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Official Report of Debates (Hansard)

Tuesday 27 October 2015

Journal des débats (Hansard)

Mardi 27 octobre 2015

**Standing Committee on
Government Agencies**

Intended appointments

**Comité permanent des
organismes gouvernementaux**

Nominations prévues

Chair: John Fraser
Clerk: Sylwia Przezdziecki

Président : John Fraser
Greffière : Sylwia Przezdziecki

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LEGISLATIVE ASSEMBLY OF ONTARIO

**STANDING COMMITTEE ON
GOVERNMENT AGENCIES**

Tuesday 27 October 2015

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**COMITÉ PERMANENT DES
ORGANISMES GOUVERNEMENTAUX**

Mardi 27 octobre 2015

The committee met at 0902 in committee room 1.

INTENDED APPOINTMENTS

The Chair (Mr. John Fraser): Good morning. Welcome back, everybody, to the standing committee on public appointments and government agencies.

We have two intended appointments this morning. We do also have a translation service here for our first intended appointee. So you'll notice you've got a little ear bud if you wish to use it. The nominee has let me know she will be speaking in English and in French. Any questions, anybody? No? That's good. Merci.

Interjection.

The Chair (Mr. John Fraser): You may want to test it out to make sure you're on the right channel.

Interjection: I can hear your dulcet tones.

The Chair (Mr. John Fraser): You can hear—yes, the FM radio voice. I wish. We'll just wait until Wayne gets plugged in there. Everybody good? Okay.

M^{ME} SIMONE THIBAULT

Review of intended appointment, selected by official opposition party: Simone Thibault, intended appointee as member, Provincial Advisory Committee on Francophone Affairs.

Le Président (M. John Fraser): Notre première nominée prévue est Simone Thibault. Madame Thibault, veuillez prendre place. Merci d'être ici ce matin. Vous aurez 10 minutes pour une brève présentation. Nous avons des services de traduction ici ce matin. Vous pouvez présenter dans la langue de votre choix.

Des membres des trois partis vous poseront des questions. Le temps que vous utilisez sera pris du temps du gouvernement pour vous poser des questions. Le gouvernement va poser les premières questions.

Merci encore d'être ici ce matin, et vous pouvez commencer.

M^{me} Simone Thibault: Merci, monsieur le Président.
Interjections.

The Chair (Mr. John Fraser): Are you plugged in? There's a switch, right?

Un moment, s'il vous plaît.

M^{me} Simone Thibault: Ça va.

Ça marche? OK. Merci, monsieur le Président. Merci, membres du comité.

I am so honoured to be asked to apply to be a public appointee for the Provincial Advisory Committee on Francophone Affairs.

En passant, vous pouvez poser vos questions en anglais ou en français. Je vais parler en anglais puis en français.

Je suis Acadienne de souche, de la Baie Sainte-Marie, du Petit-Ruisseau en Nouvelle Écosse, dans le sud-ouest de la province. Ce qui m'a amenée à Ottawa, c'est qu'en 1981, j'ai été acceptée comme page dans la Chambre des communes, alors j'ai eu l'occasion de voir le Parlement en action. J'ai aussi eu l'occasion de poursuivre mes études à l'Université d'Ottawa en sociologie et administration des affaires. Je n'ai pas pu poursuivre ma maîtrise à l'Université d'Ottawa parce que mon programme n'était pas offert en français dans le temps.

Je suis allée faire ma maîtrise en travail social à Carleton et je suis ravie que l'Université d'Ottawa, maintenant, offre le programme de maîtrise en travail social en français. Alors, on voit déjà l'évolution des services en Ontario.

J'ai passé la plupart de ma carrière, les 30 et quelques années, dans le domaine du secteur à but non lucratif. J'ai commencé avec la Maison d'amitié. J'étais jeune étudiante et j'ai commencé à travailler dans une maison d'hébergement pour femmes violentées et leurs enfants, une maison francophone qui accueillait les familles francophones.

C'est sûr que c'était une expérience qui m'a touchée et m'a marquée tout au long de ma carrière, car voir des familles souffrir comme ça n'était pas évident. Mais ça m'a donné la passion de travailler dans le secteur des services sociaux et de santé, et ça m'a aussi donné la passion de poursuivre le mandat, comme francophone, d'être là pour les francophones en Ontario.

Après mon expérience à Maison d'amitié, j'ai géré la Boîte pour quelques années. Après ça, j'ai géré un centre de ressources communautaires pour quelques années, et cette communauté, c'était pour l'est d'Ottawa, qui offrait beaucoup de services aux francophones. Lorsque j'étais DG de cette Boîte, grâce à l'appui du gouvernement, on a pu créer une équipe de santé familiale francophone dans ce secteur, dans l'est d'Ottawa.

Depuis, je gère le Centre de santé communautaire du Centre-ville, qui est un organisme bilingue qui travaille pour sa désignation des services en français qu'on espère réussir bientôt. C'est important, même dans des

organismes bilingues, qu'on offre des services pour la communauté francophone parce qu'il y a une importante communauté francophone à Ottawa. Alors j'y tiens et je le fais toujours.

Au-delà de ma carrière, je participe aussi à plusieurs tables et comités. J'étais présidente de l'Action ontarienne contre la violence faite aux femmes au niveau provincial. J'ai participé sur le CA du Réseau des services de santé en français de l'Est de l'Ontario. Maintenant, je suis membre du conseil d'administration de l'Association canadienne des centres de santé communautaire. I'm their francophone constituent. Alors, je fais partie du groupe de travail qui monte des dossiers pour voir comment on peut assurer l'accès à des services en français partout au Canada pour les francophones qui sont en milieu minoritaire.

So all those experiences—I've worked both in my profession but also in many committees to look at how we can best support francophones, especially in areas of the country that are in minority situations. In Ontario, I've been at a number of tables, and I find my tables, both national, regional and provincial, have been helpful because often there are lessons learned from these different tables.

I'm particularly excited by this committee because I would be working in French. Often I've had committees where I could work in French, where we were all francophones, but oftentimes I've been the token, "Hey, we need a francophone. Can you please be a participant to support us with your leadership to make a difference?" I'm happy to do that, always pleased to do that, but I'm much more excited at this stage in my career and personal life to be at a table where I can function in French and I can push in areas and advise in areas that will affect the people I have been supporting all these years in Ontario. So it's a particular privilege to be here today and to apply for this position. Merci.

Le Président (M. John Fraser): Merci, madame Thibault. Madame Lalonde?

Mme Marie-France Lalonde: Madame Thibault, je veux vous remercier sincèrement d'être ici aujourd'hui. C'est toujours agréable, comme vous dites, de pouvoir parler et s'adresser en français, donc pour moi, aujourd'hui, j'ai demandé de vous poser quelques questions parce que je peux les poser en français.

Vous avez quand même un résumé extraordinaire et un bel engagement. Je vous demanderais, par rapport à votre rôle sur ce comité-là, pourquoi vous pensez qu'il est important pour ce comité d'exister en Ontario au niveau de la francophonie.

Mme Simone Thibault: Il est important, puis je pense qu'on est dans un bon temps. Je pense que les gens comprennent l'importance de la valeur et des acquis que la communauté francophone peut avoir à la société.

0910

Je vois comme un « shift » des fois. À un moment donné, je sens qu'on a passé une période un peu victime, et puis on est rendu à une période où on a quelque chose à apporter. C'est une valeur ajoutée. Je sens que c'est

pour ça que je suis particulièrement intéressée à participer maintenant, parce qu'on est intéressé à des résultats. On est intéressé à voir, quand le gouvernement commence une initiative ou une stratégie, est-ce que la lentille francophone est présente?

On sait que, pour la communauté francophone, on est souvent marginalisé. Surtout dans certaines communautés, on est parti pris. Mais dans d'autres communautés, on est riche. On a plein de leaders et chefs de file qui mènent la barque et qui embarquent pleinement dans la communauté. Alors, je pense qu'il faut regarder les acquis qu'on a apportés. Je pense que si on a la lentille francophone, on s'assure qu'il y a un effectif qui se passe à la province. Ça va être un bonus au niveau économique, au niveau social et au niveau culturel pour la province. Puis, on le voit. Ce n'est pas juste en Ontario; je le vois partout au Canada. Il y a comme un vent, et je pense que je veux faire partie du vent.

Mme Marie-France Lalonde: Merci beaucoup. Lors des célébrations du 400^e en fin de semaine, je veux dire que j'ai senti ce vent qui, j'espère bien, va faire du cheminement ici en Ontario et à travers le Canada. Donc, je vous remercie de cet engagement là pour la francophonie. On va voter tantôt, mais bienvenue.

Mme Simone Thibault: Merci.

The Chair (Mr. Randy Pettapiece): Merci, madame Lalonde. Mr. Pettapiece?

Mr. Randy Pettapiece: Thank you for being here this morning. How do you think the current government policies and strategies affect francophones in Ontario? Do you have an opinion on that?

Mme Simone Thibault: Every strategy impacts francophones in Ontario. As I was saying earlier, I think it's making sure that the strategies take into account that we have a large population of francophones who can invest in our community, and including the diversity of francophones, with a lot of immigrants coming to our province whose first, second or third language is French. How do we integrate them into our communities? Every policy has an impact.

I would encourage the government to pay attention to that: Whether it's health, education, culture or tourism, how do we make sure we're paying attention from the beginning, and if not being, "Oh. We forgot. We need to pay attention." How do we integrate that lens as we build our strategies and pay attention? Especially as they're in a minority situation, there are particular strategies that will work better for francophones than for other communities.

Mr. Randy Pettapiece: So do you think there are some changes you would like to see currently in government policy concerning francophones in Ontario?

Mme Simone Thibault: I think I've seen good attempts to make a difference for francophones, and I would encourage them to continue that. I was invited to be on the expert panel on homelessness, because they realized we have to have a francophone lens. I was also looking at health care; there have been investments in making sure that certain communities have a community

health centre that is francophone, governed by the community for the community.

There have been really good initiatives and strategies. I think it's always to be paying attention, and I think we always have to be reminding the government.

Mr. Randy Pettapiece: Are there any things currently that you'd like to see addressed by the government concerning francophones?

M^{me} Simone Thibault: I think it's continuing to look at how we can reinforce, particularly around cultural communications. How can we make that even more vibrant? Because it is an economic issue, as well. How can we invest more in that area? How do we continue to invest more in health in terms of making sure that minority populations are getting health care in their language? How do we encourage l'effectif, which is—I wouldn't say it's everywhere, so that needs some work, especially with our health institutions.

I've seen a real proliferation of really good work in terms of la petite enfance—the early years programs—more and more, and schools. There are more schools being built for francophones. I think there's a recognition that we need to do more. We need to start at the beginning.

There's currently youth mental health rolling out. I'm looking at that, as to how we have applied the francophone lens on that file. I would raise that as something to watch and pay attention to, because for youth, mental health is a big issue. We need to pay attention, and not later in the strategy as it unfolds.

Mr. Randy Pettapiece: Okay, thank you.

The Chair (Mr. John Fraser): Mr. Bailey?

Mr. Robert Bailey: Yes. Excuse me. Thank you for coming, Ms. Thibault, today.

What are some of the other issues that you see, going forward, that are facing the francophone community, not just in Ottawa but across Ontario?

M^{me} Simone Thibault: I see we have an opportunity by raising the number of immigrants who speak French coming into our province—a real opportunity, an opportunity that can't be missed. There are a lot of communities in Ontario that could les accueillir, that could welcome them. How do we do that? How do we prepare to do that? How do we make sure that they are fully welcome and integrated in our communities? That's one area that I'm watching, because I think it's an opportunity.

There's a richness. People are attracted—often people don't even know there are francophones in Ontario. And sometimes immigrants come to Ottawa and think we're a fully bilingual city where you can function totally in French, and then they get surprised that it's not necessarily the case. That's one area that I think we can be—and then different parts of Ontario are looking for young families. That's one area that I would see.

Mr. Robert Bailey: Okay. Thank you.

The Chair (Mr. John Fraser): Mr. Gates?

Mr. Wayne Gates: Hey, good morning. How are you?

M^{me} Simone Thibault: Good.

Mr. Wayne Gates: I'm not going to show off my French.

Interjections.

M^{me} Marie-France Lalonde: Pourquoi pas?

Mr. Wayne Gates: I'm just saying. But I am going to ask you probably the most important question before I get going: Are you an Ottawa Senators fan or a Montreal Canadiens fan?

M^{me} Simone Thibault: I don't watch hockey. Do I get—

Mr. Wayne Gates: Wow. You could be a Liberal; you didn't make a decision there.

Interjections.

Mr. Wayne Gates: Hey, you guys were laughing at my French.

Okay, a couple of questions. I notice that you've done a lot of work in the not-for-profit sector. Maybe you'd like to explain that, because I think that's important, to be well balanced, to understand the issues that are out there, not just for francophones but for all Ontarians.

M^{me} Simone Thibault: Thanks for the question. I came to Ottawa when I was 18 to make money; I started in business. Then I went and worked in a shelter for abused women, and all of a sudden that wasn't as important. So from an early age I was involved in working with families who are going through lots of hardship, and I realized that was my point and calling. As much as I love administration, which is probably why I administer these organizations, I think there's an opportunity to make a difference for those who are most marginalized in our communities, as francophones, and francophones in all their diversities.

In the centre I work in, we see a lot of lesbians, gays and transgender who are having a hard time. We work with a lot of immigrants and refugees and asylum seekers, lots of women who are experiencing trauma. It's really important in anything we do, in the strategies this government takes, that we pay attention to those who are not doing well in life, and often because they've been traumatized at an early age. So the early interventions are key in anything we do. And you're right: Whether you are francophone or of another culture, it's a significant problem that we need to address. Thanks for the question.

Mr. Wayne Gates: You talked a little bit about something that we talk about, quite frankly, here when we're asking questions: the growing issue around mental health and the lack of resources that are going to mental health. One that we don't talk a lot about, but it is a big issue with suicides with teens, is youth mental health. Maybe you can just elaborate on what you've seen over the last number of years.

M^{me} Simone Thibault: For sure.

I know the new investment was to start with youth, which is a good thing. We need to do more. I happen to be—the one centre in Ottawa has an experience where we support LGBT youth. What we're seeing is a lot more transgendered youth. The suicide ideation is very high. We have waiting lists of over 50. We see youth who are

struggling, and it's the transition of going to adulthood and making sure that they don't fall through the cracks that's key. So we see a lot of children and youth who are struggling. We see a lot of immigrant children who are falling through the cracks, as well, because they're not doing well for a myriad of different reasons.

For sure we need to invest in early prevention, and when they get to that transition stage—we have people in my life that it's very serious. Sometimes it can start very small and then it can accelerate very quickly, depending on their peer group and their social supports and their family life.

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Mr. Wayne Gates: You talked a little bit about the community health centres, family health centres. We keep hearing how there's not enough doctors in the province of Ontario. Are you seeing that in the community health centres when you're there, that the—

M^{me} Simone Thibault: No. We're not seeing an issue with physicians. We're seeing an issue of making sure we have enough nurse practitioners and nurses and social workers. I think if we want robust health, we need to invest in the right care at the right time by the right provider.

There's a role for physicians; I have physicians in my community health centre. But they'll be the first to say, "I can't do my job if I don't have a really good team with me, working with me." They count on the social workers. They count on the nurses. They count on the practical assistant worker who is going to get the ID for that person who lost their ID and who is struggling on the street.

I would say, let's make sure it's the right care, right time, right profession, and let's pay attention to all parts of those professions. There are professions that are a higher cost—there's a role for them—but there are other professions that need to work with them to make sure that they are part of the solution. I would support that we really look at that larger team. There are probably things we haven't done yet in terms of more personal support workers. There's a lot of people on a team to support the health and well-being of people in our communities.

Mr. Wayne Gates: The other one you talked about is homelessness.

M^{me} Simone Thibault: Yes.

Mr. Wayne Gates: I believe that's a growing issue in the province of Ontario, particularly around affordable housing. That's why we're seeing a lot of homelessness. Are you seeing that in the francophone community as well?

M^{me} Simone Thibault: Yes. I'm walking on the streets, and many francophones are homeless. I think the issue is often the data. We're not counting the number of francophones really well, compared to the rest of the population. I think there's a data issue. But for sure, the issue of homelessness is not only in Ottawa. It's everywhere in the province.

It's experienced differently, from my experience on the Expert Advisory Panel on Homelessness. It's

experienced very differently, depending on where you're from—rural, north, south; large urban areas.

People say that we need to look at community solutions to address homelessness and how can we do that. I'm on the Canadian Association of Community Health Centres. Our number one priority is to get affordable housing. People are not healthy or well if we don't have affordable housing. We're hopeful that that will get better over time. But that's significant, and that was coming from all parts of the province on this panel: We need affordable housing.

Mr. Wayne Gates: I can tell you that in our office, one of our biggest issues is affordable housing and the wait times. What's equally disturbing is the number of seniors who are now caught in that crunch.

A couple of last questions: I'm from Niagara Falls, but Welland, which is not that far from me, has a really big, very vibrant francophone community.

The last thing: I see the CARE Canada—you walked in the Walk in Her Shoes fundraiser and participated, which is a very good cause that is raising a lot of money and awareness on that issue.

So I say thanks very much. My pleasure, talking to you.

M^{me} Simone Thibault: Okay, merci. Thank you.

The Chair (Mr. John Fraser): Thank you very much, Mr. Gates.

Madame Thibault, merci pour votre présentation ce matin. Nous allons examiner les « concurrences » à la fin de la réunion. Merci encore. Vous pouvez reprendre votre place.

You're welcome to stay, if you wish. Thank you very much.

M^{me} Simone Thibault: Okay, merci. Thank you very much.

MS. JESSICA SMITH

Review of intended appointment, selected by official opposition party: Jessica Smith, intended appointee as member, Trillium Gift of Life Network.

The Chair (Mr. John Fraser): Our next intended appointee is Jessica Smith, nominated as member, Trillium Gift of Life Network.

Ms. Smith, can you come forward? Thank you very much for being here this morning. You will have an opportunity to make a brief presentation, and members from all three parties will be able to ask you questions after that. Any time that you use for your presentation will be taken from the government's time for questions, and the questioning will begin with the official opposition.

Thank you very much again for being here. You may begin.

Ms. Jessica Smith: Good morning, Mr. Chair, and members of the committee. I feel privileged to have been selected as a potential appointee to the Trillium Gift of Life Network, and I'm truly honoured to be before you today, because I'd like an opportunity to offer you further

insight on my background, to highlight how my experience to date will help me make an effective contribution to the board of directors.

I hold a degree in international business, with a minor in Spanish, and for my opening statement I'd like to highlight three influencing factors from my personal and professional life that you won't find on my CV. I will take an opportunity to highlight some of my qualifications at the end of my opening statement as per my position at United Way/Centraide Ottawa as director of strategy management and organizational development.

I'd like to take you back to when I was 16 years old; it was my first office job. I learned valuable interpersonal skills in this job as an office assistant—this is going to sound very glamorous—who was tasked with converting patient files from MS-DOS to Microsoft Word. I don't anticipate anybody knowing what that entails but, essentially, when you do that conversion, characters and squares and lines appear in the new document that need to be erased. That was my job.

More importantly, I got to observe how the public sought care from their doctor. I want to say that while I work in a community development organization and I have worked in other community development organizations in other parts of the world, health care has always been part of my life. That first job that I had was for a now-retired general practitioner: my father.

I hoped that I would have a future opportunity to re-engage in the health care field. That is one of the reasons why I'm before you today.

Foundational to the access citizens have to health care and other social services here in Canada is that connectivity of the system with other organizations aimed at positively impacting people's lives.

I lived and worked in Santa Cruz, Bolivia, for six months, and I volunteered at a local orphanage for second-generation street children. I discovered that the director of the orphanage had never successfully secured funding from the state government. For those of you who have lived and worked in the developing world, this is a common occurrence, and you hope that the government has a role to play in alleviating some of the systemic issues around poverty.

While my experience abroad taught me many things, I certainly do value the opportunity to work here in Canada where there are transparent systems that make good use of government and private funding. I feel as though the Trillium Gift of Life Network is working very well at an integrated system, managing the growing wait-list of donors who need life-saving transplant surgeries. I'm also pleased to see that the performance improvement plans are in line with Ontario's Excellent Care for All strategy.

My final motivation that I'd like to share with you speaks directly to my progressive and fulfilling career in strategy at United Way. I was selected for the role of director of strategy management and organizational development in 2008 given my demonstrated experience in focusing on our future state. My job is to see where we

need to be in six months, where we need to be in a year and where we need to be in five years, and I act as an adviser to the president/CEO.

In recent years, our local United Way has been recognized by the president/CEO of United Way Worldwide as one of the most progressive United Way organizations in North America. This success is attributable to the vision of my president/CEO in Ottawa, who works towards a collaborative and distributed leadership model for the network as a whole. My job is to ensure that we can execute on that vision.

I build relationships with my colleagues across the United Way system to co-develop the future of United Ways and community. I work with United Ways all over North America, et je travaille aussi avec les Centraide au Québec et les Centraide qui sont proches d'Ottawa.

On travaille maintenant dans une collaboration de quatre Centraide. D'eux autres, il y en a deux qui ont des populations anglophones; à Ottawa, on a une population bilingue anglophone-francophone, mais au Centraide à Prescott-Russell, ils ont une population en français. Leur comité de direction : c'était la première fois l'année passée où ils ont commencé à travailler en anglais aussi. Maintenant, quand on aimerait travailler tous ensemble, on a besoin de se familiariser avec comment leur Centraide offre aux donateurs des communautés francophones leur identité et comment c'est différent pour la population anglophone.

0930

I also work on a file that I'm very, very proud of, and that is to formalize a diversity and inclusion strategy for United Way Ottawa. You would think that United Way Ottawa is inherently representative of the community. You can look at the size of our board, about 31 members, and we do our best to represent both donors and community stakeholders, but through our diversity and inclusion strategy we're not aiming at being representative. We need an understanding of how populations view United Way's role in the community. Through this formalized strategy, we want to engage a significant donor population from the Southeast Asian community, a similar population that is targeted by Trillium Gift of Life.

Finally, in June of this year, I was asked by the president and CEO of United Way Canada to take on a temporary assignment for 60 working days, advising our senior decision-makers on an actionable agenda for 170 United Ways in Canada. We most recently signed on to United Way Worldwide formally, and now we're learning how to work within the global network. I wrote a proceedings report and communications piece of our prioritized actions from a two-day meeting in Washington, DC, and built out a short-term plan for implementation to support medium- and longer-term objectives.

I am very proud to have been chosen to bring strategic counsel to the United Way movement's direction in that capacity, and I look forward to working with the board members and staff at the Trillium Gift of Life Network to

increase organ and tissue donation across the province of Ontario.

I am proud to say that I am trilingual and I have a demonstrated ability to interact effectively with, and present to, multiple levels of stakeholders, external clients, executives and boards in my day-to-day job. Thank you, Mr. Chair, and I'd now like to take questions from the committee members.

The Chair (Mr. John Fraser): Thank you very much, Ms. Smith. Mr. Pettapiece.

Mr. Randy Pettapiece: Thank you, Chair. Good morning to you.

Ms. Jessica Smith: Good morning.

Mr. Randy Pettapiece: You have extensive experience with the United Way, and the United Way is certainly present in all communities. The one in my community works hard. It always amazes me, with the number of organizations that are after dollars, how they seem to achieve what they're after, and that certainly is significant because the people in all our ridings are very generous, I feel, in giving to charities and helping to try to make life better for others who are less fortunate.

One question I would like to ask you is, how would you go about informing people about the organ and tissue donation program a little bit better than what's been done in the past?

Ms. Jessica Smith: Certainly. I see a few opportunities. When I think about the back-end systems and everything that the network has to look at to just evolve through their technology, that's centred a lot around data collection, analyzing the data. Where I see some potential would be in the area of creating the donor segments and marketing effectively to those segments. When I think about some of the education programs that are in schools today to educate youth about how you need to sign up on BeADonor.ca to be able to offer that gift to somebody else, they're going to do so by pulling out their smartphone. I would hope that we begin to understand, even more so, that this isn't an online world anymore. This is a digital world, so how do we market to those youth in that age group that Trillium Gift of Life Network has identified as the 16-to-24-year-olds? They're going to want to be able to do it instantaneously if they would like to offer that gift.

I hope this isn't shameful, but I most recently exchanged my white and red health card a couple of months ago for the green health card, and I was pleased that I walked up to the ServiceOntario kiosk and they said to me, "Ms. Smith, I see that you have registered to be a donor. Thank you very much." Just that element of customer service; I think any point of contact that we can offer is a great opportunity.

So a digital strategy and segment marketing—those are kind of the areas that I think would—

Mr. Randy Pettapiece: The reason I asked that question—for those of us who have been touched by the organ donation process—I had an uncle who received a heart a number of years ago. They felt it gave him an

extra 10 years of life. Certainly, their family was forever thankful for the program.

I wonder sometimes whether signing your licence, or whatever is used, is sort of an afterthought, unless somebody does ask you to do it. I know that yours truly has forgotten to sign or put the X on, or whatever they do. I currently have done that. So I guess I'd like to ask you this question about what your thoughts on the current donor registration process are, and whether you would like to see changes to that. I know you mentioned the smart phones and everything.

Ms. Jessica Smith: Yes. There's actually a lot to it, especially coming from a not-for-profit organization that is seeking an individual engagement with donors. More often than not, when we ask why someone hasn't given to United Way, they'll say it's because they hadn't been asked.

In the conversations I've had over the last few months with friends of mine—and I understand this issue is still at play a little bit—folks don't understand that the donor card that they once signed now requires you to do the online signup.

The community groups that are in place, where we're able to run these drives in workplaces, I think, could be grown. I'm thinking about the largest employer, for instance, in Ottawa, the government of Canada. They of course run the government of Canada workplace charitable campaign, benefiting Centraide Outaouais, United Way Ottawa and health partner organizations. But they also do a poppy drive and a blood drive.

You see that the blood drive has really taken hold in workplaces. It gets people's attention. Could we not begin to have those educational opportunities in workplaces as well, even more so than we do today? Because it isn't necessarily the financial donation that you're making, perhaps. It's just an awareness as to something that you may be able to give.

Content is definitely something that is working very well in this new fundraising landscape. The more you're able to tell the story of the life of a person who has been changed or saved, that pulls on your heartstrings. I think Trillium Gift of Life has a perfect product when it comes to generating that content. The more content they can produce, perhaps even on a daily basis—Monday, Tuesday, Wednesday, Thursday, Friday, a new story of a life changed, as well as talking about how simple it is. It takes two minutes to sign up.

Does that offer you a little bit more?

Mr. Randy Pettapiece: You're doing well.

Ms. Jessica Smith: Okay. I've got ideas.

The Chair (Mr. John Fraser): Thank you very much, Mr. Pettapiece. Mr. Bailey?

Mr. Robert Bailey: Yes, just a real quick question. Thank you, Ms. Smith, for being here today and for all your work with the United Way. I'm a past fundraising chair in my local United Way.

Ms. Jessica Smith: Wonderful.

Mr. Robert Bailey: I was just sitting here, thinking how many years ago it was. Anyway, I wouldn't want to tell you.

Anyway, there have been a number of high-profile living organ transplants in the last couple of years. Of course, they were high-profile. They were able to get a lot of attention, and then the transplants came. Is there some way to make sure we keep a balance in the system, so that people who don't get that so-called media attention or are unable to be at the front of the line—is there some way we can balance that? Are you concerned about that, I guess, is another way of—

Ms. Jessica Smith: To be honest, an opinion on that is I understand that people don't feel great about those who perhaps, in their view, jump the line. But that kind of profile that we're able to get, whether it's the Hélène Campbell or Eugene Melnyk—it does bring attention to the issue. So I'm just wondering if that by-product might help us, and if we are able to manage the PR around it—I mean, one life isn't more valuable than the other. But I do understand that you have to have a strong communications team to be able to manage those issues.

Mr. Robert Bailey: Thank you.

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The Chair (Mr. John Fraser): Thank you very much, Mr. Bailey.

Mr. Gates?

Mr. Wayne Gates: Good morning. How are you?

Ms. Jessica Smith: I'm very good, Mr. Gates. How are you?

Mr. Wayne Gates: Good. I have a lot of ties to the United Way.

Ms. Jessica Smith: Wonderful.

Mr. Wayne Gates: I was on the board for six years and had the privilege of being a campaign chair for two years. I understand how it has had to change over the years, particularly on donors, as the unions kind of dropped a little bit, because that was really the unions' charity of choice, particularly on payroll deduction.

I'm going to get into the reason why you're here, but I want to ask you a question. Federally, do they do a campaign for the MPs in Ottawa? Would you know that?

Ms. Jessica Smith: We have a lot of MPs who support United Way, usually through their own efforts. We do kind of direct engagement with them. Their ability to be champions for some of the issues that they care about characterizes their engagement with United Way, not running a workplace campaign necessarily. They can choose to do whatever they like.

I know of quite a few champions, around youth drug addiction especially, who have brought a heightened awareness to the need to integrate our local systems to tackle the systemic issue and set some goals, set some targets for our community to manage, not just through funders but school boards, police services etc. That's the role that they customarily play with us.

Mr. Wayne Gates: When I got elected here, I was surprised there wasn't one here for MPPs, so I'm kind of

putting that out. Maybe you can let United Way know that I think there should be a payroll deduction here.

When I take a look at some of the stats here, it says that Ontarians are in favour of organ donation by 85%, yet only 25% signed up. How do you get to the other 60%?

Ms. Jessica Smith: Yes. Also very interesting is that we actually also know that there are 11.9 million potential donors, so the fact that we're trying to close the gap, and we're at about 27% right now—not often do you know where your end target can be. You can't get to 100%, but what can you get to?

What I'm wondering is, perhaps we might be able to explore some multi-year goal-setting, whether that's more of an internal exercise than anything else. If we were to be bold enough to go out and say, "We're at \$3.3 million"—I don't know what the numbers are going to be at the end of this quarter. We set annual targets; that's great. But when we hit the \$3-million mark, that was something to celebrate. Why not go for \$4 million? That would be my—

Mr. Wayne Gates: Because it is an interesting and big gap. I don't know whether more awareness needs to be done in the schools or whatever, but that is a big gap on the "Yes, it's a great idea, but don't ask me" type of thing.

You did a little bit on the Eugene Melnyk story. You had an interesting comment on how that raises the profile. But I guess my concern is, what message does it send, that just because I have a lot of money, I can go to the front of the line? I'm a firm believer that I look at the other part, that everybody's life is important. Eugene is no more important than anybody in this room. We all have family; we all have grandkids; we all have that.

It's interesting that you said it could be a positive, but I'm not so sure, if you want to get to the other 60%, that they would look at that in a favourable light, saying, "Well, if I have money, I'll just jump the line." I think it's a mixed bag there. There may be some awareness, but I'm not so sure that's one that gets you the type of publicity that we should be happy with.

The last point I'm going to make—I can tell you that I give a lot of credit to my wife for this one. She has talked to my daughter since she was little about signing a card. My wife has already done it, obviously. I can tell you my 18-year-old, Jacqueline, has signed a card to be an organ donor. I was extremely proud of her. I thought I'd tell you that story.

There is a way to get young people to understand the importance of it. It may start with schools; it may start in university or post-secondary education. I think it's important to get young people to understand how important their organs are to somebody who needs them right away.

That might be something, when you get on this, to talk about: How do we get to young people? Then you won't have to worry about the gap, because the gap will be starting down here, when you get to them a lot younger.

Ms. Jessica Smith: I agree with you. I talked a little bit about that segment marketing. When you see that 16-

to-24-year-old bracket, you see also the 34-to-44-year-old bracket potential and those families who make \$60,000 a year in combined income as those areas to focus on.

In United Way world, we also go after high potential, high yield, so I'm happy to see they have been identified. Try and see which strategies work. Sometimes some strategies that work in some populations have to be amended to work with others.

But I agree with you: The youth are the donors of today and tomorrow.

Mr. Wayne Gates: Thank you.

The Chair (Mr. John Fraser): Thank you very much, Mr. Gates.

Ms. Martins?

Mrs. Cristina Martins: *Remarks in Spanish.*

Ms. Jessica Smith: *Remarks in Spanish.*

Mrs. Cristina Martins: Thank you very much for being here and for taking the time to join us here today. I just wanted to commend you on all the experience that you've had with United Way and all the different organizations that you've had an opportunity to work with, and all the governance experience that, hopefully, you will be bringing to this particular board.

I guess my question is, this is such a specific, niche board, and the mandate behind it all—what sort of actions are you going to be taking to familiarize yourself with this organization?

Ms. Jessica Smith: Some folks may not get as excited as I to read a three-year strategic plan, but I've already done so, and it's great to see that we're at a juncture where we would be planning for the next three years, potentially. That's an area that I'm very comfortable in: the ability to analyze the data we have collected, see which strategies are working, and set a path forward that can be adjusted along the way but, essentially, a longer-term outlook on what we're trying to achieve, and then building out those one-year business plans from there—any strategic advice and counsel that I can offer in that regard.

I think it will be a refreshing and healthy experience for me to be at the board table as opposed to the one implementing it. So we're going to see how that transpires.

Mrs. Cristina Martins: Thank you so much. Once again, thank you for being here, and congratulations on having such an extensive résumé.

Ms. Jessica Smith: Thank you.

The Chair (Mr. John Fraser): Mr. Colle; you have about a minute.

Mr. Mike Colle: You're an impressive applicant, I might say. You've offered your services to this very important cause. I want to thank you for that.

The one question I have is, one of the challenges in getting organ donations is that there is such a low uptake from newcomers and new immigrants to Ontario. Some of it has to do with cultural blocks and in terms of traditions. These traditions don't exist where they come

from. Organ donations are taboo subjects in many of these countries.

What can we do, do you think, to try and break into this huge segment of the Ontario population that doesn't participate?

Ms. Jessica Smith: I'm happy that you characterize it as traditions, because what Trillium Gift of Life Network has begun to do is break down, for instance, the religious views on organ donation. What I was very interested to see is that, with the exception of two religious faiths, organ donation is either encouraged or supported and, for the most part, up to the individual.

What I was also pleased to see is some of the first steps they've made to translate all their brochures into various languages. It looked like there were about 15 different languages in which the brochure was available.

Going back to when we spoke about those one-on-one conversations—the trust, perhaps, that these folks put in their local physician, that sort of thing—perhaps those are the kinds of avenues that we can explore. Their children are in the education system. Perhaps they can bring back some of that insight.

But it will be most valuable, I think, to engage with them, as best we can, one on one. That's what we're learning from especially reaching out to some of the minority populations in Ottawa that we traditionally have not had a relationship with through United Way. They value engagement through one-on-one consultation. If we have to meet them in the way that they want to be engaged, then perhaps we need to explore some strategies that will allow us to do that.

The Chair (Mr. John Fraser): Thank you very much, Ms. Smith.

Mr. Mike Colle: Thank you.

The Chair (Mr. John Fraser): That concludes the time for the interview today. Thanks again very much for presenting here this morning. We will consider the concurrences at the end of this meeting, just coming up, so you're welcome to stay. Thank you very much again.

Ms. Jessica Smith: Thank you.

The Chair (Mr. John Fraser): Okay. We'll now consider the concurrences one at a time.

Simone Thibault, nominated as member, Provincial Advisory Committee on Francophone Affairs. Mr. Rinaldi?

Mr. Lou Rinaldi: I move concurrence in the intended appointment of Simone Thibault, nominated as member, Provincial Advisory Committee on Francophone Affairs.

The Chair (Mr. John Fraser): Any discussion? All those in favour? Opposed? Motion carried. Félicitations.

We'll now consider the appointment for Jessica Smith, nominated as member, Trillium Gift of Life Network. Mr. Rinaldi?

Mr. Lou Rinaldi: Chair, I move concurrence in the intended appointment of Jessica Smith, nominated as member, Trillium Gift of Life Network.

The Chair (Mr. John Fraser): Any discussion? All those in favour? Opposed? Motion carried. Congratulations, Ms. Smith.

We now have two deadline extensions to consider. The first deadline extension is for Eden Gajraj, nominated as member, Council of the College of Homeopaths. The extension is to December 1, 2015.

All those in favour? Okay, we're good. It's unanimous. Thank you very much.

Mr. Wayne Gates: What was that last word you said? It's what?

The Chair (Mr. John Fraser): Unanimous. I thought you put up your hand. This is all by unanimous consent.

Mr. Wayne Gates: It's a nice word. I just wanted to—

The Chair (Mr. John Fraser): Unanimous, yes; I didn't get tongue-tied on it. I'm having trouble with my English this morning, right?

Mr. Wayne Gates: I'm writing that day down.

The Chair (Mr. John Fraser): We've had a very multilingual morning. As a result, I have another: Bruce Krushelnicki, nominated as executive chair, Environment and Land Tribunals Ontario; and member, Assessment Review Board, Board of Negotiation, Conservation Review Board, Environmental Review Tribunal, and Ontario Municipal Board. That extension is to December 1, 2015.

Do I have agreement? Again, it's unanimous. Thank you very much.

We had a multilingual morning this morning. Thank you very much, Ms. Martins, as well, and Ms. Smith.

Meeting is adjourned.

The committee adjourned at 0954.

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