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**Wednesday 29 November 2006**

**Mercredi 29 novembre 2006**

Speaker  
Honourable Michael A. Brown

Président  
L'honorable Michael A. Brown

Clerk  
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LEGISLATIVE ASSEMBLY  
OF ONTARIO

Wednesday 29 November 2006

ASSEMBLÉE LÉGISLATIVE  
DE L'ONTARIO

Mercredi 29 novembre 2006

*The House met at 1845.*

ORDERS OF THE DAY

LONG-TERM CARE HOMES ACT, 2006

LOI DE 2006 SUR LES FOYERS  
DE SOINS DE LONGUE DURÉE

Resuming the debate adjourned on October 24, 2006, on the motion for second reading of Bill 140, An Act respecting long-term care homes / Projet de loi 140, Loi concernant les foyers de soins de longue durée.

**The Deputy Speaker (Mr. Bruce Crozier):** Further debate?

**Mr. Peter Kormos (Niagara Centre):** I'm very pleased that my caucus has permitted me to be here this evening to debate Bill 140, to participate in this. As you know, our critic Shelley Martel, the member for Nickel Belt, did the lead on this several days ago. She's had a long-time interest in the status of long-term-care homes, long-term-care facilities, seniors' homes here in the province of Ontario, an interest that her caucus colleagues and I'm sure many others in this chamber share with her. Look, at the end of the day, this is where our folks go; this is where our grandfolks go. This is where we go, should we be lucky enough to live that long.

The interesting thing about these long-term-care homes, long-term-care facilities, is that the age of people going into them is older, and one can at least anecdotally and logically presume that the period of time that people spend in them is longer. People are living to older ages. Because of pharmaceuticals and medical technology, people at older ages can keep living longer.

Some of the tragedies—and Mr. Bradley will know this because he visits some of the same long-term-care facilities down in Niagara as I do, whether they're private or public. Some of the shocking experiences are to visit the Alzheimer's wings of these facilities. The remarkable thing about Alzheimer's disease is that it isn't a disease that's exclusive to the very old or even the old. All of us in our constituency offices have worked with families who are caring for a loved one—a parent, a spouse and, from time to time a child, an elderly child—who has Alzheimer's.

First, I want to praise. Down in the Niagara region, we have a system of public long-term-care homes. It was Doug Rapelje who many years ago now acquired

stewardship of Sunset Haven in Welland, which is no longer there; it's been abandoned and the new facility has been built. But Doug Rapelje is one of the leading experts and standard-setters for long-term care in this province and has been acknowledged across this country. We've been very blessed down in Niagara to have had Doug Rapelje stewarding the development of long-term-care facilities—public ones—as well as a regional government that has maintained a strong commitment to public facilities.

I will say that there are some excellent private sector facilities in Niagara—in fact, a recent one that's close to opening in Welland—and there's certainly a need for them, because the public sector is not developing beds quickly enough to accommodate all the demand. The problem, obviously, with the private sector is that it is profit-driven. That, in and of itself, may not be a problem, but it means that fees have to be much higher than they are in the non-profit sector, or, if they're not much higher, the services are much lower and people are put at risk.

1850

The pressure on long-term-care beds is nothing today compared to what it's going to be 10 years from now when Mr. Bradley and I, as baby boomers—he amongst the older baby boomers; myself literally amongst the youngest, the last of the baby boomers. In 10 years' time, 15 years' time, the pressure on long-term-care facilities is going to be enormous. We aren't even close to being prepared in terms of capacity, not by a long shot.

That same pressure, of course, is going to extend into our health care system. One of the sad things is when hospitals are used, effectively, for long-term care because there aren't long-term-care beds available. It's an incredibly expensive proposition. Understaffed hospitals provide less direct attention from time to time—and again, I'm not being critical, because I understand. I've been in the long-term-care portions of our local hospitals. I've seen the staff, just like they do in long-term-care facilities, literally breaking their backs. You see, one of the biggest problems with staff in long-term-care facilities caring for seniors is injuries. Back injuries are common, incredibly common. Workplace pressure with understaffing is incredibly common. I find the staff in these places to be incredibly committed, incredibly professional. Of course, in the private sector they tend to be very modestly paid. Even in the public sector, long-term-care staff are not particularly well paid. So the people, the women and men, aren't in it for the money, so to speak, not by a long

shot. The folks working in long-term care have a real passion about their jobs, a real commitment, and an increasingly higher and higher level of professionalism. The standards of training for staff in long-term-care facilities have increased dramatically over the years. Of course, community colleges as well as universities have participated in that.

New Democrats have for a long time been concerned about the status of our folks and grandfolks in our long-term-care facilities. We have been concerned for a long time about the availability of public non-profit beds because, as I say, in the private sector it's profit-driven, and that's understandable. It's the private sector. But that means the client, the resident, has to be charged not only for the care they receive but also for the profit margin of the operator. That in and of itself is not a criticism; it's just a reality. That's the nature of that particular animal.

The public in Ontario was concerned about the status of their folks and grandfolks in long-term-care facilities during the course of the last government. That's why, no doubt, the Liberals campaigned with promises about long-term care. They made promises. They promised to increase the amount of direct staff contact with residents on a daily basis, to establish clear minimums. Promise broken. Liberals made promises as basic and as fundamental as ensuring that residents would get more than one bath a week. Promise broken.

In our long-term-care homes, our folks and grandfolks are sitting in their own waste. Let me tell you what one long-term-care facility—in this instance, it happens to be a private one in Niagara region—does. I was there. It was a manufacturer of adult incontinent pads that, when they're over 60% saturated, turn purple, and the staff are forbidden to change—these are adult diapers. I'm sorry. I know I'm going to be criticized for that. I'm not supposed to call them that. There but for the grace of God go any of us now, and with some high level of certainty, should we live long enough. Unless the fabric has turned purple, being over 60% saturated, the staff are forbidden to change that diaper. So if you're only a little bit damp, you sit in it, or if there's more solid waste than urine, you sit in it.

Most of us bathe at least once a day. We consider it a norm, a given. Many people bathe twice a day or more a day, if they go to the gym or bicycle to work. For residents, for our folks and our grandfolks, in long-term-care facilities to not have an adequate number—guaranteed—in terms of baths per week is atrocious. I don't necessarily like making the prison analogy, but if you go to the local lock-up, you get to shower every day. Think about it. You go to a long-term-care facility, and hopefully it's not just a sponge bath. If you want anything even close, even remotely close, to daily or every-other-day bathing, you've got to hire private aides or have family who visit with you. One of the problems with that is that families aren't structured the way they historically had been. Increasing numbers of families don't have children; and families that have children, as often as not, their kids are spread out all over North America, all over

the world. They're not there to care for their parents. They're simply not geographically located such that they can do it.

Ms. Martel, our critic, the member for Nickel Belt, has indicated, and I have indicated as House leader in conversations with Mr. Bradley, the government House leader, that this bill is going to require, this bill cries out for, this bill calls out for, this bill demands the issue, insists that the public of Ontario have an opportunity to attend before a tripartite committee, a standing committee of this House, and, first of all, talk about the inadequacy of this bill in terms of establishing—guaranteeing—real, adequate, fair, humane and civilized minimum standards for every resident of every long-term-care facility in every part of this province, from Toronto and other big-city Ontario with dense populations all the way through to the far north with its remote communities and significantly diminished support systems.

It's naive, I put it to you, to talk about long-term care without talking about people living in their own homes as seniors. That means community care, home care. It remains that in our constituency offices, one of the more frequent concerns expressed to our staff and to us are concerns by families about the inadequacy of home care for their folks, for their spouses or for a child. You see, the longer people stay in their own homes, the healthier they remain, the more dignity they retain, and the less expensive it is to care for them. If they stay healthier, it saves the taxpayer money because they don't need hospital treatment, health care treatment. If they stay in their own homes, they don't need a bed in a public or private facility.

#### **1900**

This isn't rocket science. This is pretty basic stuff. For the life of me—again, I know the people who work in home care. I was disgusted with this government when they retained, in fact sustained, the so-called competitive bidding by home care providers so that good, committed, professional staff from non-profit organizations like the Victorian Order of Nurses—you know it. Every one of you knows it, because it was an issue in each and every one of your ridings. Some of these organizations, like the VON, Victorian Order of Nurses, the Red Cross, had to disband locally. They were committed to providing that home care. But what happened is that the private sector, for-profit operators, underbid them, knowing that they, the private sector, for-profit operators, once they got their foot in the door, were going to maintain and control a monopoly, because the non-profits were gone. They disappeared; they evaporated. And you know what's going on as well as I do. By and large, the for-profit operators in home care, with lower wages, less trained staff and higher staff turnover, are focusing on the easiest-to-care-for seniors, which means the most dramatically vulnerable seniors get no care. That's what happens. That's what's happening right now.

New Democrats believe that the public of Ontario, the people of this province, the residents of this provincial community, have to have the opportunity, indeed the

right, to speak to this bill, to speak about the inadequacy of the bill and to speak to their concerns regarding long-term care and what they expect this government to do to address those concerns.

I spoke to Mr. Bradley just the other day and indicated, along with Ms. Martel, our health care critic, that maybe some of the long-term-care facilities themselves might be appropriate venues for these committee hearings, because let's not be dismissive of our seniors. Seniors in our long-term-care homes can tell their own stories, I tell you, quite, quite well. So I say to the government that the standing committee that travels with this bill should also be visiting long-term-care facilities in the province of Ontario and hear from the seniors themselves about the inadequacy of bathing, about the inadequacy of personal care, about the inadequacy of the food budgets. Good grief, there's a whole pile of people in this chamber who will spend more on one martini at Bigliardi's than is allowed in the whole daily budget for a senior in a long-term-care facility—a whole lot of them. Do you know that, Speaker? It's incredible how parsimonious people can be in this chamber when it comes to taking care of other folks, but how generous they can be when it comes to taking care of themselves—the undercurrent of a demand to restore a pension plan, a gold-plated pension plan, for MPPs, and the undercurrent of a demand for substantial increases in wages by MPPs. They wouldn't wait a New York minute to give themselves salary increases if they thought they could get away with it in here, but when it comes to a few extra dollars a day to guarantee adequate levels of care for our folks and grandfolks in long-term-care facilities, this government wrings its hands and says, "Oh, we feel your pain." Those folks and our grandfolks don't want you to feel their pain; they want you to deal with their pain. That means making the investments you promised in the last election campaign.

**The Deputy Speaker:** Questions and comments? There being none, further debate?

**Mr. Ernie Hardeman (Oxford):** I'm pleased to rise today to bring forward concerns from seniors and long-term-care providers in my riding, the great riding of Oxford.

On October 3, the Minister of Health and Long-Term Care introduced a bill entitled Bill 140, An Act respecting long-term care homes. Concerned caregivers and their families called Bill 140 a "care less act." One of the many promises that the McGuinty Liberals made during the 2003 election was to provide increased funding of \$6,000 and 20 minutes of additional daily care for each long-term-care resident. This bill, of course, does nothing of the kind. Bill 140 breaks that promise to seniors. People have worked hard throughout their lives and now deserve to live in comfort and dignity.

Last Friday I met with representatives of peopleCare nursing home in Tavistock, Maple Manor Nursing Home in Tillsonburg, Oxford Regional Long-Term Care Facility in the great town of Ingersoll, and Caressant Care facilities in Woodstock. These providers of nursing home

service in Oxford were very concerned with Bill 140 and the impact that it would have on their long-term-care facilities.

In their visit to my office, they brought postcards signed by hundreds of my constituents—people who are presently in long-term-care facilities, people who have family in long-term-care facilities and just general community people. I just want to read for the record what the people who signed these postcards wrote, and which they brought to my office on the expectation that I would bring them here to Queen's Park and tell the government how they felt about—

**Mr. John O'Toole (Durham):** Is that the "forgotten" campaign?

**Mr. Hardeman:** Yes. The member from Durham asked about what the campaign is. It says, "The Ontario government has forgotten. Help the government remember." I don't bring these in as a prop, Mr. Speaker. This is strictly based on what the people asked me to bring here to Queen's Park.

**The Deputy Speaker:** I'll be the judge of that.

**Mr. Hardeman:** Exactly. Thank you very much, Speaker. I just wanted to explain my position.

The postcard reads, "The recently proposed Long-Term Care Homes Act promises comfort and dignity for all long-term-care residents, but for over 35,000 of them who live in older homes, the promise is empty.

"They will continue to live in three- or four-bed wards and to line up in wheelchairs for crowded dining rooms, uncertain even about the future of their homes in their communities.

"They are the forgotten. Government has no vision or plan for them.

"Instead of a commitment to secure their future and their home, this legislation:

"—limits the operating licence of their home to as little as 10 years, with no answer to their question of what happens next, and

"—makes no commitment to fund the structural renewal of the older (B and C) homes as is being done for new homes and recently rebuilt (D) homes.

"Please ask government to remove the cloud of uncertainty they have placed over these residents, their families and communities by amending the proposed licensing scheme and committing to fund the renewal of older homes now.

"They deserve a commitment and plan now, not 10 years from now."

As I said, well over 300 were presented to me last Friday, and more are arriving in my office each and every day. I think it's very important that we have them on the record and to understand what this bill does to our long-term-care facilities. I read into the record a few moments ago the ones that visited mine.

**1910**

We will all know in this House that a number of years ago the previous government put a program in place that would supplement the daily fee per resident for D homes that needed to be upgraded to A homes. When that

upgrading was done, the owners of that facility would use the extra money per day to fund the capital cost of that home. As that has moved along, of course, we have the B and the C facilities that need to be upgraded to that same standard as the D homes have been upgraded to, but they have no program in place that will fund that capital expenditure. The extra funding that went into the homes that have presently been built is not extended to a C facility home. Where would the owner of that home now get the financing and the ability to upgrade that home?

Of course, the first thing we would hear from the government is that they should go to the bank and borrow the money to build the upgraded home, but when they go to the bank to arrange for the mortgage, the banker says, "Mr. Operator, how do you intend to pay off the mortgage on this facility?" which we all agree should be provided for our residents. And the operator says, "Well, we'll do our best, but the revenue stream that's presently coming in is all I'm going to have. Furthermore, I'm guaranteed only 10 more years of that and then I have no idea what will happen to this home, because my licence is only for a 10-year period." I think the bank manager would be very quick in saying, "I think maybe you're in the wrong place to get financing for such a venture, because obviously the ability to pay us back is not what we would look for on that type of deal."

Residents who move into a long-term-care home are in need of care, not simply a place to live. Bill 140 puts the emphasis on paperwork and processes, reducing the time focused on caring for residents. And again, that is even extended beyond if the owner of the home actually invests in the capital; that will provide even less money for the care that's presently being provided.

I want to say to everyone here that in the homes I've been in in Oxford county, the care is exemplary and the people who work there work exemplarily hard to try to provide the care that our citizens need. It's the facilities that need the funding to upgrade.

Long-term-care providers in Oxford that I met with expressed many of the same concerns that my colleagues here in the Legislature have been expressing in this House ever since Bill 140 was introduced. Instead of being a plan and a real commitment to improve living standards for seniors, Bill 140 penalizes older long-term-care homes. As I said, they cannot upgrade and they will eventually lose their licence. That means they're also penalizing the residents of their home. It was just pointed out to me that Madge Hall in Centennial Place in Millbrook has great concerns for what her future will look like in the nursing home, because she is in one of these homes that would not get a licence beyond the 10 years.

Even if they do want to upgrade long-term-care homes, they're getting caught in the cycle again, as I mentioned: To upgrade, they need to spread the cost over the long term, and if they can't get a licence for the long term, obviously they can't upgrade. The postcards say that under this legislation those seniors are the forgotten and that the government has no vision or plan for them. It's hard enough for many seniors to move from their homes

into a nursing home. For the government to then create that level of uncertainty is unfair and, in my opinion, unacceptable.

I'm calling on the government to do the right thing and make a long-term-care investment in Ontario's nursing homes so our seniors can live in comfort and security, as they deserve, and to make sure they have the assurances that as long as they need to stay in the home they're presently in, it will be there to provide the care they are entitled to, that we as their offspring have an obligation to provide for them in the years when they need that care.

Again, I urge the government to change the bill in order to provide for security for our seniors in our nursing homes.

**The Deputy Speaker:** Questions and comments? Further debate?

**Mr. John Yakabuski (Renfrew–Nipissing–Pembroke):** I'm pleased to have the opportunity to speak to Bill 140.

I did have the opportunity last week to speak to a motion by my colleague from Kitchener–Waterloo, Liz Witmer, so some of the stuff that I say will be reiterated from there. That was about her resolution to upgrade the B and C beds across the province of Ontario.

My colleague from Oxford talked about how the previous government upgraded the D beds and put the money into that program so that the homes that were of the lowest standards would be raised to the standards of today.

This government has no program, no plan, for upgrading the B and C beds across the province of Ontario.

As my colleague has stated, when those long-term-care centres go to a financial institution—because they're told, "Just go to a bank, get the money and fix up those beds"—they can't get the money because the licensing provisions under Bill 140 will not give them a licence that is long enough for a bank to be able to say, "Do you know what? This home is actually going to be around in seven, eight, 10 years." The position of the banks is—and their businesses are answerable to shareholders—"We're not going to make an investment that we can't be assured will be a safe investment in the long term." If they don't know that these long-term-care centres are going to be there, they're not going to be too willing to lend the money to allow them to upgrade those beds.

The government, on the one hand, is purporting to be very, very concerned about the welfare of the residents of long-term-care centres with this bill, but in fact the opposite could be the result, because the truth is that the only welfare that the government is concerned about is the electoral welfare of the Liberal Party in 2007. They're trying to wedge people against the long-term-care operators in the province of Ontario, because they're giving them an impossible task. They're saying, "These are the standards. We're raising the standards."

As one of my long-term-care operators has said, "Without question, homes must be held accountable." This is from Ann Aikens from North Renfrew Long-Term Care. "And we support measures that will enhance

standards. The not-for-profit sector has a long history in Ontario of providing quality care in culturally sensitive, resident-centred homes that are strongly supported by their communities. But unless the government provides additional funding, homes will be forced to apply even more of their limited resources to meeting all the new administrative requirements of the act. That means less money will be getting to the bedsides of residents.”

Minister Smitherman had a letter to the editor in the *Pembroke Observer* this past week talking about all they've done in long-term-care centres and all the nurses they've hired, blah, blah, blah. I'm told by one of the administrators of a long-term-care centre in my riding of Renfrew–Nipissing–Pembroke that the paperwork alone so that the ministry can substantiate that they've hired these nurses requires 100 hours per quarter. If you're giving somebody 100 hours per quarter of additional paperwork simply to satisfy the political goals of the government, that is not doing anything to enhance the care of people in long-term-care centres; that is an attempt to enhance the electoral chances of the Liberal Party.

I've been told by one long-term-care operator in my riding that this is “the worst piece of legislation ever written.” That's what she said. I haven't been around since 1867. I've only been here since 2003, so I don't have that much experience on bad, bad, bad pieces of legislation, although I've seen a lot from this government. But this is the opinion of one of my long-term-care operators: “It's the worst piece of legislation ever written.” Those were her words to me as I met with a group of long-term-care operators in my riding.

**1920**

Another one said, “I have never been so discouraged, as someone who provides health care and long-term care to seniors, by a piece of legislation.”

They did have some positive things to say. They said that parliamentary assistant Monique Smith, the member from Nipissing, who did a study of the long-term-care centres—

**Mr. Kormos:** And she's grumpy tonight.

**Mr. Yakabuski:** She usually is. But she had a report—and do you know what? They talked pretty positively about that report. But when it got time to implement the report, well, Ms. Smith turtled on them. She turtled, because she was every bit—the minister is going to have these new standards, but she wasn't going to give them any additional resources to be able to implement the standards.

I drew an analogy last week about a hockey team that, if you give them all the best hockey players in the world but you only give them six, just enough to fill the ice and put one line out—the goalie and five skaters—they won't win a single game, most likely, and they certainly won't win the Stanley Cup because they'll be burnt out and worn out.

At the time of the Second World War, as Winston Churchill said, “We shall not fail or falter; we shall not weaken or tire.... Give us the tools and we will finish the job.” But you know what? You guys don't want to give

our long-term-care centres the tools to finish the job. You want to give them the task of defeating Nazi Germany and oppression and tyranny, but you don't want to give them the tanks and the guns, the soldiers and the planes.

The problem is that this government is so determined to drive a wedge between the residents of long-term care centres and their families and the operators of long-term-care centres that in fact they may harm the residents of long-term-care centres.

Bill Croshaw, who is the chair of the health committee in Renfrew county, said, “We are worried that the bill will result in a reduction in care and services for our residents.”

*Interjection.*

**Mr. Yakabuski:** Bill Croshaw, the chair of the health committee, Renfrew county.

Some of the things that the long-term-care centre operators have told me—and I share the position of Ms. Aikens, who says, “Absolutely, we need to do everything we can to improve and enhance the standards of care in our long-term-care centres because nobody deserves an increased level of care more than our seniors in those long-term-care centres.” But you can't tell them to do the job and then not back it up with some resources.

**Ms. Monique M. Smith (Nipissing):** Why don't you give them your money from your CDs?

**Mr. Yakabuski:** They're getting my next one, as a matter of fact.

**Ms. Smith:** The next one?

**Mr. Yakabuski:** Yeah. How many CDs have you brought out, Monique? Let's hear you sing. You yelp enough; let's hear you sing.

*Interjections.*

**Mr. Yakabuski:** Standards for skin: gone from 24 to 28 skin standards in our long-term-care centres. So any time a resident leaves the long-term-care centre for eight hours or more, they've got to go through a complete skin examination of the entire body by an RN. You know what? That's great. That's wonderful that we've got those standards, but you have to be prepared to back it up with the resources that the long-term-care centres need.

I'm a little fuzzy on this one—

*Interjections.*

**Mr. Yakabuski:** Yes, but one of them told me that if they go out and take their people for ice cream or something, and they fail to report—and you've got a group of them and you've taken them out for ice cream and you fail to report exactly—one person might eat the ice cream and one person might not—for each resident, you are guilty of a failed standard under this new act.

**Ms. Smith:** It's called charting, John.

**Mr. Yakabuski:** Ms. Smith says it's called charting. She must think we've got 40 people taking these residents out for an ice cream. The fact is, they're working hard in those centres to do something nice for the people, and you know what? People working hard might fail to make a note about an ice cream in a dairy bar.

**The Deputy Speaker:** Questions and comments? There being none, further debate?

**Mr. Robert W. Runciman (Leeds–Grenville):** I appreciate the opportunity to have a rather brief participation in this debate on very important legislation, Bill 140. I also want to indicate my appreciation of the government House leader's understanding of the importance of this legislation and the need for widespread public consultation. He's a good and understanding fellow, and I want to put that on the record because he probably won't be very happy with me tomorrow. But I think he will appreciate my reasons for being not as co-operative as he is on occasion.

I want to put some comments on the record here. I can't talk about the standards or the quality of nursing homes or nursing home care across the province because I'm not that familiar with it. I haven't served in a responsibility where I would have that kind of exposure. But in my own riding, like most of us, I do have an opportunity to visit nursing homes and look at the quality of care and the character of the people involved: the administration, the folks who are preparing food, the nurses, the assistants and the people who work so hard on the behalf of elderly residents, many of them members of our families.

My own mother is a resident of Wellington House in Prescott, and obviously I visit on a regular basis, even though my mum is suffering from Alzheimer's. But, as we all understand and appreciate, we have to keep in touch with our parents. I have to say how impressed I am, during my regular visits to that place, with the staff, the cleanliness of the place, the caring approach of the staff in that facility. I have to say that that's been my reaction to all of the facilities in my riding that I've had the opportunity to spend time in. I don't think it's a show when the MPP visits; I think this is the real world for most of the people who work in these places. They genuinely care and they want to do a good job.

I think part of the problem is that every barrel has a bad apple or two. We've had a few bad apples in the nursing home sector, and a lot of attention has been focused on those bad apples. I think it was W-Five that did a story a couple of years ago where some family put a hidden camera in the room of a parent and showed that that parent was being treated very badly indeed. Of course, when something like that happens, it reflects on everyone in the system, and I think the government has overreacted to that. Perhaps they feel there's some sort of political opportunity there. I hope that's not the case. I hope their reaction was one of caring and not looking at some political leg up.

The reality is that I had every nursing home in my riding, non-profit and private sector, come in with their concerns about this legislation. They share the view that the member for Renfrew–Nipissing–Pembroke just expressed, that this legislation is harmful—harmful indeed. I don't think they said that it's the worst piece of legislation that's ever come down the pike, but they think that this is very bad legislation.

I'm going to get a little political here, because I think it reflects a trend within this government that I've com-

mented on and some of my colleagues have commented on in the past: a lack of understanding or appreciation for rural and small-town Ontario. These are facilities—

*Interjection.*

**Mr. Runciman:** You can moan over there, because you were one of the architects of this legislation. I'm hearing this from people who are impacted by what you've done. These are people who are genuinely concerned about the future of their facilities in small-town and rural Ontario. If you don't want to recognize that, so be it. You're turning a blind eye to very legitimate concerns; for what reasons, I am not sure, but we could raise those kinds of questions about a lot of initiatives on the part of this government. Bill 107 is the most recent one. Why you've shut off debate on that—again, I don't want to get into that, Mr. Speaker. I know you'll bring me to order.

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I think this is important. When you bring in standards like two baths a week and then do not provide the funding to allow these people to meet those standards, and then you bring in these licensing requirements and send in inspectors to rule on whether they're meeting these enhanced standards—without funding—then they can put their licences in jeopardy. This is what's happening. Of course, if these people want to improve their facilities, if they want to upgrade their facilities, they have to go to a lending institution. The lending institution looks to the requirements you have placed upon them and the jeopardy with respect to licensing, and they say, "We are not going to loan you any money. We're not going to put our cash in jeopardy in this way."

That's another reality I'm hearing from these people in the riding. The nursing home in Kemptville is the third-biggest employer in that municipality. I think they have 200 employees and a budget in the millions of dollars. They are very, very concerned. You look at Hilltop Manor in Merrickville—again, a major employer; the home in Eastons Corners; Carveth Care Centre in Gananoque, an unbelievably fine facility run by an outstanding family that genuinely cares about people and our seniors and providing appropriate and adequate care for them. These are people who are coming to me and saying that this legislation puts their future in jeopardy.

What happens with this legislation is that of course they come in and pull their licence. What they do, then, is transfer the beds. So you transfer the beds out of Leeds–Grenville to Cornwall or to Kingston or to Ottawa—

**Mr. Kormos:** Maybe Toronto.

**Mr. Runciman:** Maybe Toronto. That has even been raised as a possibility. It's certainly a possibility under this legislation that they can simply move these beds out of rural small-town Ontario because of the standards they have imposed on the sector without providing adequate funding to enable them to meet the standards. This is the irony of it. This is the irony of it, and we should all be concerned.

I know we get into these political corners and defensive modes because this is government legislation. Some-

body somewhere in the bowels of government determined that this was a good idea without, I think, fully understanding all of the implications.

Again, I reflect on the Toronto-centric mindset. It happens probably to all of us to some degree if we stay around this place long enough. I was talking to one of our own staffers about a question period issue today—I'm not sure if it was on raw milk or what it was on—and he was saying, "You know, I get too focused on what goes on in the city of Toronto, reading the clippings that come to us every day." They're all Toronto-based clippings, essentially.

That happens—certainly the bureaucracy, who are entrenched here, and most of them have been for many years. This government currently is perhaps the most Toronto-dominant government, if you look at the makeup of the cabinet and the executive council. I think close to 50% of the executive council are Toronto-based members. Most of the new members who are from small-town rural Ontario are new people and are, I assume, concerned somewhat about their futures and are not prepared to buck the folks who bring legislation to their caucus meetings and to stand up and say, "Look, Minister, this is wrong. This is wrong. This is going to impact badly. Before you table this, at least let us go back and talk to our people about certain initiatives—without spilling the beans—that you're talking about. Let's get feedback from those people."

But of course that hasn't happened. This legislation is now before us, and hopefully—we have to hope and pray, I guess, in terms of small-town rural Ontario—that, at the end of the day when we go through the extensive public hearings which the government House leader has indicated will occur, we're going to see amendments—

**Mr. Kormos:** He promised that on Bill 107 too, Bob.

**Mr. Runciman:** Yes. Let's hope that that sort of situation doesn't develop here. I think it would reflect badly on all of us. I'm going to be optimistic because I think even most of the backbench in the Liberal caucus recognize that this bill should be toured, that people should have an opportunity to be heard—

**Mr. Kormos:** We've got a lot of work to do on this bill.

**Mr. Runciman:** Very, very serious and legitimate concerns should be heard. I agree with my colleague that there is a lot of work to do here. Hopefully it will be recognized by the government and this will not be one of those "Blinders on and follow the lead of the minister at all costs."

Thank you very much for this opportunity.

**The Deputy Speaker:** Questions and comments? There being none, further debate?

**Mr. Gerry Martiniuk (Cambridge):** It's my pleasure today to speak on Bill 140, the Long-Term Care Homes Act, 2006. Over the past few weeks, I've spent a great deal of time meeting with long-term-care home representatives in my riding of Cambridge and discussing their concerns with Bill 140.

A couple of weeks ago, I went to St. Luke's Place in Cambridge and met the administrator, Bev Preuss. I also visited Fairview Mennonite Home and met with the administrator, Lois White, and the executive director, Tim Kennel. I also met with residents, family and staff from the Stirling Heights Long-term Care Centre, Hilltop Manor, Riverbend Place, Golden Years and Cambridge Country Manor. Unfortunately, the discussions all came to the same conclusion: that there are serious problems and just concerns with this legislation. The legislation is disappointing, to say the least. The only positive comment I've heard about this legislation is about the whistleblower portion. However, it is also my understanding that many of the homes already have this protection in place.

The McGuinty government has chosen to pay more to feed criminals in Ontario than to feed our seniors. In Ontario, provincial jail inmates are allotted approximately \$10 per day for a food allowance, while our long-term-care homes receive \$5.41 to supply three meals a day to seniors. The \$5.41 for three meals is less than a Big Mac meal for \$6.38 at McDonald's or the Whopper meal for \$6.03 at Burger King. The people in these homes are our mothers and fathers, our grandparents, our aunts and uncles, and they deserve a lot more respect than this.

The new Long-Term Care Homes Act imposes a multitude of new requirements on long-term-care facilities but does not provide the necessary additional funds to carry out the requirements. This simply means that the money to implement the new requirements will have to be taken from other areas, such as the food allowance of \$5.41 per day per resident, which will further aggravate the present problem considerably.

The current situation of our long-term-care homes is unsettling. There are managers, nurses, and housekeeping staff all feeding the residents. What will happen when the new legislation comes into force? Some residents are waiting up to 30 minutes to use the washroom. Their dignity has been lost. There's no reason our homes should be so underfunded and understaffed that residents would have to wait 30 minutes to use a washroom.

At one of the homes in Cambridge there are 35 residents on one floor, 19 of whom have to be physically fed each of the three meals, and there are only three staff members on that floor. I would ask the minister responsible if he knows how long it takes to feed one resident. This is not like you and I going to the cafeteria, grabbing a sandwich and eating on our way to question period. The skill and patience involved in feeding a long-term-care resident is much more extensive, and this cannot be done in five minutes. The staff of the long-term home facilities I visited deserve to be commended for what is an incredible job they do with the limited resources they have. Plain and simple, our homes need more resources. This legislation creates more paperwork for staff and more hoops for staff to jump through, and the end result will be less time spent caring for the residents.

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What a long-term-care home needs is the promised \$6,000 per resident for additional care and they need the promised 20 minutes in additional care, but this legislation does not provide our homes with either. And this is what the Minister of Health and Long-Term Care considers a revolution. This sounds like *déjà vu*. We've gone back in time to 1988, when the Liberal government put a freeze on all buildings of long-term-care facilities. The freeze was not lifted until Progressive Conservatives came to power in 1995. At that time, the severe problem was recognized. As a government, the Progressive Conservative government built 20,000 units and upgraded 16,000 beds, a far cry from this minister's revolution. In three long years this revolutionary minister of long-term care has built 300 beds. This government is making the same mistake the Liberal government made in 1988 by not building new homes.

At Cambridge Memorial Hospital, we have seniors taking up beds while they wait to get into a long-term-care home. A cost for a senior to be in a hospital bed is outrageous when they should be in a long-term-care home. One day or night at the hospital is equivalent to five hip surgeries. Where would the money be better spent—on those surgeries or on a senior who is waiting to get into a long-term-care home? I am not sure where this government's priorities are, but they sure aren't with our health care industry or our seniors.

Stop the government waste and invest in our seniors. This government wasted \$6 million to drop the letter C from OLGC. The McGuinty government wasted an additional \$219,000 to redesign the trillium logo. The McGuinty government spent \$90 million to close or consolidate community care access centres. There you have three examples, with a grand total of \$96,220,000 that could have been spent to invest in our seniors.

Families are being split up because of a lack of beds in long-term-care homes. Husbands and wives are being separated because the homes do not have enough room for both. I met a gentleman who has been married for more than 50 years. He is now in a home in Cambridge and his wife is in a home in Hamilton because they cannot get an additional room in the Cambridge facility. That, members, is despicable.

We have an aging population in Ontario. We have more seniors now than ever before who need a long-term-care facility. Now is not the time to ignore our seniors, and that is what this government, the McGuinty government, has done.

To make matters worse, this government has put long-term-care home licences in jeopardy. Long-term-care homes will not be able to get the necessary financing from banks because they could be construed as a high risk without a secured licence.

This intrusive legislation has given the government more power to be micromanagers. The government now has the right to tell homes what recipe to use and what ladle to scoop the food out with. There are more sanctions on long-term-care homes than in hospitals. There

need to be amendments made to the purported legislation, and hopefully the minister will seek consideration from administrators of long-term-care homes before going ahead with Bill 140. The freeze on buildings must be lifted. The commitment of a \$6,000 increase per resident per year must be met. This bill demands a full hearing across our province. Our parents and grandparents deserve our respect. Thank you very much.

**The Deputy Speaker:** Questions and comments? Debate? The member for Durham.

**Mr. O'Toole:** I've been waiting for this opportunity to comment on Bill 140, to represent the people of my riding and those in long-term-care homes in my riding. I want to get them on the record quickly. I have much to say. I want to first credit Elizabeth Witmer for the work that she's done on this bill, and Karen Sullivan for the work of the Ontario Long Term Care Association, which has brought voice to this issue.

We are talking about our seniors. We're talking about people like myself—I'm over 60—and others who are older than I am, who would be residents of long-term care. The important issue that I think is worth remembering is, these are people's lives. When I look at some of the comments with respect to the 50,000 long-term-care residents, these are their homes, and some of them aren't up to the standards. This bill, Bill 140, that we're discussing tonight, is absolutely putting the industry of profit, not-for-profit and municipally owned industries in jeopardy. It's a serious concern.

I don't say this for selfish reasons, but I want to first put on the record as I'm speaking that before I came into the House I phoned my mother-in-law, Madge Hall—

**Mr. Jeff Leal (Peterborough):** She's a wonderful lady.

**Mr. O'Toole:** Jeff Leal says she's a wonderful lady. I appreciate that, Jeff; she is. She's in long-term care in one of the newer homes, Centennial Place. It's in Millbrook, Ontario. My wife, Peggy, and I are there every single week. In fact, I spoke to her five or 10 minutes ago, because she's going through the stages that most of us will experience in our lives. So when you're making comments on this bill, you should remember that it's not just the long-term-care association; it's the residents, it's the staff, it's the condition and quality of life that we are enunciating for the people of Ontario.

I've met with all of the long-term-care homes in my area. I want to go through and mention them. First, I would do it in some sequence, Mr. Speaker, with your indulgence. Strathaven Lifecare Centre: the administrator is Patrick Brown, Stella Jackson is the president of the residents' council, and Sharon Courts is the treasurer of the residents' council. They attended the meeting. I had a meeting at each of the long-term-care homes as well as in my constituency office in Bowmanville. Marnwood Lifecare: Tracey Werheid is the administrator there. Support staff were there, and I remember the residents' council was there as well. Fosterbrooke Long-Term Care is one of the homes. Tina Bravos is the administrator, Jessie

Watkins is the residents' council president, and Marjory Caswell is the family council representative.

These people don't have a political agenda. They're genuinely concerned, compassionate people who are caring for their loved ones, as most of us should or will be doing. They aren't into the politics of all this, but when you explain to them the inordinate challenge before the C and B homes—it worries me that half of the existing long-term-care spaces could be in jeopardy.

But in a slightly different tone, there's the Community Nursing Home in Port Perry. The outgoing administrator is Joy Husak; Heather Cooper is the director of care, and she's the interim administrator, I believe; Karen Sansom is the activity director; John Dodds, a wonderful gentleman, is the president of the residents' council; Liz Hobson is the chair of the family council; and there are Eric Timms, Mrs. Murdock, Mary Malloy and Perry Grandel.

I had a wonderful meeting, quite an open meeting—non-political really; just talking. See, they have some A beds that were refurbished under our government, under the 20,000 new long-term-care beds. I contribute to this discussion because Elizabeth Witmer, in a very human way, puts a great voice to the concern. I'd say there are politics involved in it for sure, but she's done a lot of work with the long-term-care associations. She also is probably a caregiver or a person who is concerned about her aging parents.

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This is her opposition day motion resolution. She said that she was calling on the government to commit to a plan of action to invest in upgrading the 35,000 older B- and C-classified long-term-care beds. This is what's happening here: We've got the A beds, which our government—Elizabeth Witmer and others—was involved in, committing over \$2 billion to that. Thirty-five thousand out of 50,000 beds: There are a lot of beds that are in some question, so the long-term-care associations want some stability on the horizon line. What her resolution was calling for—by the way, it was unanimously endorsed. It's a clear example, first of all, that this government's Bill 140 is a bad plan. They have no plan, actually, and that's what's missing here. She also reminded people that in 1998, there was the investment of \$2.1 billion in long-term-care homes, which included 20,000 new long-term-care beds built to the new standard and rebuilding an additional 16,000 of the older D-class beds to meet the new 1998 standard.

Think of it: Some of the homes that these people live in—this is their home—aren't accessible. They don't have the privacy of their own washroom; they're not wheelchair-accessible; there are no bathrooms ensuite. It's incomprehensible and quite frankly unforgivable. Here's a government that's forcing this bill and there's no plan.

I would say that I commend the minister quite frankly and openly here. The work she's done and her compassion and commitment are clear, and our leader, John Tory, would stand clearly on side with that initiative, where she called for action, for a plan for long-term care.

If you look at the demographics of Ontario, including members of this Legislature—I won't mention names because that could be age-inappropriate—this is the ultimate destination for everyone here.

I think of Madge Hall in Centennial Place in Millbrook, Ontario, a wonderful long-term-care facility.

**Mr. Leal:** Ross Smith, AON.

**Mr. O'Toole:** Ross Smith and AON in Peterborough. Jeff Leal is mentioning that, and I would concur. They do a great job. The staff there and the compassion level in a community like Millbrook—these people aren't rushing off to pick up their children. It's sort of a rural environment and it's quite friendly. I would say that I would be so lucky as to spend those declining grey years—I don't actually look forward to it.

I want to commend the work that Gerry Martiniuk has done, the MPP for—

**Mr. Martiniuk:** Cambridge.

**Mr. O'Toole:** Cambridge, yes. It's simply Cambridge. I thought there was another area involved. He has actually done a lot of work in his area. Most of the members here will bring some personal comment with respect to their long-term care, but it's important to say that the campaign by the Ontario Long Term Care Association—and I give Karen Sullivan and those members a lot of credit in my view for the campaign of attention for our seniors under the term “forgotten.” It's tragic to think that we have relegated our seniors—those who defended our country, defended our democracy, raised our children, in fact raised ourselves—to homes where they're no longer receiving appropriate levels of living conditions.

Our House leader, Bob Runciman, our leader, John Tory, and our critic, Elizabeth Witmer, would call on the government to make sure that we have further hearings on this bill. Slow down; get it right. Rome wasn't built in a day.

I think of Lou Rinaldi and his father's passing—and I hope that's not inappropriate—because he said to me earlier that the time he spent in the last days with his parents—and these are the last days of our parents, and the caregivers they actually have in their lives. So we're making a statement on how much value we put on the quality of their life and the conditions they live in.

I would encourage the government to have public hearings, to try to get this right, to address the deficiency in this bill of the B and C homes.

**The Deputy Speaker:** Questions and comments? There being none, further debate?

**Mrs. Julia Munro (York North):** It's a pleasure to be able to speak for a moment on Bill 140. In the time I have, I'd like to divide my remarks between the perceived notions that the government has in this bill and how it's being received within the community. Certainly for many people there's a great gap between the bill and its expectations and the realities of the bill and the policy that falls out from it.

Originally, the government had promised during the election that there would be \$6,000 in additional care for every resident in Ontario, and that would also include or

provide for an additional 20 minutes of care. Neither of these initiatives has happened, and neither does this bill provide an opportunity, as a vehicle, to see that happening. So there's a tremendous concern in the community that these promises are not going to be kept.

We also need to understand the context of this bill. As many will recall, when our government came to power in 1995, there had been not one new long-term-care bed in the whole province in 10 years. We knew that as the population aged, as the demographics changed in terms of the number of seniors on an annual basis and certainly by decade, this was a huge challenge for us in the last government. As a result of that need and in response to that need, we recognized this need and created 20,000 new beds in Ontario, but also recognized the fact that there were existing beds that didn't meet modern standards.

There was a considerable amount of research done by the former government to look at what were the best ideal circumstances for long-term care, so a great deal of effort and planning and design work went into creating new standards. Not only were there 20,000 new beds created, but there were also 16,000 beds that were replaced. We created a method of looking at these beds as A, B, C and D beds, and so the idea was to create the 20,000 new beds and to bring up to standard the ones that were the furthest behind, those that had the D classification.

When this government took over, they had what was left in the province in terms of beds that had not been changed, the Bs and the Cs, and that left approximately 36,000 beds in the province that were defined as B or C beds. Quite naturally, when the electorate heard the promises of the current government—the \$6,000, the 20 minutes of additional care—there were some assumptions then that those B and C beds would be upgraded, as had been begun by our government.

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This government also created a seniors' strategy, which, again, implied some commitment to these promises and to those kinds of changes. Unfortunately for our seniors, quite frankly, no changes and no commitment to those promises took place, so what we have instead, and what we're looking at this evening, is this Long-Term Care Homes Act, which is Bill 140. It has provided a very, very different kind of picture than the one that the sector anticipated.

One of the things that's there is that there is more regulation in the homes than in the hospitals, which is kind of an interesting contrast when you look at the acute care that takes place in the hospitals. In fact, there's more regulation in long-term-care facilities.

I should also point out that part of that, around the requirements, is dealt with in part II of this bill. Many have to do with important things, certainly, but in the scheme of the \$6,000, in the scheme of the 20 minutes of personal care, in the scheme of having those beds upgraded—the Bs and the Cs—this seems to pale in contrast to those kinds of priorities.

I'd like to give a couple of examples. One of them is having a mission statement, and there are several that deal with protecting residents from abuse and neglect. Clearly, those are extremely important things, but they seem to dwell on having a written policy and things like that, and certainly in the meetings that I've had with those staff members representing long-term-care facilities in my riding, including staff from Mackenzie Place in Newmarket and River Glen Haven in Sutton, they're far more concerned about two things: the B and C beds, and that there appears to be no course of action to respond to that need to bring them up to speed; and the second is the quite startling inclusion in this bill with regard to the licences and the lifespan of a licence. Staff recognize the challenges that that represents for the businesses and the owners, whether it's a not-for-profit or a for-profit facility. Bank loans and business plans and things like that are in deep jeopardy when you start looking at a lifespan. Of course, for the Bs and Cs, it's significantly less than that 25-year window, and so there's a huge concern amongst the staff, the operators, the residents and the families. I've met with members from all those categories, and they are very, very disappointed and very, very concerned that these fundamental issues of the upgrading of beds and the stability of the long-term-care facilities that their loved ones are in are in fact in some jeopardy.

So it's with some considerable concern that while we are debating this bill, we're talking about the future of the vulnerable and fragile in our community, our own family members, in many cases—and this government has not provided in this bill the kind of surety that I think Ontarians deserve.

**The Deputy Speaker:** Questions and comments? There being none, further debate?

**Mr. Tim Hudak (Erie-Lincoln):** I'm pleased to rise in the debate on Bill 140 this evening and to convey many of the concerns about this particular piece of legislation that I have heard in my riding of Erie-Lincoln.

I'm very proud of the accomplishments that occurred under the previous government, in which I had the honour of serving, in terms of improving the status of many long-term-care homes across the province of Ontario—in fact, the addition, on top of existing beds, of some 20,000 new beds. That has meant that residents in the old Northland Manor, in the old Albright Manor in Beamsville, in the United Mennonite Home in Vineland, in Dunnville, have always benefited from outstanding, hard-working staff.

I was at Grandview Lodge's reopening of the new facility just a couple of weeks ago, along with my colleague Toby Barrett, the member for Haldimand-Norfolk-Brant. I was pleased to see the same staff continuing on, and their very hard-working and dedicated auxiliary—who make those homes great places with outstanding reputations.

For a long period of time, you had residents, you had hard-working, dedicated staff and you had a very devoted auxiliary in facilities that were tired, that were run down.

Quite frankly, sadly, across the province of Ontario, many of these homes were more like institutions as opposed to actual residences. The previous government raised the standards by rebuilding homes that had that tired look and by adding new homes.

I remember visiting my grandmother as a youth, and my grandmother was, sadly, in the grip of Alzheimer's. I enjoyed seeing my grandmother despite her deteriorating condition at the time, but I always felt a bit of sadness going in the home, because there was always an air of sadness to it. It seemed, during this period of time, years and years ago, like the home was, sadly—it's probably a strong term to use—almost a warehouse. Seniors would be there in the hallways, seniors would be there in large rooms, and they would be sharing washroom facilities and sharing overcrowded common areas. As a youth, my vision of a long-term-care home was as an institution; it was not as a residence.

So it's a great pleasure—and my colleagues in the House feel the same way in their own ridings—to see the improved standards and the far greater home-like environments in places like Grandview and Albright, at the United Mennonite Home, at Northland Manor—Maple Park Lodge in Fort Erie, to name another. I do hope that the current government uses their resources in the long-term-care envelope to continue that process and to continue raising the standards in, perhaps, some of the C-level facilities, moving them up to the new high standards. Shalom Manor in Grimsby—while not in my riding currently, it's in the riding that I hope to represent after the next election, Niagara West—Glanbrook—is another one that similarly benefited from those funds.

I had the great pleasure of visiting Shalom Manor in Grimsby this past Saturday. They had their annual Christmas bazaar and open house. A great breakfast of pancakes, sausages, toast and coffee was served by the hard-working, dedicated auxiliary for five bucks. Also, because of a very supportive greenhouse sector, you could get some pretty good deals on flowers and plants in support of Shalom Manor.

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**Mr. Leal:** It's not good for your cholesterol.

**Mr. Hudak:** The member for Peterborough is suggesting that plants are bad for your cholesterol.

*Interjection.*

**Mr. Hudak:** I know. But it was all for a good cause: a little bit of cholesterol in exchange for Shalom Manor. But I will share with you, Mr. Speaker, and my colleagues that, despite improved standards, some more funds flowing, and the great camaraderie and Christmas cheer at Shalom Manor this past weekend, there is ongoing concern about some of the issues surrounding Bill 140 and the impact it will likely have on those homes if it is not amended.

Let me read you a copy of a letter from Shalom Manor, dated October 27, 2006, sent to the Honourable George Smitherman, the health minister, by the board of directors:

“While we salute the spirit of the bill”—I think we all support the spirit of a bill that would improve standards and enhance responsibility in long-term-care homes—“we are, however, very concerned about the way in which your government”—Mr. Smitherman's government, the McGuinty government—“proposes to apply the legislation.

“We are worried that the bill will result in a reduction in care and services for our residents. It places great emphasis on the enforcement of standards, and without question, homes must be held accountable. But the bill will require homes to spend a great deal more of their time and resources on compliance and documentation, and unless the government provides additional funding, homes will be forced to apply even more of their limited resources to meeting all the new administrative requirements. That means less money will be getting to the bed-sides of residents.”

I know there are discussions currently between the critics and the House leaders about hearings on Bill 140. I know that folks in Niagara and my colleague Mr. Kormos will be pressing as well to hold public hearings in Niagara. I agree with my colleague from Niagara Centre, and we were discussing this earlier on: Why not use one of the long-term-care homes as the site for the consultation in Niagara, and hopefully that will be replicated throughout the province? Certainly the facilities at Shalom Manor would be very suitable for those hearings and give the opportunity for many of the residents, their loved ones, friends and family to participate directly in the hearings. It certainly would make it a lot easier for staff who work there as well to participate during the day and give the view of their hands-on experience and their concerns about Bill 140.

I am volunteering Shalom Manor without asking them about that first, but I do say with great confidence that it's a wonderful home that would make a very suitable location for the Niagara hearings. Grimsby, being on the Hamilton border, would be suitable as well for folks from the Hamilton area to participate. In fact, I'll be visiting either Shalom or Albright in Beamsville on Friday particularly to discuss Bill 140 and get advice for the public hearings ahead. Albright Manor likewise would be a very suitable location for these public hearings. But those at Albright and those at Shalom Manor, or the United Mennonite Home in Vineland, where I had the pleasure of visiting and hosting a Q&A session this past Friday, would share these concerns, as would, I'm sure, the other homes I mentioned.

The Shalom Manor letter goes on to say, “Bill 140 will make directors personally liable for the failure of employees to meet the requirements of the act. As well, directors could conceivably go to jail for such a breach. We are concerned that this may present a significant barrier to recruiting and retaining directors, especially volunteer directors in the not-for-profit sector.”

They go on to make the important point, again shared with other homes in the remarks of my colleagues this evening, that while they support initiatives to, so to

speak, weed out the “bad apples” in the sector, “there should also be incentives for good performers.” Homes “should be rewarded in some manner for providing quality care in a safe, secure and caring environment.”

Shalom Manor, a lot like other homes that have expressed concern about this bill, are worried about the fixed-term licensing that the Minister of Health has brought forward. They have a concern about financing expansions, improvements or new homes with fixed-term licences, that if they are able to access resources to finance an expansion or a new home, there will have to be a premium of some substantial level paid if the fixed-term licences have a short shelf life. You would understand, of course, that those who are investing would want to make sure they have an adequate return on their capital, and if you have a short-term time frame, this may have a detrimental impact on the construction of new homes or the expansion of existing homes or improvements.

Shalom Manor makes the further point that, “Fixed-term licensing may also discourage charitable gifts. Donors may be reluctant to give long-term funding through endowments and multi-year commitments to charitable institutions that will now have fixed-term licences, especially in the latter years of those licences.”

I was very pleased to rise in the Legislature this evening to convey some of the concerns about Bill 140 from the homes and from those who work in the sector. I do look forward to public hearings and would definitely roll out the red carpet to help host those hearings in the Niagara Peninsula so they can make Bill 140 a much better bill than it is today.

**The Deputy Speaker:** Questions and comments? There being none, further debate? The deputy government House leader.

**Hon. David Caplan (Minister of Public Infrastructure Renewal, Deputy Government House Leader):** A point of order, Mr. Speaker?

**The Deputy Speaker:** Perhaps I could just ask if any other member wishes to speak.

Now, a point of order.

**Hon. Mr. Caplan:** I seek unanimous consent, and I hope the Legislature will grant it, to move a motion without notice concerning this evening’s debate.

**The Deputy Speaker:** Unanimous consent to move a motion without notice concerning this evening’s debate. Agreed? Agreed.

**Hon. Mr. Caplan:** I thank my colleagues and you, Speaker, of course.

I move that, notwithstanding standing order 28(h), in the event of a division on the motion for second reading of Bill 140, the division shall be deferred to Tuesday, December 5, 2006, during the period devoted to deferred votes. I’ll give that to the Clerk.

**The Deputy Speaker:** Mr. Caplan has moved that, notwithstanding order 28(h), in the event of a division—

**Hon. Mr. Caplan:** Dispense.

**The Deputy Speaker:** Dispense? Dispensed.

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

Mr. Smitherman has moved second reading of Bill 140. Is it the pleasure of the House that the motion carry?

All those in favour, say “aye.”

All those opposed, say “nay.”

In my opinion, the ayes have it.

Pursuant to the motion we just passed, the division is deferred until Tuesday, December 5.

Orders of the day.

**Hon. James J. Bradley (Minister of Tourism, minister responsible for seniors, Government House Leader):** I move adjournment of the House.

**The Deputy Speaker:** Is it the pleasure of the House that the motion carry?

All those in favour, say “aye.”

All those opposed, say “nay.”

In my opinion, the ayes have it.

This House is adjourned until 10 of the clock, Thursday, November 30.

*The House adjourned at 2018.*

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