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Wednesday 8 December 2010

Mercredi 8 décembre 2010

Speaker
Honourable Steve Peters

Président
L'honorable Steve Peters

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LEGISLATIVE ASSEMBLY
OF ONTARIO

Wednesday 8 December 2010

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Mercredi 8 décembre 2010

The House met at 0900.

The Speaker (Hon. Steve Peters): Good morning. Please remain standing for the Lord's Prayer, followed by a moment of silence for inner thought and personal reflection.

Prayers.

ORDERS OF THE DAY

STRONG COMMUNITIES THROUGH
AFFORDABLE HOUSING ACT, 2010

LOI DE 2010 FAVORISANT
DES COLLECTIVITÉS FORTES
GRÂCE AU LOGEMENT ABORDABLE

Resuming the debate adjourned on December 7, 2010, on the motion for second reading of Bill 140, An Act to enact the Housing Services Act, 2010, repeal the Social Housing Reform Act, 2000 and make complementary and other amendments to other Acts / Projet de loi 140, Loi édictant la Loi de 2010 sur les services de logement, abrogeant la Loi de 2000 sur la réforme du logement social et apportant des modifications corrélatives et autres à d'autres lois.

The Speaker (Hon. Steve Peters): Further debate?

Mr. Yasir Naqvi: Thank you very much, Mr. Speaker, for recognizing me and giving me the opportunity to speak on Bill 140, legislation dealing with Ontario's long-term affordable housing strategy. I'm very happy to speak on this very important initiative of our government.

Let me give you a bit of background as to why this issue is an extremely important one for me and my riding of Ottawa Centre. As you know, I represent a downtown community in the heart of the city of Ottawa. I think—and I've done the math before—I can definitely say that in my riding of Ottawa Centre, within the boundaries of Ottawa, I have the largest number of affordable housing units that are available. Obviously, because of that, I have a great amount of opportunity to work with various affordable housing providers to make sure that we are working on ensuring that there is ample, sustainable, good affordable housing available to members of my community, not only in Ottawa Centre but all across the city of Ottawa.

Just to mention a few of the housing providers that exist and operate within my riding—and that doesn't exclude the others—the big ones that come to mind are,

for example, Ottawa Community Housing, which is probably the largest landlord in the city of Ottawa. Jo-Anne Poirier is the chief executive officer, an extremely capable individual who is doing incredible work with Ottawa Community Housing in making sure that there's good, safe, affordable housing available within the riding of Ottawa Centre. Also, I have CCOC—

The Deputy Speaker (Mr. Bruce Crozier): Member for Ottawa Centre, just a moment. Minister of Tourism and Culture?

Hon. Michael Chan: On a point of order, Mr. Speaker: I wish to clarify remarks I made on Thursday, December 2. I was referring to the contract the Niagara Parks Commission entered into for external auditors, Grant Thornton, which was competitively tendered in August. Thank you, Mr. Speaker.

The Deputy Speaker (Mr. Bruce Crozier): That is a point of order. A member is allowed to correct his own record. It's just a bit unusual to interrupt debate to do it.

The member for Ottawa Centre.

Mr. Yasir Naqvi: Thank you very much, Speaker. I don't mind at all. Thank you, Minister, for taking the opportunity.

I was talking about various service providers that exist in my community of Ottawa Centre and do an excellent job in providing affordable housing. I mentioned Ottawa Community Housing. There is the Centretown Citizens Ottawa Corp., CCOC, led by Ray Sullivan, another great organization which is providing rent-geared-to-income housing. The Multifaith Housing Initiative, led by Sue Evans, is another very important grassroots organization in my community, led by members of various faith groups who are doing incredible work. Very recently, they held a dinner—I think the first one at the city hall—on National Housing Day, to highlight the importance of affordable housing in our communities and the need to have a national housing strategy in Canada; I will speak to that in a moment.

Another organization I really want to highlight because of the great work it does is Cornerstone. Cornerstone is geared towards providing housing for women, especially women who are escaping domestic violence. They have quite a few housing units in my riding of Ottawa Centre and are an incredible organization. They have a couple of really good projects on the go which I will speak of in a moment.

When I ran in 2007, affordable housing was a big issue in my riding. During the campaign and before, when I was involved with the Centretown Community Health Centre, I learned how important it was to have

clean, safe, sustainable affordable housing in the community. This is people's shelter. This is ensuring that people continue to build their lives in a constructive, positive fashion; and if they don't have safe, clean housing available to them, there are just that many more barriers to having a sustainable, constructive, positive life.

We've had challenges in Ottawa, but I have to say that what I've noticed, definitely since 2007, since I've been very involved as the member for Ottawa Centre, is that we have seen some incredible, positive investments being made in Ottawa Centre. We're talking about investments in terms of both maintaining existing housing stock, as the language goes, existing units that are available, to make sure that they are maintained and updated, and again, that they're clean and safe, and to building new affordable housing units in the community so that we can take people off the waiting list. That has been a big emphasis of my work. I wanted to share some of the accomplishments with you because I think they tie in really well with what this long-term affordable housing strategy is trying to accomplish.

Before I do that, I want to highlight that I've got a huge complement of various forms of affordable housing in my riding. I've got a lot of co-ops, and I want to recognize Karen Sexsmith, somebody who is very instrumental in a very important way in making sure that we allow ownership in our housing mechanism at a sustainable price. We've got affordable housing, rent-geared-to-income housing and supportive housing, which is also important and which I will speak to in a moment.

As you know, in June 2009 Ontario signed the Canada-Ontario affordable housing agreement and pledged to invest about \$622 million in social and affordable housing, for a total federal-provincial two-year commitment of \$1.2 billion. Under this agreement, Ontario will contribute the following: \$153.9 million for new rental housing for low-income seniors, for, I believe, a total federal-provincial funding of about \$307.8 million; \$28.8 million for new rental housing for disabled persons, a total federal-provincial funding of \$57.7 million; and \$352.2 million for social housing repair and retrofit programs, a total federal-provincial contribution of \$704.4 million.

This program in totality—and that's about \$1.2 billion, both federal and provincial—will build about 4,500 new affordable housing units, and approximately 50,000 social housing units will be repaired, generating about 23,000 jobs. These are quite impressive numbers. I think it's important to remember that that's a huge infusion of capital dollars, not only in building new affordable housing units, but also maintaining and repairing existing ones.

0910

Now, what that means for Ottawa and particularly Ottawa Centre—the work that is going on—is something I'm proud of. We have invested \$6 million for a 55-unit project sponsored by the Shepherds of Good Hope on Merivale Road in my riding of Ottawa Centre. This is a very important project, because these 55 units are geared

toward chronically homeless men. The majority of these men, 52 of them, never had homes, never had a roof over their head, and this is the very first time they can call a place their home. This is where they now live permanently. Here's an interesting thing about these men as well: Besides being chronically homeless, a lot of them had addictions like alcohol and drugs. They have gone through a managed addiction program and are now quite ahead on the road to recovery. By giving them good housing, we're really helping them.

This is a project which, as I mentioned, is part of the Shepherds of Good Hope but is also a part of the inner-city health initiative led by Dr. Jeffrey Turnbull, who I believe is president of the Canadian Medical Association and also chief of staff at the Ottawa Hospital. Dr. Turnbull was speaking at the Salvation Army Hope in the City Breakfast two weeks ago and was talking about this particular project and the kinds of incredible health benefits already coming out of it. The beauty of this project is that it is supportive housing, so what we're seeing is health, social services and housing services provided in one location, an incredible project that I'm very proud of.

There are about six projects in Ottawa that are being sponsored by the city of Ottawa to the tune of about \$720,000. Another very important project is the Beaver Barracks project, led by the Centretown Citizens Ottawa Corporation, CCOC: \$18.3 million to build 248 new units in Ottawa Centre. I had an opportunity earlier in the spring to visit these projects while under construction—just incredible. I'm really looking forward to this brand new affordable housing: environmentally energy efficient, and great leadership in terms of the kind of new investment we need to make in terms of sustainable, affordable housing units. Another great project taking place; actually the ribbon cutting will be very soon, and I believe people are moving in as we speak.

Also, very important investments of about \$21 million in 2009-10 and \$25 million in 2010-11 for repairs under the social housing repair and retrofit program. And this is the important part: People who live in these affordable housing units want to make sure they continue to live in a clean and safe environment. It's the small things like elevators not working—things that may be small for us—that impact quality of life and really drag that whole community down. We need to make sure that we're investing dollars on those types of initiatives, those types of basic necessities of life, so that people continue to live with dignity. That is extremely important.

I often visit various affordable housing units in my riding, especially in the winter months, and I can see the difference. You go into buildings and they have new carpets, are freshly painted and the elevators are working. People are happy; people are smiling. The other day, I was in Gladstone Heights, on the corner of Gladstone and Preston in my riding. The building has gone through some significant investments. It's a seniors' building. I've been in the building before, and you always hear a dozen or so different complaints about the condition the building is in, and because of that, neighbours are somehow not getting along and there's tension.

This time when I went into that building, seniors were smiling. I got only two complaints while I was knocking on doors. And what were those complaints? The lid on the garbage chute was brand new, so it was too hard for seniors to open. That was the biggest complaint I received. I was very happy to receive that complaint. It was legitimate, and I did check it. It was too hard to open and needed some WD-40 to make it easier. But you could just see the positive impact that the dollars that were invested in that particular community had created, where people were happy and comfortable and involved in their building. You could see the changes that were taking place.

I can go through a list of various retrofit and repair projects going on in my riding right now that are having an incredible impact, from fixing roofs to elevator repairs to foundation repairs to mould remediation, which is extremely important because it impacts people's health. Roof and furnace replacement and changing windows and doors makes a lot of these units built in the 1960s and 1970s energy efficient. These are the kinds of investments we need to make that will create a positive, healthy environment for those who live in those communities and ensure that people continue to live with dignity. I'm very proud that we are seeing those kinds of things in Ottawa Centre.

When the whole affordable housing strategy consultation started, I had the privilege of hosting a community consultation in my riding on August 19, 2009. I have to say that I pretty much hold a community dialogue—a consultation—on a monthly basis in my riding. The one in August of last year was the most involved, engaged and well attended. It was incredible to see the number of people who came with their ideas, and we had a really healthy conversation and discussion as to what Ontario's long-term affordable housing strategy should look like.

I'll be very frank with you: Does the affordable housing strategy that the government has put forward through Bill 140 hit every single mark? No. Is it a great start, for the first time that we've got a positive long-term strategy in the province of Ontario? Absolutely, yes. So it's a work in progress. We will continue to work together.

Here are a few of the things that were part of the consultation—we did put in a report to the Minister of Municipal Affairs and Housing, at that time, of some recommendations that came out of Ottawa Centre's consultation, which are part of this affordable housing strategy. For example, in Ottawa Centre's consultation, participants recommended eliminating conflicting policies and regulations, and wanted more centralized organization of services, specifically between the three levels of government, but of course with the province to initiate. We are seeing, in the long-term affordable housing strategy, that the government is taking action to consolidate and harmonize the patchwork of programs that allow municipalities to use funding in a more flexible manner to better meet people's individual housing needs. So, there is a direct correlation as to what was recommended and what is being done here.

Another recommendation was on rent adjustments and calculations, specifically suggesting increasing the asset

exemption and increasing income limits dealing with rent geared to income. Through this long-term affordable housing strategy, the government is simplifying the current RGI calculation process, reducing and eliminating more than 60 criteria now used to calculate income and reducing the administrative burden for tenants, housing providers and service managers, another positive step and recommendation that was made by the consultation that took place in Ottawa Centre.

Another recommendation was made with regard to the government providing better reporting and results data on many important affordable housing indicators. I believe we're seeing, in the long-term housing strategy, that there will be multiple reporting requirements for housing programs with different reporting cycles and frequencies, another positive step.

I would say that there were two areas that were raised in Ottawa Centre's consultation and are not included in this affordable housing strategy. One was the addition of inclusionary zoning. Unfortunately, that is not part of this long-term housing strategy. I understand the debate that surrounds that particular issue. From my point of view, from my community's point of view, I would have preferred to see inclusionary zoning included in the long-term affordable housing strategy.

0920

I understand that the Planning Act—I believe it's section 31 that allows for municipalities to be more flexible in terms of their own zoning and allows for those types of situations. So we will continue to work in our community with the city of Ottawa to find opportunities for some unique ways where we can bring all partners together—developers, affordable housing providers, housing advocates and the community—to maybe come up with those unique projects.

The other is having a sustainable track in terms of capital funding required for a lot of these projects. We are in dire fiscal times; I think we all know that. Government is making a significant contribution. I talked about a \$1.2-billion federal-provincial contribution in the last two years, which is making very significant, positive impact on the community. But having a long-term affordable housing strategy is a first step. By getting the mechanisms, the regulations right, as the financial situation of the province improves, we can talk about the capital needs as well. But I think what is very much needed—and I see I've got very little time—is that we need the federal government at the table as well. We need a national housing strategy. No government, municipal or provincial, can just work alone and deal with such a significant challenge like affordable housing.

I think Ontario has taken the right step in terms of having a long-term housing strategy. It is time that the federal government also comes to the table so that the kind of positive changes I was talking about that are being made in Ottawa Centre, in my community, can also be made across the province and across the country.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments? The member for Nepean—Carleton.

Ms. Lisa MacLeod: Thanks very much, Mr. Speaker. Just briefly, this is the first time you've been in the chair since you announced that next year you're going to go on to bigger and better things with your family, and I wanted to extend my best. I've always enjoyed you in the House in your capacity as Chair, but also as we spar sometimes across the way. I wish you much happiness in 2011 as it approaches.

I want to also thank my colleague from Ottawa Centre, who rose in defence of his community.

Having said that, the official opposition does have some concerns with this piece of legislation. As I spoke to this bill yesterday, my colleague from Burlington, who is our critic for municipal affairs and housing and who has an extensive background in municipal affairs, has raised some concerns, specifically—and I put this to the member—that the government, regardless of the rhetoric in here, has failed from time to time—most of the time—to meet their commitment to develop a 10-year affordable housing plan. Instead, with this legislation they have placed this cumbersome and potentially costly task on the local service managers so that once again they are able to step back in the event of failure and blame somebody else.

Let's talk about that for one moment, because that is one of the big concerns the official opposition, the Ontario PC caucus, has, is this blame game, whether it's from time to time blaming Stephen Harper or blaming Mike Harris or Ernie Eves. This week, we actually heard them blame municipalities for something. The reality is that at some point in time after seven and a half years you have to take responsibility for your own actions.

That is, I think, the most critical criticism that the official opposition has with this legislation. If you're going to put forward a substantive piece of legislation, make sure that you get it right. Make sure it's available to the opposition members in time, which this bill wasn't. And ensure as well that your stakeholders are part of the planning process.

The Deputy Speaker (Mr. Bruce Crozier): The member for Timmins—James Bay.

Mr. Gilles Bisson: I no doubt want to underline that the member who presented tries as much as he can in order to do what he can for his constituents, as we all do in this assembly, when it comes to not-for-profit housing or what it might be.

The issue to me, however, is, where are we at when it comes to not-for-profit housing in the province of Ontario today compared to what it was eight years ago or what it was even 20 years ago? Ontario is no longer in the not-for-profit housing business in the way that it used to be. We had a very proud history in the province dating back into the 1970s, 1980s and early 1990s, where massive investments were made in order to build not-for-profit housing projects across this province. Why? Because the private sector, as far as the market itself, did not provide the units necessary in order for many families to find a home.

In my own community—I'm sure it's the same in other communities—I have people who are calling my

constituency office on a regular basis, saying that they're not able to find a place to live. I have a family that we've been dealing with in a constituency office, as a matter of fact, just this last week. They have been given notice to vacate their apartment because the owner of the building wants to move into the building himself or a family member wants to move in, which is that owner's right. But there's nowhere for this family to go. A family of eight, including the parents, have nowhere to go when it comes to finding an apartment in the city of Timmins.

Clearly, there is something that needs to be done when it comes to not-for-profit housing. We're proud that we have a very strong not-for-profit housing stock in the city of Timmins, Kapuskasing, Hearst and other places, but we have not built on that stock for at least the past 15 years and I think it's high time we do. I don't see this bill achieving that in the end.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Mrs. Donna H. Cansfield: I'm pleased to rise and reply to the member from Nepean—Carleton. Certainly, when she speaks of a reality check, it's true. There is a reality check here. The reality is, whether we like to accept it or not, the previous government put a moratorium on housing in this province and 17,000 units were cancelled and virtually very little was built.

There's no question that there is a need that needs to happen across this province. Currently, our investment of \$2.5 billion has resulted in 22,000 new homes and well over 150,000 repairs. That is a \$2.5-billion investment. We've actually prevented more than 23,000 evictions to date through our rent control, so we have in fact put in place the beginning of where we need to go.

Ultimately, everybody has agreed in this House there is more that needs to be done, but we build on the foundation that we were given and the fact is that we were given a very shaky foundation, so we do what we can with the resources that we have. We put \$430 million a year into our programs. It's incumbent upon us as a government to ensure that those dollars are spent in the most cost-effective way possible, that they are providing the services for the folks who need them. It's also incumbent upon us as a government to ensure those dollars are well spent.

Part of this housing strategy is to look at those 20 programs right across this province to see if we're getting value for our money. Are we in fact providing the kinds of services—the service managers themselves have asked for this flexibility. Remember, during the 13 consultations across this province, it was the service managers who said, "We need more flexibility to do what we need to be able to do locally."

This is the beginning of a long-term strategy that we've put forward in this bill. I look forward to the consultations as we move forward, but there is no question that we're going in the right direction.

The Deputy Speaker (Mr. Bruce Crozier): The member for Durham.

Mr. John O'Toole: I want to comment on the member from Ottawa Centre. He comments frequently and al-

ways relates it directly to his riding. I think often he'd be better to perhaps look a little more objectively at what's actually going on across the province, because you are the government.

I was listening to our member from Burlington yesterday, who I thought gave a very thorough review of where we've been and where we are, not just on this, as she's our critic, but even this morning we had our member from Nepean-Carleton speak very effectively about how poorly the programs are working on many fronts, not just on the housing file but I would say certainly on the energy file, the jobs file and the tax file. You'd have to just ask a few questions and find out that there's a bit of trouble in the economy right now, which affects families—in fact, these very families we're talking about.

The rose-coloured-glasses statement that we heard from the member from Ottawa Centre needs to be reviewed. In fact, I'm going to take it on myself in the next round to speak on this topic and perhaps have a little more balance to my comments. I would hope at this time of year to just hold the government accountable without being personally critical. The people who are the most affected, whether it's on the housing or the jobs side or just the quality of life side, are always the most vulnerable. Our critic said yesterday, clearly, that shelter is probably the most important part of resolving the problems of poverty—to have a place that you call home. From there, you can build a life for yourself and your family. That's kind of missing today. I'm finding out that there's no support for the programs.

0930

The Deputy Speaker (Mr. Bruce Crozier): The member for Ottawa Centre, you have up to two minutes to respond.

Mr. Yasir Naqvi: My gratitude to the members from Nepean-Carleton, Timmins-James Bay, Etobicoke Centre and Durham for their feedback.

Let me make just one point very clear: I am paid to represent the good people of Ottawa Centre. So as long as I'm here elected, I will continue to talk about all the good things that are happening in Ottawa Centre and the kinds of initiatives and efforts I'm working on to make sure that the good people in Ottawa Centre have the quality of life they so very much enjoy. That is why I'm very proud. More needs to be done; no doubt about it. But I'm very proud that since 2007, we have seen significant investment in both new affordable housing being built in Ottawa Centre—almost 400 new units as we speak—and also many, many units that are being repaired so that people can live quality, healthy lives. That is my mandate, that is why I'm here and I'm never going to shy away from that.

I'll give you another example of an incredible project that is going on. Forty-two supportive housing units are being built for women through Cornerstone, an incredible organization in my riding. Of these 42 supportive units, about 22 are for senior women—a demographic in the population we need to really look after—and another 20 units are for chronically homeless women, again making

sure that they for the first time have a roof over their heads.

Some \$6.3 million is being invested, 50-50 from the federal and provincial governments, and the amazing thing, again, is this is really, truly supportive housing. We are providing health services, social services and housing services under one roof. The incredible amount of savings that we're going to gain from all other areas by bringing these services together under one roof is tremendous. I'm really proud that that is taking place in my community of Ottawa Centre, and I'm grateful to the government for making that investment.

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

Mr. John O'Toole: This morning I'm pleased to participate in Bill 140, An Act to enact the Housing Services Act, 2010, repeal the Social Housing Reform Act, 2000 and make complementary and other amendments to other Acts.

I looked and listened yesterday to all sides of the House speak and, in reviewing Hansard, I have a pretty thorough understanding of the various positions. Our critic from Burlington, Ms. Savoline, having served as a mayor and a regional chair, is very familiar with that level, and as our critic brings a lot of insight to the file. I reviewed her remarks yesterday and would encourage people who may be interested to look up Hansard online and get a clearer definition of our position on this important file. I also listened to the NDP critic, Mr. Tabuns, and found his remarks to be very compassionate. I would say that they're important; I'll put it that way.

The background on this whole thing is really more important than the bill itself. When you look at the state of the economy today as sort of a starting point, the most vulnerable are the most and the first affected. I think that you can look further back. There was a commitment by the government in the last election called the poverty reduction task force. It sounds very good and quite genuine. I don't think it's unique to the Liberal Party any more than any party that we try to have a strong economy that appropriates balance and opportunity, but not leaving people behind. I would put that on the record; it would be my position to stick to that general and broad theme of creating a strong economy so that we have a great quality of life. Without the strong quality of life—you look at some countries around the world today and look at their economy and the poor quality of life. They're kind of related.

You ask yourself, what's the genesis of good quality of life? Is it the economy, or do we just move to places around the world where it already exists? Well, in fact, around the world it's falling apart, because the economy is driving a lot of it. I don't blame any one government, but you have to respond to the infection that's in the economy at the time, whether it's in Ireland or Portugal or any other part of the world, without putting a disparaging comment on—I think it started in Greece and has percolated down, and I don't think it's finished. In fact, that same result is happening here.

When you go back to the laudable objective in 2007 of having a poverty reduction task force, which has reported to the minister, Ms. Broten, who received the report, one of the pillars of this recovery of building strength in the vulnerable community is shelter. I would say and put to you that shelter is probably first. How can you put down a resumé or a job application if you don't have a home? If your home is a shelter somewhere, it's pretty difficult and pretty desperate. Your life is probably in a lot of stress at that point, whether it's your family, your children, your partner, your friends. Your whole confidence is shaken—it's destroyed, many times—and mental health manifests itself, so that when you go to talk to people about your life, your future, your job, you haven't really got much confidence at the table.

That's an important goal. I don't know where the report is, but I would say that the "poverty reduction task force" is just an expression. If you look at the numbers—and I thought Ms. Savoline yesterday—I'm just going to quote her numbers in Hansard so that it's consistent. The numbers are quite striking. In fact, we often hear a quarrelling about what the numbers are in terms of jobs and job creation. I think it's important to put on the record that Ontario's population has grown since 2005 by 500,000 people. That means the province's economy must add at least 100,000 jobs per year just to keep up. If you look at China, I think they have to create a million jobs a week to keep up with population growth. There's a billion and a half people there; just do the math.

This is a serious economic problem, and I don't know what the jobs are. If you look at the report just recently on the Second Career, in which they invested a considerable amount of money—some \$36 million, I believe—how many actually got jobs? Yes, they trained. I read of one report last week where the person had a degree, had worked 12 years in the auto industry, lost the job through restructuring etc. and eventually went back, spent \$26,000 on tuition and other costs, and did get some relief, I think, but now has got more debt and no job. The job he's being offered is about one third of the income.

So when you look at statistics, what's the household average income? It's actually going down. What's housing? It's actually going up or stabilizing. So affordable housing itself is an oxymoron. Then you look at what the other solutions are for this permanent shelter threshold that I talk about, and it's rent.

What some of the real structural problems—there are vacancies. There are 22,000 vacancies, as our critic has alluded to, and at 22,000 vacancies one must ask themselves, what's with the landlords? First of all, there are a couple of reasons there. One of them would be the Landlord and Tenant Act. In fact, there's a really good article this morning in the paper on it. I would encourage people to have a look at this article this morning. The article talks about the Landlord and Tenant Act and how unbalanced it is. I thought I had it marked here. In it, it's really saying how the landlords are portrayed as rich, greedy persons, which I don't think—I know where I rent my office for the constituency, the landlord is a large

landowner in the area of Durham—and finds out that he is not that; he's very generous and quite compassionate. I will find that section here a little later.

I'm just going to say, though, really the same thing is the other report that has recently been filed with the new minister, Mr. Bartolucci, who has done a respectable job there, I would say. This was dropped on him when he was moved out of his previous ministry position. I would say that the difficulty here is—Building Foundations: Building Futures. Again, sort of like the poverty reduction task force, a great title—and actually not a bad booklet; congratulations—Ontario's Long-Term Affordable Housing Strategy. But if you read through here, and if you look at the bill itself, there's no money.

0940

I'm going to relate it to the global thing again. IT wasn't all caused by Premier McGuinty, but he's got to stop spending money. Let's be honest about it: You can't spend your way out of poverty.

Interjections.

Mr. John O'Toole: Exactly. Some of the members are saying you can't have it both ways. The reality is that you're sending signals out there—and that report I referred to precipitated itself into Bill 140. If you look at the bill and, again, refer to the work that's done, I'm going to put a context around all of these, poverty and the housing issue. I'm looking at an article that was in the Toronto Star yesterday. The Toronto Star is not my particular first choice to read in the morning, but nonetheless we do pay close attention to it. It's widely read and often has good cartoons.

Here's the Torstar article by Carol Goar from December 6. It says, "A Flurry of Announcements but Little Content." There's pretty well another way of saying that the cover on the booklet looks good, the titles of the policy themes sound good, but when you take off the cover, it's an empty box. It's like a child pulling the stocking out at Christmas and finding a lump of coal.

Here's what it says:

"Poverty reduction plans poured out of Queen's Park so fast last week it was hard to keep up with the paper flow.

"But once all the packaging had been stripped away and the self-congratulatory rhetoric sifted out, there wasn't much left. Welfare rates were still below the poverty line. Healthy food was still out of reach. Affordable housing was still a dream.

"The 1.6 million Ontarians living in poverty had to settle"—this is important—"for an 18-month study of social assistance, a slight loosening of the rent rules for subsidized housing and an extensive list of the good things Premier Dalton McGuinty had done for them."

Ask yourself—yes, they're spending lots of money—how's it working? How's it going? We've almost doubled the debt. Our budget is about \$106 billion or \$107 billion; of that, the deficit is about \$20 billion. That's the on-book debt part, not including the WSIB debt. That's about 20 cents on every dollar that we're borrowing. We're borrowing it from the future. We're

borrowing it from our children, who are graduating and can't find jobs. We're borrowing it. Wake up.

I've been here 15 years, in fact, and before that in Durham, when I was chair of finance. I sat on the very same committees and I met Floyd Laughren, a nice person, and I met Bob Rae, now a Liberal. Before the social contract, the plan then was the expenditure reduction plan—that's what they called it. They wanted all the municipalities to make cuts when some of members here were on council back then; I'm sure Ms. Savoline was. They wanted the municipalities to take the heat.

Then they couldn't get the unions or anyone to agree with them, so Floyd Laughren and Bob Rae designed a plan which was called the social contract. What it did was open up every single public sector payroll contract and take out about eight or 10 days' pay. The budget then was \$48 billion and the deficit was \$12 billion; that's 25 cents on every dollar you're spending. Plus, the budget today isn't \$48 billion—that was back in 1995—today the budget is over \$100 billion, so it's doubled.

Ask yourself, is it any better? Can you get into a bed in a hospital quicker? Do they release you from the hospital with any supports in the community? Is there any more long-term care? Is hydro cheaper? Is anything cheaper? No. They've increased taxes to the point where there's not a cent left in your pocket. Seniors can barely stay in their homes and you're talking about affordable housing. Start with making it affordable by keeping your hands out of their pockets.

I deal with constituents in my riding, as I'm sure all members do, and I don't flaunt the politics at them. I say, "What's the worst problem that you see?" "I can't pay my hydro bill." These are people who built the country and don't normally complain and they're finding that the municipal taxes—all part of this equation is the cost of providing services, and the wage infrastructure of that is incredible.

In fact, if you look—I just looked at the Public Sector Salary Disclosure Act recently because there were things going on in my riding in the energy sector that I wanted to know more about. The salary of the person who was sending out the bill on the rate increase and explanation—there was like an accounting manager. I was a manager at General Motors for 31 years, and a personnel manager, I might say, as well.

Interjection.

Mr. John O'Toole: Yes, I had quite an interesting job.

Here is the issue: That person's salary was \$348,000. Now, who are they in competition with? It's a monopoly. And it's rampant throughout the entire range of services under the current government's regime. Even their commitment in their budget spending—I'm going to put it in perspective here because it is related to this. Affordability should be led from the top, and quite honestly, I'm stressed and disappointed at the lack of ability to stop the spending.

In the last couple of days, we were dealing with a person with the Niagara Parks Commission spending

\$300,000 or \$400,000 on somebody who is running a park. I don't know. Where's the value? It should be done by volunteers, technically.

The province is in a serious problem, and until you admit you have a problem, you can't begin to deal with the problem. I don't want to blame the people in those sectors who are making \$100,000-plus. It was in the report in the paper there a few weeks ago. I'm critic of government services, and in that, there is a deputy minister who makes over \$350,000, and there are four assistant deputies all making over a quarter of a million dollars.

What does government services do? It's a large ministry that deals with contracts and deals with consultants. We're spending about \$1 million a day on consultants. We have 70,000-some public sector employees who are qualified people. Why have we got all these consultants? I think that's off-book payroll; that's what it is.

I look at some of the people who have been appointed. For instance, the head of the Ontario Power Authority is a good example or the IESO and all these electricity safety places; OPG, Ontario Power Generation; Hydro One; the OPA; the Ontario Energy Board—these are people making \$500,000 and up.

Interjection.

Mr. John O'Toole: Yes. So why is there no money in this bill for housing? I'm explaining it to the Minister of the Environment. You look after Earth Works up in Uxbridge, in my riding, and I'll be happy.

My point is that I have deeper concerns that you have a plan that has no money, which means you have no plan. Let's be straightforward with the people of Ontario. I'm going to say to myself that there are many members over there who I don't think intentionally set out to make things worse; I think we all try to make things better. I wouldn't blame any one individual or minister, but you have to deal with what's going on.

There's a good example just in the clippings this morning. This is how your sector is dealing with it: "Hydro Error Costs Retiree \$12,000." This is a retired teacher who has a property, which was his old family farm, I gather, and after the end of the year, he got a hydro bill where he was in arrears for \$12,000, and they just took it out of his account and he didn't have any money left. Now he's fighting to get the money back. That's a government agency. Don't blame it on somebody else.

There's a number here. It says, "Academic Rankings: How Canada is Becoming Outclassed."

Interjection.

Mr. John O'Toole: That's what the article says. I'm not making it up. Read it.

"Stacking the Deck Against Ontario Landlords" is the article in the National Post. Here is the issue that I'm talking about. If you look at the Landlord and Tenant Act and you read this article—and you wonder why landlords would sooner take their apartment building and turn it into a condo where you have the money.

How do people even get into their first house or home, which might be a condo? That's what is happening in Toronto, and landlords are saying that under this act—it

says here, “The law appears to have been drafted on the assumption that all landlords are rich and greedy. Under the act, a tenant can allow anyone to move” in to be a tenant.

After they get it, they can move in, they can bring friends in and you can’t get them out. In fact, if the person who is the tenant brings up a record of maintenance deficiency, the landlord may have to award money to the tenant, even if they haven’t been advised.

The landlord must play the nice-and-careful role in case they might offend someone and be accused of harassment. Even by asking repeatedly for the rent, they can be accused of harassment. Bringing up random maintenance deficiencies—“the Landlord and Tenant Board, which appears to” have been “set up specifically to help tenants exploit their landlords,” for example. I’m reading the article here, and we’re talking about affordable housing.

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Just watch what’s going around in the community and in the province and pay attention. And you wonder why housing in Ontario—the term “affordable housing” is an oxymoron. There’s no such thing. I think the average price of a home in Toronto is \$330,000, and unless you’re making \$45,000 a year, there’s no possible way. Then you look at the length of mortgages and people carrying 50% of their income as a mortgage. Those are signs that the current system isn’t working, and we’re leaving more and more people behind. Do not put out these artificial papers that imply that you’ve got a plan and do the very opposite. They mislead people, in my opinion.

I’m concerned that if you look at—there are 142,000 people on the current waiting lists. That’s unacceptable, if you look at how much other jurisdictions and other provinces are putting into it.

On the report, I’m going to say one last thing: There is federal money at the moment. Right now, it’s about \$900 million this year, last year and next year that goes into housing from the federal government. Yes, they are getting out of it.

Our plan is to have—not investing in capital; it’s investing in people. The rent subsidy provision in Bill 140 is something I’d accept. The rent-geared-to-income provision I accept. That is how you help people with the dignity of saying that they pay a fair share; that may be a very small amount, but at least they have the dignity of saying that they are paying, that it isn’t another handout that makes them feel even smaller and less confident in themselves and their family.

This bill is just one more thing. It’s disappointing. It’s too little, it’s too late and it’s completely—

The Deputy Speaker (Mr. Bruce Crozier): Thank you. The member for Timmins–James Bay for questions and comments.

Mr. Gilles Bisson: I always enjoy listening to my good friend from—

Mrs. Julia Munro: Durham.

Mr. Gilles Bisson: Durham. Thank you. I always have to point to get the riding names. That’s why I will

never run as a Speaker; otherwise I’d have to say, “Hey you, your turn.”

Anyway, I always enjoy listening to what he has to say and, quite frankly, I agree with him in the sense that this is sort of a late initiative at the end of a dying government’s term. They’ve now been the government of Ontario for seven-plus years.

They first ran, if you remember back early on, in the election that led to their first term, on building 13,000 housing units within—no, there were 20,000 housing units that were going to be built within the first three years. Here we are, seven years later. Around 10,000 units have now been built over a period of seven years, hardly anywhere near what they had called for in their own platform and certainly not anywhere near what the housing community is asking for, which is about 10,000 new units per year.

I understand there is a want on the part of this government to measure what the expectations are as far as the 10,000 units per year, but at least they should be able to meet their own targets that they had set when they ran back in the early election that led to their first mandate.

I look at this bill and I say, “What is this going to do? Is this going to do anything to rectify the deep housing shortage that exists in the province of Ontario when it comes to the not-for-profit sector?” I have to say no, because what we’re really dealing with is a bill that’s going to deal with some of the bureaucratic issues and about how not-for-profit housing is run, but it doesn’t deal with providing any funding, and it doesn’t deal with providing any initiatives, targets, goals or anything that deals with the issue of not for profit.

I’ll get a chance to talk about that a little bit later, but I wanted to agree with the premise the member had made.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Mr. Khalil Ramal: I listened to the member from Durham, and he promised us, before he spoke, that he was going to be balanced in the spirit of the season. But he wasn’t. He started talking about different things, and he talked about the economy in Europe, in the United States. Do you know what? We are lucky we live in Ontario. We have a government that was able to produce more than 50,000 jobs for the people of Ontario. Also, the recovery was more than 87% of job losses in the province of Ontario. I think it’s a very important step, and I think the member from Durham should stand up in his place and praise the government and thank the government and thank our strategy—

Mr. Phil McNeely: It’s 10% in the States.

Mr. Khalil Ramal: Yes, 10% in the States and 87% in Ontario. It’s a very important step.

We believe strongly in the people of Ontario. I think it’s our responsibility and duty to support the low-income people and the poor people among us in the province of Ontario by putting a strategy for affordable homes. I think that my colleague the member from Ottawa Centre outlined the government’s vision and how much we invested and how much we’re about to engage in the

people of Ontario in our strategy, our vision, for affordable homes in the future.

He was talking about many different elements. He was talking about the mortgages. I was listening the other day to the Bank of Canada. Do you know what Mr. Flaherty said? Ontarians comfortably are able to pay more than \$300 per month for a mortgage, which is good. Our mortgage is protected. If you don't believe me, go back to the record, go back to Mr. Flaherty's announcement.

I think it's important to talk about those elements because in Ontario, in Canada, we are comfortably trying to recover from our downturn of the economy, unlike what happened in Europe and what happened in the United States, because we have a plan, we have a strategy. We believe in the people. We invest in the people of Ontario.

So, the member will hopefully join us and support the affordable homes not to be empty affordable homes.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Ms. Lisa MacLeod: I guess this is where I say, now back to the regularly scheduled debate of a current issue. If you listen to my colleague across the way, you will hear one side of the story. It's a very rosy, glossy fairy tale. But the reality is, as my colleague from Durham has pointed out, things in Ontario aren't that great.

For example, and I'd like to say this to my colleague, we have the highest unemployment in Canada. We're a have-not province for the first time since Confederation, thanks to them. They have doubled the debt. They have doubled the deficit. Ontarians aren't working, and they have a high debt load.

The reality is, an affordable housing plan should make housing affordable for Ontarians. This legislation does not do that. Do you want to know why? Because it has been the economic and the fiscal policies of that government, who have time and again spent our children's mortgages and mortgaged their futures. If you ask me to talk to the folks back home in Ottawa, particularly in Nepean-Carleton, they're going to tell me that housing right now is not affordable because their hydro bills have doubled. They're going to tell me that their savings have been depleted to pay for so many of their risky schemes, whether that is in energy or elsewhere.

Last week I had a round table with seniors, with John Yakabuski, the MPP for Renfrew-Nipissing-Pembroke. Each of the seniors who sat there and told us their stories were concerned about housing, either staying in their own home or wondering what is next as they move through their retirement. They're concerned about their families. This bill is not going to save that. In fact it's their budget, hopefully, next year, that's going to start putting things in place so that Ontarians are working again and that they're paying for their bills.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Mr. Bill Mauro: I want to thank the member from Durham for his comments. He is often on his feet representing the interests of his party. As an old friend of mine used to say, they're beating him like a rented mule over

there. He's carrying more than his fair share of the mail over there, once again standing up representing his party. I want to thank him for that.

A few facts: Since 2003, \$2.5 billion was invested in this sector, helping us to build 22,000 new units, repair over 150,000 existing units and provide rent supplements to 35,000 different families.

There is something I'm not sure that's been put on the record that I find very interesting when it comes to this particular issue. Under our government, since we've been in power since 2003, the average rental increase under the Liberals is 2.05%. Under the Tories, not bad: 2.9%—almost 3%—in their seven or eight years in power. Guess what? Under the NDP, those who like to proclaim that they're the protectors of the most vulnerable people in the province, the average rental increase in their five years was almost 5%: 4.82% per year.

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Out of his 20 minutes my friend from Durham spent a fair bit of time talking about energy. I'm not sure how he migrated over to that topic, but since he did, I'm sure you'll allow me to respond. I need to remind people that when the Conservatives were in power in 1999, the debt retirement charge, for the first time in the history of the province of Ontario, came into being. It was put on your energy bill. What happened when they put the debt retirement charge on in 1999? Up until 2003, they collected anywhere from \$1 billion, \$2 billion to \$4 billion; I'm not sure how much. For the first time under them, \$1 billion, \$2 billion to \$4 billion was collected, but the debt retirement charge went from \$19.4 billion up to over \$20 billion. It increased by \$1 billion when they brought \$2 billion to \$4 billion in. I don't know where the money went.

The Deputy Speaker (Mr. Bruce Crozier): The member for Durham, you have up to two minutes to respond.

Mr. John O'Toole: I appreciate that opportunity. I just want to put a response on the record to the members from Timmins-James Bay, London-Fanshawe, Nepean-Carleton and Thunder Bay-Atikokan. I thank them for listening.

On the job front, I'm just going to report here, let's not forget that this government had its hand in getting Ontario to where it is today, whether that's good or bad; take your own medicine. The unemployment rate presently stands at 8.6%, higher than the national average of all of Canada, which is 7.9%. How are you doing? It's higher than Korea; it's higher than Mexico; it's higher than Brazil. Let's look at other provinces. Don't blame Ontario's situation on the global downturn. If you're looking at other jurisdictions, Ontario's unemployment rate has surpassed Canada's national average every single month since January 2007—almost two full years before we saw a financial crisis. Your policies are simply wrong. It's unfortunate, but they're wrong. I'm going back to first principles. You have to have a strong economy to make sure that we have a quality of life, whether it's education, health care or social housing, as we're talking about today. When I say "wrong," it's the wrong signal.

The last one, the member from Thunder Bay—Atikokan, was kind.

Adam Beck in 1906—the founder of electricity for Ontario, or hydro anyway—his policy was “power at cost.” He drove an economy in Ontario based on safe, reliable, affordable power. What is missing today? I believe our power system is safe; I believe it’s quite reliable; but it’s not affordable. Sixty per cent of all of the energy used is used by industry. The residential side is a very small part of the consumption ball, but it is non-discretionary consumption and it affects the poorest of the poor, and this is part of your plan that doesn’t work.

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

Mr. Gilles Bisson: I’m glad to rise in this particular debate because it’s not often that we get to speak on the issue of not-for-profit housing here in the assembly. We haven’t seen a bill touching on that subject for some time. It gives us a chance to all weigh in and talk about what we think is good and what we think is bad and what needs to change within the not-for-profit sector.

I have to say I was elected here in 1990, and when I came to this assembly the province of Ontario at that time, under previous governments and under the NDP government of the day that I came in with, was very active in the not-for-profit housing scene. Across this province, co-op housing units, municipal not-for-profit housing units and others were being built across the province at a fairly good rate. In communities everywhere from Cornwall to Sarnia to Timmins to Moosonee, and even on some of our native reserves, we saw not-for-profit housing being built. Why? Because governments of the day, dating back to the 1970s, understood that there is a housing crisis in the province of Ontario and that not everybody in this province can afford to buy a house. Therefore, if you’re in the rental market, there are limited options available to people when it comes to the ability, first of all, to find suitable rental accommodation, and number two, to be able to pay for it, as far as, how much is that unit going to cost you?

Governments of the day were very active on the housing file. You had on the one side governments dating back to the time of Bill Davis and up to the time of Bob Rae that were very active in making sure that we built not-for-profit housing in this province, and on the other side those governments from the time of Mr. Davis to the time of Mr. Rae were very active on rent control legislation and making sure that we were able to have rent control of some form that allowed the rents not to go through the roof so that people could afford to find a rental unit and pay for it. Otherwise, because you’re in such a tight market when it comes to the availability of rental units, the rents were going through the roof, as they would say.

So governments, starting back in the time of the Conservatives, pushed then by the NDP and by the Liberals in opposition, and eventually even ourselves as the government from 1990 to 1995—there’s much that was done to deal with rent controls so that the private sector

housing that was out there was available and was made affordable to people across this province.

Now, did everybody like that? No. I have landlords in my riding who came to see me from the time I was elected until the time we scrapped rent control under the Conservative government—one moment. Sorry about that. I have a lingering cold that I think just about everybody in this assembly has caught, and if they haven’t caught it, they’re about to get it; it’s been going around, as I see, the benches.

As I said, I’ve had people in my riding who are landlords who didn’t like rent control and saw that as a barrier to their ability to pay the bills, to maintain their own housing stock and make the kind of profit they thought was fair with the investment they were making in their housing stock. Nonetheless, government said, “Listen. We need to balance the need of a person to be able to make money with the need of a person to be able to afford to pay the rent in the first place.” So it was with much chagrin that, back in the Tory days under Mike Harris, I saw rent control scrapped in this province. We’ve moved now to what we call vacancy decontrol. So now, if I’m in an apartment building, as long as I stay in that apartment, my landlord can’t raise my rent more than a certain percentage every year. But the moment that I leave the apartment and vacate it, the landlord then can reset the rent.

Say that he used to charge for a downtown Toronto apartment, one unit—I’m probably paying about \$1,500 a month, which is quite cheap in downtown Toronto. As I looked at new members being elected to the Parliament three years ago, as they came down here to rent units, they’re paying upwards of \$2,000 a month for a rental unit here in downtown Toronto. It goes to show you what’s happened with vacancy decontrol. We’ve gone from paying \$1,400 or \$1,500 a month for a one-bedroom apartment to—and the minute the person moves out the landlord is able to demand a higher price—as much as \$2,000 or \$2,100 a month for that same unit.

Clearly, there are a lot of people out there who can’t afford to pay that kind of money for a housing unit. Imagine being a young couple with a couple of children needing a three-bedroom apartment and how much that costs in the downtown core. I can tell you, if a one-bedroom unit on the corner of Bay and Wellesley Streets is going from \$1,900 to \$2,100 a month, imagine what you’re paying for a three-bedroom unit in that building or any building in and around the downtown of the city of Toronto.

If you move outside of the downtown core, if you move north of Eglinton or even farther north, to a place called Timmins or Moosonee, rents there can be pretty darned expensive too. You’re looking at rents for a one-bedroom apartment in a community like Timmins—a decent one—of about \$700 to \$800 a month. That is certainly not what you’re paying downtown in Toronto, but still, it’s a fair amount of money for people to pay.

So the question becomes, what has this government done in the seven years they’ve been here on a promise to

deal in a progressive way with housing policy in this province? What have they done to address any of the issues on the private side, as far as rent control, and what have they done in order to deal with for not-for-profit housing? I would say very little. We are still under the Mike Harris rent control legislation; that has not been changed significantly. There have been smatterings—some dabbings, as they would say—of attempts to make it look as if something was done but we essentially do not have rent control in this province other than what we call vacancy decontrol.

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That is causing a real hardship for people because rents are getting much more expensive with the tighter market. Unfortunately, it needs to be said that prices of rental units are going up to the point that a lot of people can't afford to pay the kind of rents that are being asked, because there's such a shortage of stock when it comes to rental units across this province.

Now, there are some places in the province, I'm sure, where rents are reasonable because there is a large vacancy component, but in many places across Ontario that is not the case. I can tell you in the city of Timmins, certainly, rentals are hard to come by, especially quality rentals, and if you do find one, you will pay quite the dollars. Many people can't afford to pay the kinds of rents that are being asked for.

That brings us to the not-for-profit side. The reason the province of Ontario got into the not-for-profit business was very simple: It was to allow those people on pensions, such as seniors; people with disabilities; people who are on ODSP; or people with a lower income who are working minimum-wage jobs to be able to afford to find a one-, two- or three-bedroom apartment and pay rent geared to income. A percentage of the income would be calculated as the rent, and then the rest of it would be paid by the rents collected overall in the unit as well as the subsidy that you got when you initially built the building.

Typically it's about 30% of your income, in a not-for-profit unit, that goes to rent. If you're making \$1,000 a month, 30% would be \$300 a month that you would pay. It might be 35%, but the last time I looked it was 30%, so I may be a little bit off on the number, but the idea is that it's rent geared to income. That says the price of your rental is based on a percentage of your income. We built these not-for-profit housing units in order to be able to do that.

Some would argue, and certainly the Conservative government argued this when they came to power in 1995, that they shouldn't be in the housing business and that it was costing Ontario a lot of money. Really, it wasn't costing us any money. Yes, at the beginning of the construction we were providing dollars to assist with engineering, the development of the project and the actual construction. We would secure the mortgages, and in some cases we would put in some money upfront, but the unit itself was paid for over time, because eventually the mortgage gets paid down; the rents that are collected

on the rent-geared-to-income unit are enough in order to maintain the stock.

If you look at a lot of the housing stock in this province, and certainly, it's the case in my riding, I would venture to guess that there are probably not too many units in my constituency that still have a mortgage on them. Pins Gris and Kaleidoscope and other various not-for-profit or co-op housing units that were built in my riding were built in the early 1990s. That would mean that they've been around for at least 15 years. The mortgages on these things were probably around 20 to 25 years max, so most of them have their mortgages completely paid off or they're very close to being paid off.

This means to say the dollars to maintain these particular units, by and large, come from the rents that are being paid by the tenants. It's a not-for-profit housing model, so the money that is paid by the individual that comes into the co-op or the not-for-profit housing agency goes towards maintaining that building. Do we need to change an elevator? Do we need to change windows? Do we need to reinsulate? Do we need to fix the roof? That's where that money comes from.

Those not-for-profit housing agencies and co-ops have done quite well at managing that money so that, over the longer term, those units actually don't cost the province anything. So yes, there's an initial investment up front, but what we end up doing is dealing with a housing shortage in the province of Ontario by front-loading our costs as a province, and eventually the units themselves help to pay the overall cost of maintaining those buildings. A lot of our buildings now have been in the system for quite a long time.

If you look at Regent Park, which is one of the older and probably one of the most well-known housing projects—Moss Park and Regent Park have been around for the better part of 50 years. Certainly, they're going to need redevelopment, but my point is that maybe at the time when we developed them we thought that was the perfect model, but we learned after that it was better to have mixed housing within the not-for-profit housing system.

The Deputy Speaker (Mr. Bruce Crozier): Member for Timmins–James Bay, I'm sorry to interrupt you, but the time is now 10:15, and according to standing order 8(a) this House will recess until 10:30 of the clock.

Second reading debate deemed adjourned.

The House recessed from 1014 to 1030.

INTRODUCTION OF VISITORS

Hon. Harinder S. Takhar: There are 90 grade 5 students from Middlebury Public School in my riding of Mississauga–Erindale visiting the Legislature today. I want to extend them a very warm welcome, along with the parents and the teacher.

Mr. Jerry J. Ouellette: I'd ask all members to join me in welcoming page Kyle Fitzgerald's mother, Roxanne;

father, Chad; and grandfather Charles Whiteman to the chamber.

Ms. Andrea Horwath: I'd like to welcome the immigrant women's leadership group to the members' gallery. They represent a partnership between Regent Park Community Health Centre, Central Neighbourhood House and the Centre for Community Learning.

Hon. Monique M. Smith: I'd like to welcome to the House the family of today's page captain, Emily Hryb. Her grandparents Don and Gail Mason are here; her mom, Jennifer; her dad, Brett; her aunt Megan; and her brother Mason. I went to school with her mom, her aunt and another aunt who isn't here today. They're a great family from North Bay and we'd like to welcome them here today.

Mr. Peter Tabuns: It's my pleasure to welcome Elias Morales, Roberto Morales, Carolina Morales, Jorge Martinez, Maria Holman, Imelda Suarez, Carmen Garcia, Calixto Ortiz and Jose Linares here on a civics course.

Mr. Reza Moridi: It is my distinct pleasure to welcome newly elected councillors of the town of Richmond Hill: Carmine Perrelli, councillor of ward 2 and Castro Lio, councillor of ward 3. Please join me in welcoming the councillors to the House.

Hon. Carol Mitchell: I'm very pleased to introduce team Ontario today. Members in attendance: Adrian Rehorst, John Maaskant, Reg Cliché and Jack Vanderland. I want to remind everyone there's a wonderful reception this evening. Come and eat lots of fresh chicken.

Mrs. Maria Van Bommel: I would like to introduce to the House my husband and retired chicken farmer, René Van Bommel, who's joining us today.

Mr. Kevin Daniel Flynn: I'd like to introduce visiting us today from New Brunswick, Karina LeBlanc from AutismPro, and a constituent of mine, Dean Hannaford, who's director of business development for Essential Skills.

Mr. Lou Rinaldi: I'd like to introduce some folks that are making their way into this chamber as we speak: Mayor John Williams, a director of the Quinte Economic Development Commission; Ted Reid, a director from the Quinte Economic Development Commission; Bruce Davis, executive director of Trenval Business Development Corp., Chris King, chief executive officer; Gerald Draaistra, a director and also my neighbour; and Linda Lisle, economic development of the city of Quinte West.

Hon. Leona Dombrowsky: I would like to introduce members from my riding from the Quinte Economic Development Commission. They are Mitch Panciuk, Tom Lafferty, Ross Rae, Peter McCann, Karen Poste and Mike Hewitt.

Mr. Robert Bailey: I'd like to take the opportunity to introduce a couple of friends of mine from Sarnia-Lambton that were down to partake in the Speaker's Christmas party and enjoyed themselves very much: Les Armstrong and George Fortin from Sarnia-Lambton. Speaker, it was a good party.

The Speaker (Hon. Steve Peters): Joining us this morning in the Speaker's gallery is a former staff mem-

ber and a good friend of mine, Erin Drushel. Welcome back to the Legislature. Welcome back to Canada as well.

Happy birthday to our colleague from Ancaster-Dundas-Flamborough-Westdale as well.

ORAL QUESTIONS

COMMUNITY SAFETY

Mr. Tim Hudak: My question to the Premier: Premier, a sign that a government has badly lost its way is when it exercises such extraordinary poor judgment as you did in passing what effectively were war measures powers and then conspired to keep them a secret from the impacted public. Premier, the Ombudsman called it "a premeditated, conscious decision not to announce the existence of the regulation or the reviving of this wartime act."

Premier, please tell us why did you pass this illegal G20 law and why did you conspire to keep it a secret from the general public?

Hon. Dalton McGuinty: I appreciate the question, but first of all, I want to thank the Ombudsman for the work that he has done. As usual, he was very, very thorough. I appreciate all of his findings and the recommendations; we intend to move on each and every one of those. In particular, the minister is already moving and establishing a new protocol.

I also appreciate the finding of the Ombudsman that our government acted with the best of intentions. When we were approached by the police with a particular request, we acted on the basis of that request. We said clearly that we could have and should have done more with respect to adequately communicating this change to Ontarians. But again, I want to thank the Ombudsman for his recommendations and assure Ontarians that we intend to act on every one of those.

The Speaker (Hon. Steve Peters): Supplementary?

Mr. Tim Hudak: Premier, quite frankly, the old hand-dog look, your old promise to do better simply isn't going to cut it anymore. This was not a simple error. It was not a simple mistake. The Ombudsman said that this was a premeditated plan to keep the general public in the dark.

Before the minister, there were cabinet meetings, including up to 14 ministers who could have put a stop to this extraordinary law and who could have said, "No, it is wrong to conspire to keep what's equivalent to the War Measures Act secret from the general public." Not one had the courage to stand up and say that this was wrong. In fact, the emails the Ombudsman has uncovered show you actually put your minds to work on how to keep these illegal war measures a secret. Premier, why do you think you can get away with this?

Hon. Dalton McGuinty: To the Minister of Community Safety and Correctional Services.

Interjections.

The Speaker (Hon. Steve Peters): Members will please come to order.

Mr. Tim Hudak: It was clearly a question to the Premier.

The Speaker (Hon. Steve Peters): The honourable members know that the Premier or any minister can refer a question—

Interjections.

The Speaker (Hon. Steve Peters): Minister?

Hon. James J. Bradley: I would first of all note that the Ombudsman has stated in his report that the regulation, as passed by the government, had a “laudable purpose.” The regulation had the purpose of “protecting participants ... either from terrorist enemies or from protestors.” The Ombudsman also goes on to say, “There is no fair basis for suggesting that the ministry’s purpose in recommending the passage” of the regulation “was to infringe or deny freedom of expression.” Those are the words of the Ombudsman.

I’m pleased with the Ombudsman’s report. I had an opportunity to sit down and meet with the Ombudsman, to review each of his recommendations and to review his findings, and I gave him an undertaking that the government would implement each and every one of the recommendations made by the Ombudsman of the province of Ontario. And our government is going to—

The Speaker (Hon. Steve Peters): Thank you. Final supplementary?

Mr. Tim Hudak: Quite frankly, I cannot believe the contempt the Premier is showing by refusing to answer these questions: contempt for the members of the assembly, contempt for the—

Interjections.

1040

The Speaker (Hon. Steve Peters): Members will come to order.

Please continue.

Mr. Tim Hudak: I want to see this Premier have the courage of his convictions and stand up and answer these very important questions on behalf of Ontario families.

As the Ombudsman’s plan demonstrates, then Community Safety Minister Bartolucci set in motion, once the regulation was passed through cabinet, a plan to keep it secret—a premeditated plan to cover up the secret law. The Ombudsman, in fact—

The Speaker (Hon. Steve Peters): I ask the honourable member to withdraw that last comment.

Mr. Tim Hudak: Withdraw.

In fact, the Ombudsman uncovered a June 7 email from the minister’s office which says, “Everyone was on board with drawing out the actual release of that knowledge to the public for as long as what is reasonable.... So long as we can stress as best we can that this should be kept under wraps....”

From the minister’s office, who authorized the law and keeping it secret from the general public?

Interjections.

The Speaker (Hon. Steve Peters): Members will please come to order.

Mr. Tim Hudak: The question was to the Premier, Speaker. The question was to the Premier.

Mr. Toby Barrett: Who authorized the cover-up?

The Speaker (Hon. Steve Peters): The member from Haldimand–Norfolk will withdraw the comment he just made.

Mr. Toby Barrett: Withdraw, Speaker.

Interjection.

The Speaker (Hon. Steve Peters): The member from Davenport, it’s not helpful.

Minister?

Hon. James J. Bradley: Once again, I use the very words of the Ombudsman, who said: “There is no fair basis for suggesting that the ministry’s purpose in recommending the passage of” the regulation “was to infringe or deny freedom of expression.” The Ombudsman has also stated in his report that the regulation, as passed by the government, had “laudable purpose.”

I am pleased to have the Ombudsman’s report. I have asked—as the opposition would know, we’ve hired Chief Justice McMurtry to review the Public Works Protection Act. I’m pleased that the Ombudsman shares our view, but Mr. McMurtry’s mandate covers the areas of the recommendations of the Ombudsman—

Interjection.

The Speaker (Hon. Steve Peters): The member from Leeds–Grenville will withdraw the comment, and if this language persists, I’m just going to start to name the members.

Mr. Steve Clark: Withdraw.

The Speaker (Hon. Steve Peters): Thank you. Minister?

Hon. James J. Bradley: Justice McMurtry’s deliberations, of course, will benefit the Ombudsman’s report, and the recommendations of the Ombudsman will be very helpful to Mr. McMurtry.

Following Justice McMurtry’s advice, we’ll make any needed amendments to the Public Works Protection Act to ensure that it reflects the security concerns of the province and the values of our society—

The Speaker (Hon. Steve Peters): Thank you. New question.

COMMUNITY SAFETY

Mr. Tim Hudak: My question is to the Premier of the province of Ontario concerning the Premier’s conduct and that of his office, and Premier, you can’t duck and hide from these important questions. Please stand up and respond.

According to the Ombudsman, your office, the Premier’s office of Ontario, also had its fingerprints on the illegal G20 regulation and the plot to keep it a secret. On page 57, the Ombudsman quotes from a Ministry of Community Safety email which states that the Premier’s office had also been consulted and “are fine with this moving forward.”

I want to know: Did the Premier of the province himself authorize this secret law and the premeditated plan to keep it secret from the general public?

Hon. Dalton McGuinty: To the Minister of Community Safety and Correctional Services.

Hon. James J. Bradley: As the Ombudsman pointed out—

Interjections.

Interjection: If it's not so, say so.

Mr. John Yakabuski: Speaker, it is directly on the actions and the behaviour of the Premier—

The Speaker (Hon. Steve Peters): The honourable member from Renfrew, speaking—

Interjections.

The Speaker (Hon. Steve Peters): No. No.

Interjections.

The Speaker (Hon. Steve Peters): I am going to name the member from Peterborough, Jeff—

Interjections.

The Speaker (Hon. Steve Peters): I don't need any help.

I'm going to name the member from Peterborough, Jeff Leal. I warned the House about the use of that word. Sergeant-at-Arms?

Mr. Leal was escorted from the chamber.

Interjection.

The Speaker (Hon. Steve Peters): Government House leader, I really don't care if you believe it or not.

Minister?

Hon. James J. Bradley: As the Ombudsman pointed out, the regulation met the legal requirements for publicizing regulations, but I think, in fairness, as he also pointed out, technical compliance was not good enough and e-Laws posting is not good enough. We should have communicated properly, clearly and widely. I have said this and others in the government have said this.

My colleague needs to remember the potential security threat. We had 20 of the probably top targets for terrorists in the province of Ontario, in downtown Toronto, where the federal government decided to have this particular gathering of international people. Second, we had threats being made by the Black Bloc that there was going to be violence. Third, there was a bombing—

The Speaker (Hon. Steve Peters): Thank you. Supplementary?

Mr. Tim Hudak: I will ask for the fourth time for the Premier of this province to stand up and be accountable for the decisions that he made and those of the ministers of his government.

Premier, the Minister of Community Safety demonstrated extraordinarily poor judgment, recommending an illegal regulation that invoked war measures powers and then put in place a premeditated plan to keep it secret from the general public. When he got caught he should have done the honourable thing and resigned, and if he didn't and I were Premier, I would fire that minister on the spot.

Premier, will you do the right thing? Will you stand up and be accountable for the act you brought forward and

the plan to keep it secret? Will you fire Minister Bartolucci from cabinet today?

Hon. James J. Bradley: I do not recall the Ombudsman, when I read his report, calling for the recommendation that the Leader of the Opposition has happened to make. I certainly am in compliance with that.

I know that as members of the opposition—and I hear a lot of noise out there—you continue to call, on any particular instance, for the resignation of ministers. That is what the opposition happens to do.

The Speaker (Hon. Steve Peters): Final supplementary?

Mr. Tim Hudak: I will ask for the fifth time for the Premier of this province to stand up and be accountable for his government and his minister's decisions. No doubt, this resembles a government on its last legs when it thinks it's the right thing to do to bring in a war measures act and then invoke a premeditated plan to keep it secret from the general public. It is far too late to say you're sorry and that you're going to do better. Premier, with all due respect, you're showing incredible contempt for the members of the assembly and Ontario families by refusing to answer these questions.

1050

Here are the facts. You have revived war measures. You had a premeditated plan to keep it secret from the public, and you refused to fire the minister who showed such extraordinary bad judgment. Why is it—

The Speaker (Hon. Steve Peters): Thank you. Minister?

Hon. James J. Bradley: I find it astounding that the Leader of the Opposition who, in order to gain the power of the leadership of his party, was prepared to make a deal with the member for Lanark, that deal being to abolish the Human Rights Commission of Ontario—I find it astounding that the same leader today would characterize himself as a defender of civil rights in the province of Ontario.

COMMUNITY SAFETY

Ms. Andrea Horwath: My question is to the Premier. Cabinet ministers met in secret to pass a wartime regulations act under the Public Works Protection Act last June. My question is a simple one: Can the Premier tell us exactly who was at that meeting?

Hon. Dalton McGuinty: I don't think it's going to come as a great shock to the people of Ontario that cabinet meets in secret on a regular basis. That's our responsibility. In fact, we take an oath. We are sworn to secrecy when it comes to discussing those kinds of matters.

I want to, once again, take this opportunity to thank the Ombudsman for his work, to assure Ontarians that we take responsibility for failing to properly communicate the change we had made. It was significant and deserved greater effort on our part. I also want to thank the Ombudsman for his finding that we acted with the best of intentions.

Our intention now is to act on those recommendations. It's appropriate and prudent that we wait for the recommendations that are forthcoming from—

Interjection.

The Speaker (Hon. Steve Peters): I name John Yakabuski, the member from Renfrew–Nipissing–Pembroke.

Mr. Yakabuski was escorted from the chamber.

The Speaker (Hon. Steve Peters): Supplementary?

Ms. Andrea Horwath: Yesterday, the Ombudsman noted that individuals were consulted before the government passed their illegal and unconstitutional regulation that led to the loss of civil rights and mass arrests in this province. Did the Premier, in any way, consult with constitutional experts or legal experts of any kind, and if so, what concerns did they express?

Hon. Dalton McGuinty: To the Minister of Community Safety.

Hon. James J. Bradley: As the member would know, the government receives its advice from government lawyers when crafting legislation. I'm not an appeals court judge, so I can't make a judgment as to whether something is illegal or something is unconstitutional. That, of course, is why we have appointed former Chief Justice Roy McMurtry of Ontario, an eminent justice, a person who has had many responsibilities both in this House and outside this House, to look into the law and make a determination as to whether this law is appropriate in the year 2010. The law originally, as you know, was constructed in 1939, and this is a regulation from that law.

So I am looking forward with anticipation to the deliberations of Justice McMurtry, and I suspect the member is as well.

The Speaker (Hon. Steve Peters): Final supplementary?

Ms. Andrea Horwath: Well, eureka. Maybe they should have consulted before they passed the regulation.

I'm trying to figure out exactly what the Premier was thinking. He's a lawyer, but he and his government have demonstrated appallingly poor legal judgment with their actions. Did the Premier not, at any time, have any concerns, or did he really think it was perfectly okay to secretly enact an illegal and unconstitutional wartime regulation?

Hon. James J. Bradley: Again, I say to the member, not being a lawyer, not being a constitutional lawyer, but particularly not being an appeals judge, that I'm unable to make that determination as to whether something is illegal or unconstitutional. That is exactly why we have engaged former Ontario Chief Justice Roy McMurtry to take a very careful look at the law as it exists at the present time. This was a regulation that was passed as a result of that law. I think that Justice McMurtry will benefit immensely from the recommendations that have been made by the Ombudsman of Ontario and that he will take into account those recommendations.

I know that the member will be looking forward with anticipation, as well, to the deliberations of Mr. McMurtry

and the recommendations that are forthcoming from those particular deliberations.

COMMUNITY SAFETY

Ms. Andrea Horwath: My next question is also to the Premier. If the Premier felt that there was nothing at all wrong with this regulation—and he still seems quite certain of that fact six months later—why didn't he tell anybody when he passed it?

Hon. Dalton McGuinty: I want to just quote again from the Ombudsman's report, because I think it's very helpful, and I think he speaks throughout to the public interest, which is, I think, what all of us are determined to uphold here.

He says, among other things, "The government has announced that the Public Works Protection Act will be reviewed.... This is a step in the right direction. I have recommended that in the context of this review, the ministry should take steps to revise or replace the act." We are giving that very careful consideration. As I say, we look forward to the report of the Honourable Mr. Justice Roy McMurtry.

He also says, "On November 1, 2010, the minister confirmed on behalf of the government his unequivocal commitment to act on my recommendations in a timely manner. I am satisfied with the minister's response to my recommendations and will monitor the ministry's progress in implementing them."

Again, we respect the findings. We endorse the recommendations. We look forward to acting on those in concert with Mr. Justice Roy McMurtry's recommendations as well.

The Speaker (Hon. Steve Peters): Supplementary?

Ms. Andrea Horwath: The Premier released a media statement during the G20 summit. Why didn't he use that opportunity to clarify the misinformation about the illegal and unconstitutional law that he passed?

Hon. Dalton McGuinty: To the Minister of Community Safety and Correctional Services.

Hon. James J. Bradley: I think it's instructive to look at the recommendations that the Ombudsman has made, that I have given unequivocal assurance that the government will implement. He says, "The Ministry of Community Safety and Correctional Services should take steps to revise or replace the Public Works Protection Act." The government will do that.

"The Ministry of Community Safety and Correctional Services should examine whether the range of police powers conferred by the Public Works Protection Act should be retained or imported into any revised statute." We are prepared to do that.

He says, "The Ministry of Community Safety and Correctional Services should develop a protocol that would call for public information campaigns when police powers are modified by subordinate legislation, particularly in protest situations." We are already doing that.

"The Ministry of Community Safety and Correctional Services should report back ... in six months...." I have

given the assurance that we will give a full and detailed report to the Ombudsman on the progress which has been made—

The Speaker (Hon. Steve Peters): Thank you. Final supplementary?

Ms. Andrea Horwath: There can be no doubt: What happened during the G20 showed a chilling disregard for people's civil liberties and for democracy itself. The Premier passed an illegal and unconstitutional wartime law and not only didn't debate it, but he bent over backwards to hide it from the public.

Ontarians are owed an apology. When will the Premier provide one for his shocking failure to uphold the trust that the people of this province should be able to have in him?

Hon. James J. Bradley: Mr. Speaker—

Interruption.

The Speaker (Hon. Steve Peters): Oh, we'll let the honourable member take that call.

Interjections.

The Speaker (Hon. Steve Peters): Minister?

1100

Hon. James J. Bradley: I think what's important is that the government has indicated very clearly that it believes that better communication would have been very helpful in this particular case. But it has also indicated clearly that it's prepared to take a variety of actions that the Ombudsman happens to have recommended to us.

I think I remember that in the Ombudsman's report a reference made to the fact that, in 1990, the NDP government reviewed the Public Works Protection Act, had an opportunity to make changes to it and chose not to do so. Now, they may have had very good reasons for not changing it, but I do say that in 1990 the NDP government did have that opportunity, and chose on that occasion not to revise the act.

The act was in place, it was passed by the Legislature a number of years ago, and the regulation flowed from that particular act—

The Speaker (Hon. Steve Peters): Thank you. New question.

COMMUNITY SAFETY

Mrs. Christine Elliott: My question is for the Premier. The former Minister of Community Safety signed off on the illegal G20 law that invoked war measures in Toronto. The war measures law then went to the legislation and regulations committee for approval on May 31. Eight ministers sit on that cabinet committee. On June 2, a five-member cabinet meeting approved the illegal law. In all, up to 14 ministers have their fingerprints on the illegal G20 law.

According to the Ombudsman, you say that the names of the ministers who agreed to invoke martial law are solicitor-client privilege. Well, Premier, you're the client: You can waive the privilege. Which of your ministers should be held accountable for invoking the illegal war measures legislation?

Hon. Dalton McGuinty: To the minister.

Hon. James J. Bradley: First of all, I should point out to the member that when you look at the number of people who are looking into this particular law, we have the Toronto Police Services Board, which is conducting an inquiry under Justice John Morden; we have the Office of the Independent Police Review Director, which is receiving complaints from the public and will be reporting back on those particular complaints; the RCMP, the federal police force, which is conducting an internal review; we have the Special Investigations Unit, which is conducting a review; and we have Justice McMurtry, who is reviewing the Public Works Protection Act. So we have a number of different reviews that are going on at the present time, including the committee of the House of Commons, where these matters are being deliberated. Those, I think, will—

The Speaker (Hon. Steve Peters): Thank you. Supplementary?

Mrs. Christine Elliott: I did ask the Premier, but I would say to the minister that all of the things that you just mentioned don't include a review of what this government did and don't name names, and that's what we're asking about right now.

The plan for the illegal G20 law was vetted by Premier McGuinty and several of his ministers. The plan included a strategy to deflect any public criticism of the very war measures act you passed if your secret got out. Paragraph 210 of the Ombudsman's report describes the emails that show the recommended plan was to blame and "an inattentive media" for the lack of public notice of a war measures law you deliberately buried. Keeping an illegal law a secret is bad enough, but the McGuinty Liberals' propaganda plan is utterly disgraceful.

If he will not resign, Minister or Premier, why won't you fire Minister Bartolucci?

Hon. James J. Bradley: First of all, may I say to members of the Legislature something that I think they will know, and that is that the Ombudsman did not call for anybody to be fired. I am not calling for anyone—I'm complying with what the Ombudsman did not say in this particular case.

I go back to the fact that it is very difficult for many people in this province to understand that your party, if it were to be elected as the next government of Ontario, is committed to abolishing the Ontario Human Rights Commission, and that this same party in the province of Ontario would be that which wishes to stand now before the people of this province and say that they are going to save civil liberties.

PUBLIC TRANSIT

Ms. Cheri DiNovo: My question is to the Premier. Yesterday, the Premier met with Toronto's new mayor to discuss the future of Transit City. Earlier this year, the Premier and his government yanked \$4 billion worth of Transit City funding. Following his meeting yesterday, has the Premier now completely abandoned Transit City, yes or no?

Hon. Dalton McGuinty: To the Minister of Transportation.

Hon. Kathleen O. Wynne: We've been very clear that the funding that is going to the city of Toronto remains in the envelope to go to the city of Toronto. It's the biggest investment in transit in a generation. There's a plan in place to build all those projects—five projects over 10 years—and I think the member opposite knows that.

The Premier had a good meeting with Mayor Ford yesterday, as has been reported. As we've both said, we'll continue to work with the city. The council has yet to meet. It's important for the TTC and Metrolinx to work through the technical details. We'll continue to work with them.

We want to build transit in the city of Toronto. That's what this is all about.

The Speaker (Hon. Steve Peters): Supplementary?

Ms. Cheri DiNovo: Toronto families want their politicians to stop playing games, get the shovels in the ground and build Transit City. Along Eglinton Avenue, families have been waiting for decades for better public transit. Fifteen years ago, these families saw a previous provincial government kill a public transit plan; now it looks like the same thing is about to happen under the McGuinty government. Will this Premier take decisive action to make sure that the Eglinton LRT is built on schedule, or will he make the same mistake as Mike Harris?

Hon. Kathleen O. Wynne: The member opposite really needs to talk to the councillors in Toronto. She needs to talk to city council. She needs to encourage them to have that conversation with the mayor. But this is a member who has consistently voted against the air-rail link. She has not been in favour of transit in Toronto. In 2007, Howard Hampton, the then leader of the NDP—

The Speaker (Hon. Steve Peters): I remind the honourable member that we use riding names.

Hon. Kathleen O. Wynne: The member for Kenora-Rainy River said, "We don't need another subway mega-project ... extending the subway ... into a lightly populated York region."

This party has consistently not been supportive of transit. We need them onside, supporting transit across the GTHA and across the province. They need to talk to city council. City council needs to work with the mayor. We want to build transit in the GTHA.

HOSPITAL FUNDING

Mr. Kevin Daniel Flynn: I've got a question this morning for the Minister of Health. In the Auditor General's annual report, the auditor raised concerns about emergency room wait times. But he also recognized Ontario's leadership in bringing down those wait times and the progress that has been made. He cited the adage, "You can't manage what you can't measure."

Oakville families want to know that high-quality emergency health care is there when they need it, and in

order to make that real in Ontario we need to be able to measure that progress. My question this morning to the minister is, can you please speak to the work Ontario has done to address wait times in my community and throughout the province?

Hon. Deborah Matthews: Thank you to the member from Oakville for his question.

Ontario was the first province to start measuring wait times in our emergency departments, and we are already starting to see the results. Oakville is a good example of that. At the Oakville Trafalgar Memorial Hospital, our investments in ERs mean that 96% of people are being seen within the target time, a 30% reduction in wait times since we started measuring in 2008. These are significant and meaningful results for the people in Oakville.

Across Ontario, our targeted investments mean that 85% of people going to emergency rooms are now being seen within our target—85%. We've seen a 9% reduction in time spent in emergency departments.

I'm proud to be part of a government that is making these investments, in contrast to the opposition, who have—

The Speaker (Hon. Steve Peters): Supplementary?

Mr. Kevin Daniel Flynn: It's clear that the investments in our wait time reduction plan are working and they're starting to make a difference for families in my riding of Oakville, but emergency wait times are just one part of the challenge. Being able to get timely access to surgeries, MRIs, CT scans and ultrasounds are also critical components of a strong and healthy system.

A report that was released on Monday from the Fraser Institute said that unfortunately, wait times for surgeries are growing across Canada. Can the minister please inform the House whether or not this is the case for the province of Ontario?

1110

Hon. Deborah Matthews: We're not just making progress. Ontario is actually leading the country, according to the Fraser Institute, an organization not generally known for its enthusiastic support of the Liberal Party. Their most recent report shows that Ontario has the shortest wait times for CT scans, for MRIs, for ultrasounds, and we've got one of the shortest wait times for specialist consultants.

This report confirms what we've already heard from the Wait Time Alliance. Their 2010 report card gave Ontario straight As for reducing wait times for hips, knees, cancer, cataract and cardiac surgeries.

Within the Halton health care system, wait times for hip replacements are down 122 days. That's a 50% reduction in wait times. Surgeries for knee replacements are down 28%, and 77% for CT scans.

I'm proud of the success that we're having, and we look forward to doing more.

COMMUNITY SAFETY

Mr. Garfield Dunlop: My question today is for the Premier. McGuinty Liberals would like to think Premier

McGuinty and Pierre Trudeau have a shared respect for civil liberties and the charter in common. The Ombudsman, however, shows that the only thing they really have in common is declaring martial law. But even there, Premier McGuinty does not measure up, because at least Trudeau held a public debate when he invoked war measures.

What made you think you could get away with keeping your illegal war measures a secret from the people of the province of Ontario?

Hon. Dalton McGuinty: To the minister.

Interjections.

Hon. James J. Bradley: There's considerable noise coming from the opposition.

I would first of all draw the context. I know it's difficult for the Conservative Party, because on the one side, you want to be on the side of law and order, and on the other side, today, you want to be defending civil liberties. So it's a difficult proposition for the party to be able to do both of those.

You will know the context of the situation. Your federal friends insisted that the G20 be in downtown Toronto, against the advice of the city of Toronto, against the advice of the Ontario government. As a result, 20 of the top terrorist targets in the world were assembled in downtown Toronto, with all kinds of threats being made to those individuals and to that conference.

The Speaker (Hon. Steve Peters): Supplementary?

Mr. Garfield Dunlop: Minister, your answer had nothing to do with my question.

The Ombudsman put it best when he said about your illegal war measures law that "it may have been the best-kept secret in Ontario's legislative history...." But even after you got caught, your office continued to say that your war measures didn't provide police with new powers, and you're still at it. This morning, you said that only two people were arrested under your war measures act, and the Ombudsman posted a message on Twitter to correct you even this morning. This is an embarrassment to this House. How can you expect the public of Ontario to have confidence in you and the former minister when you continue to exercise such outrageous judgment?

One thing is for sure: The Ombudsman's report, Caught in the Act, will not be hidden on this side of the House. We will remind the people of the province of Ontario, right through to the evening of October 6, about the actions of this government.

Hon. James J. Bradley: First of all—

Interjections.

The Speaker (Hon. Steve Peters): The member from Lanark has been constantly and consistently interjecting today. If he persists, I will have to warn him.

Minister?

Hon. James J. Bradley: The member probably didn't have time to share this with the House, but he will know that the Ombudsman complimented the government of Ontario on its response to his report. He was very pleased with the degree of co-operation that he had from the government of Ontario, and he indicated that in his press

conference and in his report. We are prepared to comply with all of the recommendations that he has in that particular report. I think he recognized as well the context in which the government was developing a law, with all of the threats that I have mentioned and the circumstances that were facing the government at the time.

Had something untoward happened to any one of those people who was in downtown Toronto, where the federal government insisted on having this, I suspect that the questions that would be coming to me today would be far different from those which are being asked now.

ACCESS TO PUBLIC LANDS

Mr. Gilles Bisson: My question is to the Minister of Natural Resources. For many weeks now, I've been raising the issue that is frustrating northerners more than a whole bunch of other issues that you're frustrating them with as a government, and that is access to crown roads.

You keep on saying, at the end of the day, that nothing can be done and if people want to go hunting or fishing or blueberry picking, they're going to have to walk into those roads that they've used for generations by way of motorized vehicles.

Further, it is alleged, and I've raised it in the House before, that there are cases where MNR staff have themselves bought outfitters' camps and used their positions within the MNR to block some of those roads. You have said as recently as yesterday in this House that in fact no such case exists. I have one. The Ombudsman of Ontario actually investigated one. I'd like to send that over to you so you can reinvestigate it and try to do something about what is a travesty in northern Ontario.

Hon. Linda Jeffrey: I'm happy to answer this question. I'm pleased that the member is in the House today to hear the answer.

Yesterday, I was asked by the member from Algoma-Manitoulin about a question that had been raised by the member previously. It was with regard to Fushimi Lake Provincial Park and how it was subjected to an unauthorized motorized vehicle restriction. I'm really pleased that I have an opportunity to answer the question again. Had the member from Timmins-James Bay brought this particular case to my attention weeks ago, when I had originally asked, instead of waiting for question period, I would have been able to tell him that this restriction was a matter of public safety. There were concerns with regard to snowmobilers entering the park through unauthorized access points, particularly over frozen creeks.

I'm certain that everybody in this House would agree that public safety and liability is what we should take with utmost seriousness.

Snowmobile access is allowed to continue through—

The Speaker (Hon. Steve Peters): Thank you. Supplementary?

Mr. Gilles Bisson: Minister, you're mixing up two issues. The issue of the Fushimi park, which you're trying to refer to, I raised with you as far back as last year, and you promised at that time you were going to fix

it. You then came into the House yesterday and said you're not. The issue I'm raising today is the one that I've raised previously: MNR staff have been accused of having built outfitters' camps, gotten land under the act, and have used that land to their own benefit while ministry employees.

I've sent over an investigation by the Ombudsman that points to one investigation that was whitewashed by your ministry. Will you look into that and get back to this House and clarify this issue once and for all?

Hon. Linda Jeffrey: As I stated yesterday, the northern residents continue to enjoy unrestricted access to the vast majority of Ontario's crown lands. We always work to balance the public's access to recreational activities and opportunities with the need to protect, promote and preserve our wilderness and enhance remote areas.

To the allegations with regard to the MNR officials benefiting from planning decisions: I have had staff look into the matter, and we have yet to confirm a specific case of conflict-of-interest violation. But as I said, if anyone knows of a specific case, I would encourage them to bring it to my attention. My door is always open.

MNR staff do an outstanding job of protecting our natural resources. They're often active members of our community, in which they work and live.

It's important that access decisions are made through forest management and land use planning, both of which require public planning. I encourage anybody who has interest to participate in our public consultation process.

INJURED WORKERS

Mr. David Zimmer: My question is for the Minister of Labour. Ontario's injured workers face huge difficulties in coping with the consequences of their injuries. In particular, mobility issues make it very difficult to travel to deposit their benefit cheques in the bank or to cash their cheque. I recently received a letter from the WSIB stating that it is now offering direct deposit of loss-of-earnings benefits for injured workers.

Minister, having heard complaints from my many constituents about this issue, I'm happy to see that WSIB has taken this step. Can you give us more details about how this change is going to work and what it means for Ontario's injured workers?

Hon. Peter Fonseca: I'm pleased that the member has raised this issue and the concerns surrounding this matter. I'm also pleased that the WSIB has heard the concerns of injured workers and has taken action.

1120

Previously, direct deposit was only available on monthly benefits such as pension payments, but now, with these improvements that have been made, it'll allow workers to receive their biweekly payments by direct deposit. So what will this do? This will help workers in terms of knowing that their cheques are secure, knowing that they're going directly into their bank accounts. This will bring great relief to those injured workers.

As well, with that relief and that help to those injured workers, it would also help the WSIB's administrative

costs. So it helps on two fronts. This strives to respond to the needs of their customers, who are the injured workers. This is an excellent initiative by the WSIB, working very closely with injured workers and advocacy from members like the member from Willowdale.

The Speaker (Hon. Steve Peters): Supplementary?

Mr. David Zimmer: Injured workers in Willowdale and, indeed, Ontario will welcome the convenience of having their benefits deposited directly into their accounts. But Minister, this is not the only concern that injured workers have here in Ontario. As we emerge from the global recession, and especially during the holiday season, many injured workers and their families are worried about their benefit levels.

Minister, what are you doing and what is our government doing about benefit levels for Ontario's injured workers?

Hon. Peter Fonseca: Unlike the parties opposite, this government has taken measures to help injured workers by increasing their benefits.

We all remember the 1990s, when the NDP brought forward the Friedland formula. Injured workers will tell you that is their "F" word. It was made even more regressive under a Conservative government. They exacerbated the situation and they virtually cut benefits to injured workers by 30%, unlike this government, which has increased benefits to the tune of 9% to injured workers.

We understand that injured workers, especially in these challenging times, need government's help. So we are there working with injured worker groups, working with the WSIB and working with employers. We understand that we're all in this together, unlike the parties opposite.

COMMUNITY SAFETY

Mr. Frank Klees: My question is to the Premier. In light of the fact that the Premier has refused to answer questions related to the conduct of Minister Bartolucci in passing and suppressing the G20 regulation, will the Premier agree to allow Minister Bartolucci personally to respond so that he can accept his ministerial responsibility and offer his resignation?

Hon. Dalton McGuinty: To the Minister of Community Safety.

Hon. James J. Bradley: As my friend—

Interjection.

The Speaker (Hon. Steve Peters): This will be the final warning for the member from Lanark, and he should be in his seat as well.

Minister?

Hon. James J. Bradley: As the member would know—he's a member who has been in the Legislature for some period of time and he would be aware of the rules of the Legislature—all questions dealing with the Ministry of Community Safety and Correctional Services are to be directed to the minister who happens to have this position at this time.

I have indicated clearly that I'm prepared to answer any and all of the very legitimate questions that my friends on the opposite benches are prepared to direct to me. Therefore, I am here to answer those questions in any way that I guess I deem appropriate. I will try to be as lucid as possible in my answers to you, but I am here to answer those questions and I'm prepared to be here today and tomorrow.

The Speaker (Hon. Steve Peters): Supplementary?

Mr. Frank Klees: Actually, we're well familiar with the standing orders. In fact, standing order 37(e) states specifically that a minister would be able to refer to the subject matter that is involved. We're talking about a subject matter that involved the actions of Minister Bartolucci. He is the minister who was responsible for the actions. We are now asking the Premier to allow that minister to stand in his place, explain his actions, take ministerial responsibility and do the right thing and offer his resignation for his actions.

Hon. James J. Bradley: I'm trying to recall, as no doubt my good friend and colleague from Carleton-Mississippi Mills is trying to recall today, any instance in the House where that has ever been undertaken. You may wish to consult with the esteemed member from Mississippi Mills, who some in your party are trying to dump from his position as the member for Mississippi Mills. I think it would be instructive if, rather than consulting with the member beside you, who has been trying to undermine the member for Carleton-Mississippi Mills, in fact you consult with the member for Carleton-Mississippi Mills, who is a long-standing and esteemed member of this House, one who has gained the respect of the people of his constituency and one who has gained the respect of all of the people in this House. Rather than that happening, I think you should be worried about someone trying to dump the member—

Interjections.

The Speaker (Hon. Steve Peters): Stop the clock.
New question.

CHILD CARE

Ms. Andrea Horwath: My question is to the Minister of Children and Youth Services. Does the minister think it's appropriate that Ontario parents are waiting more than a year for licensed child care for their infants?

Hon. Laurel C. Broten: I know that the Minister of Education will look forward to answering this question because, as the member opposite likely knows, the file of child care was transferred to the Ministry of Education.

We did that a number of months ago in order to recognize the fact that when children start in child care, it's the beginning of their formal education. We want to ensure that the processes and the protections that are put in place and the education and learning that begin start at the earliest days, upon them being placed in child care—as I did with my own children; you talk to your kids about the first day of child care as their first day of school, and that is the reality for families. That is now the

reality here in our government structures, and we're very, very proud of that change.

The Speaker (Hon. Steve Peters): Supplementary.

Ms. Andrea Horwath: The minister might not want to face it, but the reality is faced by a lot of parents in this province. They cannot get child care for their infants. In Kenora, there are only nine licensed child care spots—nine spots in Kenora. In a city of 15,000 people, families are waiting more than a year for child care, causing emotional and financial turmoil in those households.

Consider Erin, a new mom from Kenora, who writes, "As a mother, my greatest priority is the safety and well-being of my son. I should not have to rely on unregistered and unmonitored home daycare upon my return to work."

When will this government start taking the concerns of new parents like Erin seriously?

Hon. Laurel C. Broten: To the Minister of Education.

Hon. Leona Dombrowsky: This is a very, very important issue, and I have to say that I'm delighted now that I have the responsibility of working with those in the child care sector as we continue to improve access to those services.

Since we've come to government, we have increased the number of spaces in the province by 67,000. Now, 22,000 of those are a result of our investments in Best Start.

But what I can say to the honourable member is that our commitment to full-day kindergarten will go a long way to expanding access to regulated child care spaces. For those families who are using regulated spaces for their four- and five-year-old children, those children will now move to the regular school system, thereby freeing up space in child care facilities for those families who are awaiting infant care in child care facilities.

Our investment in full-day kindergarten is going to have—

The Speaker (Hon. Steve Peters): Thank you. New question.

FULL-DAY KINDERGARTEN

Mrs. Amrit Mangat: My question is for the Minister of Education. Minister, full-day kindergarten is clearly popular as we have seen a high level of demand for the program across the province. However, there are some areas where all the students who want to get into the program are not being accommodated.

In response to this, the Peel District School Board has offered 10 additional classes this year. However, this decision is costing approximately \$1.3 million more than the board was funded for this first phase of implementation.

As a result, trustees voted to defer the launching of the program at five Peel schools until the 2012-13 school year.

1130

Minister, what is our government doing to meet the ever-increasing demand for full-day kindergarten? And what is our plan to ensure—

The Speaker (Hon. Steve Peters): Thank you. Minister?

Hon. Leona Dombrowsky: First of all, we know that parents love full-day kindergarten and we are not surprised that families are very eager to participate in this program. We have, however, recognized that it is going to be a challenge. Moving forward there are many things that must be considered, and that is why we're taking a staged approach. That is why, when we invited school boards to bring us their ideas on how to roll out in their boards, we made very clear the money that was going to be available for this and we said to them, "Now, you need to present your plan."

I think it is regrettable. We've been very clear with what resources would be available. In the member's case, the board has decided to, perhaps, accept beyond the funding that we said we would make available. I think it's really unfortunate when commitments are made and then they're withdrawn from the people in the jurisdiction.

We will continue. We are committed to full-day—

The Speaker (Hon. Steve Peters): Thank you. Supplementary?

Mrs. Amrit Mangat: Minister, as we work towards full implementation, my constituents are eager to have their children enrolled in this program. We know full-day kindergarten is the best way to ensure our society moves forward and produces a stronger Ontario for the future.

I also know that full-day kindergarten is just one of the many investments that the McGuinty government has made to strengthen public education in Peel, though I have been hearing from my constituents that the Peel board is underfunded.

For many constituents in Mississauga–Brampton South and for those of my colleagues in the Peel region, could you inform this House, are we doing enough to support our students? And is the Peel board underfunded?

Hon. Leona Dombrowsky: What I can say, and what I would hope all members in this House would say to their constituents, is that this government has increased funding in education by 40%.

The other thing we are committed to is full-day kindergarten, unlike the other party, who has not committed to it. They call it a frill. They are not committed to maintaining this program. The member can tell her constituents that in 2015 all families will have access to full-day kindergarten.

With respect to Peel, I can say as well that we have increased funding to the Peel board by \$64 million. That is a 70% increase in funding from the time we took government for the Peel board, for the member's constituents. There have been 50 new schools built in Peel.

We are committed to working with the elected representatives from Peel, as they do a very good job of meeting the needs of their families and their students. There's more—

The Speaker (Hon. Steve Peters): Thank you. New question.

COMMUNITY SAFETY

Mr. Peter Shurman: My question is to the Premier. We've been watching you, Premier, for the entire question period, which is almost now expired, and I might say that Ontario has been watching you as well on some very important questions that concern everyone in this province. You have spent the entire question period laughing, joking and conversing with members of your caucus on either side and around you—

The Speaker (Hon. Steve Peters): Stop the clock for a second.

Interjections.

The Speaker (Hon. Steve Peters): Start the clock. I would just ask the member to get straight to his question, please.

Mr. Peter Shurman: My question is this: Does the Premier take these questions and this issue seriously or not?

Hon. Dalton McGuinty: To the Minister of Community Safety.

Interjections.

The Speaker (Hon. Steve Peters): The time for question period has ended.

Interjections.

The Speaker (Hon. Steve Peters): Members will please come to order.

DECORUM IN CHAMBER

The Speaker (Hon. Steve Peters): I just want to remind all members about notes that travel through this chamber. Yes, it's a very useful way for us to converse with one another or converse with our staff, but I'm extremely disappointed in a note that has come to my attention that passed from one side of this House to another today. I don't know if it was written as a tongue-in-cheek note or not, but I don't think it's appropriate, in my opinion of what I read in this note. The author of this note knows who sent it and knows where it went, because I'm sure the author knows exactly the note I'm talking about. I don't need an apology in this House, but I would appreciate an apology from the author of this to its recipient. I'll leave it at that. Stuff like this is not helpful in the chamber.

DEFERRED VOTES

HELPING ONTARIO FAMILIES AND MANAGING RESPONSIBLY ACT, 2010

LOI DE 2010 SUR L'AIDE AUX FAMILLES ONTARIENNES ET LA GESTION RESPONSABLE

Deferred vote on the motion for third reading of Bill 135, An Act respecting financial and Budget measures

and other matters / *Projet de loi 135, Loi concernant les mesures financières et budgétaires et d'autres questions.*

The Speaker (Hon. Steve Peters): Call in the members. This will be a five-minute bell.

The division bells rang from 1136 to 1141.

The Speaker (Hon. Steve Peters): All those in favour will rise one at a time and be recorded by the Clerk.

Ayes

Aggelonitis, Sophia	Fonseca, Peter	Moridi, Reza
Arthurs, Wayne	Gerretsen, John	Murray, Glen R.
Balkissoon, Bas	Gélinas, France	Naqvi, Yasir
Bartolucci, Rick	Gravelle, Michael	Oraziotti, David
Bentley, Christopher	Hampton, Howard	Pendergast, Leeanna
Best, Margaret	Hoskins, Eric	Phillips, Gerry
Bisson, Gilles	Hoy, Pat	Prue, Michael
Bradley, James J.	Jaczek, Helena	Pupatello, Sandra
Broten, Laurel C.	Jeffrey, Linda	Qaadri, Shafiq
Brown, Michael A.	Kormos, Peter	Ramal, Khalil
Brownell, Jim	Kular, Kuldip	Ramsay, David
Cansfield, Donna H.	Lalonde, Jean-Marc	Rinaldi, Lou
Carroll, Aileen	Levac, Dave	Ruprecht, Tony
Chan, Michael	Mangat, Amrit	Sandals, Liz
Chiarelli, Bob	Marchese, Rosario	Sergio, Mario
Colle, Mike	Matthews, Deborah	Smith, Monique
Crozier, Bruce	Mauro, Bill	Sorbara, Greg
Delaney, Bob	McGuinty, Dalton	Sousa, Charles
Dhillon, Vic	McMeekin, Ted	Tabuns, Peter
Dickson, Joe	McNeely, Phil	Takhar, Harinder S.
DiNovo, Cheri	Meilleur, Madeleine	Van Bommel, Maria
Dombrowsky, Leona	Miller, Paul	Wilkinson, John
Duguid, Brad	Milloy, John	Wynne, Kathleen O.
Flynn, Kevin Daniel	Mitchell, Carol	Zimmer, David

The Speaker (Hon. Steve Peters): Those opposed?

Nays

Arnott, Ted	Hudak, Tim	O'Toole, John
Bailey, Robert	Jones, Sylvia	Ouellette, Jerry J.
Barrett, Toby	Klees, Frank	Savoline, Joyce
Clark, Steve	Martiniuk, Gerry	Shurman, Peter
Elliott, Christine	Miller, Norm	Sterling, Norman W.
Hardeman, Ernie	Munro, Julia	Wilson, Jim
Hillier, Randy	Murdoch, Bill	Witmer, Elizabeth

The Clerk of the Assembly (Ms. Deborah Deller): The ayes are 72; the nays are 21.

The Speaker (Hon. Steve Peters): I declare the motion carried.

Be it resolved that the bill do now pass and be entitled as in the motion.

Third reading agreed to.

MEMBERS' PRIVILEGES

The Speaker (Hon. Steve Peters): I am in receipt of notice of identical points of privilege filed by the member for Thornhill, Mr. Shurman, and the member for Simcoe-Grey, Mr. Wilson. Without hearing further from the members, I am prepared to make my ruling on the basis of the written statements, as standing order 21(d) allows me to do.

The members relate that following question period on December 7, they and the member for Whitby-Oshawa were followed along the west hallway and subsequently into the west elevators by a Liberal caucus staff person

with a video camera. The members further assert that their ability to have a private conversation was, as a result, hindered, and that this constituted a breach of privilege, since they were obstructed from performing their parliamentary duties.

Let me begin by saying in the strongest possible language that an allegation of a breach of privilege is a serious matter. It should not be made lightly or with any other motivation than the protection of the institution of Parliament and the members who serve it.

The heads of privilege are very few and their application is very narrow. As Speakers have said on numerous occasions in the past, when it comes to obstruction, privilege very specifically applies to "parliamentary duties." This does not include constituency matters, attendance or invitations to functions outside this place, and certainly not the ability to have a private conversation in a public space. Obstruction of a member in his or her effort to carry out parliamentary duties refers to such things as being physically prevented from attending the House or severely intimidated from speaking on a matter before the House.

The members have characterized the staffer's video-taping of elected members in the hallways as "reprehensible." I myself find the practice distasteful at best. In this technological age, when video and photographic devices are so common, I can see that it is tempting to use them for political purposes. Unfortunately, that temptation is succumbed to all too frequently. Given that, I am not surprised the practice has given rise to the complaints from the members for Thornhill and Simcoe-Grey. I would prefer if the political process rose to a level of dignity our surroundings here suggest it deserves. So I would ask all members to reflect on what I've said and give it consideration in the future.

Beyond the use of these devices, I am increasingly alarmed at activity initiated and engaged in by both sides of the House that I consider to be unworthy of this place. It sometimes seems that more effort goes into stunts and "gotcha" politics than thoughtful consideration and mature debate on the significant issues at hand. I've said before and I will repeat: The people of this province deserve better conduct from their elected representatives.

I want to thank the honourable members for their submissions. They have not made a prima facie case of breach of privilege. I will, though, hear the second point of privilege that was submitted properly to my office from the member from Thornhill.

Mr. Peter Shurman: Do you want to hear it now, Speaker?

The Speaker (Hon. Steve Peters): I would prefer to.

Mr. Peter Shurman: I would like to present it this afternoon at 3 o'clock, with your indulgence.

The Speaker (Hon. Steve Peters): The Speaker is prepared to hear that this afternoon at 3 o'clock.

There being no further business, this House stands recessed until 3 p.m. this afternoon.

The House recessed from 1148 to 1500.

INTRODUCTION OF VISITORS

Mr. Monte Kwinter: I'm pleased to introduce from the Ontario Society of Professional Engineers, sitting in the member's gallery, John Schindler, president and chair; Danny Young, acting CEO; and Edwina McGroddy, director of policy, government and stakeholder relations.

The Speaker (Hon. Steve Peters): Welcome to Queen's Park.

Mr. Kevin Daniel Flynn: Earlier today, we were joined by a special group of people from my community of Oakville. They arrived after the introductions, unfortunately, but they were here from the White Oaks High School Futures Program and they were here with their teachers, parents and guests.

CORRECTION OF RECORD

Ms. Cheri DiNovo: On a point of order, Mr. Speaker: I just wanted to correct the record of yesterday's debate on Bill 135, section 13. I misspoke; I said that it "ends" in May instead of "starts" in May. So I would like to correct the record.

The Speaker (Hon. Steve Peters): Thank you. That is a point of order; a member is allowed to correct their own record.

Having received proper notice of a point of privilege from the member from Thornhill, I will recognize the member at this point.

GOVERNMENT CONTRACT

Mr. Peter Shurman: I do rise on a point of privilege on a matter for which I did give proper written notice. The issue relates to the statement the Minister of Tourism and Culture made in this House regarding a \$50,000 contract that was awarded to one Peter Van Kessel, which he stated was in accordance with government procurement rules; that is, bid competitively.

As you recall, during question period on December 2 several questions were put to the minister about the so-called new direction he and his government are taking at the Niagara Parks Commission. This new direction looks remarkably similar to the one Premier McGuinty and his former health minister took in the billion-dollar eHealth boondoggle: a well-connected Liberal—this time Fay Booker, chair of the Niagara Parks Commission—who doesn't think procurement rules apply to her; a sham bidding process in which the third-highest bidder, who by coincidence has ties to the chair, was awarded a contract as an external auditor; the same chair angling to be paid twice as much to do the same work.

The question I asked related to the \$50,000 contract that was awarded to Mr. Van Kessel, who is a friend of the same Fay Booker. I asked the minister to explain why Ms. Booker handed her friend the sweetheart deal worth \$50,000. Given all the echoes of eHealth and Premier McGuinty's solemn vow that he had fixed the problems

that led to the billion-dollar boondoggle, the question—and more importantly, the minister's answer—is a serious matter of public interest. The answer the minister gave, however, was totally inaccurate.

He said, about the \$50,000 contract—and I'm quoting from Hansard: "That went through a competitive process, and the honourable member is wrong." Yet Ms. Booker herself confirms that the \$50,000 contract did not go through a competitive process. Therefore, I was not wrong, which begs the question, why did the minister skirt the facts as the opposition was exposing the fact that the government was conducting business as usual?

A story appearing in the December 2, 2010, edition of the Niagara Falls Review elaborates on Ms. Booker's account of the sweetheart deal that was handed to her friend. The Niagara Falls Review reported that, "When she came to the commission in the spring, she realized no one had been assigned to oversee the boat tour request for proposals. She told ... John Kernahan to hire someone and suggested names, including Van Kessel." The admission of the chair who handed out the sweetheart deal contradicts the statement the Minister of Tourism made in this House.

I do not bring this matter forward lightly. Asking you to find a member of provincial Parliament—in particular, a minister of the crown—in contempt is a serious matter. The Minister of Tourism wanted members of this assembly and Ontario families to believe that he and his hand-picked chair did not directly award this contract. The chair, however, says the opposite.

This was not an inadvertent slip of the tongue by the minister. The same day the minister made the remark, my colleague the member for Wellington–Halton Hills alerted him to Ms. Booker's statement and encouraged the minister to correct the record, and he did not. I stood on a point of order, which was ruled as not being a point of order, but did also ask for the record to be corrected, but he did not.

The minister was asked further questions about the Niagara Parks Commission each day of the week, including one that asked him to clarify the inconsistency of his remarks—that was this week. He did not retract his misleading statements, sticking to prepared talking points instead. He attended the late show debate last night, but showed his recalcitrance in standing by his inaccurate statement and refusing to clear up the inconsistency between it and the chair's account. He even had the audacity to call upon the members of the opposition to apologize for doing their job of asking these hard questions. It appears the Liberal government's new credo is that the best defence is a good offence. The minister clearly and deliberately adopted the statement he made in this House in response to my question of December 2.

Finally, after I filed this point of privilege yesterday, the minister did take some action. While I believe the minister to be a gentleman, his half-hearted point of order this morning failed to fully correct the record. He failed to come clean, admit the Van Kessel contract was sole-sourced and that the answer he gave in the House on

December 2, 2010, was wrong. Having reviewed the Hansard myself from this morning, he referred only to the awarding of a contract that had to do with auditing of the Niagara Parks Commission and not to the boat tour. Furthermore, his point of order did not explain why he is contradicting his own appointee.

The inconsistency between the minister and his appointee is sufficient grounds to establish a prima facie case of contempt. Page 111 of the 22nd edition of Erskine May states, "The Commons may treat the making of a deliberately misleading statement as a contempt."

Parliamentary precedent supports finding that a prima facie case of contempt has been made. On May 4 of this year, Speaker Toth of Saskatchewan's Legislative Assembly was asked to rule on facts and circumstances very similar to the ones here. A minister of the crown made a statement in the House that certain public consultations on a matter of public policy had occurred. An officer of the Legislature, who had a role in overseeing the area of public policy, said the consultations had not occurred. Speaker Toth found that the inconsistency in the statements was sufficient to establish a prima facie case of contempt. In his ruling, the Speaker reflected on the "distinct impression" that was left by the minister's comments. He ruled that the distinct impression the minister left was false and apt to mislead.

Speaker, I respectfully submit that a prima facie case of contempt of this House has been made for very similar reasons. Thank you, Mr. Speaker.

The Speaker (Hon. Steve Peters): The government House leader.

Hon. Monique M. Smith: I would argue that, in fact, there is no issue of contempt in this particular circumstance. I will go through some of the points made by the member for Thornhill.

In his letter, the member for Thornhill took exception to the statement made by Minister Chan in response to a question, where he said, "That went through a competitive process..." In fact, today in the House, the Minister of Tourism, Minister Chan, stated, "Mr. Speaker: I wish to clarify remarks I made on Thursday, December 2. I was referring to the contract the Niagara Parks Commission entered into for external auditors, Grant Thornton, which was competitively tendered in August." As such, the minister has corrected the record, and if the member for Thornhill is seeking further information, it is open to him to ask that question.

The minister did correct the record, and that is referred to in a number of the precedents the member for Thornhill has referred to as being a component of not—sorry, it is a component of contempt not to have corrected the record. In this case, the minister has corrected the record.

I note, Mr. Speaker, that on December 2, you noted in a ruling on the previous point of order, "I am sure the minister, if he has erred, will correct his record," which he did today.

I'd just like to take this opportunity to distinguish the precedents that have been referred to and to point you to

other precedents that I think are more helpful in this particular circumstance.

The member for Thornhill has referred to a precedent set by Speaker Toth in respect to an issue raised by Opposition House Leader Mr. Yates in May 2010. I would argue that this is incredibly distinguishable from the facts of this case. In that case, we were talking about a minister who said that he had consulted formally on four different occasions on this very regulation with the privacy commissioner.

In fact, the Speaker found in that case, after looking at a letter that had been submitted by the privacy commissioner on the very circumstances that were in debate, that there were troubling questions and inconsistencies in that the proposed regulations the commissioner states in his letter he had been provided with were significantly different from those that were, in fact, the question of debate at this circumstance.

While the minister contended that he had consulted the privacy commissioner on four different occasions on regulations, the regulations were completely different from the ones at debate. Therefore, the Speaker did find a prima facie case of contempt in that particular circumstance.

1510

In this case, there has simply been a misunderstanding as to which process had been followed. I would direct you, Mr. Speaker, to previous decisions that you have given in this House, particularly on October 4 of this year, when you ruled on a point of order raised by Ms. MacLeod. I thank the honourable member for her point of order.

It is, again, another challenge for the Speaker to deal with the veracity of comments that have been made and that may be made in the cut and thrust of question period, but also for the Speaker to deal with the factual correctness of comments that do get made in this House.

I would just remind all members that they should endeavour that to the best of their ability and to the best of their knowledge they are ensuring the comments that are made in the House are factual. That is, in fact, what the minister has done in this particular circumstance.

Finally, Mr. Speaker, I would refer you to another statement that you made on October 6, 2010, when you stated, "I would remind all members in this regard that it is not for the Speaker to determine the veracity, the factuality or the correctness of any statements made. It is my role to ensure that all honourable members are taken at their word. If the honourable member takes exception to comments that were made, I would say to him that the ideal time for him to have taken exception to them was during the five-minute response that is allocated."

In this particular case, Mr. Speaker, in a ruling that you made on September 28, 2009, you spoke of what was involved in determining contempt. You reviewed a decision by Speaker Carr, made in 2002, when Speaker Carr stated, "The threshold for finding a prima facie case of contempt against a member of the Legislature on the basis of deliberately misleading the House is therefore set

quite high and is very uncommon. It must involve a proved finding of an overt attempt to intentionally mislead the Legislature. In the absence of an admission from the member accused of the conduct, or of tangible confirmation of the conduct independently proved, a Speaker must assume that no honourable member would engage in such behaviour or that, at most, inconsistent statements were the result of inadvertence or honest mistake."

In this decision that you provided on September 28, 2009, you also reviewed Speaker Carr's review of the Profumo incident in 1963 in the UK, where there was clear evidence that the House had been misled and that Profumo had deliberately set out with the intention of doing so.

In your reasons, as well, you quoted David McGee in the Third Edition of Parliamentary Practice in New Zealand, which sets out the threshold, which is rather high. "There are three elements to be established when it is alleged that a member is in contempt by reason of a statement that the member has made: the statement must, in fact, have been misleading; it must be established that the member making the statement knew at the time ... that it was incorrect; and, in making it, the member must have intended to mislead the House."

I would argue that in this particular case, none of these three thresholds have been met and that Minister Chan has taken the opportunity to correct the record.

In your decision on September 28, 2009, you again referred to David McGee and his Parliamentary Practice, specifically addressing ministerial replies to oral questions, where he states, "A deliberate attempt to mislead the House would be a contempt, and if a minister discovers that incorrect information has been given to the House, the minister is expected to correct the record as soon as possible. But subject to these circumstances, accuracy or otherwise is a matter that may be disputed and the Speaker is not the judge of it. It is a matter for political criticism of the minister concerned if members believe that a minister has answered incorrectly."

You go on to state, "It seems apparent, in the absence of any such corrections or retractions, that the Minister of Health," in the case in September 2009, "is of the view not only that he and the Premier had not made a misstatement, but also that they believed their statements in the House were accurate at the time they were made and that there is nothing to correct. Presumably this view is bolstered by the fact that by the time the House resumed earlier this month, additional information had become common knowledge."

In this case, again, I would repeat that the minister did correct the record this morning.

In your decision of September 2009, you stated, "The Speaker is therefore left without any clear evidence of a deliberate attempt to mislead the House and instead with what comes down to a disagreement between members on opposite sides of the House as to the facts.

"Since the circumstances that are the subject of this point of privilege fall short of establishing 'a proved

finding of an overt attempt to intentionally mislead' the House, I cannot find that a prima facie case of contempt has been established."

Here again I would argue that in the case of Minister Chan and the questions raised by the member for Thornhill there is no proved finding of an overt attempt to intentionally mislead and I would say that there is no prima facie case of contempt in this particular matter.

The Speaker (Hon. Steve Peters): Member from Thornhill.

Mr. Peter Shurman: I would like to respectfully correct the statements just made by the government House leader, not on any of the particular precedents she cites but rather on the issue of whether or not Minister Chan did correct the record or did not correct the record.

If one consults Hansard from this morning, he rose on a point of order first thing in the morning, obviously forewarned that we were going to bring a point of privilege, and he did correct the record but he corrected it with regard to a contract, as I stated in my initial presentation, relating to the awarding of an auditing contract to Thornton and company, if memory serves. He did not correct the record and he has had ample chance to do so over the course of the past week in a late show, under repeated requests for a correction of the record, and he has yet to do so. I believe, as I said, that the minister is an honourable gentleman. However, since he has not corrected the record, it stands as a point of privilege on my part that this minister did, indeed, misrepresent. Whether that was an error of commission or omission, I can't say. All I know is that we, and therefore the people of Ontario, got misleading information. I leave it to your good judgment.

The Speaker (Hon. Steve Peters): I'd like to thank the member from Thornhill and the government House leader. I appreciate the information that has been brought to the attention of the Speaker. He will reserve his ruling.

MEMBERS' STATEMENTS

CHICKEN FARMERS OF ONTARIO

Mr. Ernie Hardeman: I'm pleased to rise to recognize the Chicken Farmers of Ontario, who are here today at Queen's Park. I want to thank them for coming to share their concerns and let us know the state of their industry. I hope all members will take the opportunity to meet with them or join them in the dining room later today.

As some of you may know, the egg farmers were here to visit us recently. So I guess we've settled the age-old question of which comes first, the chicken or the egg.

Ontario chicken farmers make a huge contribution to the province. They employ 5,000 people directly and thousands more indirectly through transportation and food services. Ontario families depend on our chicken farmers to produce high-quality, safe and healthy chicken, and they deliver. In fact, Ontario chicken farmers have

some of the highest standards in the world. There are nearly 1,100 chicken farmers in Ontario which combine to produce 330 million kilograms of chicken annually.

The Chicken Farmers of Ontario is a farmer-run, non-profit organization that has been in existence since 1965. The organization operates under a system known as supply management or orderly marketing. This system maintains a constant price and ensures that farmers make a living while consumers have a steady supply of chicken. On behalf of Tim Hudak and the PC caucus, I want to reiterate our support for this system.

I want to thank the chicken farmers once again for being here today. We will continue to work with them to make sure they can provide the same high-quality, widely available and affordable product for years to come.

FREDERICK HARRIS

M^{me} France G  linas: I have a very special statement to make today about an exceptional man. His name is Frederick Keith Harris. He was born on December 17, 1920, in Tichborne in Frontenac county. He was the second of four children of Effie and Frederick William Harris, and his brothers were John, Harold and Joe.

Mr. Harris moved to Sudbury to work in the mines. He got married to C  cile Ranger from Capreol 68 years ago, and they have five children: David, Darleen, Brian, Diane and my husband, Keith. They have 13 grandchildren and 13 great-grandchildren.

He worked for Inco for 35 years. He worked at most of the plants, including Froot, Kirkwood and Garson mines, as well as the Coniston smelter, as an industrial electrician and he has been retired since March 1977.

In 1955, he built a camp on Wahnapiatae Lake. He told me he still remembers how bad the bugs were that spring. He spent his summers out at camp sharing his love of fishing and hunting with his boys, as well as being an excellent blueberry picker. In later years, he became a good curler and bowler.

He will be celebrating his 90th birthday, so I invite everyone who knows Keith, or uncle Chuck or Curly, to come and join us on December 18 from 1 to 4 at the Walford.

Happy 90th birthday and congratulations on passing your driver's licence test yesterday. I knew you could do it.

CHICKEN FARMERS OF ONTARIO

Mr. Pat Hoy: I'm pleased to rise today to thank the Chicken Farmers of Ontario for coming to Queen's Park to host their annual Chicken Day.

Our chicken farmers play an important role in Ontario's agricultural sector. With more than 5,000 full-time jobs in Ontario, and thousands more in spin-off jobs, many Ontario residents depend on the chicken industry to earn their living, pay their mortgages and raise their families.

1520

I'm proud Ontario is home to some of the world's safest, most delicious and nutritious chicken. I'm proud

to support Ontario's chicken farmers. Nearly 40% of all the chicken farms in Canada are located right here in Ontario, making Ontario the largest producer, processor and consumer of chicken in the country. We also know that supply management plays an important role in that success; it brings stability to the industry, which is why our government is a strong, committed supporter of the system.

I want to commend the Chicken Farmers of Ontario as an organization for their hard work. The leadership and support they provide is helping Ontario's hard-working chicken farmers. They make a great contribution to our agri-food industry and to our economy.

The McGuinty government is proud to support and celebrate the wonderful achievements of the Chicken Farmers of Ontario and looks forward to their continued success.

ONTARIO DRUG BENEFIT PROGRAM

Mr. Ted Arnott: I'm glad the Minister of Health and her parliamentary assistant are in the chamber and can hear this statement.

Wellington county resident Lucas Maciesza suffers from PNH, a rare blood disease. Despite repeated questions in this House and despite widespread media coverage, he's still waiting for assurance that, over the long term, this government will pay for Soliris, the medication he needs to save his life. The good news is that it's already working, after the London Health Sciences Centre stepped in to provide Soliris, pending the ministry's expedited review.

Still waiting for the government, the London hospital provided another dose yesterday, but this may not continue indefinitely. Last night, I spoke to Rick Maciesza, Lucas's father. Week to week, his family wonders whether Lucas will receive the medication he needs. Week to week, his family wonders whether he will live or die. It's totally and completely unacceptable that they should have to live like that. They need and deserve certainty.

I want to quote from Dave Meyer's recent editorial in the Wellington Advertiser: "We firmly salute the doctors who had the guts to start Lucas on Soliris, even if it is only for a short time."

His doctor, Ian Chin-Yee, writes that Lucas "will almost certainly benefit from Soliris, yet the question of funding remains as his family struggles, not knowing how they will bear the cost of this treatment." In fact, Dr. Chin-Yee wrote this long column, which was published in the Guelph Mercury just recently.

We need to know when this government will finally agree to provide long-term assurance that he will receive this essential medication. Let's give Lucas and his family the Christmas present that they deserve.

EVENTS IN OTTAWA CENTRE

Mr. Yasir Naqvi: Well, I think it's clear that Christmas is here. We can see all the festivities around us here

in this great Legislature and in our families and in our communities as well. It's a great opportunity for all of us to be one with our families, our friends and our neighbours, and to celebrate Christmas and the holiday season in its fullest glory.

I think we all know that not everybody in our community is as privileged as some of us may be. They may not have access to a warm home or a close family member, or just a simple roof over their head, and it's incumbent on us, every single member, along with our communities, to be involved and to make sure that those people will also be able to enjoy this great festive season.

I know that, like in many members' communities, in my community of Ottawa Centre there are some great organizations which every year host Christmas dinners and lunches to ensure that those who are deserving in our community have the same opportunities as well, and I want to highlight some of those organizations.

On December 11, from 11 a.m. to 6 p.m., the Salvation Army will be hosting their free, volunteer-run annual Christmas dinner at the Booth Centre at 171 George Street.

On December 19, the Ottawa Mission will host their Christmas dinner from 11:30 a.m. to 5 p.m. at the mission on Waller Street.

On December 25, on Christmas Day, the Shepherds of Good Hope will be hosting their holiday meal for seniors.

Knight Enterprises will host a Christmas dinner on Christmas Eve, through Chris Knight, who's a great philanthropist, at the Jack Purcell Community Centre.

The world-famous Newport Restaurant in Ottawa Centre and its owner, Moe Atallah, will be holding their Christmas dinner meal on December 25.

And the Carleton Tavern and the Hintonburg Economic Development Committee in Ottawa Centre, as well, will be hosting their Christmas party on December 25. Everyone is invited.

Those who do not have a home and all who want to volunteer, please come to these Christmas dinners.

To everyone, merry Christmas.

RENEWABLE ENERGY

Mr. David Oraziotti: I rise in the House today to comment on a green energy project that is creating jobs while also diversifying the riding of Sault Ste. Marie.

Starwood Energy has announced the completion of financing for phase 2 of its \$150-million solar energy farm, which will be operational in the next year. Once built, the 50-megawatt Starwood solar farm will power as many as 20,000 homes during peak demand and will reduce emissions by an amount equal to taking 9,500 cars and light trucks off our roads.

In addition to helping clean up our environment, the Starwood project will create good-paying jobs in Sault Ste. Marie. Four hundred new jobs are created in engineering and construction, and 20 permanent jobs will be provided in ongoing management and operations for the community. The Starwood energy solar farm project

is just one recent example of how the Green Energy Act is helping create jobs and strengthen Sault Ste. Marie's economy.

There continues to be considerable success in our area with renewable energy. The Brookfield Renewable Power wind farm is a \$400-million project, one of the largest wind farms in Ontario, made up of 126 turbines that generate enough power for 40,000 homes.

Our cogeneration strategy efforts have resulted in a power purchase agreement with Essar Steel Algoma. It is a \$135-million investment in a 70-megawatt cogeneration facility that eliminates waste gases from the environment. As well, St. Marys Paper will be building a biomass cogeneration project with 400 construction jobs and 155 permanent jobs.

This is indeed great news for our riding of Sault Ste. Marie.

EVENTS IN LAMBTON-KENT-MIDDLESEX

Mrs. Maria Van Bommel: We're only two and a half weeks from Christmas, but preparations have been under way for quite some time in Lambton-Kent-Middlesex.

Santa parades are the harbinger of the holiday season. The honour of being the first parade in Lambton-Kent-Middlesex goes to the village of Poplar Hill, where the parade is the weekend before Remembrance Day. One week later, Santa made his appearance in Wallaceburg, where the weather was so warm this year that even Santa must have wanted to take his coat off.

Every weekend until Christmas is filled with opportunities to follow Santa around the riding. In Lambton-Kent-Middlesex, parade floats and participants move from small community to small community, from parade to parade. Last Saturday, you could start the morning with Santa in Watford, follow him to Walpole Island in the afternoon and to Lucan or Alvinston in the evening.

Parade themes abound, with the most novel theme being in Watford, where floats were bedecked with blue boxes and Christmas trees decorated with all sorts of recyclables, all competing for the best reuse, reduce and recycle float.

As small children watch with wondering eyes, the evening parades are abuzz with the hum of portable generators as every float is bejewelled with bright colours. These same floats take on a completely different appearance in the daytime at the next parade.

If you were in Lucan on Saturday, you would have been witness to the beginning of the record snowfall which, at the time, seemed to add a wonderful excitement to the event, but as it continued to fall so that we now have over 146 centimetres, some were left to say, "Be careful what you wish for."

I want to recognize the unsung heroes of every community and parade: the people who, year after year, organize, stage and direct the floats; the local dealerships who offer vehicles for the dignitaries; and the businesses and service clubs who work diligently to design and build

the floats that fascinate the children for whom all this is being done.

I want to thank my constituents and wish all of them a merry Christmas and continued blessings in 2011.

PERIMETER INSTITUTE

Mrs. Elizabeth Witmer: Almost a decade ago, Mike Lazaridis founded the Perimeter Institute for Theoretical Physics in my community of Waterloo. Recently, BMO Financial Group, which has been serving Canadians since 1817, announced a \$4-million gift to the Perimeter Institute. I was very pleased to participate in this announcement.

The gift announced by BMO president and CEO Bill Downe is the largest corporate donation received by the Perimeter Institute in its 10-year history and the largest single donation to support science in BMO's history. It will establish the BMO Isaac Newton Chair in Theoretical Physics at Perimeter Institute, the first of five such positions to be named after scientists whose insights have defined modern physics: Isaac Newton, James Clerk Maxwell, Niels Bohr, Albert Einstein and Paul Dirac.

Perimeter Institute is already a global leader in basic research, and there is no question that these chairs will serve as a magnet for talent, bringing even more of the best theoretical physicists to Waterloo, creating a brain gain for Canada.

1530

I thank BMO for stepping up first and I hope it will encourage other private sector donors to come forward. I wish to join all members in thanking BMO for their commitment to accelerating research and innovation in Canada and for investing in our communities across Canada.

CREDIT VALLEY HOSPITAL

Mr. Charles Sousa: Mississauga is very fortunate to be served by two outstanding hospitals: Trillium Health Centre and the Credit Valley Hospital. They have an excellent reputation. Unfortunately, members of the opposition have been attacking the Credit Valley Hospital. These attacks are very upsetting to the patients and workers at the hospital as well as the community.

Recently, Mayor Hazel McCallion responded to the opposition's outrageous claims by writing to their leader. In that letter, she said:

"Mr. Hudak

"Last year, Credit Valley Hospital had one of the busiest emergency departments in the province....

"In this incredibly busy and challenging environment, Credit Valley Hospital is a provincial leader in reducing ER wait times....

"In April of this year, the Credit Valley Hospital was recognized for ... wait time improvements, and secured \$943,000 ... through the Ministry of Health and Long-Term Care, in recognition for achievement within the pay-for-results initiative.

"Overall ... patient satisfaction results increased....

"I trust that you will use this information on a go-forward basis to support Credit Valley Hospital and I hope you will also consider publicly apologizing to the hard-working employees, physicians and volunteers at Credit Valley Hospital, who endeavour each and every day to provide outstanding care."

I hope that members of the opposition will take Mayor McCallion's words to heart. Stop attacking our Mississauga hospitals and start standing up for patients and health care workers.

INTRODUCTION OF BILLS

ONTARIO SOCIETY OF PROFESSIONAL ENGINEERS ACT, 2010

LOI DE 2010 SUR L'ASSOCIATION DES INGÉNIEURS DE L'ONTARIO

Mr. Kwinter moved first reading of the following bill:

Bill 148, An Act respecting the Ontario Society of Professional Engineers / Projet de loi 148, Loi concernant l'Association des ingénieurs de l'Ontario.

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

First reading agreed to.

The Speaker (Hon. Steve Peters): The member for a short statement.

Mr. Monte Kwinter: The bill will solidify the Ontario Society of Professional Engineers's position as an advocacy member service body for engineers in Ontario.

UKRAINIAN HERITAGE DAY ACT, 2010

LOI DE 2010 SUR LE JOUR DU PATRIMOINE UKRAINIEN

Mr. Martiniuk moved first reading of the following bill:

Bill 149, An Act to proclaim Ukrainian Heritage Day / Projet de loi 149, Loi proclamant le Jour du patrimoine ukrainien.

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

First reading agreed to.

The Speaker (Hon. Steve Peters): The member for a short statement.

Mr. Gerry Martiniuk: I'm honoured to introduce this bill on behalf of myself with the support of my colleague from Oshawa, Jerry Ouellette, and my co-sponsors: my friend of many years Donna Cansfield, member for Etobicoke Centre and a Canadian of Ukrainian descent, and Cheri DiNovo, member for the riding of Parkdale-High Park.

This bill would see September 7 in each year proclaimed as Ukrainian Heritage Day. The first official Ukrainian immigrants to Canada, Vasyl Eleniak and Ivan

Pylypiw, arrived in Ontario on September 7, 1891, on their way westward. Soon afterwards, Ukrainian immigrants began arriving in Ontario in larger numbers. Today, Ontario is home to more than 336,000 Ukrainian Canadians. There are over 1.2 million Canadians of Ukrainian descent across this country.

I thank Yvan Baker, president of the Ukrainian Canadian Congress, Ontario Provincial Council, and its members for their invaluable assistance in the drafting of this bill. On behalf of myself and co-sponsors, I urge all members to support this bill, which is the first of its kind in Canada, in any province, recognizing Ukrainian heritage.

PETITIONS

RAIL LINE EXPANSION

Mrs. Joyce Savoline: “To the Legislative Assembly of Ontario:

“Whereas Metrolinx, an agency of the government of Ontario, is planning an eightfold expansion in diesel rail traffic from 50 trains per day to over 400 trains per day in the Georgetown corridor, which cuts through the west-end neighbourhoods including Liberty Village, Parkdale, Roncesvalles, the Junction and Weston; and

“Whereas this expansion will make this the busiest diesel rail corridor on the planet; and...

“Whereas diesel exhaust poses an especially potent danger to children and the elderly...

“Therefore we, the undersigned, are concerned citizens who urge our leaders to act now to ensure that the rail expansion in the Georgetown south rail corridor, including the air-rail link, be electrified from the outset and that there be no further expenditure on diesel technology.”

I agree with this petition. I'm going to sign it and give it to page Jennifer.

DIAGNOSTIC SERVICES

M^{me} France Gélinas: I have this petition from the people of Nickel Belt.

“Whereas the Ontario government is making ... PET scanning, a publicly insured health service available to cancer and cardiac patients” ... ; and

“Whereas,” since October 2009, “insured PET scans” are being performed “in Ottawa, London, Toronto, Hamilton and Thunder Bay; and

“Whereas the city of Greater Sudbury is a hub for health care in northeastern Ontario, with the Sudbury Regional Hospital, its regional cancer program and the Northern Ontario School of Medicine;

“We, the undersigned, petition the Legislative Assembly of Ontario to make PET scans available through the Sudbury Regional Hospital, thereby serving and providing equitable access to the citizens of northeastern Ontario.”

I fully support this petition, will affix my name to it and ask page Kira to take it to the Clerk.

BRITISH HOME CHILDREN

Mr. Jim Brownell: I have a petition, and it reads as follows:

“To the Legislative Assembly of Ontario:

“Whereas, between 1869 and 1939, more than 100,000 British home children arrived in Canada from group homes and orphanages in England, Wales, Scotland and Ireland; and

“Whereas the story of the British home children is one of challenge, determination and perseverance; and

“Whereas due to their remarkable courage, strength and perseverance, Canada's British home children endured and went on to lead healthy and productive lives and contributed immeasurably to the development of Ontario's economy and prosperity; and

“Whereas the government of Canada has proclaimed 2010 as the Year of the British Home Child and Canada Post will recognize it with a commemorative stamp;

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

“Enact Bill 12, a private member's bill introduced by” the MPP from Stormont–Dundas—South Glengarry—“on March 23, 2010, an act to proclaim September 28 of each year as Ontario home child day.”

As I agree with this petition, I shall sign it and send it to the clerks' table.

SERVICES FOR THE DEVELOPMENTALLY DISABLED

Mr. Jerry J. Ouellette: I have a petition to the Legislative Assembly of Ontario.

“Whereas there are over 7,000 people with disabilities waiting for the Ontario Ministry of Community and Social Services' special services at home (SSAH) funding and almost 4,000 on wait-lists for Passport funding; and

“Whereas such programs are vital and essential to supporting Ontarians with developmental disabilities, and their families, to participate in community life;

“ARCH Disability Law Centre supported by Family Alliance Ontario, People First of Ontario, Community Living Ontario, Special Services at Home Provincial Coalition, Individualized Funding Coalition for Ontario and the undersigned individuals and organizations urge the Ontario government to take quick action to substantially improve developmental services.

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

“—Ensure that all qualified Passport and SSAH applicants immediately receive adequate funding;

“—Make the application and funding allocation process transparent; and

“—Ensure that sufficient long-term funding is in place so that eligible Ontarians with disabilities can access the supports and services they need.”

I affix my signature to this petition in full support.

REPLACEMENT WORKERS

M^{me} France Gélinas: I have a petition from the people of Brampton, Burlington and St. Thomas, and it reads as follows:

“Whereas strikes and lockouts are rare: 97% of collective agreements are settled without a strike or lockout; and

“Whereas anti-temporary replacement workers laws have existed in Quebec since 1978; in British Columbia since 1993; and successive governments in those two provinces have never repealed those laws; and

“Whereas anti-temporary replacement workers legislation has reduced the length and divisiveness of labour disputes; and

“Whereas the use of temporary replacement workers during a strike or lockout is damaging to the social fabric of a community in the short and the long term as well as the well-being of its residents;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to enact legislation banning the use of temporary replacement workers during a strike or lockout.”

I fully support this petition, will affix my name to it and ask page Elizabeth to bring it to the Clerk.

1540

REPLACEMENT WORKERS

Mr. Jim Brownell: I have a petition that reads as follows:

“To the Legislative Assembly of Ontario:

“Whereas strikes and lockouts are rare: on average, 97% of collective agreements are negotiated without work disruption; and

“Whereas anti-temporary replacement workers laws have existed in Quebec since 1978; in British Columbia since 1993; and successive governments in those two provinces have never repealed those laws; and

“Whereas anti-temporary replacement workers legislation has reduced the length and divisiveness of labour disputes; and

“Whereas the use of temporary replacement workers during a strike or lockout is damaging to the social fabric of a community in the short and the long term as well as the well-being of its residents;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to enact legislation banning the use of temporary replacement workers during a strike or lockout.”

I shall sign this petition and send it to the clerks’ table.

SOLAR ENERGY PROJECTS

Mr. Garfield Dunlop: It’s a solar farm petition.

“To the Legislative Assembly of Ontario:

“Whereas Dalton McGuinty’s Liberal government is forcing Ontario municipalities”—

The Speaker (Hon. Steve Peters): I just remind—the member may not have been here. I remind all members that when presenting a petition, they can present excerpts from a petition, but the same rules that I made note of earlier, of using titles or riding names, apply to petitions. So even though a name may be in a petition, you have to make reference to, in this case, the Premier.

Mr. Garfield Dunlop: “Whereas” Premier McGuinty’s “Liberal government is forcing Ontario municipalities to build solar-powered generation facilities without any local say or local approval; and

“Whereas the McGuinty government transferred decision-making power from elected municipal governments to unelected and unaccountable bureaucrats, who are accountable to no one; and

“Whereas the McGuinty government has removed any kind of appeal process for municipalities or for people living in close proximity to these projects; and

“Whereas Tim Hudak,” Garfield Dunlop “and the Ontario Progressive Conservative Party have committed to restoring local decision-making powers and to building renewable energy projects only in places where they are welcome, wanted and at prices Ontarians can afford;

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

“That the McGuinty government”—can I say that?—“restore local decision-making powers for renewable energy projects and immediately stop forcing new solar developments on municipalities that have not approved and whose citizens do not want them in their community.”

I’m happy to sign that and give it to Connor to present to the table.

HYDRO RATES

M^{me} France Gélinas: I have this petition consisting of 60 names from the community of Gogama. For those of you who don’t know Gogama, this is 90% of the population. It’s very short.

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

“Be it resolved that” Premier McGuinty “immediately exempt electricity from the harmonized sales tax (HST).”

I fully support this petition, thank the people of Gogama for sending it and will ask page Mahir to bring it to the Clerk.

CEMETERIES

Mr. Jim Brownell: I have a petition to the Legislative Assembly of Ontario.

“Whereas the Ontario Historical Society, founded in 1888, is a not-for-profit corporation, incorporated by the Legislative Assembly of Ontario April 1, 1899, with a mandate to identify, protect, preserve and promote Ontario’s history; and

“Whereas protecting and preserving Ontario’s cemeteries is a shared responsibility and the foundation of a civilized society; and

“Whereas the Legislature failed to enact Bill 149, the Inactive Cemeteries Protection Act, 2009, which would have prohibited the relocation of inactive cemeteries in the province of Ontario; and

“Whereas the Cooley-Hatt Cemetery (circa 1786) is located in the Niagara Escarpment plan within Ontario’s greenbelt plan in Ancaster, city of Hamilton; and

“Whereas this is one of the earliest surviving pioneer cemeteries in Ontario, with approximately 99 burials, including at least one veteran of the War of 1812;

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

“The government of Ontario must take whatever action is necessary to prevent the desecration of any part of this sacred burial ground for real estate development.”

I agree with this petition, shall sign it and send it to the clerks’ table.

OAK RIDGES MORaine

Mr. John O’Toole: I’ll be very brief.

“Whereas citizens are concerned that contaminants in materials used as fill for pits and quarries may endanger water quality and the natural environment of the Oak Ridges moraine” in my riding of Durham; and

“Whereas the Ministry of the Environment has a responsibility and a duty to protect the Oak Ridges moraine; and

“Whereas the government of Ontario has the lead responsibility to provide the tools to lower-tier government to plan, protect and enforce clear, effective policies governing the application and permit process for the placement of fill in abandoned pits and quarries; and

“Whereas this process requires clarification regarding rules respecting what materials may be used to rehabilitate or fill abandoned pits and quarries;

“Therefore we, the undersigned, ask that the Minister of the Environment initiate a moratorium on the clean fill application and permit process on the Oak Ridges moraine until there are clear rules; and we further ask that the provincial government take all necessary actions to prevent contamination of the Oak Ridges moraine.”

I’m pleased to sign it, support it and present it to Joshua, my favourite page.

HYDRO RATES

M^{me} France Gélinas: I have this petition from the people of Capreol, Hanmer and Val Caron, and it reads as follows:

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

“Be it resolved that Premier McGuinty immediately exempt electricity from the harmonized sales tax (HST).”

I fully support this petition, will affix my name to it and ask page William to bring it to the Clerk.

CEMETERIES

Mr. Jim Brownell: I have a petition, and it reads as follows:

“To the Legislative Assembly of Ontario:

“Whereas the Ontario Historical Society, founded in 1888, is a not-for-profit corporation, incorporated by the Legislative Assembly of Ontario April 1, 1899, with a mandate to identify, protect, preserve and promote Ontario’s history; and

“Whereas protecting and preserving Ontario’s cemeteries is a shared responsibility and the foundation of a civilized society; and

“Whereas the Legislature failed to enact Bill 149, the Inactive Cemeteries Protection Act, 2009, which would have prohibited the relocation of inactive cemeteries in the province of Ontario; and

“Whereas the Cooley-Hatt Cemetery (circa 1786) is located in the Niagara Escarpment plan within Ontario’s greenbelt plan in Ancaster, city of Hamilton; and

“Whereas this is one of the earliest surviving pioneer cemeteries in Ontario, with approximately 99 burials, including at least one veteran of the War of 1812;

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

“The government of Ontario must take whatever action is necessary to prevent the desecration of any part of this sacred burial ground for real estate development.”

I shall sign this and send it to the clerks’ table.

SERVICES FOR THE DEVELOPMENTALLY DISABLED

Mr. Ted Arnott: My petition is to the Legislative Assembly of Ontario, and it reads as follows:

“Whereas there are over 7,000 people with disabilities waiting for the Ontario Ministry of Community and Social Services’ special services at home (SSAH) funding and almost 4,000 on wait-lists for Passport funding; and

“Whereas such programs are vital and essential to supporting Ontarians with developmental disabilities, and their families, to participate in community life;

“ARCH Disability Law Centre supported by Family Alliance Ontario, People First of Ontario, Community Living Ontario, Special Services at Home Provincial Coalition, Individualized Funding Coalition for Ontario and the undersigned individuals and organizations urge the Ontario government to take quick action to substantially improve developmental services.

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

“—Ensure that all qualified Passport and SSAH applicants immediately receive adequate funding;

“—Make the application and funding allocation processes transparent; and

“—Ensure that sufficient long-term funding is in place so that eligible Ontarians with disabilities can access the supports and services they need.”

It’s signed by a significant number of my constituents, and I’ve signed it as well.

The Speaker (Hon. Steve Peters): The member from Durham.

Mr. John O’Toole: I’m pleased to find a petition here and then read it. It reads as follows—as soon as I find it. Pardon me.

The Speaker (Hon. Steve Peters): The member from Simcoe North.

MULTIPLE SCLEROSIS TREATMENT

Mr. Garfield Dunlop: “To the Legislative Assembly of Ontario:

“Whereas thousands of people suffer from multiple sclerosis;

“Whereas there is a treatment for chronic cerebrospinal venous insufficiency, more commonly called CCSVI, which consists of a corrective angioplasty, a well-known and universally practised procedure that is low-risk and at relatively low expense;

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

“That the Minister of Health agrees to proceed with clinical trials of the venoplasty treatment to fully explore its potential to bring relief to the thousands of Ontarians afflicted with multiple sclerosis.”

I’m pleased to sign that on behalf of the hundreds and hundreds of names I have on this petition.

The Speaker (Hon. Steve Peters): The member from Durham.

Mr. John O’Toole: Yes, I’m pleased to read a petition from the riding of Durham, which reads as follows:

“Whereas”—I’m sure I have it here.

The Speaker (Hon. Steve Peters): The member from Cambridge.

1550

HOSPITAL FUNDING

Mr. Gerry Martiniuk: “To the Legislative Assembly of Ontario:

“Whereas Cambridge Memorial Hospital and other hospitals in the Waterloo region are experiencing substantial increased demands due to population growth; and

“Whereas the McGuinty government’s freeze on new long-term-care facilities has resulted in additional long-term-care patients in our hospitals; and

“Whereas the McGuinty government’s cuts to hospital funding have resulted in a dangerous environment for patients and staff in Cambridge and across Ontario;

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

“(1) That the McGuinty government meet its obligations to introduce a population-needs-based funding formula for hospitals, as has been done in other Canadian provinces.”

I agree with this petition and affix my name thereto.

ORDERS OF THE DAY

HEALTH PROTECTION AND PROMOTION AMENDMENT ACT, 2010

LOI DE 2010 MODIFIANT LA LOI SUR LA PROTECTION ET LA PROMOTION DE LA SANTÉ

Ms. Matthews moved second reading of the following bill:

Bill 141, An Act to amend the Health Protection and Promotion Act / Projet de loi 141, Loi modifiant la Loi sur la protection et la promotion de la santé.

The Speaker (Hon. Steve Peters): Debate?

Hon. Deborah Matthews: I’m very pleased to address members at this second reading of our proposed amendments to the Health Protection and Promotion Act. I’ll remind the House that we introduced this legislation late last month with one goal in mind: to better protect the health of our people and our communities during a public health emergency. To achieve that goal, we felt it was necessary to strengthen Ontario’s response in the face of serious public health events, such as a pandemic. The next time a major health emergency comes around, and one will most certainly come around, we need the province to be better coordinated and better prepared.

Overall, the proposed amendments would strengthen the province’s ability to plan, manage and respond to future pandemics; to provincial, national or international public health events; and/or to other emergencies that affect the health of Ontarians. “Why now?” you may ask. “Where is the urgency of implementing these proposed measures?” Well, let me tell you. In an increasingly globalized world, the movement of people, micro-organisms and products such as food and consumer goods can lead to health security concerns. Ontario is often the entry point to complex and wide-reaching connections all around the world that could potentially bring serious threats to public health right to our doorstep.

We found that out the hard way with both SARS in 2003 and then again with the H1N1 pandemic in 2009. The H1N1 pandemic is but the latest example of a significant public health threat affecting Ontario, but it will certainly not be the last. Thankfully, the H1N1 pandemic was not as severe as it could have been. Had it been more severe, we believe that our proposed measures would have added to the many important tools already in

place to respond even more effectively to a public health emergency.

I'm certain none of us will soon forget last year's H1N1 influenza pandemic. I know I certainly won't. It was the major news story for weeks and months across this province, this country and, indeed, the world. Here in Ontario, public health units across this vast province worked extraordinarily hard to implement the largest mass immunization program we've ever seen, and they did so under intense media and public scrutiny.

The logistics of organizing and delivering such a mass immunization campaign under tight time frames were highly complex and demanding. I'm very pleased to say that, in general, Ontario did very well in the face of that worldwide health emergency. Through the H1N1 pandemic there was unprecedented collaboration internationally, nationally, provincially and at the local level. Health experts shared fast-moving, evolving information on a novel virus and best practices to control its spread. There was also terrific collaboration at all levels on planning and delivering antivirals and vaccines, especially in our northern and remote areas. Furthermore, boards of education, teachers and public health staff worked well together to keep schools open. Our emergency departments stayed open and were able to handle the very high volumes of patients.

I would like to take this opportunity to once again thank our very dedicated medical officers of health, our countless health care providers and the volunteers who came to help for their responsiveness, for their collaboration and for their professionalism.

Along with all that good work, it became evident, however, that there was room for improvement. As in any crisis situation, we could have done better, so we need to take the lessons learned, and we need to act on them.

I want to reinforce that these amendments are not a criticism of the local response. Rather, I want to emphasize that this proposed legislation would provide greater support to local public health units and enable them to respond with even greater consistency. The changes that we're making today are about looking forward and planning ahead for the next public health emergency. Think of it as everyone in Ontario working under one big umbrella rather than 36 different umbrellas when the storm hits.

Last June, Dr. Arlene King, Ontario's chief medical officer of health, released her preliminary report on the province's H1N1 response. Dr. King's report identified what worked well during the H1N1 pandemic, as well as opportunities to strengthen the ministry's response in future public health emergencies.

The report made several recommendations. Among them was the need for a strong, centralized approach to pandemic response, the kind of response that the current legislation simply does not permit. Dr. King suggested that when faced with a serious health threat, the province's chief medical officer of health must have the authority to direct public health units in real time.

We are listening to that advice, and we're taking action by proposing to give the chief medical officer of

health the necessary strong central oversight during a public health emergency, and we're doing that through our proposal to amend the Health Protection and Promotion Act, or HPPA. This is necessary because the legislation in force does not currently permit the CMOH to issue directives to medical officers of health and/or boards of health.

At this time, the CMOH has powers under HPPA to issue directives but only to health care providers or health care entities and only with respect to precautions and procedures; for example, wearing protective masks in certain settings. The CMOH also currently has the authority to assume any of the powers of a medical officer of health or board of health if the CMOH is of the opinion that it is necessary to avoid a health risk.

However, to address province-wide consistency and standardization, that could amount to exercising the powers of the boards of health of all 36 public health units, which would be neither practical nor reasonable, particularly in the time of an emergency. The proposed amendments, in contrast, would enable the CMOH to specifically direct boards of health and medical officers of health to respond to public health events in a standardized way. This would allow the CMOH to direct a coordinated response to a public health emergency in a way that Ontarians expect and in a way that Ontarians deserve, without unnecessarily managing the day-to-day operations of health units.

During last year's pandemic, local public health units led the response in their respective jurisdictions; that's how our public health system is organized in this province. This approach allowed communities to respond to local needs, taking into account the enormous variations across communities, an approach which is highly valued and encouraged.

However, without a consistent approach on critical aspects of the response, variations in response across the province and the perception of unequal access to pandemic services can result. Variability across the province can also create challenges for health organizations which serve residents in more than one public health unit. These health organizations have to tailor their programs and services in accordance with varying immunization strategies taken by different public health units, which can lead to a lack of clarity among staff, and most importantly, among the public.

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In a future pandemic or public health emergency, if our legislation is passed, the chief medical officer of health could issue directives to medical officers of health and/or boards of health relating, for instance, on elements of a mass immunization response to promote consistency and standardization across the province where it's appropriate to do so. Clear provincial directives regarding immunizing priority groups, for example, could help to minimize any potential confusion or perceptions of inequity in different parts of the province.

It's important to remember that the proposed directive-making powers are for use in very limited and

very specific circumstances, and for a limited period of time; that is, for example, in cases of infectious diseases, environmental health and public health emergency preparedness. Such directives could be enforced for six months, or less, if the chief medical officer of health so decided.

These measures are in no way intended to undermine a fundamental principle of public health in Ontario; that is, the ability of health units to customize programs and services in recognition of local needs. We very much value that feature of our public health system, and we want to preserve it. However, we believe that the right balance between provincial standardization and local flexibility is necessary in any public health response.

During significant public health events, it is especially important for public health to speak with one voice and act in concert across the province. Within those specified provincial parameters, local flexibility in implementing the response would be maintained and indeed encouraged. Our proposed legislation would provide greater support to local public health units and enable them to respond with greater consistency. For Ontarians, this means that no matter where they live in the province, they would be shielded and protected equally.

In addition to the new authority we propose to give the chief medical officer of health, the proposed amendments would also ensure that appointments of acting medical officers of health are approved by the chief medical officer of health and the minister. These amendments would also expand the minister's power to use publicly owned premises, on the advice of the chief medical officer of health, for public health purposes such as holding an immunization clinic.

Members should note that the CMOH engaged in a number of discussions with public health officials related to the proposed legislation. Dr. King spoke with medical officers of health, the executive of the Council of Ontario Medical Officers of Health, and the executive of the Association of Local Public Health Agencies. Continued discussions with these stakeholders will take place to plan for future public health events. These discussions will also help inform the implementation of the proposed amendments, including the appropriate balance between provincial consistency and local flexibility in public health responses.

It may interest members to know that a number of other provinces and territories have provisions for CMOH and/or ministerial powers that permit the issuing of directives to local or regional authorities, and/or the possession of premises in a variety of different circumstances. It should be noted, however, that the organization of public health services in each Canadian province and territory is quite varied, with different reporting relationships between the provinces, CMOHs and local health authorities. In some Canadian jurisdictions, for instance, the local board of health members and/or medical officers of health are provincial employees. Ontario has one of the most decentralized public health systems in the country. While this decentralization

affords local health authorities flexibility to look after local needs, I want to emphasize that we need to balance that with provincial standardization, especially in times of public health emergencies.

The proposed legislation is part of this government's larger plan to enhance the way we respond to future public health events or emergencies. I wish to mention that this larger plan also includes a renewal of the Ontario health plan for an influenza pandemic. The OHPIP is an evergreen document, meaning it is continually reviewed by Ontario health experts with a view to continuing improvement. There are certainly many lessons learned in last year's pandemic that will be seriously considered to enhance our provincial pandemic plan and improve our health system's operations for the next time a pandemic rolls around.

In addition, Ontario will continue to take steps toward implementing Panorama, a pan-Canadian initiative that will improve public health surveillance and enhance the province's capacity to deliver immunization programs. Once implemented in Ontario, Panorama will be a significant step forward for public health that will greatly improve our response in future health emergencies.

I'm very proud of this government's record of having a real commitment to public health in Ontario. We've more than tripled public health spending since we took office, and that helps make Ontario better prepared for events like H1N1 and others. With last year's pandemic, we were fortunate; it was not as severe as it might have been. As Dr. King noted in her report, hospitalizations, ICU admissions and death rates were lower in Ontario than the national rates. Immunization coverage was higher than most countries in the world. H1N1 deaths were fewer than annual deaths from seasonal flu. So, we got off relatively easily. But the next one could be worse.

This proposed legislation would add to the many important tools already in place, and enhance our response to public health threats. With this legislation expanding the authority of the chief medical officer of health, an enhancement of OHPIP and the steps being taken toward implementing Panorama, our government is demonstrating our comprehensive response to the lessons learned during the H1N1 pandemic.

These coordinated steps are crucial in ensuring that Ontario's highly regarded public health system continues to promote and protect the health of Ontarians. I urge all members to consider supporting this legislation.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments? The member for Durham.

Mr. John O'Toole: I commend the minister for making brief remarks on this small but important bill. But more importantly, I'm waiting for our critic, the member from Whitby-Oshawa, to make our position well understood as well, because public health and public safety is certainly something our leader, Tim Hudak, has spoken to us being very important that we stand firmly, making sure we can deliver what we promise. So I listened carefully.

I think last year's evidence was clear that we had lots of vaccine and problems with distribution logistics and

other things. But I think Dr. King's report probably was the genesis of this bill, and I guess your response to it is focusing a bit more control in your office and in the medical officer of health's office, which is important for the coordination you referred to.

Certainly, in these risky times, with communicable diseases and that, we need to have a plan. It's better to have a plan than to be late planning, which on this late day in this round of four years we are having a discussion about. It is important, and we would probably be supporting it. But I'm waiting for the input from our critic, Christine Elliott, to make sure that we put firmly on the record some of our concerns and some of our recommendations.

The Deputy Speaker (Mr. Bruce Crozier): The member for Nickel Belt.

M^{me} France Gélinas: I was really glad to have an opportunity to hear the Minister of Health explain to us basically some of the parts of Bill 141: what will change, what will stay the same, who gets what power and why. I would agree with the previous speaker that it sounds like the genesis of this bill really came from Dr. King's June 2010 report on the H1N1 pandemic last fall.

What I would like to have seen as well is that the Minister of Health is conducting her own review. I will quote from Dr. King: "As mentioned at the beginning of this report, the Ministry of Health and Long-Term Care is currently conducting a detailed review of its response to the pandemic. When this is released, the findings of the review will paint a much clearer picture of Ontario's H1N1 response than anyone has seen to date. I would urge those interested in a complete and technically detailed examination of what happened in this province during the pandemic to read it."

To this day, we have not seen or heard of this report.

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We are now presenting a bill that clearly comes from some of the shortcomings that we experienced last fall and that Dr. King has documented for us, but the full picture has not been painted yet, or if it has, it has not been shared. I would respectfully ask that this report be shared with everybody so we really understand what is bringing Bill 141 forward and what are some of the shortcomings that we are trying to fix with this bill.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Ms. Helena Jaczek: It's certainly a pleasure to rise in support of Bill 141, the amendment to the Health Protection and Promotion Act.

As a former medical officer of health, I think I have probably a fairly unique perspective on this issue in this chamber, and I can tell you that if I was still the medical officer of health for York region, I would be supporting this bill. There is no question in my mind that the primary responsibility of all medical officers of health, in particular the chief medical officer of health, is to look out for the public interest, the best interests of our constituents—of our community, in the case of medical officers of health.

This bill does a lot in the public interest. It is certainly in the public interest to have a clear direction province-wide, to have consistency in terms of the approach taken when there is a public health emergency in the province. As our local medical officer of health, I enjoyed certain independence in terms of delivery locally, and I think in many cases that is a useful thing, that medical officers of health can tailor programs to the local needs of their community. But in the case of a public health emergency, certainly the most important thing is to ensure the safety and health of the public, and this amendment goes a long way in that direction.

In particular, it addresses something that I think will be of great assistance to medical officers of health, wherein the chief medical officer of health can obtain premises to hold a flu clinic. This is something that was an issue during last year's pandemic and it goes directly to assist local medical officers of health.

The Deputy Speaker (Mr. Bruce Crozier): Minister of Health, you have up to two minutes to respond.

Hon. Deborah Matthews: I look forward to the debate on this legislation in the House. I want to say thank you to the member from Durham, the member from Nickel Belt, and the member from Oak Ridges–Markham, who, as she said, has a very unique perspective on this legislation. I think she is the only former medical officer of health sitting in the Legislature today, maybe ever having sat here; I'm not sure about that, but she may very well be the first.

This legislation actually brings our laws in line with what the people of Ontario probably already thought we had. At the time of the H1N1 pandemic, I think people were surprised that we didn't have the authority to actually issue directives around who the priority groups were in terms of getting immunized; that we did not have the authority to actually ensure that immunization clinics could be set up.

This is legislation that I think is very important as we prepare for the next event. Of course, we do not know what that event will be, but when it does come our response as a province will be stronger if we actually pass this legislation. What it means is that people across the province will have consistent access to care, will have consistent messaging. Our media now covers far more area than our public health units do, so it's important that when there is a message to be delivered, we can deliver that message to all people across those rather artificial boundaries that create our public health units.

This is important legislation. It protects people. It will eliminate a great deal of the confusion that can surround a response to a public health emergency, and I'm hopeful that members of the Legislature will, in fact, see the value in it.

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

Mrs. Christine Elliott: I am pleased to rise on behalf of the Progressive Conservative caucus to comment on Bill 141, Health Protection and Promotion Amendment Act, 2010. With your indulgence, Mr. Speaker, I would like to share my time with the member from Durham.

These amendments to the Health Protection and Promotion Act are aimed at strengthening our public health system in advance of the next pandemic, because we do know that it is a question of when, and not if, in the world in which we live now.

Since the early 1970s, we have seen the emergence of more than 30 previously unknown diseases associated with bacteria or viruses that have wreaked havoc on health care systems. These include Ebola from 1977; legionnaires' disease, also 1977; hepatitis C, 1989; variant Creutzfeldt-Jakob disease, 1996; and H5N1 influenza A, or avian flu, in 1997, just to name a few. H1N1, of course, is the most recent example of an international pandemic.

I would like to say at the outset that I do call this piece of legislation an important first step. We will be supporting this legislation, but it is only one piece of the overall public health picture that I think we need to be increasingly aware of as time goes on.

With the introduction of the Health Protection and Promotion Amendment Act, we've seen from the ministry's websites, from different things that we've seen in the media, what the ministry advises and highlights is the commitment to the implementation of Panorama, which, of course, is the pan-Canadian solution that will allow us to track who has been immunized. This has been in development since the SARS epidemic some years ago. We've heard the ministry talk about the benefits of Panorama and their commitment to seeing it being implemented, but there isn't a word about Panorama in Bill 141, and I think that needs to be noted. I'll be speaking about that a little bit later on in my comments this afternoon.

With respect to the legislation itself, Bill 141 does largely echo many of the recommendations made by Ontario's chief medical officer of health, Dr. Arlene King, with respect to Ontario's response to the H1N1 pandemic of 2009. Dr. King's thoughtful report, which was entitled *The H1N1 Pandemic—How Ontario Fared*, noted that overall Ontario fared well compared to the rest of the world, and I did note the Minister of Health's comments on that, but the fact remains that we do need to make some changes to our public health system in order to be even better prepared for the next pandemic. I think it is true to say that we got off relatively easily with respect to this pandemic. However, a number of people died, and we need to examine what we did and our response to see whether we could have done some things better. And I think it's fair to say that we could have.

I would just like to take a brief quote from Dr. King's report that I think, certainly, highlights the need to deal with these issues. She stated that:

"We live in a truly interconnected world, and with that interconnectedness comes vulnerability to literally any disease that emerges anywhere in the world. Because of air travel, a disease can take less than a day to travel around the globe under the right, or wrong, circumstances. A recent study, for example, found Toronto to be one of the most vulnerable cities in the world in that

regard because of our high volume of air travel to and from a great number of different locations.

"Simply put, we know beyond a shadow of doubt that at some point, there will either be another pandemic, or another emerging infectious disease event like SARS, that will require a provincial response. We intend that response to be as robust and effective as it can be."

Dr. King's report noted several aspects of Ontario's response to H1N1 that went right, and I think that we should take some time to comment on that. We do note, first of all, that all of our public health officials did an amazing job under very, very difficult and strained circumstances, and worked above and beyond. We owe a huge debt of thanks to Dr. Arlene King, to all of the medical officers of health and to all the health professionals across the province. That was spectacular.

The other thing that went right was the state of emergency preparedness overall. The province's Critical Care Secretariat worked with 124 hospitals to implement a coordinated surge capacity management plan, which helped to manage increased demand in critical care units.

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Secondly, sufficient quantities of antivirals were ordered. As part of its health plan for an influenza pandemic, Ontario made it a priority to have enough antivirals on hand to treat 25% of all Ontarians, while the national strategy only requires that supplies be available to treat 17.5% of the population. So we were ready with respect to that.

Similarly, with respect to vaccines, Ontario received its first shipment by October 20, and immunization began on October 26. A national strategy for the administration of the vaccine, to which all federal, provincial and territorial partners agreed, set out the following priority groups who would be given first access to the vaccine: pregnant women, children between the ages of six months to five years, people living in remote and isolated communities, people under 65 with chronic conditions, health care workers, household contacts and care providers of infants less than six months of age, and people who are immuno-compromised.

Now, all that was good. It was at the delivery stage of the vaccine that problems began to happen, and those are the issues that the chief medical officer of health's report primarily deals with, and that Bill 141, of course, which takes over from the chief medical officer's report, also deals with. Dr. King's report notes that the picture presented repeatedly by the media of people lining up for hours to get themselves and their children immunized was a disturbing one. It hinted at possible widespread panic and a system not ready to cope. Neither of those things, as it turned out, was true, but there is no question that the H1N1 immunization process could have been better handled.

Delivery of the H1N1 vaccine did not go nearly as well as it should have. Public health officials and members of the public were constantly confused over the rollout of the vaccine, who was in the priority groups and where to get the vaccine. We even experienced confusion

over who had been vaccinated from the loss of vaccination lists to people being double-dosed due to a lack of an ability to follow who had and who had not been vaccinated.

Confusion began even before the outbreak. In the face of concerns of an autumn H1N1 surge, public health officials across the country began to rethink pandemic and seasonal flu vaccination plans. Initially the plan was to administer the seasonal flu vaccination to Ontarians, followed by the vaccination rollout for H1N1. The fear was that the wave might peak before H1N1 vaccine could be delivered or that vaccine would arrive too late to make a difference in the course of the outbreak.

The next wave of confusion and miscommunication came with the actual rollout of the immunization plan. We will all recall the news stories in the first weeks of the vaccine becoming available in Ontario, when pregnant women, the elderly and those at risk stood in the cold and rain for hours. Sometimes patients would get the shots after some hours of waiting; sometimes clinics would be shut down after only a few hours, due to being overwhelmed with demand, running out of vaccine or a variety of other reasons.

The variance from region to region was astounding. I know that vaccination clinics were open in my riding days before the vaccination clinics opened in Toronto, even to those in high-risk groups. This, of course, led to a series of problems surrounding region jumping, where Torontonians were travelling out to the suburbs so that they too could receive the shot at the earliest convenience. This, in turn, overwhelmed many of the GTA 905 region clinics, which were now trying to inoculate not only their own residents but the residents of Toronto and surrounding areas as well.

Next came the confusion over who actually belonged to the high-risk groups. We had some regions in Ontario, for example, where pregnant women were being told in one town that they were considered to be in a high-risk group and were eligible for early vaccination and others who were told they were not a priority. Another issue with pregnant women later emerged regarding the adjuvanted versus the unadjuvanted vaccine. Initially, pregnant women who were determined to be at high risk received the adjuvanted vaccine. After a week or two of this being administered, it was decided that pregnant women would receive the unadjuvanted vaccine after all. It was later announced, again by the World Health Organization, that the adjuvanted vaccine is in fact safe for expectant mothers. This decision was followed by the realization that prioritized pregnant women who hadn't already received the adjuvanted vaccine would have to wait now for the unadjuvanted vaccine, which was behind schedule in its delivery. On and on the confusion went.

Then there was the issue of the distribution of the vaccine. Unlike the seasonal flu vaccine, the H1N1 vaccine was initially only being distributed in flu clinics. This caused a lot of confusion through the general public, many of whom were used to being vaccinated at their

family doctor's office. This, along with the inconvenient early hours of operation of the immunization clinics, caused a lot of confusion.

Finally, on October 31, 2009, Ontario announced that it would distribute the vaccine to family doctors, but only those who met the criteria and requested it.

Dr. King summarizes the situation as follows: "This was the largest and most rapidly executed immunization program in Ontario's history. We underestimated the logistics of organizing and delivering a mass campaign in extraordinarily tight time frames, across a vast province, in the glare of intense media coverage and in the face of rising demand. We underestimated lineups and demand surges. We had different plans unfolding in different communities, with the result being a different level of service depending on where you were in the province. We didn't fully leverage the primary care physicians who traditionally deliver the seasonal shot. And in too many critical ways, we didn't have the details we needed about how the immunization program was unfolding.

"That last point is critical. In an era where there is much talk about electronic health systems and patient records, we do not have in this province the capacity to electronically manage and track our immunization programs." Those are the words of the chief medical officer of health, not mine.

There are two important points here that we need to highlight. One is the importance of having a functioning system of electronic health records to track and manage immunization programs.

It's amazing to me how often the need for electronic health records is noted in every aspect of our health care system, yet the McGuinty government continues to mismanage this file dismally. Despite the expenditure of over \$1 billion, we do not have an eHealth system, nor, at this point, even a hope of one. In this case, the chief medical officer of health has highlighted the need for such a system, yet Bill 141 does nothing to improve this situation.

The bill does, however, change the chain of command in times of emergency to eliminate confusion and to ensure a consistent response to emergencies across the province. It allows the chief medical officer of health to direct public health units in real time as he or she sees fit. This additional power can only be used if there exists or if there is an immediate risk of a pandemic; a provincial, national or international public health event; or an emergency with health impacts anywhere in Ontario, and if the policies or measures are necessary to support a coordinated response or to otherwise protect the health of persons.

The Health Protection and Promotion Act is also being amended to allow the Minister of Health to take over the possession of public premises on the advice of the chief medical officer of health where the premises are needed for public health purposes; where there is an immediate risk of an outbreak of a communicable disease anywhere in Ontario; or where there exists, or may exist, an immediate risk to the health of persons anywhere in

Ontario. This is an important provision in cases of emergency to allow the minister to designate a place where clinics can be held, where the public can be immediately alerted and directed to, to deliver this coordinated response.

Finally, section 69 of the act is amended to provide that a board of health may not appoint an acting medical officer of health without the approval of the chief medical officer of health and the minister, except where the appointment would be for a period of less than six months.

We currently have 36 public health units across this province, and nine of them have acting medical officers of health. Currently, under the HPPA, or Health Protection and Promotion Act, a board of health can appoint physicians as acting medical officers of health, but there are no further educational qualifications attached to these appointments, no provincial mechanism required and no time limit on the length of the appointment.

This amendment is aimed at strengthening the public health system by attaching conditions to these appointments, and we certainly support that.

In conclusion, the changes being proposed to the HPPA are, on their face, quite reasonable. We look forward to committee hearings on this bill to ensure that the changes are considered reasonable by the many people and organizations involved in our public health system. We need to do whatever we can now to ensure the safety of the public in advance of the next pandemic, and certainly whatever can be done in order to ensure public health in the coming years. The Progressive Conservative Party and caucus are certainly proud to support that.

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The Deputy Speaker (Mr. Bruce Crozier): The member for Durham.

Mr. John O'Toole: It's a pleasure to listen to the very thorough review of our critic the member from Whitby-Oshawa, Ms. Elliott. I believe we should all be working together, as she suggested. More importantly, I think she made a lot of references to the work by the existing medical officer of health and commended all the people who work in public health, especially in these high-risk circumstances.

I feel rather vulnerable; I probably know less than anyone in this room, less than the next probable speakers. I would say the member from Oak Ridges-Markham has declared that she is a former medical officer of health from York region, I believe, and I have a lot of respect and time for what she has to say, so I'm certainly going to listen up there, too. I hope she's able to break free of the notes and comment directly and specifically on what steps she would recommend. Often here, we're kind of geared to the government's message, certainly when you're on the government side. I hope she's able to release herself, set herself free and say some things that are quite germane to the improvement of the delivery of health care generally.

Also, I am waiting anxiously to listen to the member from Nickel Belt, whom I've heard. She's the NDP critic

on health. I have a lot of time for her time. She's also worked at a very high level in health delivery in communities. I'm not sure she's a nurse, but she certainly seems to know a lot about health care, as her predecessor, Shelley Martel, did.

Anyway, that being said, this bill is clear right from the outset that it's pretty much mirroring—I've just finished reading the notes that I've been given, and the bill. Most importantly, it's made up of two or three different sections that aren't really in themselves anything more than an organizational structure, technically, in response to Dr. King's report, as has been mentioned.

I just recently had my staff person look that up and get me some information on the contents of how Ontario fared. I think the summary offered by the member from Whitby-Oshawa is quite accurate. I say there was a fair amount of confusion, and some of it was, who was in charge? It comes back to the very first point she made: The Panorama plan for Canada is really what's important, because if you move up the food chain here on the pandemic level and the globalization implications, where it gets very complicated, who's in charge? In fact, I worry about the United Nations becoming the purveyor of all the information and coordinator, and then all the languages, all the cultural variances and all of the taboos that cross all those lines, and it getting confused because of the high-risk groups, maybe women—and women may not have that high of a particular importance in some societies. It can get almost politicized to the point where it becomes incomplete, compromised.

In the last go-round, two of them that I'm reasonably aware of—SARS, when we in fact were government—I might be wrong here, but I think the person who came forward the most—there was some confusion about who was in charge provincially at that time. Certainly, there was the chief medical officer of health. Even today, what they're able to do is being clarified in this role here.

There are 36 medical officers of health in our province, but often some of them are temporary, because maybe they don't pay that well or you're in a community where it's remote or hard to service, and it's difficult to attract or recruit qualified medical officers of health to some of those areas.

Again, going globally, I remember the work done by the World Health Organization. If I move even just to Canada, there was Dr. Butler-Jones, who is the chief public health officer for Canada. Then there was another person who basically had another role, who was the head of the immunization part of it. The infectious disease control people had a particular role in this thing.

First of all—and more important—is organization. The second part is where Canada should support Ontario; respectfully, it should take the lead in trying to make the Canadian plan comprehensive across the provinces and the territories. I think that's pretty important.

The next thing that's needed is the information system and protocols within the communication. The point was brought up by our critic, Christine Elliott. This may sound critical, and it's not political. It's to the importance

of the eHealth system. I can tell you that I was parliamentary assistant to the Minister of Health for, I think, about three years, and I was on the board then called Smart Systems for Health. Prior to that, there was a federal initiative—this is where it becomes quite confusing; the politics even in Canada. Canada Health Infoway is the gateway, the system, the architecture for communicating health records, but then you get these different freedom of information officers who start to intervene and interpret who can see what.

It bogs right down. Imagine, as I say, if this was run by the United Nations. Who can see what? Here's the issue. If someone is in a high-risk group—there are about six high-risk groups: pregnant women, children over five, people in remote areas, chronic disease people, health care workers themselves, of course, and immune-compromised individuals. Some countries may not have the same priorities in all those things, and if it's run at the highest level, where's the autonomy of the nation, without all the wrangling between the provinces?

The health record is on system. Who can see it? Can a nurse see it? Can a doctor see it? Can a person who's the front-end piece of an immunization clinic see your health record, which may show you have had diseases that perhaps are personal.

I'm telling you: Look at this system, and it isn't as simple as it seems. There needs to be strong, effective, trusted leadership to come up with a system that's going to satisfy the First Nations in Canada, the Inuit and their predisposition or preconceived discomfort that maybe immunization is foreign to their way of dealing with health.

So when I look at these words in the three sections, one is the power of the minister or the chief medical officer of health to appoint permanent persons within the 36 districts or whatever number of medical officer of health districts there would be. There are some very large areas in Ontario. These are unorganized territories, mostly in northern Ontario, where it would be very difficult to have the means of instantly getting out electronic information on immunization records: who's had it, who hasn't, who's on the preferred list, where to report, whether you should get the adjuvanted dose. I remember all that on adjuvanted: who should get it, which doses are where. They had too much of some and not enough of the other.

Imagine if this was a world pandemic and there was a shortage. The last one was kind of an unfortunate situation, but we were fortunate, and I think that's what the report from the medical officer said. Basically, Dr. King's overall assessment was that indeed we were ready. However, she did note, "Had the pandemic been of a significantly more severe nature, we might not have been as ready." If you're ready, you're ready, or you're partially ready. That means you're not ready. I'd say, put it down as you were just plain lucky.

That's not what you want in a public health delivery system. Quite honestly, I think there are many roles and many players in this whole discussion. Some would even

say there's potential for a fair amount of, dare I say it—I remember that the only producer, if you recall, on the money side of this; always follow the money, Mr. Speaker. You would know that. You worked in that industry for a while.

Here's the issue. Do you recall there was only one producer of the antiviral, and it was priceless? Imagine their stock. I wouldn't have minded having their stock. So, there's that part: scarcity of resources, and usually price goes up. That's one part.

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The other part is, how much do you order? How many doses or refresher doses are required for young persons and for older persons? How much does it compromise the already natural immune system that individuals may carry? What about the rights of the individuals themselves to say, "I don't want to partake in this"?

Here you've got the United Nations—and we saw what happened in the G8 and the G20: People were roughed up; their rights were ignored. Even the auditor said it in his report—where is that report? Maybe I took it up to my office because I have to take it home to read this weekend. Yeah, that's the report there; I was looking at it. It says, Caught in the Act. That's the report that's talking about the G20 thing. The reason I'm saying that is, these things—the rights of the individuals should be paramount. I really firmly believe that. I want to make that statement.

Then you get into this—how do you stop the spread? Can you isolate people who don't take it?

When it says in the regulatory provisions, none of which are spelled out here—you'd need to have some confidence in the people running the business, making sure that their rights are being respected, whether it's on cultural or religious grounds or other preferences.

I also say that I was looking at the organizational structure for the infectious disease and emergency preparedness branch. This is the Ministry of Health. It's Leona Aglukkaq, who is the federal minister.

Here's the organizational chart: The chief public health officer is David Butler-Jones, as I said. Then there's the infectious disease and emergency preparedness branch, which is Dr. Danielle Grondin. Then there's the centre for emergency preparedness and response, Dr. Theresa Tam. Then there's the centre for communicable diseases and infection control, with Dr. Howard Njoo. There's the centre for immunization and respiratory infectious diseases, with Dr. John Spika. Then there's the policy integration, planning, reporting—Dr. John Spika has that responsibility as well. Then there's the centre for food-borne, environmental and zoonotic infectious diseases, Mark Raizenne. Then there's the laboratory for food-borne zoonoses, which is Mohamed Karmali. Then there's the national microbiology laboratory, and the chief scientist there is Frank Plummer.

We saw most of those people on the CBC fairly regularly, all being reasonably excited about the pandemic. Every time I watched the United Nations, and the United Nations person's name was—just a minute here; I

have it here somewhere. Anyway, her name is not that important, but she kept appearing. Every week, they kind of upped the tension on the pandemic, which caused, as our member from Whitby–Oshawa said—and then the delivery mechanisms weren't exactly reliable, like whether there was enough in the right labs and things.

No one wants—but when we had SARS, we know that people lost their lives, and there was a lot of blame spread around. We were lucky, as Dr. King said, last year with the H1N1.

Dr. Sheela Basrur, I believe, was the medical officer of health, and she became the most active spokesperson on media on that whole SARS outbreak. I respect—she was passionate and effective in her communications. She was eventually appointed as medical officer of health and, unfortunately, died in that role. She was highly regarded by all sides of the House and was highly praised for the work and the profile she brought to it, that I think was important. It was kind of accidental in the whole scheme of things, but it's really important to make sure we all listen to these roles.

Then, of course, I would think Dr. King would want to see, as our critic, Mrs. Elliott, said—the Panorama plan for Canada is where we should be aimed. We need to support clearly in this legislation and in this Legislature itself, in word and action—even perhaps by amendments saying that we would be subordinate to the national plan, encouraging other provinces that are less resourced with the talent that we have to work toward that plan, ultimately.

I do believe that much of the literature today on the economy, much of the literature today of trade or of the monetary system, is global. I would say the bird is out of the nest. It's global. Everything you do, everything you eat and everything you even wear or every box you open came from somewhere else. That's the reality.

When we talk about these things in that context, this whole thing becomes even more important, even though it's just a small piece of how terrorism operates. Do you understand? Even that would become part of the plan here, so in terms of the overall concern I have, this is a pretty small piece of work, to be honest. Respectfully, it's one and a half pages.

The reason I'm trying to make sure that much of what I'm saying should be on the record—and the member on the other side has been given to speak rather recklessly lately—

Interjections.

Mr. John O'Toole: The member from Willowdale, yes. He's trying to encourage me to stop. Now, what does he not want said? That's really a more appropriate question.

I'm looking at this plan here, as I always go back to the fundamentals of the discussion, and this is a plan that we support. It's part of a larger plan and a larger challenge that need to fit clearly into a national plan. What it does—it really doesn't do much of that. In fact, it's not even mentioned in here.

The other part that's mentioned is some mandatory provisions here, which is sort of downloading because,

really, there's insufficient funding for the medical officer of health. I'm sure that the member from Oak Ridges–Markham will say that. It says that the medical officer of health is to issue directives “to any board of health or medical officer of health requiring the adoption or implementation of certain policies or measures if there exists or there is an immediate risk of a provincial, national or international public health event, a pandemic or an emergency with health impacts in Ontario and the policies or measures are necessary to support a coordinated response or otherwise protect the health of persons.”

It goes on in a bit more detail but that's part 2. The first part was that the minister can permanently appoint a medical officer health in one of the 36 regions. The second part doesn't really mandate too much organization, unfortunately, which is very important. Also, “The act is amended to provide for the further definition of specific terms in the regulations and to provide for prescribing the matters for which the chief medical officer of health may make directives under clause 77.9(2)(d).”

I'm saying it really doesn't do in any specific way very much. All of the words that I've put on the record are to respect the fact that we consider it very important. I don't want to get too far out on a limb here, but we were kind of blamed for SARS, really. I think it was completely unfounded. In fact there were people who died during H1N1 last year. I'm not blaming anyone, and I don't think the medical officer of health did. But what I'm saying here is that there really isn't a plan. It's admitted there isn't. There was a lot of confusion during the implementation. We were lucky, even the report says that. I had a few questions that I felt should be on the record to address the globalization issue, who's in control, the cultural issues, and “How did Ontario fare?” is a fair question.

But I do look back with some history at the bubonic plague, Ebola, the hep C epidemic, SARS, H5N1 and H1N1. There's no question that these things will become more grave and more difficult because of the resistance to certain treatments. We are reducing our natural immunization or immunity systems by all the times we take more and more things to prevent things. We're reducing our own natural ability to be immune to things. I'm completely convinced of that. We do grow up, and I think there was an article in the paper the other day that said the more you're exposed when you're young to certain things, the more resistance you have when you're older, and I think there's some truth to that.

I want to thank the people who work in health care, and I really do mean that. I have a couple of sisters who are nurses. I know just how drawn to their profession, in a professional way, they are, how they rise to the challenge, how many of them even expose themselves to great dangers. Some passed away during the SARS thing offering service to their community and to their fellow man. That's the context that I'm thinking of, and the cynicism that can arise once big government, the big brother of society, starts telling us what to do—there

must be certain clarity about it, and we, as legislators, owe that to the people. So I would expect there would be more hearings, an education forum for people to understand the risks and the solutions that are being presented.

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I could speak longer if I was asked, but it appears that some people would prefer I didn't. So with that, I'll give up the floor for our side and compliment again our critic, the member from Whitby–Oshawa.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

M^{me} France Gélinas: It was most interesting to listen to the member from Whitby–Oshawa, as well as the member from Durham. They went through all of the on-again, off-again information that was circulated last year during the H1N1 pandemic, and gave us real-life examples in their riding as to how some vaccination clinics were going while others hadn't even opened up; how some priority populations didn't have access, while people off the priority list had access; how an adjuvanted vaccine was recommended, then not recommended and then recommended again; how a double dose was recommended for kids, and then not recommended; how they were on the priority list and then they were not; and how this created the huge mess that we saw last year. They gave examples of what happened in their ridings.

I will have tattooed in my brain for the rest of my life that horrible, horrible day in Sudbury. The weather was just awful, between rain and snow and sleet and hail and wind, and this lineup of pregnant women and young families pushing strollers, standing in the cold to get their vaccine, finally making it inside the mall and inside the vaccination centre only to be told that they had run out of vaccine. This was completely despicable, completely hard to comprehend, but it happened. It happened right here in Ontario.

We have to learn from this. We have to learn the lesson of the past so we can do better in the future. If this bill is a step forward to help us do better, certainly let's go down this path, because where we've been before was not pretty.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Mrs. Liz Sandals: I am pleased to be able to respond to the remarks by the member from Whitby–Oshawa and the member for Durham. I'm very pleased to hear that the official opposition will be supporting Bill 141, because I think this is work that everyone in this place can agree on, that we need to follow up on the recommendations from Dr. King, the chief medical officer of health.

Thank you to both members, because they really summarized some of the things that went smoothly. But some of the challenges that we ran into during H1N1—and I think it's particularly important to note that when it came to matters of availability of the vaccine, when it came to setting high-priority groups and which group was to get what vaccine, because there was coordination at the federal level, the supply each week was managed by the federal Ministry of Health, and the different

directives on who should be getting what and in which order were actually also directives that were being coordinated across the country.

There were a number of remarks about the Panorama system, and I want to touch on that quite briefly. Panorama is the public health system that is being developed. It is being developed jointly by all the provinces and by the federal government. The responsibility for the development actually rests with all the provinces, not simply with Ontario, because there is a recognition that we need to coordinate the availability of data during a pandemic, during an epidemic, because we know that those things cross provincial boundaries, so that the Panorama effort is progressing.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Interjection.

The Deputy Speaker (Mr. Bruce Crozier): No. You spoke on it, right?

The member for Whitby–Oshawa, you have up to two minutes to respond.

Mrs. Christine Elliott: I would like to thank all of the members who commented on my comments this afternoon: my colleagues the member from Durham, the member from Nickel Belt and the member from Guelph.

I am looking forward to the discussion on this issue. I look forward to the full comments by the member from Nickel Belt. I hope that the member from Oak Ridges–Markham will be commenting again, because as a former medical officer of health, she does have a unique perspective.

I think it is important to note that what we are looking at is setting up a more hierarchical chain of command in the event of a public health crisis. This is going to be necessarily changing the way that people have operated traditionally. Change can ruffle feathers sometimes and can cause people to not want to give up powers and abilities that they have traditionally had, but I think the remarks that were made by the member from Oak Ridges–Markham were very encouraging—that this is something that most medical officers of health would certainly be happy to do if it's going to contain a public health crisis and an outbreak of another pandemic.

I do look forward to this matter going into committee at some point, when we return to this place, and to hearing from the other people who will be affected by this. I think we do need to pay particular attention to our public health situation and make sure that we are ready for the next pandemic, because we all know that we were quite fortunate with respect to the H1N1 outbreak. We might not be so fortunate the next time around, so anything that we can do to strengthen our public health system we should be doing. I look forward to committee and hearing from the many stakeholders involved in this.

As a final note, again I would like to thank Dr. Arlene King and her staff, and all the dedicated health professionals in the province who managed during this difficult time.

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

M^{me} France Gélinas: It will be my pleasure to add my voice to the second reading of Bill 141, An Act to amend the Health Protection and Promotion Act.

I'd like to bring us back to 2003, when the SARS pandemic shocked the confidence of Ontarians in the health care system. We were not ready; we were not ready at all when SARS came here. Lots of people got sick, and many of them died. Health care workers got the disease from their patients, and some of them died. Our borders got closed. Nobody could come in and out. Our tourism industry pretty much collapsed. You could walk down the big hotels in Toronto, you could walk down the convention centres, and they all sat empty. It was a horrific blow to the local economy, certainly the tourist economy. Ask the hotel industry, the convention industry, the taxi industry: They all remember 2003. They all remember SARS.

It affected all of us. People could not shake hands in church anymore. I still have tickets for a concert by Elton John and Billy Joel that never took place because our borders were closed and they were not allowed in.

Mr. Khalil Ramal: I hope they paid you back.

M^{me} France Gélinas: The member asked if they paid me back. Yes, they did pay me back, like they paid back the tens of thousands of people who had bought tickets.

But the fact remains that it completely turned our lives upside down. We got a taste, although on a small scale. People who got affected, people who lost loved ones and got sick wouldn't say that it was a small scale, but in the grand scheme of things, we got a taste of what a pandemic would look like.

We all remember Dr. Sheela Basrur as being the voice of reason, the one trying to make sense of all of this mess, the one telling us that we were going to get through this and we were going to learn.

1700

Well, SARS did live its course. Our borders reopened and tourists started trickling in. I also remember SARS Fest, where hundreds of thousands of people gathered to celebrate the reopening of Toronto. Toronto was open for business and tourists again; SARS was finally over.

But after SARS, many reports were written. Dozens of recommendations were issued to make things better. One such recommendation that the member from Oshawa-Whitby mentioned was that we should have a medical officer of health in each of our 36 health units. Well, it's now seven years later. In 2003, out of 36 health units, 12 of them did not have a permanent full-time medical officer of health. Fast forward seven years later, to today: nine of them, a full quarter, don't have a full-time permanent medical officer of health.

How could it be that something that brought this great city of ours to its knees did not motivate people to make the changes that we all know needed to be made so that we would be ready for the next time? Because we all know there will be a next time. Yet the recommendation—and nobody disagreed with the recommendation—sat there, and we went from 13 chief medical officer of health positions that were not filled by full-time perman-

ent doctors to nine. That's still way too many. We were supposed to be at zero. We were supposed to have a full complement of 36 medical officers of health way back in 2004. We're in 2010, about to welcome 2011, and things have not improved.

Why is it that when it comes to public health, the will for change, the will to do better, is never there? Public health is never looked at. It is not fancy, it doesn't grab a headline, and it doesn't use any sophisticated pieces of equipment. It is there to protect the public health. It is there to protect you and me, but we never give it the importance it deserves.

So six years later, we are left asking many of the same questions we asked ourselves after SARS. How could there have been such poor coordination? How could our public health system have fallen so short? Why was the communication plan such a disaster? There's no other way to describe it. If you go and talk to any one of the regional newspapers, they will tell you that on a daily basis they were getting at least three different pieces of information that did not jibe with one another, coming from three different areas. They took their role seriously in trying to inform the public as to how they could protect themselves from H1N1, who was on the priority list, what you were supposed to do and not do and all of this, but the information that was fed out to the regional media, and the central media for all matters, was a complete disaster. The papers didn't know who to believe, didn't know what to print, didn't know what to say. They tried their best to get information from their local public health unit, to look at the information from the chief medical officer of health, to put all that together and try to make sense out of it, when truly some of the information given was completely contrary to other information. One day they would say that pregnant women need the adjuvanted vaccine; the next day the other paper would say, "No, no, they don't," and then, seven days later, they did again. It's hard to make sense out of all that.

It's no surprise that the take-up on the vaccine was the lowest that the province had seen. Any other flu season, we hit over a third of the population, sometimes half, depending on who goes and gets the vaccination. With H1N1, with everything that was going on, we hit a quarter of the population. Not a great success now, was it? Our only saving grace was that H1N1 was a rather mild flu. People got sick all right, but they got better on their own. Thank God for that, otherwise what was a disaster on the communication side could have been a disaster in lives paid.

Today, Ontarians are not sure why so many of the problems occur. Why was there inconsistent advice? Why was there queue-jumping by the wealthy? We can all remember the hockey players getting in front of the line. Some of the children attending expensive boarding schools got ahead of the line. It seems like the basic values of our health care system, that people should get the health they need based on their needs, not on their ability to pay—this is a fundamental value of Canadian

society, of Ontarians. I would say we all share this. We all believe that people should get health care based on their needs, not on their ability to pay. All of this got thrown out the window. People were afraid of H1N1. Let the hockey player who's got lots of money get to the front of the line. Let the rich kids of the rich families get to the front of line.

What is this? It really showed that we were not prepared, it really showed that we were not ready, and yet Toronto should have learned. Toronto was the one that had gone through SARS. Toronto is the one that had made the recommendations and that knew we could do better six years before that. But the recommendations, I guess, stayed there and collected dust, because we certainly did not see them in action when it came time for H1N1. Lots of families were scared, and they didn't know who to turn to.

I must say that myself and the NDP welcomed the report by the chief medical officer of health, Dr. King. Her report raised some deeply concerning questions and issues, and also shed light on some of the pieces where we did pretty good. Dr. King made specific recommendations, one of which is included in Bill 141, and we will be moving forward with it. However, there are many other troubling pieces and issues that are raised in Dr. King's report or raised by other experts, and none of them are being dealt with.

It has been over a year since H1N1. It has been close to six months since Dr. King made her report public, and we are moving on but one of her recommendations. That's it; that's all. The rest of them are being ignored. How can we say, on one hand, that this is important and that we have to move forward, and on the other, we're only going to act on one of the recommendations? The rest of them, well, will they take care of themselves? I don't think so.

Perhaps the greatest concern is that after what happened after H1N1, both right and wrong, because Dr. King's report shows us what we did right as much as what we did wrong, the Minister of Health and Long-Term Care has never really acknowledged Dr. King's report. The quote I want to mention is that in Dr. King's 2010 report, she mentioned, "As mentioned at the beginning of this report, the Ministry of Health and Long-Term Care is currently conducting a detailed review of its response to the pandemic. When this is released, the findings of the review will paint a much clearer picture of Ontario's H1N1 response than anyone has seen to date. I would urge those interested in a complete and technically detailed examination of what happened in this province during the pandemic to read" the report.

Well, it looks like the government is moving forward. It doesn't only look that way; the government has moved forward and has tabled Bill 141 in response to what Dr. King has said. But Dr. King admits that the complete picture will only come once the full report has been tabled and shared. Wouldn't it have been a little bit more prudent to wait for the full report to be shared, so that we

could learn from our mistakes and move forward with a piece of legislation that is inclusive of all our mistakes and all the recommendations, not just the one?

1710

As a member of the opposition, I was never given any information about the review. The draft report was confidential, and it would seem that not even the public health partners were consulted. The final report is nowhere to be seen, except I must say that the Minister of Health and Long-Term Care walked across the aisle this afternoon and spoke to me privately, saying that I will hear from it soon. I'm certainly looking forward to seeing this report, but I would feel a whole lot more confident if I had the whole picture in front of me before I was asked to support and move forward with a piece of legislation that is basically the result of what happened with H1N1. Why don't we get the full picture before we move ahead?

I look at this as a process issue. You will remember that the accountability act was a little bit like this. The Auditor General tabled his report on the use of consultants by hospitals in a few LHINs, and the same day—actually, that morning—the minister brought forward a bill. As we started to work through the bill, we realized that this had been rushed through and unintended consequences of the bill had not been taken into account and we didn't have the time to correct them. I want to do this right. There is too much in the balance. A pandemic that is not handled properly, and for which the virus is serious, could mean thousands of deaths in Ontario. We need to do this right.

In order to do this right, we need to have the full picture of what happened with H1N1. We've had the full picture of SARS. The reports are there. They are well written. The recommendations are there, and we've seen very little movement. We will soon have the full picture of what happened during H1N1. Why don't we let the hard work of those people who did the review guide us?

I am no pandemic expert. Except for Dr. Jaczek, I don't think any of us are. But we are asked to make a judgment on a piece of legislation that has to do with how we handled the H1N1 pandemic. I would like to have an opportunity to read the report of the experts that speaks directly to this before we move ahead. I sure hope I will have a chance to do this so that we don't make the same mistakes and realize after it's passed that it has negative consequences that we had not planned for, or like in the case of the narcotics safety bill, that it leaves out entire areas of the province.

The narcotics bill, you will remember, does not cover people in First Nations and people living in rural and remote Ontario, where prescribing and dispensing of narcotics is not the typical physician, nurse practitioner or dentist prescribing, and you go to a pharmacist who dispenses and get your drugs. The bill works wonderfully well for that scenario, but I happen to represent people for whom that scenario does not work. We have alternate methods of getting drugs, because we live in remote, rural or northern Ontario or in First Nations.

We already know that when you rush things through, you make mistakes. I want to see the report. H1N1

should have been a five-alarm bell for all of us. We'd better do things right.

In May, the Toronto medical officer of health released a report on how Toronto Public Health fared during H1N1. The director of communicable diseases said, "The public health unit was stymied by changing directives from the provincial health ministry." In fact, their report goes on to make numerous recommendations to the Minister of Health and Long-Term Care. I will read a few of them, because I think they are very pertinent. The first one: The medical officer of health of Toronto Public Health—which, by the way, is a huge public health unit when you look at the millions of people who depend on that medical officer of health—goes on to say, recommendation 1, "The Minister of Health and Long-Term Care:

"(a) should update the Ontario health pandemic and influenza plan (OHPIP) by specifying the pandemic roles and responsibilities of the Ontario Agency for Health Protection and Promotion (OAHP) and the local health integration networks (LHINs)." Yet in our bill we don't even mention the local health integration networks, although we all know that last fall they did play a role, and they will probably be called upon to play a role again. We're putting forward a piece of legislation that is supposed to correct those loopholes, but they have been left out.

They also said, "Designate LHINs as the lead agency for planning and implementation of flu assessment centres (FACs), including the identification of criteria for opening and closing FACs, in partnership with local public health units and primary care providers, including community health centres as key partners for ensuring that the needs of vulnerable populations are met."

If you were ever interested in putting an equity lens on this bill, you will realize that although vulnerable populations—and the key element that makes a population vulnerable is poverty. We all know that poverty is the biggest determinant of health. That population is at risk of being more sick, more often, more severely and being hospitalized for a longer period of time. Yet if you put an equity lens on Bill 141, equity was not part of the topic, although the Toronto Public Health unit clearly states that you have to look at key partners for the needs of vulnerable populations. It's not part of this bill. I would ask you, why not?

Other recommendations made by the Toronto health unit: "Mandate the province-wide use of real-time surveillance systems for timely monitoring of local influenza-like illness (ILI) activity." We don't see any of that in the bill.

They go on to say, "Ensure that Ontario Government Pharmaceutical and Medical Supply Services (OGPMSS) remains the coordinating agency responsible for processing and pre-approving community-based influenza vaccine orders for Toronto during an influenza pandemic."

Those are serious recommendations. This is a health unit responsible for the protection of the lives and health

of millions of Ontarians, that has gone through the process of looking at what went wrong, what were the tools, what were the processes that didn't work with H1N1 last year. They put forward recommendations for change, but none of those are being taken into account right now, and that worries me.

They also want to direct the chief medical officer of health, that's Dr. King, to lead planning and coordination of communication with the primary care sector regarding pandemic influenza. Remember how angry physicians were that their vulnerable patients were coming to them and they did not have access to the vaccine? They knew that the people standing in front of them in their waiting room, calling their office, needed access. They were part of the priority population, yet they were completely shut out. They were not allowed to give vaccines. What kind of a rollout is that? Everybody has known for years that when flu season comes, you can go to the health unit, but you can also go to your primary care provider and they give you your flu shot. Everybody in Ontario knew this, yet we refused to use that system. For reasons of urgency—we were trying our best with H1N1 last year, and the results were not really good. So they're making recommendations here, but I don't find those in Bill 141. None of those have been included.

1720

They also suggested that we review the effectiveness of different methods of planning influenza vaccine delivery, as demonstrated in the H1N1 pandemic, and include criteria for decision-making in that plan. It would be nice if that would be acted upon, I think.

Those are well-thought-out recommendations. They are doable. They don't cost any money, so it's not like we can use this recession as, "Well, we can't move forward. We haven't got the money." Those recommendations don't cost anything; they just ask us to do things differently, to give different powers to different people so that next time the next pandemic comes, we are ready. But we have Bill 141, a teeny-weeny little affair of a bill that doesn't touch on any of those.

As a member of the opposition who's going to have to work on that bill, how can I know if the minister has made any progress on any of these recommendations? If she has, how come they're not included in the bill? Have they looked into the important issues raised by Toronto Public Health and the other 35 health units that are all putting out their lessons learned from H1N1? When I contacted the one that I have a relationship with, they said that, no, they had not been contacted, their input had not been sought, that this comprehensive report from the government was news to them and they didn't know anything about it.

Those are the people who were on the front lines. Those are the people who took it on the chin when it didn't work out. Those are the people who are best suited to learn from what happened and make recommendations for change. They were there. They lived it. Some of them worked 20-hour shifts for days on end, yet we don't go and ask for their feedback? We don't take into account

their experience, what they've learned and what they would like to see changed? Is the minister certain that the bill before us today represents the careful assessment and thought that came from a thorough examination of the H1N1 pandemic in Ontario? I wish somebody would answer that question. I would feel a whole lot better if they did.

Also, a concern about the process of the government review of H1N1: They haven't been willing to examine questionable practices that occurred during the pandemic. Remember? I can still remember. I was there when the Minister of Health was scrummed in the hallway just outside of here when we first learned about queue-jumping, where the wealthy in Ontario, people with money—not necessarily people with the highest need, but people with the thickest wallets—were able to access H1N1 immunizations just because they could afford to pay their way to the front of the line.

When the minister heard of this, she, like everybody else in this House, was outraged. This is not the way our system should work. Our system should prioritize the people whose health needs are the highest. They are the ones who should go to the front of the line, not the people with the thickest wallets. But here it was on the front page of the paper for everybody to see: If you had money, you could weasel yourself to the front of the line.

The minister said—and I was there—in front of all the cameras, and it's printed in the paper, that she was going to look into it. She didn't think that this was right. She wanted to know what had happened. Did she look into it? If she did, she certainly didn't share it with me or anybody else in this House. If we are to learn from our mistakes, if we want to make sure that at the next pandemic, the hockey players don't get at the front of the line while the pregnant women wait outside in the rain, then we have to correct a few things here. No offence to hockey players, but when you're not on the priority list, you should not be at the front of the line. Pregnant women were on the priority list, but they were not at the front of the line.

Nothing has come of this. We've never heard back. We don't know if this was done. We don't know how come it happened. We haven't shed a light on any of this. We certainly haven't learned and cannot tell the people of Ontario, "It will never happen again, because this is how they weaseled their way to the front of the line. We have cut off that supply. It's never going to happen again." None of this was done.

In the next pandemic, what will keep the rich from finding their way to the front of the line like they did the last time? I don't know. I guess it was okay that those troubling events happened, because we're not willing to look into them, we're not willing to learn from our mistakes and we're not willing to tell the people of Ontario, "We've looked into it. It was not right and it won't happen again."

The NDP filed freedom of access to information requests because we wanted to know, has the work been done? How did that happen? We were told that those documents will not be released. What's that supposed to

mean? Is it because it was never actually done? Is this because it was done but they found that it's okay for rich people to go to the front of the line? We have no idea. They have decided that the documents will not be released. I'm not happy with that answer. I want more transparency. I want us to learn from our mistakes. I want us to do better. We owe it to everybody in Ontario to do better, but I get answers like this.

If the government is trying to fix the system, is secrecy and denial the right way to fix our system? Is this the right approach: secrecy and denial? I don't think so. I think we owe it to the people of Ontario, who basically judged us, whether we wanted them to or not—and you can go out on the street anywhere in this province and ask, "How do you figure the H1N1 pandemic went last year?" There won't be too many compliments coming forward. There will be stories of waiting in the rain; stories of waiting a long time to be told they had run out. There will be stories of not knowing who to believe, but there won't be too many compliments.

Now we want to fix this. We want to do better. The government has put Bill 141 forward, but a lot of the information that would allow us to turn the page, that would allow us to bring accountability, has not been released, and even through freedom of access of information, we're being told that it will not be released.

At first glance, the idea that the chief medical officer of health should have the ability to direct public health units in real time during a pandemic seems to make a lot of sense. It seems like a reasonable idea to me. But the details on how this will work and what that will mean for every community in Ontario remains to be seen. This work has to be thought through. This work has to be done so that we are certain that by taking away local flexibility we will end up with something better, because this is what you're doing. If we pass Bill 141 the way it is written now, the chief medical officer of health will be able to direct the public health boards and will be able to direct the medical officers of health. Up to now they had the freedom to answer to the local needs of the population they serve. We're about to pass a bill that will take away that freedom; that will centralize power.

This morning, we spent an awful lot of time talking about the G20 and how the centralization of power did not work out that well—and certainly was not welcomed by the people of Toronto or Ontario. It was a disgrace on all of us. So here we are, about to pass a bill—not to say that the chief medical officer of health would ever behave in the way that we saw—that is centralizing power during a certain health event. Let's think that through. Let's think through what that will mean for every community in Ontario so that we're sure that we do good.

The foundation of our public health system right now, of our 36 public health units, is reliant on local control. The local board of health must have the autonomy to plan and execute public health initiatives that work in their own community.

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I can tell you that the Sudbury and district public health unit, headed by Dr. Penny Sutcliffe, knows the

needs of the region way better than anybody in Toronto does. She knows how to reach people, how to communicate with them. Now, under certain circumstances, we're going to take that power away from her, a woman, a doctor that I respect tremendously, and shift it to another woman that I respect tremendously but who is further away from the action, further away from the people of Nickel Belt. It needs to be thought through. We need to make sure we're doing the right thing.

So how does Bill 141 change this? How is this going to lead to better planning and coordination of a pandemic? Show me how this will work so that I can better understand.

On July 15, the Association of Local Public Health Agencies—that's the association of public health units—wrote to Dr. King. They were concerned about her recommendation for more central control of local boards of health. Those are the people on the ground. Those are the people who live and work in our communities, and they are concerned.

The letter states: "We believe that increasing 'command and control' in such a system is unnecessary and may have the unintended consequence of aggravating the very problem that the report suggests it is meant to solve. Our experience"—and those are the people on the ground—"during the H1N1 response, for example, was that centralized attempts to standardize the rollout of the H1N1 vaccine program by imposing inflexible rules about priority populations were in fact themselves responsible for some of the inconsistencies and resulting public confusion that you identify in your report."

Those are pretty significant concerns. We are talking about an association of 36 public health units which, last year at this time, were up to their eyeballs in H1N1, trying to roll out and do the impossible, and they are concerned. They have severe concern about what we're about to do, plus they tell me that they have not been consulted. Shouldn't we, under the precautionary principle, take the time to hear from those people? Shouldn't we take the time to learn from their mistakes? We don't have to do all of the mistakes ourselves. We can learn from the ones we've done in the past and not repeat them.

Although I must say that we are not privy—I am not privy—to any subsequent consultation and conversation between Dr. King and what is called ALPHA, it is obvious that the issue raised in this letter needs to be addressed. Does the government have a response to those valid concerns? If they do, they have not shared it with me. I do share the concerns, but I don't know what the answers to those concerns could be.

If the provincial review of the H1N1 response would provide answers, why is this legislation being tabled before the full report has been shared and we've had time to read and understand the recommendations in it? It seems to be a bit backward—more than a bit, actually.

Dr. King talked extensively in her report about the impact of not having an electronic health record, an electronic patient record system: in Ontario there is no

way of knowing who gets the vaccine and no way to share this information system-wide.

Panorama, which I think every party has talked about, has been in development for over six years, but to this day, it is still not operational. Why? I have a few suggestions for why. Does eHealth mean anything to anybody? Does \$1 billion invested, with very little in return, mean anything to anybody? We haven't done stellarly on electronic health records; we have not done well.

When will Ontarians have a fully functional electronic health record?

Interjections.

M^{me} France Gélinas: I'm being heckled right now, saying that millions of Ontarians have a health record. They have a health record that does not talk to the health unit. If you send somebody for a test that is done by a health unit, the health unit will mail you your result or fax it. A poor secretary out there will have to scan it and put it into your health record, and there is absolutely nothing you can do with that report but read it online. Might as well read it in the paper chart; it would make no difference. The beauty of electronic health records is that you can share things; you can trend things; you can do things. None of this is available for the millions of people that have electronic health records in Ontario. I guarantee you, health units cannot send their results online. So we have part of an electronic health record for part of the population of Ontario. The problem is that to gain the benefits of a health record, all of the pieces need to work. Some of the pieces have started to work some of the time for some of the people, but that's not how you get the benefits out of it. We are still in the build-up stage.

The fact is that as long as our health care and public health system remain without the necessary electronic health record, we will remain permanently thwarted by this absence.

I realize that the time is running on the clock. The pandemic last year was a wake-up call; SARS was a wake-up call. Public health is something that I truly believe in. It could make a world of difference if we were to take it seriously. If we were to act upon the recommendations of the people who work within that system, we would have a completely different health status in this province. We would show drastic decreases in rates of cancer, in rates of Alzheimer's disease, other brain health diseases. We could make a world of difference, but public health always takes a back seat.

Finally, we have a bill in front of us that talks about public health. I hope that we will take the time to make the changes to that bill so that it really reflects all of the changes that need to happen so that when the next pandemic comes at our door, we will do better. Ontarians deserve nothing else.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Mr. Pat Hoy: First of all, I want to take the opportunity to wish everyone in Chatham-Kent-Essex a very merry Christmas, and I hope everyone has a healthy, safe and joyous new year. To little Trent, I want to tell him

that Santa Claus has the magic key to his house and there will be no problem on Christmas Eve, because I know you're concerned that you don't have a chimney, but Santa will get there.

Now, to the matter at hand, Bill 141, the Health Protection and Promotion Amendment Act, 2010: This is an important initiative on behalf of our Minister of Health, and flows in part from the pandemic we had, commonly known as H1N1. The proposed amendments would ensure that appointments of acting medical officers of health are approved by the chief medical officer of health and the minister, which I think makes good sense. There would be directives that could be in force for six months or less if the chief medical officer of health so decided, and would be limited to very specific matters, for example, infectious diseases, environmental health and public health emergency preparedness.

These directives most assuredly would give guidance to those that are going to have to perhaps make important decisions into the future. There are those who think that those possibilities are strong, and there are those persons who think that's absolutely going to happen in a modern world where diseases cross borders because of the way we travel now and the way the world is so small in terms of shipment of items and the moving of people, for example.

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I certainly look forward to continued debate on this matter.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments?

Mrs. Christine Elliott: I do appreciate the comments that were made by the member from Nickel Belt who I know was very involved in following the H1N1 pandemic and who saw the confusion that we all witnessed with respect to the lineups, who was going to be receiving the vaccine and in what order. I did note from her comments that she has been speaking to some of the front-line health professionals since the H1N1 situation, and she noted some of her discussions with them.

I was really disappointed to hear that they haven't been consulted with, despite the minister's comments—all the more reason why we were commenting on the need to make sure that this gets a full hearing in committee, that we need to make sure that we hear from the people who were on the front lines. It's well and good for all of us here to talk about it, but we didn't have that experience.

We need to hear from them about what went well, what didn't go so well and, more importantly, what their response is to this specific piece of legislation which is, for those watching, Bill 141, the Health Protection and Promotion Amendment Act, because this does delineate a very different kind of chain of command in an emergency situation. There are limits to when that can be used. It needs to be used primarily in an emergency situation. It has to be necessary.

We need to really examine whether those changes are absolutely necessary, whether there are reasonable limita-

tions on the local medical officer of health's powers, whether they should be restrained more, whether they should be loosened.

We look forward to hearing from the experts on the front line. Again, I appreciate the fact that the member from Nickel Belt brought that important point forward, as well as a number of issues relating to queue jumping and other issues that we shouldn't have to deal with in our public health system. We need to make sure it's accessible for everyone, and especially in cases of emergency that people who need attention get attention first.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments.

Mr. Bob Delaney: We've talked a little bit about what happens in a pandemic, and we've talked a lot about some of the local impact of that, and I'd like to describe something that we're trying to do in the city of Mississauga with just such an idea in mind as the measures proposed in this bill.

I've read petitions down through the months about an ambulatory surgery centre in the city of Mississauga. Now, should a pandemic or a serious illness strike almost any hospital, one of the first things to be cancelled is often elective surgery. If there's a procedure that a patient may have been waiting in line for for upwards of weeks, months and, in some cases, maybe even a year, depending upon the severity of the condition and what form of treatment the patient is having with their doctor, and just at the very moment you're expecting the operation, through no fault of yours, no fault of the doctors, no fault of the hospitals, if they have to lock it down because of a serious infection or an outbreak of a virus, your surgery may be cancelled.

That's one of the reasons that at the Credit Valley Hospital we're proposing an ambulatory surgery centre which, should the hospital have to take the measures such as are proposed in this bill to secure the health and the safety of other patients and the hospital facility itself, means that if you've got your surgery booked, you'll still be able to have your surgery done.

What impact is this? Well, a generation ago, if you went into hospital for most types of surgeries, the odds were four out of five you'd be staying overnight. Today, the odds are reversed. About 80% of surgery is day surgery, and it's surgery that you walk in and walk out of, and that's a really good argument for not merely passing the bill but for doing a project like an ambulatory surgery centre.

The Deputy Speaker (Mr. Bruce Crozier): Questions and comments.

Mr. Khalil Ramal: I'm delighted to stand up and comment on the speech of the member from Nickel Belt. I know she's an expert in the health field, but I was shocked that she would speak negatively about this bill. I don't know why.

The Minister of Health and the team of this government are trying to do their best to face any possible pandemic that happens in the province of Ontario. They create all the effort, put all the teams together, create a

special mechanism to tackle those issues if they happen in the future. That's what we're trying to do: give the chief medical officer the support and the ability, if something happens, to act fast and quickly, in a professional manner, to put all the teams across the province of Ontario together to act in the same professional way.

We know we learned from our experience. You mentioned the flu we had last year in Ontario, and before, in 2003, we had SARS. Do you know what? We were probably not equipped to deal with it in a quick and professional manner. That's why the Minister of Health came in with a proposal to create a mechanism, a flexible mechanism, for the chief medical officer of Ontario to have the ability to conduct and also to command all the medical health units across Ontario to act in a professional manner, in the same way, to tackle any possible issues facing the province of Ontario.

You're right, that's why we have this place open on a regular basis: to debate many different issues. Your speech and the opposition's speech and ideas will enhance our ability to come up with better and stronger bills to be able to serve the people of Ontario. That's why we're bringing the bill to this particular place: in order to be debated, in order to be discussed on a regular basis, to have the best possible way to enhance our ability to serve the people of Ontario, especially in terms of health, because health is very important for all of us in the province of Ontario.

The Deputy Speaker (Mr. Bruce Crozier): The member for Nickel Belt, you have up to two minutes to respond.

M^{me} France Gélinas: I will start with a response to the member from Chatham–Kent–Essex. He talked about the part of the bill that limits the appointment of an active acting medical officer of health to six months. I think this is a step in the right direction. We've known since SARS that one of the key success factors for quality public health is to have permanent, full-time medical officers of health in all 36 health units. This doesn't bring us there, but it brings us towards there by limiting to six months. Right now, some of those medical officers of health have been "acting" for years. It will certainly, I would say, light a big fire under somebody's behind to try to get them to change this with a bill that says, "No more than six months."

From the member from Whitby–Oshawa, I certainly agree with her that we need to have full hearings on this. When you go out to the field and you hear from people who were up to here in H1N1 last year that they knew nothing about the bill coming, that they knew nothing about the ministry doing a review, this is very scary. Those are the people who know, those are the foot soldiers on the ground. The local medical officers of health on the ground need to be included. We need to take their concerns into account.

From the member from Mississauga–Streetsville, I fail to see the relationship between an ambulatory surgery centre and a pandemic. They would be one of the first

things that would be closed down, in my book, to use them as a flu centre, but that's beside the point.

The member from London–Fanshawe, I appreciate that they will be listening to the opposition.

ROYAL ASSENT SANCTION ROYALE

The Deputy Speaker (Mr. Bruce Crozier): I beg to inform the House that in the name of Her Majesty the Queen, His Honour the Lieutenant Governor has been pleased to assent to certain bills in his office.

The Clerk-at-the-Table (Ms. Lisa Freedman): The following are the titles of the bills to which His Honour did assent:

Bill 120, An Act to amend the Pension Benefits Act and the Pension Benefits Amendment Act, 2010 / *Projet de loi 120, Loi modifiant la Loi sur les régimes de retraite et la Loi de 2010 modifiant la Loi sur les régimes de retraite.*

Bill 122, An Act to increase the financial accountability of organizations in the broader public sector / *Projet de loi 122, Loi visant à accroître la responsabilisation financière des organismes du secteur parapublic.*

Bill 135, An Act respecting financial and Budget measures and other matters / *Projet de loi 135, Loi concernant les mesures financières et budgétaires et d'autres questions.*

Bill 172, An Act to amend the Ticket Speculation Act / *Projet de loi 172, Loi modifiant la Loi sur le trafic des billets de spectacle.*

Bill Pr37, An Act respecting The Sisters of St. Joseph of the Diocese of Peterborough, in Ontario.

Bill Pr38, An Act respecting Big Bay Resort Association.

Bill Pr41, An Act to revive Tonum Ltd.

HEALTH PROTECTION AND PROMOTION AMENDMENT ACT, 2010 LOI DE 2010 MODIFIANT LA LOI SUR LA PROTECTION ET LA PROMOTION DE LA SANTÉ

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

Mrs. Liz Sandals: I'm very pleased to be able to add to the comments that were made earlier by the Honourable Deb Matthews, Minister of Health and Long-Term Care, to this, the second reading of our proposed amendments to the Health Protection and Promotion Act.

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What this proposed legislation is about is reinforcing an already robust and highly effective public health system in Ontario. The amendments that we're putting forward are about consistency and looking forward to the next public health emergency. Sooner or later, there will

be another public health emergency, so we have to be prepared.

Public health certainly took on a leadership role in managing the difficult H1N1 challenge. Let me remind you that this was the world's first pandemic since 1968. Our government was tremendously impressed by, and grateful for, the dedication and hard work shown by everyone in public health and in the health care sector across the province.

All Ontarians depend on the work of public health not only during times of crisis but each and every day. So many aspects of public health and well-being depend on the daily work of public health units in areas like childhood immunization, food inspection, health promotion, to name just a few of the areas that public health units are responsible for.

When a health crisis strikes, that's when public health units really shine. They pull out all the stops to rush in to do what's necessary to protect the public's health. We saw that time and again during last year's H1N1 pandemic.

For example, because children were at high risk of complications from pandemic H1N1, public health units worked closely with daycare centres, schools and school boards to educate teachers, early childhood educators, students and parents in order to protect children and keep schools open. They carefully monitored school absenteeism and were prepared to close schools, if necessary. I'm pleased to say that no schools had to close during the response—a measure that would have been highly disruptive, both for parents and children. This is in stark contrast to some other jurisdictions, such as Mexico and the United States, which did implement school closures as a means of containing the H1N1 epidemic.

Communities also did their part to stop the spread of infection. One northern community set up a call centre where people living anywhere in the region could call in to book an immunization appointment at a site in their own community, so they wouldn't have to drive long distances to get the immunization.

Other communities used social networking technologies to inform the public about wait times at immunization clinics or used wristband technology to limit the time the public spent in lineups. Still other jurisdictions formed innovative partnerships, such as working with staff from public health and local Ontario Early Years centres, to support the immunization of children.

In First Nations communities, the effectiveness of the response was especially critical, given that some First Nations people were at high risk of becoming seriously ill from H1N1. There was tremendously strong collaboration among various partners, including First Nations organizations, federal, provincial and local organizations, and a close working relationship between public health units and communities. All these efforts at various levels resulted in Ontario doing very well, on the whole, in the face of pandemic H1N1.

As a government, we recognize the importance of our continued investments in public health because what

public health does is so essential for the lives of all Ontarians.

I want to be clear: The proposed amendments are not meant as a criticism of Ontario's public health response to the H1N1 pandemic. On the contrary, Ontario's public health system performed admirably during the H1N1 pandemic. However, the proposed measures would add to the many important tools public health units and the province already have in place to respond effectively to a public health threat.

The minister, when she was speaking earlier, outlined in detail the proposed expansion of the chief medical officer of health's powers to issue orders and to have a coordinated response in the case of a health emergency, so that we have a coordinated response all across Ontario.

I'd like to turn to two of the remaining elements of the legislation: the appointment of acting medical officers of health and the taking over of public spaces for public health use.

With respect to the taking over of public spaces for public health use, let me note that the proposed amendment refers only to public premises whose owner is already part of the broader public sector. The definition of "broader public sector" is taken from the Financial Administration Act and includes, among others, schools, colleges, universities, entities that are health service providers and municipalities. That gives you an idea of the locations in which you could have premises being taken over.

Currently, the minister may take over premises to use as a temporary isolation facility, a very narrow use. Of course, that resulted from SARS, when the conversation was about how we would isolate people who already had the disease. As we've learned from H1N1, we now understand that what we need to do with these facilities is broader than that. For example, we might want to take over a facility to use as a mass immunization centre. So the ability to take over something for public health uses is still, though, fairly narrow under the act. The minister would have to have in writing advice from the chief medical officer of health, who "is of the opinion that,

"(a) there exists, or there is an immediate risk of, an outbreak of a communicable disease anywhere in Ontario, or there exists, or there may exist, an immediate risk to the health of persons anywhere in Ontario...." It goes on to say that the premises are required in order to address that risk, the emergency health risk.

Under the HPPA—and this is already in the legislation because of the limited ability to take over—the occupier or the owner of the premises, as the case may be, would be entitled to compensation for the use and occupation of the premises in accordance with the Expropriations Act.

I see the Speaker is getting out his magic watch, so I'm just thinking that perhaps I will end after that explanation of that one amendment I wanted to talk about. Perhaps sometime in February I'll be able to tell you about the other amendment. So I'll keep you all in suspense until we get to the new year.

Second reading debate deemed adjourned.

The Deputy Speaker (Mr. Bruce Crozier): Well, indeed, my little pocket watch does say that we've had a

good afternoon and that this House is adjourned until 9 of the clock on Thursday, December 9.

The House adjourned at 1758.

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Gélinas, France (NDP) Gerretsen, Hon. / L'hon. John (LIB)	Nickel Belt Kingston and the Islands / Kingston et les Îles	Minister of Consumer Services / Ministre des Services aux consommateurs
Gravelle, Hon. / L'hon. Michael (LIB)	Thunder Bay–Superior North / Thunder Bay–Superior-Nord	Minister of Northern Development, Mines and Forestry / Ministre du Développement du Nord, des Mines et des Forêts
Hampton, Howard (NDP) Hardeman, Ernie (PC)	Kenora–Rainy River Oxford	Deputy Opposition House Leader / Leader parlementaire adjoint de l'opposition officielle
Hillier, Randy (PC)	Lanark–Frontenac–Lennox and Addington	
Horwath, Andrea (NDP)	Hamilton Centre / Hamilton-Centre	Leader, Recognized Party / Chef de parti reconnu Leader, New Democratic Party of Ontario / Chef du Nouveau parti démocratique de l'Ontario
Hoskins, Hon. / L'hon. Eric (LIB)	St. Paul's	Minister of Citizenship and Immigration / Ministre des Affaires civiles et de l'Immigration
Hoy, Pat (LIB) Hudak, Tim (PC)	Chatham–Kent–Essex Niagara West–Glanbrook / Niagara- Ouest–Glanbrook	Leader, Official Opposition / Chef de l'opposition officielle Leader, Progressive Conservative Party of Ontario / Chef du Parti progressiste-conservateur de l'Ontario
Jaczek, Helena (LIB) Jeffrey, Hon. / L'hon. Linda (LIB)	Oak Ridges–Markham Brampton–Springdale	Minister of Natural Resources / Ministre des Richesses naturelles
Johnson, Rick (LIB) Jones, Sylvia (PC) Klees, Frank (PC) Kormos, Peter (NDP) Kular, Kuldip (LIB) Kwinter, Monte (LIB) Lalonde, Jean-Marc (LIB) Leal, Jeff (LIB) Levac, Dave (LIB) MacLeod, Lisa (PC) Mangat, Amrit (LIB)	Haliburton–Kawartha Lakes–Brock Dufferin–Caledon Newmarket–Aurora Welland Bramalea–Gore–Malton York Centre / York-Centre Glengarry–Prescott–Russell Peterborough Brant Nepean–Carleton Mississauga–Brampton South / Mississauga–Brampton-Sud	Third Party House Leader / Leader parlementaire de parti reconnu
Marchese, Rosario (NDP) Martiniuk, Gerry (PC) Matthews, Hon. / L'hon. Deborah (LIB)	Trinity–Spadina Cambridge London North Centre / London- Centre-Nord	Minister of Health and Long-Term Care / Ministre de la Santé et des Soins de longue durée
Mauro, Bill (LIB) McGuinty, Hon. / L'hon. Dalton (LIB)	Thunder Bay–Atikokan Ottawa South / Ottawa-Sud	Premier / Premier ministre Leader, Liberal Party of Ontario / Chef du Parti libéral de l'Ontario
McMeekin, Ted (LIB)	Ancaster–Dundas–Flamborough– Westdale	
McNeely, Phil (LIB) Meilleur, Hon. / L'hon. Madeleine (LIB)	Ottawa–Orléans Ottawa–Vanier	Minister of Community and Social Services / Ministre des Services sociaux et communautaires Minister Responsible for Francophone Affairs / Ministre déléguée aux Affaires francophones
Miller, Norm (PC) Miller, Paul (NDP)	Parry Sound–Muskoka Hamilton East–Stoney Creek / Hamilton-Est–Stoney Creek	
Milloy, Hon. / L'hon. John (LIB)	Kitchener Centre / Kitchener-Centre	Minister of Training, Colleges and Universities / Ministre de la Formation et des Collèges et Universités
Mitchell, Hon. / L'hon. Carol (LIB)	Huron–Bruce	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Moridi, Reza (LIB) Munro, Julia (PC)	Richmond Hill York–Simcoe	Third Deputy Chair of the Committee of the Whole House / Troisième vice-présidente du Comité plénier de l'Assemblée législative
Murdoch, Bill (PC) Murray, Hon. / L'hon. Glen R (LIB)	Bruce–Grey–Owen Sound Toronto Centre / Toronto-Centre	Minister of Research and Innovation / Ministre de la Recherche et de l'Innovation
Naqvi, Yasir (LIB) O'Toole, John (PC) Oraziotti, David (LIB) Ouellette, Jerry J. (PC) Pendergast, Leeanna (LIB) Peters, Hon. / L'hon. Steve (LIB) Phillips, Hon. / L'hon. Gerry (LIB)	Ottawa Centre / Ottawa-Centre Durham Sault Ste. Marie Oshawa Kitchener–Conestoga Elgin–Middlesex–London Scarborough–Agincourt	Speaker / Président de l'Assemblée législative Chair of Cabinet / Président du Conseil des ministres Minister Without Portfolio / Ministre sans portefeuille Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
Prue, Michael (NDP) Pupatello, Hon. / L'hon. Sandra (LIB)	Beaches–East York Windsor West / Windsor-Ouest	Minister of Economic Development and Trade / Ministre du Développement économique et du Commerce
Qaadri, Shafiq (LIB) Ramal, Khalil (LIB) Ramsay, David (LIB) Rinaldi, Lou (LIB) Ruprecht, Tony (LIB) Sandals, Liz (LIB) Savoline, Joyce (PC) Sergio, Mario (LIB) Shurman, Peter (PC) Smith, Hon. / L'hon. Monique M. (LIB)	Etobicoke North / Etobicoke-Nord London–Fanshawe Timiskaming–Cochrane Northumberland–Quinte West Davenport Guelph Burlington York West / York-Ouest Thornhill Nipissing	Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales Government House Leader / Leader parlementaire du gouvernement
Sorbara, Greg (LIB) Sousa, Charles (LIB) Sterling, Norman W. (PC) Tabuns, Peter (NDP) Takhar, Hon. / L'hon. Harinder S. (LIB)	Vaughan Mississauga South / Mississauga-Sud Carleton–Mississippi Mills Toronto–Danforth Mississauga–Erindale	Deputy Third Party House Leader / Leader parlementaire adjoint de parti reconnu Minister of Government Services / Ministre des Services gouvernementaux
Van Bommel, Maria (LIB) Wilkinson, Hon. / L'hon. John (LIB) Wilson, Jim (PC)	Lambton–Kent–Middlesex Perth–Wellington Simcoe–Grey	Minister of the Environment / Ministre de l'Environnement First Deputy Chair of the Committee of the Whole House / Premier vice-président du comité plénier de l'Assemblée
Witmer, Elizabeth (PC) Wynne, Hon. / L'hon. Kathleen O. (LIB) Yakabuski, John (PC)	Kitchener–Waterloo Don Valley West / Don Valley-Ouest Renfrew–Nipissing–Pembroke	Minister of Transportation / Ministre des Transports Opposition House Leader / Leader parlementaire de l'opposition officielle
Zimmer, David (LIB)	Willowdale	

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Jim Brownell, Kim Craiton
Bob Delaney, Garfield Dunlop
Phil McNeely, John O'Toole
Maria Van Bommel
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Rick Johnson, Sylvia Jones
Jean-Marc Lalonde, Ted McMeekin
Shafiq Qaadri, Khalil Ramal
Elizabeth Witmer
Committee Clerk / Greffière: Susan Sourial

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