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**Thursday 4 December 2014**

**Journal  
des débats  
(Hansard)**

**Jeudi 4 décembre 2014**

**Standing Committee on  
Social Policy**

Safeguarding Health Care  
Integrity Act, 2014

**Comité permanent de  
la politique sociale**

Loi de 2014 de sauvegarde  
de l'intégrité des soins de santé

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## LEGISLATIVE ASSEMBLY OF ONTARIO

## ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON  
SOCIAL POLICYCOMITÉ PERMANENT DE  
LA POLITIQUE SOCIALE

Thursday 4 December 2014

Jeudi 4 décembre 2014

*The committee met at 0902 in committee room 1.*

**The Clerk of the Committee (Ms. Valerie Quioc Lim):** Good morning, honourable members. In the absence of the Chair and Vice-Chair, it is my duty to call upon you to elect an Acting Chair. Are there any nominations? Ms. Forster.

**Ms. Cindy Forster:** I nominate Miss Taylor.

**The Clerk of the Committee (Ms. Valerie Quioc Lim):** Miss Taylor, do you accept the nomination?

**Miss Monique Taylor:** I do. Thank you.

**The Clerk of the Committee (Ms. Valerie Quioc Lim):** Are there any further nominations?

There being no further nominations, I declare the nominations closed and Miss Taylor duly elected as Acting Chair of the committee.

**Ms. Cindy Forster:** Lucky you.

**The Acting Chair (Miss Monique Taylor):** Thank you, I think.

SAFEGUARDING HEALTH CARE  
INTEGRITY ACT, 2014LOI DE 2014 DE SAUVEGARDE  
DE L'INTÉGRITÉ DES SOINS DE SANTÉ

Consideration of the following bill:

Bill 21, An Act to safeguard health care integrity by enacting the Voluntary Blood Donations Act, 2014 and by amending certain statutes with respect to the regulation of pharmacies and other matters concerning regulated health professions / Projet de loi 21, Loi visant à sauvegarder l'intégrité des soins de santé par l'édiction de la Loi de 2014 sur le don de sang volontaire et la modification de certaines lois en ce qui concerne la réglementation des pharmacies et d'autres questions relatives aux professions de la santé réglementées.

**The Acting Chair (Miss Monique Taylor):** Good morning. The Standing Committee on Social Policy will now come to order. We are here for clause-by-clause consideration of Bill 21, An Act to safeguard health care integrity by enacting the Voluntary Blood Donations Act, 2014 and by amending certain statutes with respect to the regulation of pharmacies and other matters concerning regulated health professions.

Please note that at 2 p.m., I will be required to interrupt proceedings and shall, without further debate or amendment, put every question necessary to dispose of all remaining sections of the bill and any amendments

thereto. From that point forward, those amendments which have not yet been moved shall be deemed to have been moved. Any division required shall be deferred until all remaining questions have been put and taken into succession, with one 20-minute waiting period allowed, pursuant to standing order 129(a).

Are there any comments or questions before we get into section 1? Okay. Section 1, section 2 and section 3—there do not seem to be any amendments. Can we group those together?

Shall sections 1 to 3 carry? Carried.

Schedule 1, section 1: no amendment. Shall it carry? Carried.

Schedule 1, section 2: no amendment. Shall it carry? Carried.

Schedule 1, section 3: There is a PC amendment. I recognize Mr. Walker.

**Mr. Bill Walker:** I move that subsection 3(3) of the Voluntary Blood Donations Act, 2014, as set out in schedule 1 to the bill, be struck out and the following substituted:

“Exemptions

“(3) Canadian Blood Services, the individuals who give blood to Canadian Blood Services and any other persons or entities designated by Canadian Blood Services are exempt from subsections (1) and (2).”

**The Acting Chair (Miss Monique Taylor):** Any discussion?

**Mr. John Fraser:** I can't support this motion, because I think the exemptions inside the legislation are broad enough right now to cover, so this amendment is not necessary.

**The Acting Chair (Miss Monique Taylor):** Any other further debate?

**Mr. Bill Walker:** Are we able to plead? I think what we're trying to do is make a friendly amendment that works with the proposed legislation. It enjoys the support of the PPTA and other key stakeholders. At the end of the day, what we want is to ensure that Canadian Blood Services, health care providers and all Ontarians have access to a safe supply of plasma.

**Mr. John Fraser:** Yes, and—

**The Chair (Miss Monique Taylor):** Mr. Fraser?

**Mr. John Fraser:** Sorry. Thank you. I get ahead of myself here sometimes.

**The Acting Chair (Miss Monique Taylor):** That's okay.

**Mr. John Fraser:** I can appreciate that. I think what I'm saying is that the exemptions that exist for CBS are broad enough. It's already captured. We don't need to amend.

**The Acting Chair (Miss Monique Taylor):** Any other further comments? Shall we vote?

Shall schedule 1, subsection—

*Interjection.*

**The Acting Chair (Miss Monique Taylor):** Oh, I'm sorry. Shall the motion carry? All in favour? All those opposed? Motion lost.

Shall schedule 1, section 4, carry?

**Interjection:** No, we're on 4.

**The Acting Chair (Miss Monique Taylor):** I'm sorry. All right. I get it.

Shall schedule 1, section 4, carry as amended—it's not amended. Okay.

Shall schedule 1, section 3 carry? All those in favour? All those opposed? Carried.

Schedule 1, section 4: no amendments. Shall it carry? Carried.

We can group schedule 1, section 5, to schedule 1, section 15. Are you in agreement to group them? No amendments. Carried.

Shall schedule 1, section 5, to schedule 1, section 15, carry? Carried.

In schedule 1, section 16 there's an NDP amendment. Ms. Forster?

**Ms. Cindy Forster:** I move that section 16 of schedule 1 to the bill be struck out and the following substituted:

“Commencement

“(16) The act set out in this schedule comes into force on the day the Safeguarding Health Care Integrity Act, 2014, receives royal assent.”

**The Acting Chair (Miss Monique Taylor):** Any discussion? Mr. Walker?

**Mr. Bill Walker:** I have one question. My documentation doesn't have what the current is. Can you just tell me what is changing?

**Ms. Cindy Forster:** Actually, under the proposed bill, it says that “the act set out in this schedule comes into force on a day to be named by proclamation of the Lieutenant Governor,” and “Sections 13 and 14 come into force on the day the Safeguarding Health Care Integrity Act, 2014 receives royal assent.”

**The Acting Chair (Miss Monique Taylor):** Any further discussion?

**Ms. Cindy Forster:** Well, the reason for this amendment, actually, is to make sure that this moves forward very quickly. You know we've been talking about it for a number of years, and I think it's important to ensure that it happens immediately upon receiving royal assent.

**The Acting Chair (Miss Monique Taylor):** Further debate? Ms. McGarry.

0910

**Mrs. Kathryn McGarry:** Thank you very much. The government is comfortable with this schedule 1 coming into force as soon as possible.

**The Acting Chair (Miss Monique Taylor):** Anything further? Shall the motion carry? Carried.

Shall schedule 1, section 16, as amended, carry? Carried.

Schedule 1, section 17: I'm not seeing any amendments. Shall it carry? Carried.

Shall schedule 1, as amended, carry? Carried.

Schedule 2: Sections 1, 2 and 3 have no amendments. Shall we group them together? Is that fine with you?

**Mr. John Fraser:** Sections 1, 2 and 3?

**The Acting Chair (Miss Monique Taylor):** Schedule 2, sections 1, 2 and 3 have no amendments. Group them together?

**Mr. John Fraser:** Yes. That doesn't include section 3.1, right?

**The Acting Chair (Miss Monique Taylor):** No, no. It doesn't include that.

**Mr. John Fraser:** Perfect. I just wanted to be sure.

**The Acting Chair (Miss Monique Taylor):** Okay. Shall schedule 2, sections 1, 2 and 3 carry? Carried.

Schedule 2, section 3.1, an NDP motion: Ms. Forster?

**Ms. Cindy Forster:** “I move that schedule 2 to the bill be amended by adding the following section:

“3.1 The act is amended by adding the following section:

““Group purchasing organizations and shared services organizations

“122(1) This section applies in respect of,

“(a) organizations whose shareholders or members include one or more hospitals and which enter into agreements with one or more health care organizations for purposes relating to procurement of drugs; and

“(b) other prescribed organizations.

“Application of Broader Public Sector Accountability Act, 2010

“(2) An organization to which this section applies is deemed to be an employer for the purposes of the application of part II.1 (Compensation Arrangements) of the Broader Public Sector Accountability Act, 2010.

“Application of Public Sector Salary Disclosure Act, 1996

“(3) An organization to which this section applies is deemed to be an employer for the purposes of the definition of ‘employer’ in subsection 2(1) of the Public Sector Salary Disclosure Act, 1996.

“Auditor General

“(4) The Auditor General may, at any time, audit any aspect of the operations of an organization to which this section applies.

“Regulations

“(5) The Lieutenant Governor in Council may make regulations prescribing organizations for the purposes of clause (1)(b).”

**The Acting Chair (Miss Monique Taylor):** Thank you, Ms. Forster. This motion is out of order because it is outside of the scope of the bill.

**Ms. Cindy Forster:** Am I able to actually speak to it?

**The Acting Chair (Miss Monique Taylor):** No, I'm sorry. It's out of order.

**Ms. Cindy Forster:** That's unfortunate.

**The Acting Chair (Miss Monique Taylor):** Thank you, Ms. Forster.

We have schedule 2, sections 4, 5, 6 and 7. I see no amendments. Can we group them? May they carry? Good; carried.

Schedule 2, section 8: I see a government amendment. Anybody to speak to that? So schedule 2, section 8, government clause 33(c)—

**Mrs. Amrit Mangat:** Which section?

**The Acting Chair (Miss Monique Taylor):** Number 4 in your package.

**Mrs. Amrit Mangat:** Motion number 4?

**Mr. John Fraser:** Number 4? Okay, got it. We've got it here.

**The Acting Chair (Miss Monique Taylor):** Mr. Fraser?

**Mr. John Fraser:** "I move that section 8 of schedule 2 to the bill be struck out and the following substituted:

"8. Section 33 of the Public Hospitals Act is amended by striking out 'or' at the end of clause (b), by repealing clause (c) and by substituting the following:

"(c) a physician resigns from a medical staff of a hospital or restricts his or her practice within a hospital and the administrator of the hospital has reasonable grounds to believe that the resignation or restriction, as the case may be, is related to the competence, negligence or conduct of the physician; or

"(d) a physician resigns from a medical staff of a hospital or restricts his or her practice within a hospital during the course of, or as a result of, an investigation into his or her competence, negligence or conduct,"

**The Acting Chair (Miss Monique Taylor):** Any discussion? Ms. Martow.

**Mrs. Gila Martow:** I just think that it's discouraging physicians from taking a leave while there's an investigation going on, which is what I think we would want.

**Mr. John Fraser:** The proposed motion—

**The Acting Chair (Miss Monique Taylor):** Mr. Fraser.

**Mr. John Fraser:** Thank you. Sorry. We'll get this right.

**The Acting Chair (Miss Monique Taylor):** It's all good.

**Mr. John Fraser:** It's just the cadence and the—I'll slow down a little bit.

I think the intent of this motion is obvious. It's to strengthen the hospital's duty and powers to report. That's why we put the motion forward. I appreciate your point of view, but I think it's important we do this.

**The Acting Chair (Miss Monique Taylor):** Any further discussion?

**Mrs. Gila Martow:** I'm just worried about unintended consequences.

**The Acting Chair (Miss Monique Taylor):** Ms. Mangat.

**Mrs. Amrit Mangat:** I think the government's motion 4 and opposition motions 5 and 6 would achieve the

same policy objectives, but government motion 4 is more clear and precise.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Shall we vote?

*Interjection.*

**The Acting Chair (Miss Monique Taylor):** Sorry?

**Mr. Bill Walker:** Can I just get some clarity on that? I just want to make sure I'm not missing something, because we have a motion—

**The Acting Chair (Miss Monique Taylor):** Yes. Thank you, Mr. Walker. Please go ahead.

**Mr. Bill Walker:** Yes. This is all new to me, so I wanted to make sure we're not missing something, because we do have a motion that we'd like to introduce on schedule 2 to section 8, clause 33.

**The Acting Chair (Miss Monique Taylor):** I believe all three parties actually have something in the same spot.

**Mr. Bill Walker:** Yes, but you're not grouping anything there?

**Mr. John Fraser:** No.

**The Acting Chair (Miss Monique Taylor):** No.

**Mr. Bill Walker:** Okay. I just wanted clarity.

**The Acting Chair (Miss Monique Taylor):** This would just be on the government's clause 33 motion.

**Mr. Bill Walker:** Thank you.

**The Acting Chair (Miss Monique Taylor):** Shall we vote on this clause? All in favour? All opposed? Carried.

We'll move on to the PC motion for the same section. Number 5: Mr. Walker.

**Mr. Bill Walker:** I move that clause 33(c) of the Public Hospitals Act, as set out in section 8 of schedule 2 to the bill, be struck out and the following substituted:

"(c) a physician resigns from a medical staff of a hospital or restricts his or her practice within a hospital during the course of or as a result of a formal or informal investigation into his or her competence, negligence or conduct, or where a physician resigns from a medical staff of a hospital or restricts his or her practice within a hospital and the administrator of the hospital has reasonable grounds to believe that the resignation or restriction, as the case may be, is related to the competence, negligence or conduct of the physician,"

**The Acting Chair (Miss Monique Taylor):** Any discussion? Ms. Mangat.

**Mrs. Amrit Mangat:** Government motion 4 achieves the same policy objective as this PC motion, but the government motion is more clear and precise.

**The Acting Chair (Miss Monique Taylor):** Any further discussion?

**Mr. Bill Walker:** We just want to make sure that it's clear that at this point there's no requirement for the hospital to report this to the CPSO, even if there are serious concerns. We want that mandatory reporting duty in cases where the CPSO will not be informed where these concerns or changes to privileges and patients may continue to be at risk as a physician could continue to practise at another facility.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Ms. Mangat.

**Mrs. Amrit Mangat:** The language of the government's motion 4 is consistent with the issues put forward by stakeholders while also ensuring that the requirements of the mandatory reporting obligations are clear to public hospitals.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Okay. Shall we vote on PC clause 33(c), number 5? All in favour? All opposed? The motion is lost.

We'll move on to page 6, which would be the NDP motion. Ms. Forster?

**Ms. Cindy Forster:** I'll withdraw that amendment.

**The Acting Chair (Miss Monique Taylor):** Withdrawn.

Okay. Shall schedule 2, section 8, as amended, carry? All those in favour? All those opposed? Carried.

**0920**

Schedule 2, section 9: I see no amendments. Shall it carry? Carried.

Schedule 2, section 10: There is a PC motion on page 7. Mr. Walker.

**Mr. Bill Walker:** I move that clauses 36(1)(d.1) and (d.2) of the Regulated Health Professions Act, 1991, as set out in section 10 of schedule 2 to the bill, be struck out and the following substituted:

"(d.1) to a public hospital that employs or provides privileges to a member of a college or to a person who operates a facility where a member practises, where the college is investigating a complaint about that member or where the information was obtained by an investigator appointed pursuant to subsection 75(1) or (2) of the code, subject to the limitations, if any, provided for in regulations made under section 43;

"(d.2) to a person other than a public hospital or person mentioned in clause (d.1) who belongs to a class provided for in regulations made under section 43, where a college is investigating a complaint about a member of the college or where the information was obtained by an investigator appointed pursuant to subsection 75(1) or (2) of the code, subject to the limitations, if any, provided for in the regulations;"

**The Acting Chair (Miss Monique Taylor):** Any discussion?

**Mr. Bill Walker:** I can just provide some rationale. The idea is designed to respond to the four issues that the college and the Federation of Health Regulatory Colleges of Ontario brought to the government's attention. I'm just going to outline those, if I could, to put them on the record:

- to enable health regulatory colleges to more readily share information with public health authorities when health protection concerns have been identified;

- to permit colleges to share information with hospitals related to investigations;

- to enhance mandatory reports to health colleges to better protect patients by closing some existing gaps; and

- to permit flexibility to focus college investigation of complaints, limited with discretion.

**The Acting Chair (Miss Monique Taylor):** Ms. McGarry.

**Mrs. Kathryn McGarry:** The inclusion of the language "facility where a member practises" would expand the scope of the provision beyond the public hospitals into a variety of different settings, each with its own different circumstances.

The existing language in Bill 21 would allow government to expand the list of other persons with whom the colleges would be able to share the information via regulation. The current wording of Bill 21 would also permit the purpose for which the information could be shared to be set out in regulation, as well as to set out potential limits upon the sharing of such information if and where that's appropriate. It would also provide the government with flexibility to tailor the approach of such sharing of information in different contexts and to consult with the affected stakeholders in the process of doing so. In the development of all these regulations, the ministry would look to coordinate and consult with relevant stakeholders as part of the regulatory development process.

**The Acting Chair (Miss Monique Taylor):** Any further discussion?

**Mr. Bill Walker:** Yes, Chair, please.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** The rationale, again—there are two points I would like to just put on the record. The CPSO is concerned that disclosure of information to public hospitals and other entities could be done only for a prescribed purpose provided for in regulation. Therefore, if the regulation is not made or is not updated on a regular basis, the CPSO will not be able to address emerging concerns or make a disclosure under these provisions. In addition, adequate protection is already included in the provision because it is explicitly subject to limitations prescribed in the regulations.

Currently under Bill 21, disclosure will only be permitted to a public hospital that employs or provides privileges to a member. For members who are practising in other health care settings, such as a long-term-care home, or who are practising in a hospital but are not employed or provided privileges there, disclosure will not be permitted. Therefore, the college recommends that 36(d.1) should be amended to include disclosure to facility operators.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Okay, shall we vote on—

**Mrs. Kathryn McGarry:** No—sorry.

**The Acting Chair (Miss Monique Taylor):** Oh. Sorry, Ms. McGarry.

**Mrs. Kathryn McGarry:** That's okay. I don't have a very long arm.

I just wanted to reiterate that the inclusion of the language "facility where a member practises" does expand the scope of the provision beyond the public hospitals into a variety of settings, and also that in the development of the regulations, the ministry would look

to coordinate and consult with relevant stakeholders as part of the regulatory development process.

**The Acting Chair (Miss Monique Taylor):** Further discussion? Okay. Shall we vote on the motion? All in favour? All opposed? The motion is lost.

There's an NDP motion. Ms. Forster?

**Ms. Cindy Forster:** I move that clauses 36(1)(d.1) and (d.2) of the Regulated Health Professions Act, 1991, as set out in section 10 of schedule 2 to the bill, be struck out.

**The Acting Chair (Miss Monique Taylor):** Any discussion? Yes, Ms. Forster?

**Ms. Cindy Forster:** We know that health care workers and colleges all took issue with the government on the overuse of the regulatory provisions in this section when they made presentations. People have no idea what the term "prescribed purposes" will actually mean. It's one of those kinds of grey definitions that we know will create problems in the future as it appears in the original bill. That phrase has caused a lot of concern for many people because it's an exception to allow the disclosure of information, but it's not specific and it's left entirely to regulations.

Secondly, the committee actually heard from organizations that were quite concerned about the impact that this provision would have and would prefer to leave the existing provisions in place, at least until there's greater consultation with this sector.

So we're moving this amendment to actually allow for further consultations to occur and for those concerns of front-line staff to be better addressed.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Ms. Mangat?

**Mrs. Amrit Mangat:** The government has heard from the health regulatory colleges that the enhanced information sharing provisions are necessary in order to more fully and completely support their public protection mandate.

Further, the government supports facilitating the ability of the colleges and hospitals, both of which are responsible for the promotion of patient safety, to share critical information that may affect the safety and quality of patient care so that potential issues within the hospital could be addressed more efficiently, and so that the systemic information can be shared with hospitals regarding potential improvements concerning their own internal operations and processes.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Shall the motion carry? All in favour? All opposed? The motion is lost.

Shall schedule 2, section 10 carry? All in favour? All opposed? Carried.

Schedule 2, section 11: There is PC motion 9. Mr. Walker.

**Mr. Bill Walker:** I move that clause 43(1)(g.1) of the Regulated Health Professions Act, 1991, as set out in section 11 of schedule 2 to the bill, be amended by striking out "prescribing purposes and" at the beginning.

**The Acting Chair (Miss Monique Taylor):** Any discussion? Ms. Mangat.

**Mrs. Amrit Mangat:** The government is committed to the approach taken with regard to the increased ability of health regulatory colleges to share important information with the public hospitals and with other entities in the health sector.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Mr. Walker?

**Mr. Bill Walker:** I'd like to put on the record that this amendment was brought forward by the College of Physicians and Surgeons of Ontario—CPSO—and the Federation of Health Regulatory Colleges of Ontario, FHRCO.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Shall the motion carry? All in favour? All opposed? The motion is lost.

NDP motion, page 10: Ms. Forster.

**Ms. Cindy Forster:** I'll withdraw this motion.

**The Acting Chair (Miss Monique Taylor):** Okay, so there are no amendments. Shall schedule 2, section 11 carry? All in favour? All opposed? Carried.

Schedule 2, section 12: Page 11 is an NDP motion. Ms. Forster.

**Ms. Cindy Forster:** I move that subsection 25(5) of schedule 2 to the Regulated Health Professions Act, 1991, as set out in section 12 of schedule 2 to the bill, be struck out and the following substituted:

"Complainant to be informed

"(5) The registrar shall give a complainant notice of receipt of his or her complaint and a general explanation of the processes of the college, including the jurisdiction and role of the Inquiries, Complaints and Reports Committee and the power of the registrar to make a determination that it is not reasonable to believe that the allegations contained in the complaint would constitute professional misconduct, incompetence or incapacity on the part of the member, or that the complaint does not warrant further investigation or it is not in the public interest to investigate the complaint further, together with a copy of the provisions of sections 28 and 29."

0930

**The Acting Chair (Miss Monique Taylor):** Any discussion?

**Ms. Cindy Forster:** Yes. This amendment was recommended to the committee by the CPSO. The CPSO asked the committee to incorporate a public interest threshold for complaints they receive. By adopting this amendment, the college will have the ability to not investigate complaints that do not advance the public interest. For instance, if two physicians are complaining about their internal business practices and it has nothing to do with the public, the CPSO would be able to say that they would not investigate that kind of frivolous complaint.

**The Acting Chair (Miss Monique Taylor):** Ms. McGarry.

**Mrs. Kathryn McGarry:** Rather than making revisions in a piecemeal way, the government would like to hold off on making such changes to these portions of the legislation in Bill 21 until any and all possible

changes to this aspect of the legislation have been brought forward and evaluated. The government wishes to ensure that any potential changes made to the legislation are wholly consistent with the government's ongoing commitment to increased transparency and accountability. I think since this legislation was first drafted, the climate has changed, and we want to make sure that we take a broader and a better look at the transparency.

Since the introduction, as I said, the government has taken a number of initiatives that could potentially result in consideration of further legislative changes to the Regulated Health Professions Act, 1991, including with respect to the manner in which complaints from members of the public are dealt with in the future. The Ministry of Health and Long-Term Care is currently working with colleges to examine ways of ensuring that more information is released to the public so that patients can make an informed decision about the professionals from whom they receive health care services.

**The Chair (Miss Monique Taylor):** Further discussion? Ms. Forster.

**Ms. Cindy Forster:** I would only say to that that the CPSO has been advocating for this change for more than four years, and the government introduced this legislation in July, and they've had plenty of time to get their act together.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Ms. McGarry.

**Mrs. Kathryn McGarry:** I would agree that, yes, this legislation has been in front for a while. But since some things have come to light in the media in the last couple of months, they want to take a closer look, to make sure that we have this right going forward. It has really been very recent changes of some of the situations that have been out there in the public in the last couple of months, so that's why—instead of a piecemeal way—they want to really tighten up on this section.

**The Acting Chair (Miss Monique Taylor):** Further discussion? Shall the motion carry?

All in favour? All opposed? The motion is lost.

The next motion is an NDP motion on page 12. Ms. Forster.

**Ms. Cindy Forster:** I move that subsection 25(7) of schedule 2 to the Regulated Health Professions Act, 1991, as set out in section 12 of schedule 2 to the bill, be struck out and the following substituted:

“No selection of a panel

“(7) Despite subsection (1), the chair of the Inquiries, Complaints and Reports Committee shall not select a panel of the committee to investigate a complaint where the registrar has determined that,

“(a) it is not reasonable to believe that the allegations contained in the complaint would constitute professional misconduct, incompetence or incapacity on the part of the member;

“(b) the complaint does not warrant further investigation; or

“(c) it is not in the public interest to investigate the complaint further.”

**The Acting Chair (Miss Monique Taylor):** Any discussion? Ms. Forster.

**Ms. Cindy Forster:** This amendment was also recommended to the committee by CPSO and is consequential to establish a public interest threshold for the investigation of complaints.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Shall the motion carry?

All in favour? All opposed? The motion is lost.

The next motion is a PC motion on page 13: Mr. Walker.

**Mr. Bill Walker:** I move that subsections 25(5) and (7) of schedule 2 to the Regulated Health Professions Act, 1991, as set out in section 12 of schedule 2 to the bill, be struck out and the following substituted:

“Complainant to be informed

“(5) The registrar shall give a complainant notice of receipt of his or her complaint and a general explanation of the processes of the college, including the jurisdiction and role of the Inquiries, Complaints and Reports Committee and the power of the registrar to make a determination that it is not reasonable to believe that the allegations contained in the complaint would constitute professional misconduct, incompetence or incapacity on the part of the member, or that the complaint does not warrant further investigation or it is not in the public interest to investigate the complaint further, together with a copy of the provisions of sections 28 to 29.

“No selection of a panel

“(7) Despite subsection (1), the chair of the Inquiries, Complaints and Reports Committee shall not select a panel of the committee to investigate a complaint where the registrar has determined that,

“(a) it is not reasonable to believe that the allegations contained in the complaint would constitute professional misconduct, incompetence, or incapacity on the part of the member; or

“(b) the complaint does not warrant further investigation or it is not in the public interest to investigate the complaint further.”

**The Acting Chair (Miss Monique Taylor):** Thank you, Mr. Walker. Any discussion?

**Mr. Bill Walker:** Yes, please.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** Just a bit of background, Chair: This amendment was brought forward by the College of Physicians and Surgeons of Ontario and the Federation of Health Regulatory Colleges of Ontario.

The bill permits the registrar to decline to forward a complaint to the Inquiries, Complaints and Reports Committee, ICRC, where the registrar determines that it is not reasonable to believe that the complaint, if established, could constitute professional misconduct, incompetence or incapacity on the part of the member. The registrar's determination must be made within 30 days and the complainant would have 30 days within which to appeal to the ICRC.

Currently the college is obligated to undertake an investigation of all complaints unless they're deemed to



be frivolous or vexatious, regardless of their seriousness, and this can cause delays in dealing with more serious matters. For example, the college routinely receives complaints that are related to issues that do not affect patient safety and are unrelated to our duty to protect the public interest. These might include complaints regarding business disputes between doctors, statements made by a physician in a magazine, or the patient waiting an hour in a waiting room to see a physician. The college is seeking the ability to not investigate these complaints that consume valuable resources but do not advance the public interest.

The new discretion contained in Bill 21 is narrow and insufficient. That said, Bill 21 contains an appropriate appeal process for this discretion category of complaints.

The rationale: As noted above, section 12 of schedule 2 in Bill 21 provides a new but extremely narrow discretion. It would not have the intended effect of giving colleges the ability to focus resources where they can have the greatest impact, as it would require the more complete investigations in the case examples provided above.

Under Bill 21, subsection 25(5), the registrar must make a determination that it is not reasonable to believe that the allegation contained in the complaint, if established, could constitute professional misconduct, incompetence or incapacity on the part of the member. In order to exercise his or her discretion to not appoint a panel, this threshold would provide little change.

In order for the bill to meet its intended goals, the college has drafted an amendment that works with the existing provision of Bill 21 and incorporates a public interest threshold, as is currently proposed in Bill 10 and in former Bill 103. Bill 10 proposed a modernized and strengthened oversight of the Ontario child care sector and early years system. Former Bill 103 proposed to strengthen and modernize the disciplinary process of the Ontario College of Teachers.

The CPSO is seeking the ability to not investigate these complaints that consume valuable resources but do not advance the public interest. The new discretion contained in Bill 21 is narrow and insufficient. That said, Bill 21 contains an appropriate appeal process for this discretion category of complaints.

We just want to make sure that they're able to work on the most important things. I think everyone in this room would agree that if someone's complaining about sitting in a waiting room for an hour or about an article in a newspaper or a magazine, it's not really where valuable resources should be put. They should be with things that are front-line patient care.

**Mrs. Gila Martow:** If I could just comment?

**The Acting Chair (Miss Monique Taylor):** Ms. Martow.

**Mrs. Gila Martow:** We want to focus the resources on patient safety. I can share with you very, very quickly that a surgeon was accused of having his assistant from his clinic do an operation when that assistant never even set foot in a hospital. It was obvious that this was a very

strange circumstance. It went through weeks and weeks of hearings, and then in the end, somebody bothered to ask the patient, "Well, you know, everybody says that this person was never seen in the hospital, let alone the operating room. Why are you suggesting it?" And he said, "Because my God told me."

It becomes these sort of strange circumstances where people are having maybe mental illness breakdowns and things like that, and the College of Physicians and Surgeons is spending weeks of their time when they were warned that there were other circumstances involved.

I think their hands get tied and they get forced to investigate some strange circumstances that really aren't about patient safety.

**0940**

**The Acting Chair (Miss Monique Taylor):** Thanks, Mrs. Martow. Further discussion? Mr. Fraser.

**Mr. John Fraser:** I waited.

Thank you. I appreciate the motion. We will not be supporting the motion. I think, in the public interest in terms of transparency, that we need to take a harder look at these things—about extending discretion. I think it's a fair and reasonable thing to do. I appreciate the amendment, though.

**The Acting Chair (Miss Monique Taylor):** Any further discussion? Okay.

Shall the motion carry? All in favour? All opposed? The motion is lost.

The next one is also a PC motion, on page 14 Mr. Walker.

**Mr. Bill Walker:** I move that subsection 25(9) of schedule 2 to the Regulated Health Professions Act, 1991, as set out in section 12 of schedule 2 to the bill, be amended by striking out "30 days" and substituting "14 days".

**The Acting Chair (Miss Monique Taylor):** Any discussion?

**Mr. Bill Walker:** Yes, please, Chair.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** This amendment was brought forward by the College of Physicians and Surgeons of Ontario and the Federation of Health Regulatory Colleges of Ontario. The college is concerned about the time permitted for this new step. Complaints are supposed to be dealt with within 150 days, with a 60-day extension. A 30-day appeal process will make it increasingly difficult to meet this timeline.

The colleges suggest that complainants be given 14 days to decide whether to request a review. A 30-day appeal process will make it increasingly difficult to meet this timeline. Again, we suggest that 14 days be given to decide whether to request a review.

**The Acting Chair (Miss Monique Taylor):** Thank you, Mr. Walker. Any discussion? Ms. Forster.

**Ms. Cindy Forster:** We know that this amendment was suggested by the CPSO, and we certainly understand and respect the argument that they're making. However, we're going to have to oppose it. We don't think that the

30 days, as stipulated, is problematic. I think the most important piece is to ensure that complainants have a fair process, and to see that maintained.

**The Acting Chair (Miss Monique Taylor):** Further discussion?

Okay, we'll vote on the motion. All in favour? All opposed? The motion is lost.

The next one is a notice from the government. Mr. Fraser?

**Mr. John Fraser:** Yes. Madam Chair, I'd like to group together the motions in schedule 2, section 12; schedule 2, section 13; schedule 2, section 14; schedule 2, section 15; and schedule 2, section 16.

**The Acting Chair (Miss Monique Taylor):** That's great, but before we do that there was a notice put forward by the government, on page 15. Is there discussion on that?

*Interjections.*

**The Acting Chair (Miss Monique Taylor):** No discussion on that, then? Is that what you're saying? Sorry; Ms. Mangat?

**Mrs. Amrit Mangat:** No.

**The Acting Chair (Miss Monique Taylor):** Okay. Ms. Forster?

**Ms. Cindy Forster:** No discussion on what?

**The Acting Chair (Miss Monique Taylor):** On the notice.

**Ms. Cindy Forster:** On grouping the five together?

**The Acting Chair (Miss Monique Taylor):** Right. I thought that the notice should be spoken into the record, but now I'm understanding that it's just—

**Mrs. Amrit Mangat:** It's grouping them.

**The Acting Chair (Miss Monique Taylor):** Grouping everything together, yes.

**Ms. Cindy Forster:** So the original amendments are going to be read into the record?

**The Acting Chair (Miss Monique Taylor):** Everything was lost, so there are no amendments.

**Mr. John Fraser:** There are no amendments, just the section as—

**The Acting Chair (Miss Monique Taylor):** It would be the section as a whole, so I have a notice from the government—

**Mr. John Fraser:** We can go through each one if you like, and we can read through it, if you'd prefer to do it—

**Mr. Bill Walker:** This isn't time allocation.

**Mr. John Fraser:** No—

**The Acting Chair (Miss Monique Taylor):** No, but we will fall into that.

**Mr. John Fraser:** —but what I'm suggesting is that there's—

**Ms. Cindy Forster:** Well, I just want to actually speak to them, but—

**Mr. John Fraser:** Sure.

**The Acting Chair (Miss Monique Taylor):** Yes, so you have the opportunity to discuss them now.

*Interjection.*

**The Acting Chair (Miss Monique Taylor):** Yes.

**Ms. Cindy Forster:** Well, I think it's very weird—odd. Are you going to be reading these in?

**Mr. John Fraser:** We can, yes.

**The Acting Chair (Miss Monique Taylor):** We don't have to, though, and she does have the opportunity to speak to it.

**Mr. John Fraser:** If you would prefer to go through each one, we—

**Ms. Cindy Forster:** No, I don't care.

**The Acting Chair (Miss Monique Taylor):** Hold on. Wait. Excuse me—

**Ms. Cindy Forster:** I'm happy that you're grouping them together, but I just want to make sure that I have the opportunity just to get on the record before these are dispensed with.

**The Acting Chair (Miss Monique Taylor):** That's right. That's correct, and she has the ability to do that at this point.

**Mr. John Fraser:** Yes, on the record, for the grouping.

**The Acting Chair (Miss Monique Taylor):** Good.

**Mr. John Fraser:** Is that correct? Okay.

**The Acting Chair (Miss Monique Taylor):** Yes.

**Mr. John Fraser:** Of course.

**The Acting Chair (Miss Monique Taylor):** Ms. Forster.

**Ms. Cindy Forster:** I think it's very odd—weird—to actually see a government that's going to be voting to strike out these actual amendments, these sections of the bill. I don't understand the process here.

**The Acting Chair (Miss Monique Taylor):** Mr. Fraser?

**Mr. John Fraser:** In my earlier remarks, I referenced this in talking about some of the amendments that were put forward. I think that, in the interests of public transparency and what the government feels right now, or we will when we go through this, we would like to remove this section of the bill because we feel that we need to take a harder look at that discretion. We need to do some more work. There are some initiatives that are already under way to look at that. We believe now that it's in the public interest to take another look at it. That's why we're grouping them together. We can—

**Mrs. Gila Martow:** If I could comment.

**The Acting Chair (Miss Monique Taylor):** Ms. Martow.

**Mrs. Gila Martow:** I just find it a little peculiar that we're having time allocation and rushing through a bill, and on the other hand, the government is saying that they need more time to take a look at certain sections. On the one hand, they're rushing it through; on the other hand, they need more time to look at certain sections. I just wanted to mention that.

**The Acting Chair (Miss Monique Taylor):** Ms. Forster.

**Ms. Cindy Forster:** I have to agree with that. Had we been able to have all of the time under the standing orders without time allocation, perhaps the government could have actually worked through some of the other

amendments, and we wouldn't be sitting here today having the government striking out sections of their own bill. Parts of this bill were actually before the last Parliament. Once again, it was introduced in July of this year, so you would think that the government and the ministry would have had ample opportunity to actually get this right and have it before us here today. What we think we'll see is another piece of legislation when we come back in February. Or are all of these things going to be dealt with, without debate, under regulation?

**The Acting Chair (Miss Monique Taylor):** Ms. McGarry.

**Mrs. Kathryn McGarry:** Again, since the legislation has been written, there have been some very recent changes, just in the last couple of months, in terms of what's happening out there in this field, and several situations that have been in the public arena. The government really believes that this section of the legislation should be fine-tuned before it becomes law. That's why we're asking for the motion, and not put it in legislation today.

Even since July, things have changed out there. That's one of the reasons why we want to make sure that we fine-tune it, get it right, do a little bit more consultation and tighten that up. A couple of situations have happened with sexual abuse of patients just in the last couple of months, so they just want to make sure that this section is done right.

**The Acting Chair (Miss Monique Taylor):** Ms. Mangat.

**Mrs. Amrit Mangat:** Since we first introduced this legislation, the climate has changed, and our government just wants to strengthen the legislation. We would like to have a look at it. That's why we are grouping them in.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** A point of clarification, then: Will that come back to the committee for a review or, to my colleague from the third party's comment, will this just be done as part of regulation and we won't have any insight or ability to input?

**The Acting Chair (Miss Monique Taylor):** Ms. Forster, you were next.

**Ms. Cindy Forster:** Oh, I'm next. Okay. I understand from Ms. McGarry that some of this is because of allegations of sexual abuse that have come to light. But is part of this, as well, because the government is embarrassed by the lack of oversight of private clinics and some of the new stories that are actually coming out of private clinics about infections and the lack of oversight that should have been there?

**The Acting Chair (Miss Monique Taylor):** Mr. Fraser.

**Mr. John Fraser:** No. There are a number of reviews that are taking place right now, and it's prudent for us to wait until those things come back, to make sure that we're doing it in a way that does what we intend to do: protect the public and, at the same time, provide information and transparency.

**The Acting Chair (Miss Monique Taylor):** Ms. Martow.

**Mrs. Gila Martow:** My understanding is, the reason that we allow for lots of deputations on a very serious bill like this—this isn't to make June Bike Month or something fairly obvious and with all-party support. The reason we allow for so many deputations is, as we're listening to the people coming with their concerns—these are very knowledgeable, experienced people who come and speak to the committee—the government is able to go back, with their legal advisers and experts, and make changes in the bill.

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By rushing through and having very few deputations, they don't leave themselves enough time to make those changes. Now we're seeing that they want to just take out sections of their own bill, because probably people who came to give deputations just this week raised concerns and that's why this is being done.

I just wanted to be on the record that maybe we didn't proceed the way we should have proceeded. Maybe it wasn't in the public's interest to have rushed things through. I have concerns that the public isn't going to be able to address their concerns on whatever changes are being made. They're given the original bill and they make their comments, but when changes are made, maybe we need their input again.

**The Acting Chair (Miss Monique Taylor):** Thank you, Ms. Martow. Ms. Forster.

**Ms. Cindy Forster:** Can the government members share with us what reviews are being done and where they're at? Which sector, which agencies, are we actually currently involved in reviews with?

**Mr. John Fraser:** I can get you—

**The Acting Chair (Miss Monique Taylor):** I actually had Mr. Walker. Are you okay with passing it off to them to respond?

**Ms. Cindy Forster:** Sure.

**Mr. Bill Walker:** As long as I have my—

**The Acting Chair (Miss Monique Taylor):** Yes, and then I'll come back to you.

Okay, Mr. Fraser or Ms. McGarry.

**Mr. John Fraser:** Ms. McGarry is before me.

**Mrs. Kathryn McGarry:** Thank you. There are a number of initiatives out there that the Ministry of Health and Long-Term Care has taken on. I believe that these reports will be coming back in the winter, after the Christmas break.

I think this is one of the reasons why we just tried to sort of halt that until we get all the information back there. Some of these initiatives were started since the new Minister of Health and Long-Term Care took over. So they've just asked to try to get all those details in so that we can redraft this section to accommodate some of those things.

This is something that the government is taking very, very seriously. We have listened to the deputations that have come in. We have listened to concerns on all sides. As I said, some of the climate has changed out there in the public eye, and they want to just make sure that all

these considerations are out there before we can draft them into the new legislation.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** Thank you, Chair. Again, I just want some clarification. My original question, which I don't believe was answered, is: Will the changes come back to this committee so we can see and ensure that members of the public have the ability, through us and the third party, to bring their thought processes to the committee to ensure that it's done?

Further to that, are you asking us, if we go through this process for the remainder of the day, to pass this bill with those sections not included? Because it seems like it's a pretty significant piece. The complaint resolution piece is pretty significant. Are you going to be asking us to pass this bill with that whole section left out and wait until you decide to put it back in there?

**The Acting Chair (Miss Monique Taylor):** Okay. I did have Ms. Forster to speak next. Do you want the government to respond first?

**Ms. Cindy Forster:** That's fine.

**The Acting Chair (Miss Monique Taylor):** Ms. McGarry.

**Mrs. Kathryn McGarry:** Thank you very much. Because we don't have the recommendations—we don't have the reports back yet—we're not sure which vehicle this will be going forward in. Until that's back, they won't know how it's going to come forward.

I think the best I can offer right now is that there will be some communication once we get these back, and then proceed after we have had those recommendations as to how they are going to come forward.

**The Acting Chair (Miss Monique Taylor):** Ms. Forster.

**Ms. Cindy Forster:** Do the government members and the government not think that in an open, transparent and accountable government, members of the public should know which agencies you're currently reviewing, investigating, so that people can actually make informed choices, perhaps, about where they get their health care needs met?

**The Acting Chair (Miss Monique Taylor):** Ms. Martow.

**Mrs. Gila Martow:** My question is, why wouldn't we then just pause everything? Just pause. Why should we be voting against a section? Why wouldn't we just pause the proceedings? If the government has such serious concerns, you could address your concerns during the break. You could make the changes, you could notify us, you can notify the public and we can have more deputations.

**The Acting Chair (Miss Monique Taylor):** Mr. Fraser.

**Mr. John Fraser:** I think it's the prudent thing to do. We've got a piece of legislation here that has a lot of important measures in it, not just these measures that are related to the colleges.

In whatever format it comes back, with respect to Ms. Forster's comments in regard to public awareness and

transparency—if it comes back as a regulation—there will be consultations during that period, so it will be available to the public. If it comes back as legislation, which my colleague suggested, it would obviously come back before a committee, likely this one.

But if you take a look at the public interest, this is a big bill. It is something we have debated for a while. I appreciate the members' concerns across the way, saying, "Why are you changing this?" I think we've laid out a rationale for doing it. I believe it's the prudent and the right thing to do, so I would ask for the members opposite's support in that, and that's it.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** I'm still struggling a little bit here from the government side. They drafted this legislation. They put it in front of us. You want us to vote on it, but you want to remove pieces that you put in. I still haven't heard an unequivocal yes, that you will come back to this group, this committee, to ensure that we have the ability to consult the stakeholders appropriately, that they've had their say to make sure that happens and that it will happen. I don't know if there's any legal precedent from legal counsel. Is this a normal type of thing, where you would actually pass a piece of legislation and allow pieces to be just jettisoned in at a later date without it coming back to committee?

**Mr. Ralph Armstrong:** It has happened before, sir, yes. This is how, if the committee does not want to proceed with certain provisions, it votes them down. There are certainly many precedents in the assembly.

**The Acting Chair (Mrs. Kathryn McGarry):** Ms. McGarry was next.

**Mrs. Kathryn McGarry:** We certainly hear your concerns. I just wanted to point out that, actually, it was December 1 that we received the required responses from the regulated colleges regarding some of their issues, regarding the transparency and how they were going to proceed, so we're just taking time now to actually look at those responses and trying to draft them and incorporate them into the new legislation. It's just that we've received them December 1. It wasn't that we were trying to omit them or doing anything else.

Secondarily, when you look at all the other parts of the bill, they are very important. I think we all agree on this committee. We've heard the deputations from some of the people. The rest of the bill, as is, should go forward. It's essential that we get that part of the legislation passed. That's why the government has filed this motion to remove this section: so we can address the concerns that have just come in on that and that they're just reviewing as we speak. That's part of what the initiatives coming forward mean. When the new Minister of Health and Long-Term Care came in, he had asked all the regulated colleges to really address concerns around transparency and around accountability, and they've just gotten that work back. That work is ongoing.

That's why it's just this section we're trying to pull out. As I said, I think that we all agree on the importance

of the rest of the bill to be able to get that passed urgently and out there.

**The Acting Chair (Miss Monique Taylor):** Ms. Forster.

**Ms. Cindy Forster:** Well, I would just want to get on the record that I don't believe that New Democrats actually believe—in light of waiting four months for, for example, the insurance industry report that we've been calling upon the government to release to the opposition parties—that we'll ever see reports actually coming out of these reviews and investigations that the government is currently doing. I don't have any confidence that we'll ever see any of that information.

**The Acting Chair (Miss Monique Taylor):** I think Mr. Fraser was next.

**Mr. John Fraser:** I would just like to respond, again—maybe I wasn't clear—to Mr. Walker's question. I know counsel gave an answer to it. What we're suggesting is that the fine-tuning that we're doing would not come back as part of this piece of legislation. It would come back either as another piece of legislation or as regulation. If it's a piece of legislation, it will come to the committee. If it's a piece of regulation, it would go to public consultations, so it would be evident and open to the public.

I just wanted to be clear that it would not automatically return here.

**The Acting Chair (Miss Monique Taylor):** Mr. Walker.

**Mr. Bill Walker:** Thank you for that. It gives me a little bit of comfort that at least it's going to have some public consultation, but I'm still struggling with why we would do this whole bill and you would include it in there, and now—it just seems like: Why are you not going to be prepared to bring it back? It's almost like you want to slide something in that we're not going to see, why we're not going to have the ability—and I don't mean that in a nefarious sense. I just mean: Why would you go through this whole process and not bring that back to make it a complete piece of legislation?

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I'm concerned that there are too many things in today's current government being given to cabinet to make decisions on. They then put in regulation, and we then don't have the ability to represent all of the stakeholders and ensure that they have a voice, or our democratic right for us to voice. You could put a regulation in that we fully disagree with on behalf of the constituents we represent. When do we have that ability to have that discussion?

**The Acting Chair (Miss Monique Taylor):** Ms. Martow, you had your hand up?

**Mrs. Gila Martow:** Yes. I just wanted to ask, if it's not going to be coming back as part of this bill, as Mr. Fraser said, then why wouldn't we just be deleting these sections?

**The Acting Chair (Miss Monique Taylor):** Ms. McGarry.

**Mrs. Kathryn McGarry:** Really, I hear your concerns and I certainly appreciate the fact that you have

these concerns and you're taking these seriously—as are we.

I just want to reiterate that it's not the government that's holding this up. The Minister of Health and Long-Term Care, when he came in, asked all the regulated colleges to address the issues of accountability and transparency. I've got it right here: The deadline to submit was December 1. That was before these committee hearings were scheduled. They've just got those submissions in. The government is taking time to look at what all the regulated colleges are saying about this and seeing if there are any changes that we may need to do to this section only before it goes forward.

So it's not the government doing this. We've asked, as we all agree, for more accountability of our regulated colleges. We've got those submissions in and we're reviewing them right now. We couldn't manage to do it in the time that we were sitting in committee, but the rest of the bill, as I reiterate, is really important to get passed. Once the review is done, they decide on the vehicle that this will come back in, and then we'll be able to address it at that time, depending on when it comes back.

**Mrs. Gila Martow:** On a point of order, Madam Chair: My understanding, and maybe I'm reading it incorrectly, is that it's to require that the committee vote against the section rather than pass a motion to delete it. My question had been: Why wouldn't we just delete it if it's not going to be part of this bill?

**Mr. Ralph Armstrong:** If I may?

**The Acting Chair (Miss Monique Taylor):** Yes, Mr. Armstrong.

**Mr. Ralph Armstrong:** This is a procedural point. What the government is proposing is that it not vote in favour of these sections of the bill. That is the step to take if you do not want a section of a bill to go ahead. We have these motions here, as it were, as a reminder of how the parties intend to vote on matters. Under parliamentary procedure—and I'll defer to the Clerk, but I think I know a bit about this—you do not vote to strike out sections of a bill as a motion because the debate is upon that very section of the bill.

So what the government is proposing here is identical, in effect, to striking out these sections of the bill, but is done in this fashion in order to meet the rules of a clause-by-clause consideration. The result would be, if the government is following its intention here, that the question would be called on these sections of the bill that have been grouped together. The government is proposing to vote against them, so these sections would be taken out of the bill and the bill would go ahead without them. The government is always, of course, free to do whatever with those same areas after the course of things.

I've talked a fair bit here. Have I made myself clear? I hope—

**Mrs. Gila Martow:** You're clear; they're not so clear.

**The Acting Chair (Miss Monique Taylor):** Any further questions of legal, or are we okay for that part? Okay.

Mr. Fraser was next to speak.

**Mr. John Fraser:** I would just like to suggest that I think we've gone through this and we know what we're doing here. We all very clearly stated what our positions are. I think we got good advice from legal counsel. We know what we're doing here, so I'd like to suggest we vote on this.

**The Acting Chair (Miss Monique Taylor):** Okay, shall we move to the vote?

Shall schedule 2, section 12 carry? All in favour? All opposed?

Schedule 2, section 12 is lost.

Schedule 2, sections 13 to 16 can be grouped together. Is everybody okay with grouping it together? We're voting on schedule 2, sections 13, 14, 15 and 16. All in favour? All opposed? Lost.

Schedule 2, section 17. Page 20 is a government motion: Mr. Fraser.

**Mr. John Fraser:** I move that subsection 85.5(2) of schedule 2 to the Regulated Health Professions Act, 1991, as set out in section 17 of the bill, be struck out and the following substituted:

"Same

"(2) Where a member resigns, or voluntarily relinquishes or restricts his or her privileges or practice, and the circumstances set out in paragraph 1 or 2 apply, a person referred to in subsection (3) shall act in accordance with those paragraphs:

"1. Where a person referred to in subsection (3) has reasonable grounds to believe that the resignation, relinquishment or restriction, as the case may be, is related to the member's professional misconduct, incompetence or incapacity, the person shall file with the registrar within 30 days after the resignation, relinquishment or restriction a written report setting out the grounds upon which the person's belief is based.

"2. Where the resignation, relinquishment or restriction, as the case may be, takes place during the course of, or as a result of, an investigation conducted by or on behalf of a person referred to in subsection (3) into allegations related to professional misconduct, incompetence or incapacity on the part of the member, the person referred to in subsection (3) shall file with the registrar within 30 days after the resignation, relinquishment or restriction a written report setting out the nature of the allegations being investigated."

**The Acting Chair (Miss Monique Taylor):** Any discussion? Okay.

Shall the motion carry? All in favour? All opposed? It's carried.

The next motion is on page 21 and is a PC motion. Mr. Walker.

**Mr. Bill Walker:** I move that subsection 85.5(2) of schedule 2 of the Regulated Health Professions Act, 1991, as set out in section 17 of schedule 2 to the bill, be struck out and the following substituted:

"Same

"(2) Where a member resigns, or voluntarily relinquishes or restricts his or her employment privileges or practice,

"(a) during the course of, or as a result of, a formal or informal investigation into his or her competence, negligence or conduct, a person referred to in subsection (3) shall file with the registrar, within 30 days after the resignation, relinquishment or restriction, a written report setting out the facts related to the resignation, relinquishment or restriction; or

"(b) under circumstances where a person referred to in subsection (3) has reasonable grounds to believe that the resignation, relinquishment or restriction, as the case may be, is related to the member's professional misconduct, incompetence or incapacity, the person referred to in subsection (3) shall file with the registrar, within 30 days after the resignation, relinquishment or restriction, a written report setting out the facts related to the resignation, relinquishment or restriction and the grounds upon which the person's belief is based."

**The Acting Chair (Miss Monique Taylor):** Any discussion?

**Mr. Bill Walker:** Yes. For background, this amendment was brought forward by the College of Physicians and Surgeons of Ontario and the Federation of Health Regulatory Colleges of Ontario.

Schedule 2, section 8 of Bill 21 proposes amendments to the Public Health Act and the RHPA to require a hospital or employer to report to health regulatory colleges where a member restricts his or her practice, and in addition resigns, and an administrator has reasonable grounds to believe the restriction is related to the competence or conduct of the doctor. It removes the requirement for the action, resignation or restriction to occur during an investigation.

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Experience has shown that there are several ways that the wording of the RHPA enables would-be reporters to circumvent the mandatory reporting requirement. Currently, if a member voluntarily resigns, restricts or does not renew his or her hospital privileges, there is no clear requirement for the hospital to report this to the college, even if there are serious concerns about the member's practice. Unless there is a clear mandatory reporting duty, the CPSO will not be informed about these concerns or changes to privileges, and patients may continue to be at risk as the physician could continue to practise at another facility.

The rationale: The enhanced reporting duty in Bill 21 now turns on whether the person who grants the member privileges has reasonable grounds to believe that the resignation, relinquishment or restriction is related to the member's misconduct, incompetence or incapacity. This is a relatively high legal test. If a person wanted to avoid a reporting duty, the person could take the position that the action was not related to the member's competence or incapacity in order to avoid the reporting duty. Therefore, it is suggested that a combination of the proposed amendment and the pre-existing language would go further to achieve the goals of mandatory reporting.

We are of the view that a reporting duty that is triggered either by an administrative subjective belief or objective circumstances would be the best option.

The CPSO does not believe that the information that must be included in a report is sufficiently expansive, requiring only the grounds for the reporter's belief and not the facts underlying it, and would recommend adding language to expand the information to be included in the mandatory report.

The amendments to the RHPA and the PHA are designed to respond to four issues that the college and Federation of Health Regulatory Colleges of Ontario brought to the government's attention, those being:

- enable health regulatory colleges to more readily share information with public health authorities when health protection concerns have been identified;

- permit colleges to share information with hospitals related to investigations;

- enhance mandatory reports to health colleges to better protect patients by closing some existing gaps; and

- permit flexibility to focus college investigation of complaints, with limited discretion.

**The Acting Chair (Miss Monique Taylor):** Thank you, Mr. Walker. Any further discussion? Okay. We will vote on that motion. All in favour? All opposed? The motion is lost.

Page 22 is an NDP motion: Ms. Forster.

**Ms. Cindy Forster:** I'll withdraw that motion.

**The Acting Chair (Miss Monique Taylor):** Thank you.

Shall schedule 2, section 17, as amended, carry? All in favour? All opposed? Carried.

Schedule 2, section 18: Page 23 is an NDP motion. Ms. Forster.

**Ms. Cindy Forster:** I move that section 18 of schedule 2 to the bill be struck out and the following substituted:

“Commencement

“18(1) Sections 1 to 7 come into force two years after the day the Safeguarding Health Care Integrity Act, 2014 receives royal assent.

“Same

“(2) Sections 8 to 17 come into force on a day to be named by proclamation of the Lieutenant Governor.”

The rationale for this is that the amendment will ensure that hospitals have the time they need to get all of the processes in place to ensure that oversight is appropriate to the unique hospital setting.

**The Acting Chair (Miss Monique Taylor):** Thank you, Ms. Forster. Any further discussion? Shall the motion carry? All in favour? All opposed? The motion is lost.

There are no amendments, so shall schedule 2 carry?

*Interjection.*

**The Acting Chair (Miss Monique Taylor):** Oh, I'm sorry. I skipped a section. Shall schedule 2, section 18 carry? All in favour? Carried.

Shall schedule 2, as amended, carry? Carried.

Shall the title of the bill carry? Carried.

Shall Bill 21, as amended, carry? Carried.

Shall I report the bill, as amended, to the House? Carried.

Well, that's it. It is now almost 10:15, so we have finished this perfectly on time. I believe—

**Mr. John Fraser:** Great job, Chair.

*Interjections.*

**The Acting Chair (Miss Monique Taylor):** Oh, thank you.

**Mr. Bill Walker:** Just a point of clarification: Are we back at 2, or is that it? We're done?

**The Acting Chair (Miss Monique Taylor):** Nope, that will be it. I'll send notification. This is adjourned.

*The committee adjourned at 1015.*

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