hon. Michael (L)</b> Attorney General, minister responsible for native affairs, minister responsible for democratic renewal / procureur général, ministre délégué aux Affaires autochtones, ministre responsable du Renouveau démocratique	Windsor–St. Clair	<b>Windsor–St. Clair</b>
		York Centre / York–Centre	<b>Windsor–St. Clair</b>
		York North / York–Nord York South–Weston / York–Sud–Weston	<b>Windsor–St. Clair</b>
		York West / York–Ouest	<b>Windsor–St. Clair</b>

A list arranged by members' surnames and including all responsibilities of each member appears in the first and last issues of each session and on the first Monday of each month.

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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