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The House met at 0900.

The Speaker (Hon. Dave Levac): Good morning. Please join me in prayer.

Prayers.

ORDERS OF THE DAY

BUDGET MEASURES ACT, 2015
LOI DE 2015 SUR LES MESURES BUDGÉTAIRES

Resuming the debate adjourned on December 9, 2015, on the motion for third reading of the following bill:

Bill 144, An Act to implement Budget measures and to enact or amend certain other statutes / Projet de loi 144, Loi visant à mettre en oeuvre les mesures budgétaires et à édicter ou à modifier d’autres lois.

Mrs. Julia Munro: I’m pleased to be able to have this opportunity to voice my concerns on Bill 144, An Act to implement Budget measures and to enact or amend certain other statutes. I was scheduled to speak at the time of second reading of this bill but, at that point, it was referred to committee. I think that in my brief comments that I have time for this morning, I want to concentrate on the nature and the situation of the passage of this bill, given its length and complexity.

The bill was referred to committee and the second reading was shortened. Unfortunately, the government shut down debate on this bill and rushed it through committee with only six hours of public hearings.

As I say, I want to spend the brief time I have to look at some of the issues around it. Just to give people an idea of why the mechanics of the bill are important to recognize: Bill 144 is a 167-page bill; it looks like this, at 167 pages. It is really quite a lengthy, in-depth document.

It’s to implement budget measures after the budget itself passed back in June. On November 18, the Minister of Finance spoke for only 16 minutes, and by November 30 there was the introduction of a time allocation motion. It identified that this bill would be passed, by the process we are undertaking right now, December 10, as the end of third reading. So it had the opportunity, three weeks of opportunity, for the government to allow for debate on this bill.

I want to put that in the context of a bill such as Bill 9, Ending Coal for Cleaner Air Act. It was introduced on July 9, 2014, and it was passed November 23, 2015, 72 weeks after its introduction, almost a year and a half. What’s interesting about that is that it wasn’t that it was a contentious bill; in fact, the opposite. It wasn’t that it was so lengthy or so detailed or so complex, but, rather, it was an opportunity for the government to use it as a photo op. There was no opposition to the bill, so it could have passed within weeks or months of its introduction.

It’s an interesting example of the fact that in the 2003 election, we had already begun the decommissioning of a coal-fired plant. As the government, we promised in that election to be coal-free by 2014. But the Liberals told people in their election promises that it would be done by 2007—an unrealistic promise, obviously, broken by the Liberals. What we actually experienced was that in fact, the coal plants had closed by 2014.

So I just give that as a contrast to a bill such as Bill 144 and its complexity, and the speed with which it is being put forward in this Legislature.

This bill, Bill 144, would implement measures contained in the 2015 budget, enact five new statutes, and amend other statutes. It has 23 schedules. The issue is that it covers many different situations and issues. I’m just going to identify a few in the moments that I have, to be able to give people a sense of the complexity of this bill, and contrasting that with the speed with which this has made it through to third reading today.

I referenced a moment ago that there are 23 schedules, and each one of them could be, in itself, a bill. They deal with things as diverse as the Assessment Act; the City of Toronto Act; the Electricity Act, which deals with the debt retirement charge for commercial and industrial users; the Financial Administration Act, and the question of a transfer for payments for businesses; the Fiscal Transparency and Accountability Act—under it, the Ontario Economic Forecast Council is dissolved, so the Ministry of Finance will continue to consult but with their own experts and at their own discretion; the Government Advertising Act, for an error in the French translation.

But the one that’s probably going to affect the greatest number of people is the Horse Racing Licence Act. Here, there are many significant changes, including dissolving the Ontario Racing Commission. This means that it will be transferred to the Alcohol and Gaming Commission of Ontario through the registrar. This will then make rules for horse racing, racetracks and off-track betting facilities in Ontario, and enables the registrar to issue, suspend and revoke licences for jockeys, trainers, grooms and other horse racing professionals.
Much has been said in this House on the issue of horse racing in this province. What it boils down to is 55,000 jobs that are in that sector. The notion that it can be relegated to the kind of short shrift it is getting through this process is something that people should understand.

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In the moment that is left to me, I want to tell you about the consultation process. Witnesses were to appear before the committee on Tuesday, December 1, each witness to receive five minutes. The deadline for written submissions was Thursday, December 3, and on Monday, December 7, the amendments which “have not yet been moved shall be deemed to have been moved and the Chair of the committee shall interrupt the proceedings and shall, without further debate or amendment, put every question necessary.”

What this meant was that we sat in the committee room and simply deemed that the discussion and amendments had been dealt with, and we would consider this now at third reading. So here we are with Bill 144, squeezed through the process to accommodate the government.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mme France Gélinas: It is my pleasure, this morning, to add a few comments on the record regarding Bill 144, the budget bill. The first thing I want to put on the record: I will quote from a letter from Jennifer Clement, a nurse practitioner from my riding who is the director of the very first nurse practitioner-led clinic. I’m very proud that the very first nurse practitioner-led clinic was in Sudbury. It is a great place. They do great work. They look after thousands of people who did not have access to primary care before, and they do this in a way that is rated top-notch. Whenever they do a survey of their clients, it always comes out that clients love them, the system loves them and the clinic works.

But we have an issue—and I’ll quote from Jennifer. She had discussed with me the problem the clinic had “recruiting a nurse practitioner for a vacant maternity leave position which has necessitated the entire team pitching in to cover that patient load and the strain it has placed on the team. We also discussed the fact that due to financial constraints, our budget has remained unchanged for over six years yet costs around us continue to rise due to cost-of-living increases.”

Things have not improved. Throughout the system, one in five nurse practitioner positions in primary care is vacant. Why is that? It’s because the government made a promise during the last election campaign. They promised that they were going to look at the salaries and compensation of nurse practitioners. Nurse practitioners working in primary care haven’t seen a penny of change in their compensation for the last eight years. Yet, during those eight years, the scope of practice of nurse practitioners has changed dramatically.

You will remember, Speaker, that they used to prescribe from a list—I don’t know who ever dreamed that up, but it certainly did not work. They now have open prescribing, and prescribe whatever is most appropriate, except for narcotics. They never used to be able to look after a patient in the hospital; now they are often the primary providers of care in our hospitals. They work in our emergency rooms. They work in our CCACs. They work in our long-term-care homes.

But the problem is that as new positions were created in our hospitals, in the CCACs and in our long-term-care homes—those salaries were basically rolled out with an understanding that they should be paid more, given that the scope of practice and responsibility had increased. But the salaries of the ones in primary care, the ones who give us access to the rest of the health care system, have been frozen for eight years, and that’s wrong. If you look through the different primary care models, whether it be community health centres, aboriginal health access centres, community-led nurse practitioner clinics or community family health teams, their salaries have not moved.

All of the primary care sector has been frozen. I highlighted nurse practitioners, but things are no better for dietitians. If you go through the health care system and you look at the number of vacant positions for a nutritionist or dietitian, it is really hard for an interdisciplinary team to do their work the way they’re supposed to when they cannot recruit. Why is that, Speaker? It’s because they have not seen a penny increase in one sector of the health care system, that is primary care—while the other sectors haven’t seen a bonanza or anything like that; don’t get me wrong. We’re talking about a very modest increase. But over the eight-year period, those modest increases make a discrepancy of over tens of thousands of dollars sometimes between what you would get for Jennifer, who has been a nurse practitioner for the last eight years.

Had she stayed in her position at the hospital as a registered nurse, she would have better wages, she would have a good pension plan with HOOPP, and she would have a good set of benefits. She has chosen to go back to work, pay for her schooling, become a nurse practitioner, offer access to thousands of people who did not have access to primary care before by working in an underserviced area, and yet how do we compensate her for that? Less than she would have made. This has to be changed. We have a budget coming, and those issues have to be addressed.

I’m not the only one saying this, Speaker. We have received—and I’m sure all of us have received—hundreds of emails. We’ve received letters from physicians. Dr. Lori Chalklin, Dr. Stephen Duncan, Dr. Alicia Gallaccio, Dr. Dana Pintea, Dr. Kim Walsh, Dr. David Wallik, Dr. Chris Williams—and the list goes on and on, Speaker—all say the same thing: that if you want primary care to do what it’s meant to do, to offer access, to help with disease prevention and health promotion, to help people take charge of their own health, then you need to fund those teams in a way that allows them to do recruitment and retention of their highly capable staff. But none of this is happening in Bill 144, in the budget bill.

This week I had the opportunity to talk with the occupational therapists. They have put forward a very good
model that would make interdisciplinary rehab teams—so think physiotherapists, occupational therapists, speech-language pathologists, kinesiologists, and I am missing one that will come to me shortly—and make sure that those teams are available to people who live in long-term-care homes. The way the changes have been made to physiotherapy payments has wiped out access for the people in long-term care to an interdisciplinary rehab team. But they make such a big difference, Speaker. If you can give the patient in long-term care access to an interdisciplinary rehab team, people who need to be fed will be able to feed themselves because the occupational therapist will show them adaptations they can make so that they can hold their fork or their spoon and they can hold their bowl and feed themselves even if they are hemiplegic or had a stroke. They have a lifetime of knowledge and skills that help people stay as functional and independent as possible.

It’s the same thing with—rather than having a two-person transfer, if the person can help themself, you only need a one-person transfer. It’s the same thing with toileting, transferring in and out of the tub; it’s the same thing with a number of activities of daily living that occupational therapists, physiotherapists, speech-language pathologists certainly—you know, we look at how frustrating it is for people who cannot communicate what their needs are. If you can’t communicate, no wonder you get angry and act out, and then they get overmedicated and we spend millions of dollars on anti-psychotic drugs for people who just need an opportunity to communicate.

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This is what speech-language pathologists do. They give people who cannot communicate an opportunity to say what they want, to be heard, to be understood. And all of a sudden, once you’re able to communicate, the frustration goes away. The acting out goes away. The need for anti-psychotic medication—that was not needed in the first place—goes away—and the number of falls. They make a huge difference.

But yet again, we have a budget that has changed the way rehab dollars are allocated, in the worst possible format, so that none of those services are available to people living in long-term-care homes anymore, and that’s wrong.

This budget bill had an opportunity to right this wrong, and it needs to be changed so that the funding model—we’re not asking for more dollars here, Speaker. I want you to fully understand that. We’re not asking for more dollars. We’re asking for dollars that already flow, to be accessible in ways that are not accessible right now, so that it would change the level of activity, the level of independence, of tens of thousands of people in our long-term-care homes. But this budget bill does not allow us to do that.

I have to put a little bit on the record regarding the OMA and physician compensation. Speaker, nothing good comes from a unilateral agreement. Nothing good comes when you refuse to talk. What they’re asking for is the same thing as every other workers’ group. Yes, I know that physicians are well compensated, and, yes, I know that they are part of the 10%. This is not what the discussion is about. The discussion is about a group of very important workers in our communities—physicians—being able to have an opportunity to negotiate an agreement—an agreement that nobody will like, but everybody will be able to live with.

This is wrong. The fact that the government won’t let them have their say, won’t let them have a chance to negotiate, is bringing all sorts of unrest into our health care system that is not good. I know the Minister of Health will be interested in changing that. He understands the importance of having a good and trusting relationship between the care providers and the patients. You do this by bringing forward respect. You do this by bringing forward opportunities to be heard and to settle things so that everybody has an agreement they can live with.

Speaker, I also have to bring forward that flattening the budgets of our hospitals for year after year—we’re looking at year five and year six—is causing a lot of hardship. Some of our bigger ones are still managing relatively okay, but most of our community hospitals are having a tough time. What has been happening is that anything that is not acute hospital care is being shifted into the community, where it has no oversight, where it has no accountability, where it has no transparency. We’re not opposed to transferring care into the community where it makes sense, but we are opposed to having it done when there is no framework for transparency, accountability, and maintaining quality.

I have nothing but respect for the College of Physicians and Surgeons of Ontario. They’re trying hard. But their mandate for out-of-hospital services is very narrow. To have this one agency that is supposed to be the guardian of quality care, of transparency, of accountability—this is not happening, Speaker. CPSO does a good job; they do a good job within their mandate.

But what we had before in our hospitals, with freedom of access of information, with Ombudsman oversight—which I hope will come pretty soon—with boards of directors, with being able to have a person or a department in place that looks at your complaint—all of this is gone.

I cannot FOI the out-of-hospital premises. I cannot be sure that there will be a person there who will handle a complaint if there is one. I certainly know that you cannot escalate this anywhere. There is no transparency; there is no accountability. This is wrong. It has to be fixed. This bill would allow us to make those kinds of changes because of the number of bills that it opens up, but it is not in there.

Another promise that was made through a budget—as you will remember, Speaker, when we were in a minority Parliament, we were able to negotiate a five-day wait time for people waiting for home care. We did not like many parts of what they had in their budget, but we agreed to support a Liberal budget on the promise that the tens of thousands of people who were waiting for
home care would receive it within five days. Well, the Auditor General told us the result of that. The result of that is that people wait 195 days before they get home care.

For children waiting for children’s services, we’re talking over two years for speech-language pathology, and over two years for occupational therapy and physiotherapy. For a kid who is two, three or four years old, this is half their life that they have spent on a wait-list to get the services they need. Those are opportunities lost. This is a promise that is being broken each and every day.

We have an opportunity with this budget bill to fix that, to say that there will be a commitment that nobody who needs home care will wait more than five days. Most people are being discharged from hospital with the promise that home care will follow. But if home care doesn’t follow, their needs don’t go away. It’s not because they’ve been discharged from the hospital that a miracle has happened going through the threshold of those doors and all of a sudden all is fine. They were discharged with a promise of a care plan that included home care, which doesn’t show up.

If it does finally come together, the number of missed visits, the number of missed appointments, the number of appointments that do not come when they’re supposed to come—because if you’re supposed to be getting home care to help you get out of bed in the morning and it’s 3 o’clock in the afternoon before the PSW shows up, it is no good. If you’re supposed to get somebody to help put you to bed at night but the PSW comes at 3 o’clock in the afternoon, it’s still no good. This is what we’re facing.

We have an opportunity to commit to a five-day wait time for home care. This was a commitment that was made through a budget. This was a commitment that was made very publicly. This is a commitment that is being broken each and every day for the tens of thousands of people who are waiting for home care.

There are other things that I wanted to talk about but I see that time is going away. Right now, we have a campaign led by our midwives that says that we don’t need to put antibiotics in the eyes of newborns. There are very limited cases where this could help, but most of the time—99% of the time—we should not do this. If we stop doing this, as the best practice is telling us, we would save $618,000 a year on medication that is not appropriate for newborns and should not be used.

The $618,000 means that—remember the $200,000 that the OPP is going to save by moving the helicopter from Sudbury to Orillia, putting the people of the northeast at risk each and every day? Lots of us like to go into the bush. Winter is coming. There will be snowshoeing, skiing, trappers and snowmobilers, and sometimes we get in trouble—and it’s dark at 4 o’clock at night in my neck of the woods. This helicopter is going to be no good to us. Well, that $618,000 would pay for that helicopter three times, because they’re saving $200,000.

There is lots of opportunity for saving. It is disappointing that it is not being acted upon and that the opportunity to make modifications to that bill is next to nil.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate? Further debate? Last call for further debate.

Pursuant to the order of the House dated November 26, 2015, I’m now required to put the question.

Mr. Bradley has moved third reading of Bill 144, An Act to implement Budget measures and to enact or amend certain other statutes. Is it the pleasure of the House that the motion carry?

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

All those opposed to the motion will please say “nay.”

In my opinion, the ayes have it.

A recorded vote is being required. It will be deferred until after question period today.

Third reading vote deferred.

HEALTH INFORMATION PROTECTION ACT, 2015

LOI DE 2015 SUR LA PROTECTION DES RENSEIGNEMENTS SUR LA SANTÉ

Resuming the debate adjourned on December 3, 2015, on the motion for second reading of the following bill:

Bill 119, An Act to amend the Personal Health Information Protection Act, 2004, to make certain related amendments and to repeal and replace the Quality of Care Information Protection Act, 2004 / Projet de loi 119, Loi visant à modifier la Loi de 2004 sur la protection des renseignements personnels sur la santé, à apporter certaines modifications connexes et à abroger et à remplacer la Loi de 2004 sur la protection des renseignements sur la qualité des soins.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Jeff Yurek: Speaker, I’m on my third day of my one-hour lead; it seems that we keep running out of time. But I’m sure today we’ll be able to finish off the lead with regard to this bill.

I’ll just go through what the bill will do. Basically, the bill will create an electronic health records system that will enable health information custodians to store and use a patient’s health information over an electronic interface. This effortless exchange of health information is designed to improve patient care. It will become an integrated electronic system by creating the prescribed organization as an entity under this bill to manage personal health information in electronic format and to create and maintain an electronic health record. The prescribed organization is intended to become the hub of information.

Before I carry on with what the bill will consist of, seeing that I only have a few minutes left, I’ll just raise some concerns that have come forward from some stakeholders, something that we can discuss further in debate and as we head into committee and see if we can either tighten up the rules or find a solution that will alleviate the concerns of the stakeholders and/or strengthen the bill.
The integration of electronic health records is a much-needed step forward, but there are a few concerns. Many stakeholders will use the system and have great insight into how it currently functions, although collaboration is required with the development of the framework and the implementation if the government hopes for this legislation to become a success. So the key is collaboration.

Patients and providers should play a key role in this process, alongside the government, as they are the ones who deal with the system on a daily basis and hold all of the insights into its functions. There needs to be clarity on how the new requirements in Bill 119 will work in a practical and clinical context.

The bill creates a series of new reporting obligations where health information custodians are required to notify the Information and Privacy Commissioner and patients when dealing with a breach. These reporting obligations on the unauthorized collection and use of personal health records seem to differ between electronic and written files. Where possible, these obligations should remain consistent with any type of file.

Concern has also arisen about the feasibility of the new reporting requirement in the case where a consent directive is overridden. The concern over the feasibility of the new reporting requirement arises when dealing with an individual who made the consent that was overridden, who threatens harm to others.

Within a clinical setting, it still remains unclear when custodians or doctors have a reporting obligation to the Information and Privacy Commissioner. Although the provision where privacy breaches are to be reported to the related colleges is a good thing, the College of Physicians and Surgeons of Ontario suggests the language be changed to remain consistent with the mandatory reporting provisions in the Health Professions Procedural Code of the RHPA and the Public Hospitals Act, to avoid confusion as to when reporting is provided.

It remains unclear what would happen if the doctor were to provide the college with inaccurate information, and if the onus is on the college to ensure the accuracy of the information provided, how could the college ensure the information is correct? Clarification remains for what information is contemplated for collection beyond what the college currently collects from Ontario physicians.

The changes to the Quality of Care Information Protection Act are very much due, although further information about the circumstances in which critical incidents may be restricted from being reviewed under the QCIPA by a quality-of-care committee is required.

As many of the changes are required, questions remain about how these changes will operate in actual practice—for instance, the disclosure of information about a monitored drug to a doctor when determining future prescriptions.

Those are some of the concerns that have been brought forward. I’m sure the Ministry of Health has received much input from other stakeholders.

I’m hoping, through the continuation of debate, that we will see this bill get stronger, get through committee and be put in place. I think it’s an important bill that we must update, and ensure the privacy of individuals throughout the province as we move to a more electronic format in our province with regard to our health records.

I hope this government will continue to meet with stakeholders on this bill. I’m hoping that the consultation process that occurred in developing this bill was much stronger than what occurred with Bill 122, where we found that the majority of stakeholders didn’t engage in conversation until after the bill passed second reading.

The two concerns I brought forward from a number of stakeholders today, I think, can be taken into committee. We can strengthen the bill through strengthening the language and clarifying roles, or ensuring that those roles will be clarified when the regulations are created, to ensure that Bill 119 is strong for today and tomorrow’s growth of electronic health records, so that we don’t have to return to strengthen this bill sooner. I know, down the road, we will; it’s obvious. Technologies change; they get stronger, and they grow in size and capabilities. We need to ensure that our laws keep consistent with it.

We see, with regard to the SAMS records that the government put forward, that their proper planning wasn’t in place, and it has cost the government an extra $90 million just to implement that computer system throughout the province.

I’m hoping that we get this bill correct, that the government listens to the opposition, listens to stakeholders and makes the necessary changes, so that there isn’t an additional cost to the system and so that in fact we can implement, and assure Ontarians that they have privacy with their health records as we move to an electronic format and expand the amount of individuals who can have access to those records throughout the province, whether we be increasing the exchange between labs and doctors’ offices, labs and pharmacies, independent health facilities, health units.

As that expands and grows, there’s so much potential. We could utilize that information to study how health care is operating in this province, to study the best practices of usage of medical information, and usage of drugs and how they’re utilized in various parts of the province. I think we can actually have the opportunity to grow the health care system, to be more effective, to have higher quality, by utilizing the data that we’re moving to electronic format.

Our role here, though, is to ensure we have the necessary structure in place to protect the privacy of everyday Ontarians, so that there’s no manipulation of their data and/or publication of their data for gains for the person who would actually open up that data. I mentioned earlier Councillor Rob Ford, whose medical information was exposed for pure political purposes and/or notoriety in the media. We need to ensure that whether they’re Rob Ford or whether they’re the average person living in Aylmer, Ontario, people’s data is safe and they know they can go to their doctor, get the best-quality care available in Canada—but also ensure that their medical information is safe and secure.
I look forward to further debate as we move forward with this legislation. It’s interesting that it took three debate days in order to get my hour out. It’s coming to a close. We look forward to the third party’s continued deliberations. As we move forward in committee into the new year, I look forward to hearing from the stakeholders who I haven’t heard from yet, but at the committee level, and working to make this a strong bill for Ontarians.

The Deputy Speaker (Mr. Bas Balkissoon): Questions and comments?

Mme France Gélinas: I happened to be on duty all three times that the member has tried to do his lead, so I want to congratulate him for keeping at it. It has been in sort of a funny way, but he got it all out. His comments are worth listening to.

This bill was needed for a long time. It basically deals with three pieces of legislation. It deals with privacy and how we ensure privacy and what do we do so that there aren’t any more breaches of privacy. It deals with electronic health records and how we ensure that our health care system has a robust and effective electronic health record system so that we can have access to patient information, which will help us transform our health care system in the right direction. But you have to be able to do this in a way that ensures patient confidentiality. Right now, the bill is really short on ensuring that part.

The third part is the Quality of Care Information Protection Act. This is a part that—we knew from the start, when you told hospitals, “If you’re having a quality improvement meeting, then you don’t have to share information,” that some hospitals would use it wrongly. It was up to us to correct this and make that clear when we first put it out. It wasn’t done and we’ve seen what has happened. People who had adverse events where things went wrong were never able to gain closure, were never able to turn the page because they were told by the hospital that they cannot share that information with them. They cannot share the information with their loved ones because they’re using our law in a way that was never meant to be.

This bill needs changes.

The Deputy Speaker (Mr. Bas Balkissoon): Questions and comments?

Mr. Chris Ballard: I’m delighted to provide a couple of minutes of comment, having listened to most of the member for Elgin–Middlesex–London’s one-hour debate on this.

At a very high level, people deserve to know that they are protected by a health care system that is both accountable and transparent, and ensures the highest quality of care. We continue to believe that the default in our health care system should be disclosure and transparency. That’s why I’m very happy to see that the amendments proposed in this legislation include increasing accountability and transparency by making it mandatory to report significant privacy breaches to the Information and Privacy Commissioner and, in certain cases, to relevant regulatory colleges.

As well, the legislation seeks to strengthen the process to prosecute offences under the privacy act by removing the requirement that prosecutions must be commenced within six months of the alleged privacy breach. I think we’re all horrified at fairly recent news stories about celebrities whose medical records were snooped into. This legislation would discourage such snooping into patient records by doubling the fine for offences from $50,000 to $100,000 for individuals and from $250,000 to $500,000 for that organization. I think we all agree that that’s a good thing.

As well, the legislation would clarify the authority under which health care providers may collect, use and disclose personal health information in electronic health records.

It’s very good legislation, in my opinion.

The Deputy Speaker (Mr. Bas Balkissoon): Questions and comments?

Mr. Robert Bailey: I’d like to add my voice to Bill 119, the health protection act. I think the member from Elgin–Middlesex–London covered a lot of the territory that we, as a party, are concerned about.

As individual MPPs, we all have had—I think back to Sarnia–Lambton as I’m standing here. I’ve had people come into my office, now that I think about it, who were complaining about health care breaches themselves. Either they were removed from employment because they were accused of it, or people came in and had stories that they wanted to communicate to me in my office over health care breaches.

Probably one of the famous ones here in Toronto is the Rob Ford fiasco with health care. But there have been some in the States, too. I think there were just some high-profile ones the other day, where some people were removed from health care. There’s one in Toronto about selling the newborn baby material to life insurance companies. It was thousands, and they sold it for very little money. I couldn’t believe they sold it for as little as they did.

Anyway, I think this law will go somewhere towards protecting those individuals from that kind of access. At the end of the day, if we can take legislation and make it better, that’s what we are here for.

The Deputy Speaker (Mr. Bas Balkissoon): Questions and comments?

Mr. Wayne Gates: I’m certainly pleased to rise today. Before I really get into it, I’d like to welcome the corrections officers, some of whom have been on the road for five hours to be here today to try to correct some of the problems that they are having in the workplace and some of the things with the Conservatives wanting to privatize their jobs and get rid of the good-paying jobs. That’s what we’re seeing in health care. That’s the problem with health care.

I’ve said this to the health minister a number of times, as we talked about CarePartners, a group of nurses that were making $15 an hour, and their jobs were scabbed out as they tried to get a first collective agreement—seven months. We talked about home care. I know I
I think it’s important to talk about the privatization of our health care, because if we don’t stop the privatization of health care, our patients are at risk. When you take a look at the layoffs and the cuts to our hospitals, when you look at the AG report that said that we spent close to $9 billion more on P3 hospitals than what you did on a publicly delivered hospital—when I talk about that, I can talk about Peterborough and I can talk about St. Catharines. St. Catharines hospital was $1 billion dollars for approximately 350 beds. The Peterborough hospital, which was publicly delivered, publicly built, was $355 million. We can take that $600 million and put it right back into front-line health care rather than fighting with nurses who are trying to provide home care for my area.

The Deputy Speaker (Mr. Bas Balkissoon): I return to the member for Elgin–Middlesex–London. You have two minutes.

Mr. Jeff Yurek: I appreciate those who made comments to Bill 119. I, too, want to welcome the correctional officers from across the province who are here today. I have Elgin-Middlesex Detention Centre in my riding, and I’ve worked hard to try to ensure that the working conditions are at least improved, at the minimum, with regard to the correctional officers at the Elgin-Middlesex Detention Centre.

I think also at this time we could make mention that, with regard to information within this government, passing on health information—sure, it’s secure, but we also need to make sure that the information that we do have accessible, that front-line workers are able to access the entire database of information they need to do their job. I’ll make reference to the correctional officers who I know at the Elgin-Middlesex Detention Centre who are unable to get all the information they need in order to do their job to the best safety and also to their best potential. I will make mention of that while they’re here.

The member from Niagara Falls did make mention of past Conservative policies. They keep throwing that in our faces, but I will throw back at him the fact that when they were government, the third party, they did throw the social contract in the face of all public sector workers. I haven’t met a single person who was happy about the fact that they either had their days cut or their pay cut without any regard to any negotiation. So the member can throw forward any old Conservative policies, but I do remember that the days of Bob Rae were terrible for this province. I hope we never, ever reach that point again.

We’re getting close, with the current government in power today. However, Bob Rae and the NDP, when they were government, obliterated this province, in fact, with their new initiatives.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Ms. Peggy Sattler: It is a pleasure for me to rise today, on behalf of the people I represent in London West, to offer some thoughts on Bill 119, An Act to amend the Personal Health Information Protection Act, 2004, to make certain related amendments and to repeal and replace the Quality of Care Information Protection Act, 2004.

This is a very complex bill. Unusually for the pieces of legislation we deal with in this House, there are four pages of explanatory notes to provide an overview of what is in the bill. The amendments proposed are complex. They put in place a bit of a regulatory framework to address three of the most critical issues in our health care system: protecting personal health information, protecting the privacy and confidentiality of e-health records—electronic health records—and also ensuring accountability and full transparency when medical errors occur.

These three issues are addressed in two schedules in the bill: The protection of personal health information and of e-health records are addressed in schedule 1 of the bill, and the issue around accountability and transparency in addressing medical errors is addressed in schedule 2 of the bill.

The reason that these three issues—the protection of patient privacy and confidentiality, and also accountability when mistakes occur—are so important for this Legislature to address is because the health care system relies fundamentally on having a strong framework in place so that trust is maintained between patients and health care providers—actually, it’s not only health care providers; it’s the physicians that they deal with, it’s the nurse who they talk to, it’s every health care professional that they come into contact with while they are in that circle of care.

But it’s also the system as a whole. Patients have to have trust in the system as a whole; that the health care system will ensure the protection of their personal information, ensure that their privacy will be protected and that their information will not be leaked or released inadvertently to others in society.

When we visit the doctor, we are asked all kinds of questions and we watch our physician recording this information—often, now, into a computer. We’re asked, “Do you drink? How much do you drink?” We’re asked about our sexual activity. We’re asked about whether we use drugs. All of this information is very sensitive, Speaker, and you can imagine, the implications for employment and for personal life if this information is released.

Unfortunately, over the past decade we have seen numerous examples of where the trust has been broken.
and where people’s personal health information has actually been leaked. In large part, that has resulted in the amendments that we see before us today.

The legislation that is being amended in Bill 119 was introduced over a decade ago. It was introduced in 2004, and we have seen very egregious examples of where that legislation has failed to protect people’s personal health information. Of course, with the advent of electronic health records, there is a need for a new framework to address the reality that people’s medical records are being maintained in electronic form rather than the paper form of the past.

One of the examples of a leak of personal information that has happened quite close to my community: Just last year a woman in Sarnia had booked surgery at a hospital in London. She had made arrangements to have her surgery conducted, and she received a letter from a private cosmetic surgery clinic—a privately owned, for-profit clinic—inviting her to come and get her surgery done at this private, for-profit clinic instead of at the public hospital in London where she had booked her surgery. Certainly, Speaker, as you can imagine, this raised all kinds of questions about how on earth this private, for-profit clinic gained access to her personal information, to the fact that she had surgery booked in London. This clinic was able to try to solicit her business, frankly.

I know that when my children were born, about 20 years ago—I think anybody in my age cohort who has kids about that age remembers going home with the new baby and very shortly thereafter being contacted by a baby photographer. In my case, I got a phone call. This was routine practice. The hospital had sold the lists of new mothers to the photography studio, so the photography studio could access that personal health information about somebody who had just given birth and was then able to use that information to try to make a profit.

Speaker, this is absolutely unacceptable. It must not happen because, as I said at the beginning, it erodes trust in the system, and the system is based on trust.

There are some other recent examples of where personal health information has been leaked. In 2013, data storage sticks—flash drives—containing the personal health information of 18,000 patients at Toronto Western Hospital’s eye clinic went missing. That prompted an investigation by the privacy commissioner and it also led to an apology being issued by the chief doctor, who had failed to provide appropriate oversight over these data storage sticks that contained this information.

In 2013, again, there was a memory card and 18,000 people were involved: 18,000 people had their names, their addresses, their birth dates and their marital status all recorded on this memory card. The card was stolen from the car of a Peel region employee.

Speaker, we recently in London had an example of that just this past summer, where an employee at the health unit had their laptop, which included personal health information, again, on new mothers and babies, stolen from that employee’s car in the parking lot.

We have to ensure that there are appropriate protections in place to prevent these kinds of thefts, these kinds of losses of personal health information.

We know that Councillor Rob Ford and Jack Layton were two very high-profile cases, where their personal information was leaked to the media while they were being treated in hospital.

Finally, another very high-profile incident of a privacy breach of personal health information was at Scarborough’s Rouge Valley Health System, when the identities of new moms were allegedly sold to a firm that was offering education investment vehicles, RESPs. I mentioned my experience 20 years ago of my identity as a new mother being sold to a baby photography studio; here we see new mothers’ information being sold to a financial firm so that they could sell education investment products.

So these kinds of leaks really do great damage to the trust that needs to be maintained in Ontario’s health system. But, you know, there are other things that are equally corrosive in terms of that trust relationship between patients and their health care providers and the health care system as a whole.

In my community in London, just this week, we learned that 500 patients have been informed that their surgeries will have to be delayed. These are surgeries that they had booked in advance, and now they are being told that the surgeries will be delayed. Many of these people have been waiting up to two years to have these so-called elective surgeries performed. Now, they are told that they are effectively being bumped. The problem is, booking a surgery is not like booking a flight on a plane; it’s not as easy as when you are a passenger on a plane, you’re going on holiday and you’re informed, “Oh, sorry, we overbooked. We’ll have to bump you to the next flight.”

For many of these people who are being bumped, whose surgeries are being delayed because there’s a cap on the number of surgeries that the hospital can perform, this is not like they were taking a vacation and it’s a minor inconvenience. For many of these people, this opens them up to all kinds of risks that can have a very serious effect on their health status.

There was a constituent of mine that I spoke about in the House the other day, Brian Peck, who is waiting for hip-replacement surgery. He has fallen three times since he initially got the recommendation for surgery. His surgeon actually told him that he will likely end up in a wheelchair before he is able to get the surgery conducted. His health is being seriously compromised by his inability to access the surgery. The long-term consequences, the need for more costly interventions down the road, are really affecting the quality of the health care provision that he is entitled to.

Some of the other contexts in which we’re looking at this bill, when we talk about trust in the health care system—we have seen, day after day, announcements of more cuts in the system. We’ve seen a government that has frozen budgets for hospitals for four years in a row.
As our population ages, the implications of freezing hospital budgets mean that hospitals are being asked to do more effectively with less, when you factor in the impact of the true cost of inflation and when you factor in the fact that there are more frail elderly who are needing to access hospital services. They come to hospital with much more complex needs.

I want to move on to the other part of the legislation that deals with electronic health records. The bill includes some new provisions for the prescribed organization, who will have access to these electronic health records. Those are the organizations that are responsible for developing and maintaining these eHealth records. This is our reality. As I mentioned, we are moving to an electronic age. We know that it is important. There are lots of benefits from having computerized health information. But as we do that, as we move in that direction, we must make sure that there are appropriate safeguards in place to protect the confidentiality and security of that data that is recorded in these electronic databases.

One of the issues that New Democrats are very concerned about deals with data storage of these eHealth records outside Ontario and outside Canada.

The chief technology officer at Toronto’s University Health Network said, “There’s a lot of nervousness about storing data in the United States because of the Patriot Act. Our main concern is privacy, partly because of sharing with other people and partly because the Patriot Act gives the US government authority to have access to records if they’re stored on American soil.”

In a system that actually encourages hospitals to outsource some of their functions, hospitals may well be looking to data storage providers that are based in the US because it is cheaper; because it saves the hospital money, in a context where they have been dealing with frozen budgets for four years. In that process of saving hospitals money, we may be compromising the security and confidentiality of patients’ data that is stored in these electronic health records. As I said, that is a direct hit on the trust that we need to maintain between patients and the health system.

The final issue that I want to briefly address is that is dealt with in this legislation concerns quality-of-care information. Bill 119 repeals the Quality of Care Information Protection Act to respond to some of the scathing investigative reporting that was done by the Toronto Star about a shocking lack of follow-up with families of loved ones who have been subject to medical error. Certainly, we absolutely believe that the loved ones of patients who potentially died as a result of medical error deserve to know what happened. They deserve to be informed of the results of any kind of investigation that is conducted. And health care professionals who were involved in the care of that person who was harmed by a medical error need to feel that they can be honest and that they can share what they know during the process of an investigation, without the threat of disciplinary action or reprisals against them if they co-operate with an investigation about what happened.

The amendments that are proposed in this section of the bill are certainly long overdue. They were, as I said, prompted by some recent high-profile cases. Frankly, it’s appalling that these provisions weren’t in place earlier on.

Having said that, one of our ongoing concerns, and an issue that I know that we will be raising during the committee input on this bill, is around inconsistency and variability in how these protections are applied in the first place. What is proposed in Bill 119 will not address those issues. It will not address the fact that different hospitals, different health care providers are able to interpret their obligations under QCIPA as they see fit. This is a big problem. In particular, it’s a problem when we’re looking at the number of private for-profit health care providers who will not be covered by this legislation.

So this is a long-overdue step. We’re glad to see it come forward, but we have lots of concerns that we will be talking about when it moves to committee.

Second reading debate deemed adjourned.

Ms. Lisa MacLeod: I have a great deal of constituents here today from Nepean–Carleton, starting with two family friends, Gordon and Kathleen Stringer, who are Rowan Stringer’s parents. We have a bill in Rowan’s name.

I’d also like to introduce Dr. Henry Svec, who is a registered psychologist; Ashley Powers, who is the co-owner and physiotherapist at Dynamic; Dr. Sarah Cohen from Dynamic; Paul Hunter of Rugby Canada; Ashton Spear from CG Group, on behalf of the Ontario Athletic Therapist Association; Dr. Frances Flint of the Ontario Athletic Therapist Association; Dr. Cameron Marshall and Kyle Reidhead from Complete Concussion Management; Carol DeMatteo from McMaster University; Scott Watson, Louise Logan and Normand Côté from Parachute Canada; Barb Gillie, Phil Selig and Gary Thomas of the Barrhaven Scottish rugby club; and Susan Kitchen and Mercedes Watson of the Coaches Association of Ontario.

Please welcome them all to the chamber to see their government in action.

The Speaker (Hon. Dave Levac): It does look like we have quite a few people who are anxious to get up and introduce. Please stick as closely to the introduction as possible, and we’ll get through all of these. I make the commitment that our guests will be greeted.

Mr. Percy Hatfield: I have three guests this morning from OPSEU Local 368, at the Central East Correctional Centre. They are Adam Richards, Leanne Richards and Evan King. Welcome to Queen’s Park, and thank you for being here.

Hon. Yasir Naqvi: In the gallery today, we have got many of our hard-working and brave correctional offi-
cers, who keep our communities safe across the province. I want all the members of the House to welcome our correctional officers who are here with us at Queen’s Park.

Mr. Rick Nicholls: It gives me great pleasure to welcome corrections, probation and parole officers from throughout Ontario this morning. We have representation from the following facilities: South West Detention Centre, Local 135; Central East and Central North Correctional Centres, Locals 368 and 369; Elgin-Middlesex Detention Centre, Local 108; Maplehurst Correctional Complex, Local 234; Ontario Correctional Institute, Local 229; Ottawa-Carleton Detention Centre, Local 411; Thunder Bay Correctional Centre and the Thunder Bay jail, Locals 368 and 737; Toronto East Detention Centre, Local 582; Chatham, Local 130; and the Roy McMurtry Youth Centre, Local 290.

I hope I haven’t missed anybody, but if I did, forgive me. Let’s welcome them once again. Thank you for coming.

Mrs. Lisa Gretzky: I’d like to welcome corrections officers from the South West Detention Centre in my hometown. I’d like to welcome Zack Swaimson, Rob Wilson, Darrell Rockwood, Karim Sakaan and Darren Wilson. Welcome to Queen’s Park.

Hon. Michael Coteau: Joining us today in the east members’ gallery is someone from my staff, Morgan Stahl, and her mother, Margaret Stahl. Joining them, also, are William Petker and Tracy Wilson. Welcome to the Legislature.

Mr. Michael Harris: I want to introduce Ryan Graham and Dennis Berg from Kitchener, correctional officers belonging to Local 234 at Maplehurst. Thanks for coming, guys.

Mr. John Vanthof: On behalf of the member from Welland: One of our page captains is Benjamin Shoalts. His mother, Kerry Shoalts, and father, Todd Shoalts, are in the gallery this morning.

Mr. John Fraser: We have a number of people in the galleries here today in support of Rowan’s Law. We have Myles Spencer from Rugby Canada; Al Charron from Rugby Canada, who also happens to be a constituent; Patrick Hamilton; Patricia Hamilton; Lindsay Hamilton; Spencer Hamilton; Katherine Frost; Sandy Niquet; Maya Rattray; and David Butler, and Mark Johnson, Edie Michel, Bob Illman from Rugby Ontario.

Mr. Jack MacLaren: I’d like to introduce Kyle Johnston-Laplante, who works in my constituency office in Carleton–Mississippi Mills. He is here to visit with us today.

Ms. Jennifer K. French: It is my privilege to welcome, as we have heard, correctional officers from across the province.

I would also like to welcome Smokey Thomas, president of OPSEU; Eddy Almeida, VP of OPSEU; Ron Elliot; Tom O’Neill; and Monte Vieselmeyer, MERC chair.

Mike Lundy is here, and I would like to point out that Mike Lundy is the president of OPSEU Local 737 in Thunder Bay and also vice-chair of health and safety. We would like to welcome him specifically.

Mrs. Kathryn McGarry: I’d like to welcome my OLIP intern, Eric Zinn, who is in the members’ east gallery today. Welcome.

M. Jeff Yurek: C’est un honneur pour moi de vous présenter deux invitées spéciales qui sont à Queen’s Park aujourd’hui. Ce sont des représentantes du Centre francophone de Toronto. Nous saluons la présidente du comité d’administration du centre, Mme Claire Francoeur, et la directrice générale du centre, Mme Lise Marie Baudry. Bonjour et bienvenue à Queen’s Park.

Ms. Catherine Fife: I’d like to welcome some delegates in support of Rowan’s Law today: David Patterson and David Butcher from Rugby Ontario; and Andrew Laskoski, Jeannette Quach, Jennifer Mark, Darryl Gomes, Jessica Pemberton, Heather Tugnett, Lorni Hyne and Derek DeBono from the OATA. Thank you very much, and welcome to Queen’s Park.

Mrs. Cristina Martins: It gives me great pleasure to introduce the mother and father of my page, Michelle Lewis, from the riding of Davenport. Welcome, Nicole Knowlton and Shaun Lewis, here to Queen’s Park. Thank you so much.

Ms. Jennifer K. French: I’d be pleased to continue my list: Tammy McGregor-Carson, the chair of provincial health and safety from OPSEU; and Sean Dunn, Alex Sawicki. I recognize some presidents here—Chris Jackal and Chad Oldfield—and many other vice-presidents and elected officials from OPSEU, and the hard-working corrections officers here today.

Mr. Bob Delaney: Today, my wonderful page, Dayo Kehinde, has in the public gallery her mom, Imo, her father, Michael, and her sisters Tolu and Ayo. Welcome and merry Christmas.

Hon. Tracy MacCharles: I have two guests here today from the Canadian Women’s Foundation. We have the president, Sheherazade Hirji, and board member Marilyn Roycroft. Welcome to Queen’s Park.

Mme France Gélinas: I, too, have a visitor from the correctional officers from Sudbury Jail. His name is Nathan Aubin, and he is the president of OPSEU Local 617 and a good friend of mine. He’s making his way here. I hope he gets here pretty soon.

Hon. Deborah Matthews: I’d like to welcome Dr. Michael Strong, dean of the Schulich School of Medicine at Western University.

Also, a big hello to Smokey Thomas and all of the OPSEU members who are here.

Ms. Peggy Sattler: I’d like to welcome Ron Elliot, regional vice-president of OPSEU, who is also a constituent of mine in London West. Welcome, Ron.

Mrs. Marie-France Lalonde: I would like to acknowledge, on behalf of the member from Eglinton–Lawrence, page Jack Farley, who is welcoming his parents to the House this morning. Simon Farley and Manjusha Pawagi are here with us this morning.
MEMBER’S BIRTHDAY

The Speaker (Hon. Dave Levac): Point of order, the member from Nepean–Carleton.

Ms. Lisa MacLeod: I would like to congratulate my colleague from Huron–Bruce for a great birthday today and wish her well. I know that all members will wish her well, after a very long trip that she just took, representing our province. Congratulations.

The Speaker (Hon. Dave Levac): Happy birthday.

Further introductions? Last call for introductions.

It is now time for question period.

ORAL QUESTIONS

ENERGY POLICIES

Mr. Patrick Brown: To the Premier: I’d like to go back to the Auditor General’s report about energy. I’d just like to remind the government that the AG revealed that the Liberals will be overcharging the equivalent of $12,000 for every man, woman and child in Ontario for the cost of electricity—$12,000.

1040

That’s a year’s worth of rent in downtown Toronto. That’s the cost of a young person’s first car. That’s a graduate student’s tuition for a year. That’s a semester of backpacking in Europe. That would cover the average family’s food for an entire year.

Mr. Speaker, why is it okay for the government to pick the pockets of Ontarians?

Hon. Kathleen O. Wynne: I’m very eager to answer this question. But just before I do, this may be my last opportunity before the House rises to wish everyone a very, very happy holiday. I hope that everyone in the House, in the gallery and in the province has an opportunity in this time period to spend some time with family, with friends. It’s not always an easy time of year for people, but I hope that everyone has the opportunity to appreciate this beautiful place that we live in.

Mr. Speaker, on that note, I just had the opportunity, with members of the opposition parties, to be in Paris at the COP21 conference on climate change. I have to say—and I don’t know if the opposition members had this experience—I had people coming to me, including Premiers of other states—Australia, for example—looking to us as a model for the changes that we have made, and I will come back to that.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Patrick Brown: Again to the Premier, and since I didn’t get the question answered the first time, I’ll try the second time: The AG said the government could have achieved all of their renewable goals and not overcharged $9.2 billion.

The government’s overcharging of electricity will cost an average family $32,000. That’s a down payment on your first home in my riding of Simcoe North. That’s a new Dodge Caravan. That’s a 24-foot pontoon boat. It’s a complete kitchen renovation.

So my question, very directly, is this: How can this government knowingly take opportunities away from families by overcharging them on energy? The question is, how do you justify this unprecedented overcharging of energy in Ontario?

Hon. Kathleen O. Wynne: Again I say to the Leader of the Opposition, the changes that we have made in Ontario, including the shutdown of the coal-fired plants, the investment in renewable energy, and the avoidance of pollution that has saved lives in terms of asthma and costs—those are initiatives that other jurisdictions are looking to us for. They are looking to us.

They were very happy to see us there—for example, Manitoba, Quebec and Ontario signing a memorandum of understanding on cap and trade. They are looking to us. They are asking us how we did it, in terms of the shutdown of the coal-fired plants, the avoidance of those health care costs.

We are leading the way. We will continue to do that, whether or not the Leader of the Opposition is with us.

The Speaker (Hon. Dave Levac): Final supplementary.

Mr. Patrick Brown: Again for the Premier: It is the Christmas season. Parents, grandparents and guardians have been saving all year to put an extra present under the tree. This government could have made that a little bit easier if they hadn’t overcharged $32,000 for every family in Ontario.

Interjections.

The Speaker (Hon. Dave Levac): Order.

Mr. Patrick Brown: That could have bought 65 iPads to wrap.

Interjections.

The Speaker (Hon. Dave Levac): Order.

Mr. Patrick Brown: That could have bought 80 Xbox Ones to put under the tree. That could have bought 248 kids a new Supercycle to ride.

Mr. Speaker, just picture those gifts. Picture the look on a kid’s face as they see those gifts under the tree—

Interjections.

The Speaker (Hon. Dave Levac): I took the approach of trying to ask for order only, but if I’m getting the signalling from you that it’s not good enough, I’ll ramp it up. I wish I didn’t have to. So when I ask for order, please give it, and don’t start right after I ask for order.

Please finish.

Mr. Patrick Brown: To the Premier: In the spirit of Christmas, will you give Ontario one important Christmas gift? Never again will you intervene in the energy sector. Will you give us that present? Never again will we have Liberals intervene and cost Ontario more. Will you do it for Santa?

Interjections.

The Speaker (Hon. Dave Levac): Be seated, please.

Thank you.

Premier—
Mr. Speaker, in all seriousness, will the Premier tell the Legislature what will show up first at Queen’s Park: details on her climate change plan, the Loch Ness monster or Polkaroo? What will show up first?

Hon. Kathleen O. Wynne: I know that the Leader of the Opposition understands how important it is that all of the coal-fired plants have been shut down and that we have passed legislation to make sure they will not be rebuilt. There will not be coal-fired generation of electricity in Ontario again.

I’m sure the Leader of the Opposition knows that investing $20 million in charging stations for electric vehicles is a very important step, because if we are going to have electric vehicles in the province, if there’s going to be uptake, that infrastructure has to be in place.

I know the Leader of the Opposition understands that the cap-and-trade system that is being developed is being developed in conjunction—

The Speaker (Hon. Dave Levac): Interjection.

Hon. Kathleen O. Wynne: It is being developed in conjunction with Quebec and California. We signed a memorandum of understanding with Manitoba while we were in Paris, so central Canada is on the same track.

The plan is in place, and the Leader of the Opposition knows it.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Patrick Brown: Again to the Premier: I would have hoped in that response we would have had some details finally, but unfortunately, not.

It’s awfully easy to stage photo ops and claim you will fight climate change. It’s easy to set greenhouse reduction targets for 2030 or 2050, but it takes actual work, actual details to make a difference now.

Your Environmental Commissioner has told us that you won’t reach your 2020 targets—not even close. In fact, during this Premier’s first year in office, greenhouse gas emissions actually rose 171 megatonnes. The Premier is more concerned about a green backdrop than dropping emissions.

Can the Premier give a single example of what she has done during her time as Premier—not previous Premiers? Other than signing agreements and attending conferences, it’s all lip service. Will the Premier tell the House what she is going to do? What are the details of your plan? Please—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please. Thank you.

Hon. Kathleen O. Wynne: Mr. Speaker, this from a member of a government in Ottawa for nine years whose record was so dismal on this file that the current Prime
Minister, when he was in Paris and said, “Canada is back,” the room cheered.

The Leader of the Opposition may not like the fact that we have set clear targets. We have set an 80% reduction in greenhouse gas emissions against 1990 levels by 2015. He may not like the fact that the design features of our cap-and-trade system are being developed. We’re working with California and Quebec. He may not like that we’re investing in infrastructure for electric vehicles. But that’s what we’re doing because we are going to continue to lead in the fight against climate change.

Interjections.
The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please.

Final supplementary?
Mr. Patrick Brown: Again to the Premier: It just appears to be more hot air. You will ultimately be judged on—

Interjection.
The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please.

Mr. Patrick Brown: To the Premier: You will ultimately be judged on your greenhouse gas emissions. It’s easy to blame previous Prime Ministers and previous Premiers. You will be judged on your actions alone. The Premier loves to talk about fighting climate change, but it has been just that: just talk.

We all know you just got back from Paris. I think it’s great that you went to represent our province. I would never say you shouldn’t attend. In fact, our own critic went as well. But if you want to talk about a carbon footprint, the Premier flew back and forth twice. You took 22 advisers with you on that trip. That just seems excessive.

Interjections.
The Speaker (Hon. Dave Levac): Actually, it’s difficult to get one side when the other side continues.

Wrap up, please.
Mr. Patrick Brown: So I ask again: Other than photo ops, press conferences and press releases, what has this Premier done to fight climate change? I don’t want to hear about your predecessors. Your only announcement in Paris was about Manitoba.

What has this Premier done to fight climate change in Ontario?
Hon. Kathleen O. Wynne: Mr. Speaker, here’s what the Leader of the Opposition needs to know: I walked into a concert in—

Interjection.
The Speaker (Hon. Dave Levac): The member from Prince Edward–Hastings is warned.

Carry on.
Hon. Kathleen O. Wynne: I got back from Paris yesterday afternoon and I walked into a concert in one of the schools in my riding in the evening, and the first person who spoke to me was a young girl from grade 5. Her name was Sloane, and she came up to me and she said, “I just wrote a letter to you and I want to talk to you.” Her question, Mr. Speaker, was about climate change.

So here’s a child in grade 5, talking to the Premier of the province, saying to me, “What are you doing?” My answer to her was exactly the same as it is to the Leader of the Opposition. We are doing everything we can. We are challenging industry. We have shut down the coal-fired plants. We are developing a plan to make sure that we continue to reduce our greenhouse gas emissions, and we’re developing technology to help other countries. We’re taking the leadership—

Interjections.
The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please.

New question.

PRIVATIZATION OF PUBLIC ASSETS

Ms. Andrea Horwath: I want to begin by wishing the best of the holiday season to Ontarians, on behalf of New Democrats, and to encourage Ontarians to reach out a helping hand to those who are less fortunate, particularly the Syrian refugees who are arriving in our province today.

My question is to the Premier. In November, I raised the fact that public hydro agencies in the provinces of Quebec and Manitoba are investing more in conservation than here in Ontario, while Nova Scotia’s privatized hydro agency is actually fighting against conservation.

When the Premier was in Paris, did she explain why she’s selling off Hydro One and giving away one of the most important tools in the fight against climate change?

Hon. Kathleen O. Wynne: One of the conversations that was very, very front of mind in Paris was the investment in infrastructure. There was a lot of conversation about the need to invest in public transportation.

So, quite to the contrary, people wanted to know how we were moving ahead to make that investment, and the leader of the third party knows that in order to make that investment, we need funds. We need money to be able to do that, and that is the motivator for the broadening of the ownership of Hydro One.

In fact, I had many conversations in Paris about how we are moving ahead with making the largest investment in infrastructure across the province in the province’s history, and a large part of that is transit and transportation infrastructure. That’s what people in Paris are talking about.

The Speaker (Hon. Dave Levac): Supplementary?
Ms. Andrea Horwath: The Premier travelled to Paris to talk about fighting climate change. Hydro One will be—should be—one of the keys to energy conservation in this province. As a private company, though, Hydro One will make money when they sell more electricity, but it is in the interest of our planet to use less electricity. I’m sure the Premier can see the contradiction.

Can she explain why she is handing away control of Hydro One?
Hon. Kathleen O. Wynne: I think what’s critical is that we have clean, renewable generation in this prov-
insee. That is what we’ve got. We know that having companies that are efficient and competitive is a good thing for the province.

We know that Hydro One can be improved. And though I’ve said that the motivation for broadening the ownership of Hydro One is the investment in infrastructure, which it is, we will also see an improved company as a result of this change. That’s a benefit to the people of the province and it’s a benefit to the people who get their service from Hydro One.

As I said, there was a lot of conversation about the importance of having infrastructure investment that’s sustainable. That is the work that we’re doing as a result of broadening the ownership of Hydro One.

The Speaker (Hon. Dave Levac): Final supplementary?

Ms. Andrea Horwath: Ontario families want to see investments in transit and transportation infrastructure that will help make our economy greener. Transit takes cars off the road, but selling Hydro doesn’t build transit, according to the FAO, and, in fact, according to the Minister of Finance in his own fall economic update. On the one hand, selling Hydro One hobbles our ability to conserve energy and tackle climate change; and on the other hand, it actually fails to build transit.

I thought the Premier was serious about climate change, so why is she moving Ontario backwards?

Hon. Kathleen O. Wynne: The premise of the leader of the third party’s question is just not accurate. The fact is, a cap-and-trade system, the shutdown of coal-fired plants, the introduction of infrastructure for electric vehicles, the investment in sustainable infrastructure—all of those things are going to reduce greenhouse gas emissions.

We have set firm targets; we have met our 2014 target, and we are working with our partners across the country to reduce greenhouse gas emissions in Ontario and across the country.

I understand that the leader of the third party is not going to support the investment in infrastructure that we’re making. I think that’s wrong-headed; I think that she should be supporting that. But the reality is, we are going to continue on this path because we know that there is an environmental and an economic imperative to making those investments.

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please. Thank you.

New question.

HYDRO RATES

Ms. Andrea Horwath: My next question is also for the Premier. In less than a month, hydro bills will be going up another 10% because the government is eliminating the clean energy benefit. The government’s plan for low-income Ontarians seems to have a bit of a short circuit.

What is this Premier going to do to make sure that people struggling to pay their hydro bills actually get the relief that they’ve been promised by her government?

Hon. Kathleen O. Wynne: The OESP, the Ontario energy support program, is designed exactly to do—

Mr. John Yakabuski: You’ve spent more time advertising it than it’s been subscribed.

The Speaker (Hon. Dave Levac): The member from Renfrew–Nipissing–Pembroke is warned. I guess you didn’t hear me.

Carry on.

Hon. Kathleen O. Wynne: The member who was heckling thinks that low-income Ontarians shouldn’t know about the program, but we actually think low-income Ontarians should know about the program. It is designed exactly to address the challenges that the leader of the third party has identified.

We are going to make sure that people get that information—there have been flyers that have gone in electricity bills. The reality is that we are going to redouble our efforts to make sure that people get the information so that they can apply for those programs.

1100

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Some 7% of low-income Ontarians have applied for the OESP. Once they have applied, it takes six to eight weeks to be approved. Even if every single person applied by the end of the day today, they wouldn’t get approved until sometime in February. Supporting our most vulnerable neighbours is something people expect the government to get right, but yet again, here we have the Liberals making yet another mess in the energy sector.

What will this Premier do for the hundreds of thousands of Ontarians who have been promised support but won’t be getting it during the coldest months of the year?

Hon. Kathleen O. Wynne: I just want to say to the leader of the third party that I was concerned about the outreach to low-income Ontarians. I’ve said to my staff that I want to make sure that local distribution companies make an extra effort to connect with low-income Ontarians to make sure they make the application, because that funding is earmarked for those people. That money is earmarked for low-income Ontarians who may be struggling to make ends meet.

We will make sure that they get that money. We will do everything we can to make sure that happens within the next couple of weeks.

The Speaker (Hon. Dave Levac): Final supplementary?

Ms. Andrea Horwath: The holidays are around the corner. Selling Hydro One is a big gift to the Premier’s friends, and she’s giving Ontarians a lump of coal. People are going to pay more, and they have their Liberal government to blame.

How did this Premier so quickly lose sight of what matters to the people of this province?

Hon. Kathleen O. Wynne: The leader of the third party knows that she’s trying to connect things that are
not connected. The fact is that there is a new program in place, the Ontario energy support program. At the same time that the debt retirement charge is coming off bills, we are putting in place a program that will support low-income Ontarians.

The broadening of the ownership of Hydro One is an unrelated issue. It is an issue because we are investing in infrastructure and we are broadening the ownership of Hydro One. The leader of the third party knows that and she’s desperate to make a connection, a connection that is not there.

We will continue to invest in infrastructure because we know that our competitiveness as a province relies on those investments.

Interjection.

The Speaker (Hon. Dave Levac): The member from Hamilton Mountain is warned.

New question.

CORRECTIONAL FACILITIES

Mr. Rick Nicholls: My question is to the Minister of Community Safety and Correctional Services.

Minister, you know about the fire this past week at Toronto South. Several correctional officers and staff were taken to hospital and treated for smoke inhalation. Well, we just learned that there was a fire at Toronto East Detention Centre back on November 27, resulting in 12 staff, including six COs and six RNs, being taken for smoke inhalation. An additional three inmates were also taken to the hospital.

As was the case, several safety and security breaches occurred, and it would appear as though staff were muzzled once again.

Staff and inmate assaults, suicides and disturbances are occurring more frequently. Minister, you need to start listening to the issues these officers are bringing forward.

Actions speak louder than words. Demonstrate the respect that they deserve before an officer is seriously hurt or, God forbid, killed. Their lives are placed in danger daily and they watch even the worst of the worst offenders. They play an integral part in rehab.

To the minister: When will you start listening and act upon their recommendations and fix this crisis in corrections?

Hon. Yasir Naqvi: Speaker, let me start by recognizing many of our hard-working corrections, probation and parole officers who are here today.

The member is right: They work in a very difficult environment and they work very hard every single day to keep our communities safe. One of the things that I’ve been doing in my capacity as the minister is talking to a lot of people, including our correctional officers, as to how we build a better system of corrections, and one thing I’ve heard again and again, including from our correctional officers, is that the status quo is not good. We need to transform our system.

The very first step in that transformation is hiring more new correctional officers. That is why we have been working hard on that front. Over the last two years alone, we have hired 571 new correctional officers, but we are not stopping there. We will continue to hire even more correctional officers in the months and years to come and make sure they get intensive, proper training in order to keep our community safe.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Rick Nicholls: Well, Minister, if you respect them, stop endangering them.

We learned this morning that corrections staff rejected your tentative agreement, citing a 67% “no” vote. So it’s back to the table.

Detention centres are overcrowded and understaffed; caseloads for our probation and parole officers are huge, and there are instances where these officers are met by probation parolees carrying weapons. Where are the safety measures to protect our officers?

A labour disruption means putting management, even inmates, at risk at our detention centres. Communities would be put at risk where detention centres are, and I’m told by very reliable sources that a strike could also mean a huge setback of months or even years for all the work that probation and parole officers are currently doing for their clients, since there would be no accountability.

Minister, we know your ministry has been preparing for a labour dispute. What steps have you taken, in the event of a labour disruption—

The Speaker (Hon. Dave Levac): Thank you.

Mr. Rick Nicholls: —to ensure the safety of all?

The Speaker (Hon. Dave Levac): Thank you.

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Be seated, please.

When I say “thank you,” it’s over.

Minister?

Hon. Yasir Naqvi: We will continue to work with our correctional staff and all our partners to make sure that our—

Interjection.

The Speaker (Hon. Dave Levac): The member from Windsor West is warned.

Carry on.

Hon. Yasir Naqvi: —that our jails are safe and our correctional offices in particular are safe at all times.

What is ironic is that, from the member opposite, of all the questions he has asked, I have heard of no plan around transformation. How would he propose that we change the status quo?

Interjections.

The Speaker (Hon. Dave Levac): Order.

I’m seeking co-operation from everybody, and we are on the warning system.

Finish, please.

Hon. Yasir Naqvi: Speaker, he serves under a leader who actually supported the tough-on-crime policies by the Harper Conservatives that resulted in the kind of overcrowding that we see in our jails—not to mention, just in October 2012, the member opposite issued a press release asking for a wage freeze increase—
The Speaker (Hon. Dave Levac): Thank you.

New question.

CORRECTIONAL FACILITIES

Ms. Jennifer K. French: My question will be to the Minister of Community Safety and Correctional Services. I’m pleased to be able to ask these questions today with a full house of corrections officers and another few hundred outside this room. So maybe, today, we’ll get some real answers.

Correctional officers and probation and parole officers across this province soundly rejected a contract with this Liberal government. The fact that there is no deal puts this province one step closer to a strike or lockout in our jails. I asked the Acting Premier about this earlier this week and received an impressive non-answer, so I’ll try the minister instead.

We know that while jails stay chronically overcrowded and clearly dangerous, the province has built or kept aside bed space for managers in the event of a strike or lockout. The last time there was a lockout, the government—a Conservative government—used managers from other ministries and departments to staff the jails.

What’s the plan? In light of the hostage-taking and crisis in Thunder Bay, the fires at Toronto South, floods, lockdowns, assaults, malfunctioning cell locks, breaking glass, riots and overdoses, does the Premier really want lockdowns, assaults, malfunctioning cell locks, breaking crisis in Thunder Bay, the fires at Toronto South, floods, lockdowns, assaults, malfunctioning cell locks, breaking glass, riots and overdoses, does the Premier really want lockout. The last time there was a lockout, the government—a Conservative government—used managers from other ministries and departments to staff the jails.

Hon. Yasir Naqvi: Let me address the issue around Thunder Bay. It was a very dangerous situation. I want to thank again our very professional correctional officers and all staff, along with the Thunder Bay police, who worked extremely hard to defuse that situation in a very professional way.

I had the opportunity to speak with the correctional officer in question and I’ve given him assurance that all supports will be there for him so he gets healthy sooner. I also had the opportunity to speak with the superintendent and the local president, Mr. Michael Lundy, who is here with us today.

Speaker, I’ve said this before: Our correctional officers, and our probation and parole officers as well, do dangerous work. I’m working very closely with the Minister of Labour to ensure that all the work that he’s doing around PTSD and around prevention and resiliency as it relates to our first responders—that our correctional officers are part of that conversation.

LA FRANCOPHONIE

Mme Eleanor McMahon: Ma question est pour la ministre déléguée aux Affaires francophones. L’année 2015 a été historique dans l’histoire de notre province. Elle a marqué le 400e anniversaire de présence française en Ontario. Nous y avons célébré l’apport significatif des francophones à l’essor de notre province depuis 1615.

Monsieur le Président, est-ce que la ministre peut nous faire un survol des célébrations qui ont eu lieu cette année?

Alors, c’est toute la province qui a pu participer à des événements comme le Rendez-Vous Champlain à Penetang, le Festival franco-ontarien à Ottawa, la Franco-Fête de Toronto, et tant d’autres célébrations culturelles et touristiques, comme à Thunder Bay, Hearst, Sudbury et Windsor. Bien sûr, nous avons aussi investi dans de beaux legs. Les legs dans lesquels on a investi, j’en parlerai plus tard à la question supplémentaire.

Le Président (L’hon. Dave Levac): Merci. Question?

Mme Eleanor McMahon: Ma question est encore pour la ministre déléguée aux Affaires francophones, et j’aimerais la remercier pour sa réponse.

Je suis fière que la province ait ainsi reconnu la contribution des Premières Nations et des francophones à bâtir notre société. La ministre nous a parlé de legs permanents. Pourrait-elle partager avec la Chambre quels héritages le 400e anniversaire va laisser pour les générations futures?

L’hon. Madeleine Meilleur: Les legs dont je voulais vous parler tantôt—premièrement, nous avons investi 1,4 million de dollars dans le beau parc à Penetang, lieu de rencontre de Samuel de Champlain et le chef huron-wendat. Nous avons aussi investi dans un excellent docudrame, le Rêve de Champlain, fait par TFO, qui a reçu un prix Gémeaux de reconnaissance. Je vous encourage à le voir. Il a été visionné aussi par beaucoup de citoyens en Europe et dans différents pays.

Nous avons aussi offert une plaque commémorative à Honfleur, le port de départ de Champlain. Nous avons également investi dans un musée franco-ontarien en ligne. Et, monsieur le Président, reste à l’écoute; il y aura d’autres annonces qui vont être faites plus tard.

Mais comme procureure générale, je voulais dire, à toutes fins, que dans la période des fêtes, je demande aux gens d’être très prudents et surtout de ne pas conduire en état d’ébriété ou lorsque vous avez pris de l’alcool. On veut que tout l’Ontario soit en sécurité dans ce temps des fêtes.

CONCUSSIONS

Ms. Lisa MacLeod: Merry Christmas, Speaker, to you and all of my colleagues.

My question is to the government House leader. I’m joined today by Kathleen and Gordon Stringer—

Interruption.

The Speaker (Hon. Dave Levac): Excuse me. There will be no interruption from the gallery, please. Thank you.

Please finish.

Ms. Lisa MacLeod: I’m joined today by Kathleen and Gordon Stringer, my constituents from Ottawa. They are here to support a tripartite bill that bears their daughter, Rowan’s, name. This law would make Ontario the first jurisdiction in Canada to put in place a law around concussion identification, treatment and awareness. It is based on 49 recommendations from a lengthy and emotional coroner’s inquest into Rowan Stringer’s death.

Rowan’s Law has enjoyed massive support from Ontario, across Canada and in other parts of the world, with the federal government calling for a federal law that would emulate this bill. Just moments ago, Brains Worldwide International, based out of Austin, Texas, called for the swift passage of this bill.

What assurance will the government House leader give my constituents that this Liberal, NDP and Conservative bill will be called immediately for committee and third reading so Rowan’s Law will be enacted?

Hon. Yasir Naqvi: Minister of Education.

Hon. Liz Sandals: Obviously, our thoughts and prayers are with the Stringer family and with all of Rowan’s friends—because I know this has had a big impact on the friends and teammates that Rowan played with.

We at the Ministry of Education and other ministries that have been affected are reviewing the coroner’s recommendations, and we’ll respond directly to the Office of the Chief Coroner, but I want to thank the member and my colleagues the member from Ottawa South and the member from Kitchener–Waterloo—is that right?—all three parties’ sponsorship, and obviously the member here.

The government will be supporting this bill. We believe that this is a good bill and that the structure that has been set up—

The Speaker (Hon. Dave Levac): Thank you.

Supplementary?

Ms. Lisa MacLeod: I’d like to thank the Minister of Education for acknowledging her government’s support, but the question actually is a process question to the government House leader.

Rowan Stringer’s inquest took place over several weeks, with many expert witnesses forming the basis of those 49 recommendations. Many of those experts are here with us today, including Lisa Fischer, Charles Tator and Michael Sharpe, some of North America’s leading concussion experts from right here in the province of Ontario. Other groups, like Coaches of Canada, Parachute Canada, the Ontario Athletic Therapist Association and Rugby Canada, are here today to see this bill through.

Given that a previous concussion bill, Bill 39, died on the order paper, and given that the inquest was both lengthy and substantive, the Stringers and our stakeholders reasonably expect that this bill would pass expeditiously so that the committee, which will be led by the Minister of Tourism, Culture and Sport, can get moving.

So I’ll go back to the minister of the House: At the very least, can you assure the Stringer family today that Rowan’s Law will indeed pass the Legislative Assembly of Ontario?

Hon. Liz Sandals: I do want to update the House on what has happened. Since this came up as an issue, we have actually required all the school boards in the province to have a concussion law.

The Ontario Physical and Health Education Association, Ophea, has updated their concussion rules within
what’s known as the Ontario Physical Education Safety Guidelines. That’s a living document, and as a result of the coroner’s inquest and of the work that Ophea has done and the experts that are here today, we look forward, as this bill moves forward and the advisory committee is set up, to continuing to update those guidelines, because we realize that there is more research, new research, and as that new research becomes available, we know we need to continue—

The Speaker (Hon. Dave Levac): Thank you.

New question.

1120

CHILD PROTECTION

Miss Monique Taylor: My question is for the Premier. The Auditor General found that the delays and cost overruns in bringing CPIN online for children’s aid societies are being shouldered by the societies themselves and come out of their general operating budgets. That means less money to provide protection to children in care and more opportunities for them to fall through the cracks. A coroner’s inquest into the death of Jeffrey Baldwin called for CPIN to be implemented in February 2014 because Jeffrey fell through those cracks.

Speaker, how does the minister explain how her government went from a commitment to implement the CPIN program in 47 children’s aids at a cost of $150 million in January 2016, to now saying the cost will be as much as $200 million and it won’t be implemented until 2020?

Hon. Kathleen O. Wynne: Minister of Children and Youth Services.

Hon. Tracy MacCharles: Speaker, the reason I’m committed to seeing CPIN come to fruition is because of the safety and protection of children in care. The reason I am committed to this is because I don’t want more tragedies in our child welfare system.

It’s very important that we get this right. The system must be perfectly correct as we go forward. We’ve had good progress, and we’ll have more going forward.

I have met with the front-line workers who are working on CPIN, and it is a big-change process. We are continuing to invest in more supports, training and communications. I listened to the front-line workers; I listened to the leadership of children’s aid. In fact, on Monday I’m meeting with the leadership of child welfare agencies and the association so we can talk about the Auditor General’s recommendations and how they’re feeling about CPIN.

ARTS AND CULTURAL FUNDING

Mr. Han Dong: My question is to the Minister of Tourism, Culture and Sport. Last week I hosted one of the Culture Talks sessions in my riding of Trinity–Spadina, as part of the consultation process for Ontario’s first cultural strategy. It was very well attended, Mr. Speaker. In attendance were representatives from arts organizations, artists, art patrons and other constituents. My local BIAs were represented, and the Dano festival, the Chinatown festival, the Toronto Symphony Orchestra and the Design Exchange were represented as well.

It was a fantastic gathering filled with energy, excitement and deep conversations. Our discussions highlighted some of the things our government has done well and illustrated some of the next steps and opportunities.

Speaker, through you to the minister: Now that the Culture Talks consultations are complete, can you provide us with some more details about this initiative?

Hon. Michael Coteau: I’m happy to respond to the member’s question and thank him for his continued advocacy for arts and culture here in the province of Ontario.

Mr. Speaker, this is the first time a government has gone out and asked people what they think about culture in order to build a provincial-wide strategy. We know things are changing in culture with technology, and we’ve seen a lot of new art forms come forward. This is a sector that contributes $22 billion to our economy and employs over 280,000 people.

We went out there and we spoke to people in 11 different parts of Ontario. We had smaller meetings with indigenous First Nation groups. We spoke to young people. What we did was we had these conversations—and I want to thank members from all sides of the House, because I know there are members on the other side who
had their own consultations, like the member from Leeds–Grenville and the member from Trinity–Spadina.

We got a lot of positive information. It’s about building on the success that we have in Ontario and continuing to build our economy up through a strong culture sector.

**The Speaker (Hon. Dave Levac):** Supplementary.

**Mr. Han Dong:** I want to thank the minister for the good work he does in his ministry. I’m proud of the investment our government continues to make in the arts and culture sector.

The arts have a profound effect on our lives. For seniors, participating in the arts can lead to better health and well-being. Researchers have indicated that the presence of artists and art organizations reduces neighbourhood crime and delinquency. For children and youth, participating in arts can lead to better social skills, better grades in school and lower dropout rates. Cultural organizations building community identity and pride, and lead to increased tolerance, free expression and diversity.

Arts and culture strengthen the economy, attracting people to live in, visit and spend money in our communities.

Can the minister provide us with an indication of our government’s next step on this initiative?

**Hon. Michael Coteau:** We’ve had these great conversations. We had over 1,000 people participate in person, and we had over 800 submissions—online submissions, written submissions and submissions coming in directly to the website. What we’re going to do is we’re going to take all that information, collect it, analyze it, come forward with a framework for the strategy, bring it back to Ontarians and get some more feedback, and we hope that by the end of June of next year, we will have the first-ever culture strategy here in the province of Ontario that reflects what Ontarians want.

This is about making sure that our government resources are aligned with what people want and that we can work towards building our economy, but, even more importantly, that we continue to build great culture that tells our story here in the province of Ontario.

**FIRE SAFETY**

**Mr. Jim Wilson:** My question is to the Minister of Community Safety and Correctional Services. This government and the Ontario fire marshal created a risk-based assessment tool for communities to use when evaluating fire services. Unfortunately, they created a tool that doesn’t work. This is partly because they forgot to consult firefighters—the people who actually understand what is needed to keep communities safe. The assessment tool should be able to tell a community the level of fire service they need to get the job done. Instead, the tool doesn’t say anything. It produces a number—not on a scale, or on a grid; just a number that means nothing. The vagueness of the tool puts public safety at risk.

So, Mr. Speaker, I suggest the solution is simple. Will this government put a hold on the use of the current tool, consult firefighters and develop a tool that will keep communities safe?

**Hon. Yasir Naqvi:** First of all, Speaker, I think the member opposite appreciates that fire safety is a very important responsibility that we take very seriously. The Office of the Fire Marshal, under the provincial legislation in our Fire Protection and Prevention Act, exercises his authority to ensure that we have the appropriate services available across the province.

On this particular issue around risk-based assessment tools, my understanding is that the tool was created with consultation, but I have had conversations with professional firefighters, as well, about their concerns. I have committed to them that I will work with them to ensure that assessment tool is reflective of the reality, and that it ensures that our communities, our homes and our businesses are safe at all times.

**The Speaker (Hon. Dave Levac):** Supplementary.

**Mr. Jim Wilson:** Again, Mr. Speaker, back to the minister: Sault Ste. Marie believes they can operate with 20 less firefighters, who they plan to slash over the next three years. But how did they come to that number, and how do they know it won’t affect public safety?

Common sense would tell me that 20 less firefighters means community safety is being put at risk, but this government refuses to create a proper risk-based assessment tool to guide municipalities in their decision-making. Communities are left to speculate if they have enough firefighters, or they’re forced to spend thousands of dollars on consultants to find the answer.

**Ms. Andrea Horwath:** My question is for the Premier. Today, over 2,000 patients in Whitby, Oshawa, Scarborough and across the Central East CCAC are stuck on a wait-list for home care. The Liberals like to say...
they’re committed to five-day home care, but they are forcing thousands of patients with high and moderate needs to wait an average of four months for personal support services.

Speaker, this is unacceptable. There is no way that any senior in Ontario, living alone and struggling to meet ends meet, should be forced to wait for home care that they desperately need. So why is this Premier ignoring literally thousands of patients and seniors in Whitby and across the region who need home care now, but have to wait months just to get it?

Hon. Kathleen O. Wynne: Minister of Health and Long-Term Care.

Hon. Eric Hoskins: I appreciate the question. It is unacceptable that individuals who are in serious need of support need to wait far too long to receive that. That’s why we’re acting. We’re acting on the basis of three reports now that we’ve received this year. We introduced a 10-point action plan on home and community care in the spring. We’re implementing 10 different recommendations to bring down those wait times.

There are more than 800,000 people across this province who, each and every year, access home care through our CCACs. We have hard-working front-line workers who are doing as much as they can.

I look forward in the coming weeks as well to releasing a discussion paper that is going to speak to additional changes, including structural changes that are needed to continue to improve the service that these individuals, and others like them, so badly need and deserve.

The Speaker (Hon. Dave Levac): Supplementary.

Ms. Andrea Horwath: It’s not lost on anyone that the Liberals are actually waiting for the House to rise and the Christmas break to occur before they release that secret paper on home care. It’s quite disappointing.

Seniors from Whitby to Peterborough are waiting hundreds of days for the home care they need. In schools across the region, there are over 3,000 students stuck on the wait-list for occupational therapy—more than 1,800 in Whitby alone. They’re being forced to wait an average of 423 days for the support they need. Others are waiting two years for speech-language therapy. It means a child in grade 1 might actually get the support they need by the time they get to grade 3.

How can this Premier think it’s acceptable to force children and seniors in Whitby and Oshawa to wait months, or even years, to get the support they need?

Hon. Eric Hoskins: I know, and I understand, the reasons why the leader of the third party is focused on Whitby right now, but we’re focused on the entire province, Mr. Speaker. Our goal is to make sure that we’re providing that high-quality service to all Ontarians, wherever they reside. Whether in northern Ontario, southwestern Ontario, eastern Ontario or central Ontario, our obligation is the same to everybody.

I look forward to discussing with members of her caucus, once we release the discussion paper on home and community care, to see how we might work together on creating a plan that invests in these people, treats them with dignity and respect, and provides them with that service that they deserve.

GO TRANSIT

Mrs. Cristina Martins: My question is for the Minister of Transportation. In spring of this year, our government announced that we will be investing $13.5 billion in improvements across the GO rail network as part of the regional express rail plan. A key component of delivering on this promise is eliminating the existing Davenport Diamond, one of the busiest rail crossings in North America.

I was proud to host Minister Del Duca in my riding this summer to discuss this important project and happy that he accepted, recognizing the importance of this project to my community. But many of my constituents continue to express real concerns about the potential impact that any change to this crossing could have on our community.

Can the minister please tell members of this House what he is doing to ensure that the voices of my residents of Davenport are being heard and that they are getting the best project possible?

Hon. Steven Del Duca: I’m very happy to take this question from my friend and colleague the member from Davenport. I know that I’ll have the chance to provide a little bit more detail in the supplementary answer. I just wanted to use this opportunity to say that she is 100% right. She organized a town hall meeting in her community that took place during the summer that I was quite honoured to attend.

On this side of the House, there are, I think, 58 women and men who serve as strong champions for their communities. I want to pay tribute to all of them, but I want to pay particular tribute to the member from Davenport. This is not an easy issue to deal with as we continue to build up the infrastructure that we need in our province. It is expensive, it is time-consuming and it is disruptive to communities.

I know that the team at Metrolinx and at MTO will continue to work with residents in Davenport—especially because of the advocacy of this MPP from Davenport—to make sure that we produce an outcome that’s better for the region, but also better for Davenport.

The Speaker (Hon. Dave Levac): Supplementary?

Mrs. Cristina Martins: I want to thank the minister for his response. From the onset of this project, I have been committed to working with residents and all levels of government to ensure that our community is heard on this issue. I will also continue to champion modern and environmentally sound legacy pieces that properly represent our vibrant community—items which were also recommended by the residents’ reference panel.

One of the things I continue to hear about from those in my community, and that I’m advocating for on their behalf is the desire to have a GO station at Bloor and Lansdowne. Can the minister please provide members of this House and my community in Davenport with a status update on this station?
Hon. Steven Del Duca: Again, I thank the member from Davenport for the follow-up question and the specific request.

People in this Legislature and people across Ontario have heard us say that the GO regional express rail plan will increase weekly trips across our entire GO rail network from the current 1,500 to nearly 6,000 trips. I said in my original answer that in order to get this right, in order to build the province up and build the infrastructure that we need—it is disruptive; we recognize that. That’s why Metrolinx and MTO are working very hard with the member from Davenport.

Not that many weeks ago, Metrolinx identified that we had narrowed a list for future potential stations across the whole network down to 50. I recognize that in the spring or summer of 2016, we will confirm the final number. While I’m not in a position to confirm what might take place in Davenport, I know, and everyone on this side of the House knows, that that MPP from Davenport will continue to be a champion and she’ll make sure that we get it right.

TAXATION

Mr. Steve Clark: My question is to the Minister of Municipal Affairs and Housing. Last week, our PC caucus, with the help of thousands of realtors, home builders and hard-working Ontarians, slammed the door shut on this government’s municipal land transfer tax grab. We fought hard to keep the home ownership dreams of young families in this province alive.

But Ontarians know this Liberal government all too well. Taxes are in their DNA and have climbed a staggering $30.8 billion on their watch. Since we know a leopard can’t change its spots, Ontarians are worried about what other taxes this minister has up his sleeve to pick their pockets.

Is the minister considering making the family car his next target by authorizing all municipalities to collect a vehicle registration tax?

Hon. Ted McMeekin: I’d like to wish the member opposite a very merry Christmas. He deserves one, I think, after this session in the House.

I want to say very simply that I answered that question last week when I talked about the dialogue we’re having with our municipal partners. I want to say to the member opposite that if he wants to propose that we don’t allow municipalities to tax people who have baby kittens, I’d be pleased to stand in my place and say we’re not going to do that.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Steve Clark: Here we go again. I heard the same lines when I asked him about a land transfer tax scheme. For weeks, this minister claimed I was making it up—until he fessed up and backed off.

Drivers in Ontario already pay $10 billion every year to the provincial treasury through taxes and fees. What’s more, this government’s looming carbon tax and road tolls make the commute to work an even more expensive one.

Enough is enough. Just like the MLTT, the buck stops with this minister. No more jokes—I want a straight answer. Does the minister feel drivers in this province already pay enough taxes and will he commit today that he won’t let a new car tax out of the garage?

Hon. Ted McMeekin: This is too rich by three quarters, coming from a member of a previous government that did everything they possibly could to debilitate our municipal sector. It downloaded $3.6 billion, and when municipalities complained about it and said that they were going to have a tough time making ends meet, they said, “Go raise taxes.”

Thanks for the question.

CORRECTION OF RECORD

The Speaker (Hon. Dave Levac): The Leader of the Opposition on a point of order.

Mr. Patrick Brown: Speaker, a point of order: I’d like to correct my record. During question period, I said GHG emissions rose by 171 megatonnes. They rose to 171 megatonnes during the Premier’s first year in office.

The Speaker (Hon. Dave Levac): That is a point of order and all members are allowed to correct the record.

VISITORS

The Speaker (Hon. Dave Levac): Let’s get through these quickly. I hope they’re not things that I need to get moving on, because we’ve got two very important things to do.

The member from Nepean–Carleton on a point of order.

Ms. Lisa MacLeod: Thanks, Mr. Speaker. I appreciate it. Merry Christmas again to all colleagues.

I just wanted to introduce my daughter, Victoria, and her friend Shannon who are here today to witness the Legislative Assembly.

The Speaker (Hon. Dave Levac): Thank you. I’m told that the member’s daughter challenged her to a cartwheel contest.

The member from Hamilton Mountain on a point of order.

Miss Monique Taylor: I would like to, on behalf of my caucus and the MPP for Welland, introduce Andy Roy, who is president of the NDP riding association in Welland. Welcome to Queen’s Park.

The Speaker (Hon. Dave Levac): The member for Eglinton–Lawrence.

Mr. Mike Colle: A point of order, Mr. Speaker: There has been a lot of legislation just passed and that will be passed, but one important change took place, and I want to thank Dennis Clark, the Sergeant-at-Arms, for facilitating it. That is that my granddaughter was thrown out of the Legislature because she fell asleep on my daughter’s lap. As a result of the intervention by the Sergeant-at-
Arms, children can fall asleep in the Legislature and not be thrown out again.

Interjections.

The Speaker (Hon. Dave Levac): The member from Huron–Bruce.

Ms. Lisa M. Thompson: Thank you very much, Mr. Speaker. I hate to interrupt, but I’ve had the honour of having a University of Waterloo co-op student with me this past session. I just want to say thank you to Heather Bone.

MEMBER’S BIRTHDAY

The Speaker (Hon. Dave Levac): The member from Northumberland–Quinte West.

Mr. Lou Rinaldi: In conjunction with wishing you and the rest of the Legislature a happy Christmas and a festive season, I want to wish my good friend and neighbour Minister Leal a happy birthday in a couple of days.

LEGISLATIVE PAGES

The Speaker (Hon. Dave Levac): My friends, sad news: This is the last day for our pages, and we want to thank them for the wonderful work that they’ve done. Thank you.

Applause.

NOTICE OF DISSATISFACTION

The Speaker (Hon. Dave Levac): Pursuant to standing order 38(a), the member from Leeds–Grenville has given notice of his dissatisfaction with the answer to his question given by the Minister of Municipal Affairs and Housing concerning a vehicle registration tax. The matter will be debated on February 16, 2016.

DEFERRED VOTES

EMPLOYMENT AND LABOUR STATUTE LAW AMENDMENT ACT, 2015

LOI DE 2015 MODIFIANT DES LOIS EN CE QUI CONCERNE L’EMPLOI ET LES RELATIONS DE TRAVAIL

Deferred vote on the motion for third reading of the following bill:

Bill 109, An Act to amend various statutes with respect to employment and labour / Projet de loi 109, Loi modifiant diverses lois en ce qui concerne l’emploi et les relations de travail.

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

The division bells rang from 1145 to 1150.

The Speaker (Hon. Dave Levac): Would all members please take their seats?

On December 9, 2015, Mr. Flynn moved third reading of Bill 109, An Act to amend various statutes with respect to employment and labour. All those in favour, please rise one at a time and be recognized by the Clerk.

Ayes

Albanese, Laura
Anderson, Granville
Arnott, Ted
Bailey, Robert
Baker, Yvan
Balkissoon, Bas
Ballard, Chris
Berardinetti, Lorenzo
Bradley, James J.
Brown, Patrick
Chan, Michael
Chiarelli, Bob
Clark, Steve
Colle, Mike
Coteau, Michael
Crack, Grant
Damerla, Dipika
Del Duca, Steven
Delaney, Bob
Dhillon, Vic
Dong, Han
Duguid, Brad
Fedeli, Victor
Flynn, Kevin Daniel
Fraser, John
Gravelle, Michael,

Hardeman, Ernie
Hoggarth, Ann
Hoskins, Eric
Hunter, Mitzi
Jaczek, Helena
Jones, Sylvia
Kiwala, Sophie
Lalonde, Marie-France
Leal, Jeff
MacCharles, Tracy
MacLaren, Jack
MacLeod, Lisa
Malhi, Harinder
Mangat, Amrit
Martins, Cristina
Martow, Gila
Matthews, Deborah
Mauro, Bill
McGarry, Kathryn
McMahon, Eleanor
McMeekin, Ted
McNaughton, Monte
Meilleur, Madeleine
Milczyn, Peter Z.
Miller, Norm
Moridi, Reza

Munro, Julia
Naidoo-Harris, Indira
Naqvi, Yasir
Nicholls, Rick
Orazietti, David
Pettapiece, Randy
Potts, Arthur
Qaadri, Shafiq
Rinaldi, Lou
Sandals, Liz
Scott, Laurie
Sergio, Mario
Smith, Todd
Sousa, Charles
Takhari, Harinder S.
Thibeault, Glenn
Thompson, Lisa M.
Vernile, Daieine
Walker, Bill
Wilson, Jim
Wong, Soo
Wynne, Kathleen O.
Yakabuski, John
Zimmer, David

Nays

Bisson, Gilles
DiNovo, Cheri
Dife, Catherine
Fife, Jennifer K.
Gates, Wayne
Gélinas, France

Gretzky, Lisa
Hatfield, Percy
Hiller, Randy
Horwath, Andrea
Mantha, Michael
Miller, Paul

Sattler, Peggy
Singh, Jagmeet
Taylor, Monique
Vanthof, John

The Clerk of the Assembly (Ms. Deborah Deller): The ayes are 77; the nays are 16.

The Speaker (Hon. Dave Levac): I declare the motion carried.

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

Third reading agreed to.

BUDGET MEASURES ACT, 2015

LOI DE 2015 SUR LES MESURES BUDGÉTAIRES

Deferred vote on the motion for third reading of the following bill:

Bill 144, An Act to implement Budget measures and to enact or amend certain other statutes / Projet de loi 144, Loi visant à mettre en oeuvre les mesures budgétaires et à édicter ou à modifier d’autres lois.

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

The division bells rang from 1154 to 1155.
The Speaker (Hon. Dave Levac): On December 9, 2015, Mr. Bradley moved third reading of Bill 144, An Act to implement Budget measures and to enact or amend certain other statutes. All those in favour, please rise one at a time and be recognized by the Clerk.

### Ayes

Albanese, Laura  
Anderson, Granville  
Baker, Yvan  
Balkissoon, Bas  
Ballard, Chris  
Berardinetti, Lorenzo  
Bradley, James J.  
Chan, Michael  
Chiarelli, Bob  
Cole, Mike  
Coteau, Michael  
Crack, Grant  
Damerla, Dipika  
Del Duca, Steven  
Delaney, Bob  
Dhillon, Vic  
Dong, Han  
Duguid, Brad  
Flynn, Kevin Daniel

### Nays

Arnott, Ted  
Bailey, Robert  
Barrett, Toby  
Bisson, Gilles  
Brown, Patrick  
Clark, Steve  
DiNovo, Cheri  
Fedi, Victor  
Fife, Catherine  
French, Jennifer K.  
Gates, Wayne  
Gélinas, France  
Gretzky, Lisa  
Hardeman, Ernie

The Speaker (Hon. Dave Levac): All those opposed, please rise one at a time and be recognized by the Clerk.

The Clerk of the Assembly (Ms. Deborah Deller): The ayes are 55; the nays are 41.

### 1200

The Speaker (Hon. Dave Levac): I declare the motion carried.

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

Third reading agreed to.

The Speaker (Hon. Dave Levac): The government House leader on a point of order.

Hon. Yasir Naqvi: Speaker, Her Honour awaits.

Her Honour the Lieutenant Governor of Ontario entered the chamber of the Legislative Assembly and took her seat upon the throne.

ROYAL ASSENT

Hon. Elizabeth Dowdeswell (Lieutenant Governor): Please be seated.
Au nom de Sa Majesté, Son Honneur la lieutenant-gouverneure sanctionne ces projets de loi.

Hon. Elizabeth Dowdeswell (Lieutenant Governor): If I may, Mr. Speaker and Premier, just say to all of you in the House: Thank you for your public service to the end of this year, and a very warm set of good wishes for health, happiness and prosperity in this House and in your homes, in the year to come. Thank you so much.

Her Honour was then pleased to retire.

SEASON’S GREETINGS

The Speaker (Hon. Dave Levac): Just before we recess, I offer you my personal thanks, save and except for the wonderful experience I have during question period.

I would offer you my heartfelt merry Christmas, season’s greetings, happy new year to you, your family, your staff here, your staff in your ridings, and I want to express my gratitude and, I’m sure, ours to the entire staff here at the Legislature.

Merry Christmas to everybody.

Applause.

The Speaker (Hon. Dave Levac): And, of course, our visitors. Thank you.

There are no further—

Interjection.

The Speaker (Hon. Dave Levac): That’s it. We’ve already done that. There are no further matters. This House stands recessed until 1 p.m. this afternoon.

The House recessed from 1207 to 1300.

INTRODUCTION OF VISITORS

Ms. Soo Wong: Speaker, I have a lot of guests visiting Queen’s Park this afternoon, so I’m going to read my guests who are coming in shortly: Bejoy Das, Prat Das, Jiao Jiang, Betty Wu-Lawrence, May Wong, Howard So, Lenard Walker, Sylvia and George Pusey, Eva Yeung, Pui-Chun Fong, Shang-Ren Huang, Feng-Ying Xu, Rui-Yun Zhao, Sau-Kiu Yeung, Mee-Ling Tam, Xi-Ling Xu, Zi-Jin Zhao, Wen-Yao Weng, Yue-Ying Chen, Yong-Qiang Li; Jo-Anne Linton, my executive assistant; Fiona Su, as well as Sam Wong from my constituency office; and Maria Choi and Sherilyn Hu from Mount Sinai Hospital Wellness Centre.

Mr. Speaker, I have a lot of constituents who can’t come because they are professional people. They are watching today, and I want to introduce them as well: Larissa Tam, obstetrician and gynecologist from Scarborough Hospital; Susan Eng of CARP; Suzanne Brake and Carol Snelgrove from the province of Newfoundland’s Office of Neglected Adults; Wilson Chiu, Regina Huang and Agnes Lau at Vintage Garden; Diane Duncan, St. Paul’s L’Amoreaux Centre; Samantha Chambers and Amanda Falotico from the GAIN program; Helen Leung at Carefirst; Gurprit Matharu at TransCare; Gilbert Ching from Bank of Nova Scotia; Scarborough pharmacist Rahim Ismail; Dr. Joel Sadavoy, head of geriatric psychiatry at Mount Sinai Hospital and the Wellness Centre; Allan Malek, senior vice-president of the Ontario Pharmacists Association; Susan McNeill, Anastasia Harripaul and Verity White from the Registered Nurses’ Association of Ontario; Frank Bevilaqua and Dr. Raffy Chouljian of the Ontario Dental Association. Welcome to Queen’s Park.

The Speaker (Hon. Dave Levac): Thank you to our guests. That’s the first time I have ever heard a filibuster for introduction of guests. It’s interesting.

Further introduction of guests?

Ms. Eleanor McMahon: It’s my pleasure to welcome to Queen’s Park today Thelma McGillivray of the Burlington chapter of the council of university women and the Provincial Council of Women of Ontario; and Ancilla Ho-Young who’s a nurse at Nina’s Place, and the Halton Sexual Assault and Domestic Violence Treatment Centre based at Joseph Brant Hospital. Welcome to Queen’s Park.

MEMBERS’ STATEMENTS

HIGHWAY IMPROVEMENT

Mr. Ted Arnott: As members of this House know, for some time we have been advocating for a Highway 6 Morriston bypass in the township of Puslinch. However, Morriston is not the only community in my riding in need of a bypass. On December 7, I tabled a resolution in this House calling on the Minister of Transportation to place a Highway 7 Acton bypass project on the southern highways program, MTO’s five-year plan for highway construction.

This bypass is badly needed, due to the increasing volume of truck traffic that is making its way along Highway 7 through Acton’s narrow downtown. The need for a long-term truck strategy, including the possibility of an Acton bypass, is strongly supported by Halton Hills mayor Rick Bonnette and town council. I want to commend them for their leadership on this issue. Mayor Bonnette, council and staff are proposing a partnership with the Ministry of Transportation to develop a plan to deal with the problem of truck traffic through urban areas of Halton Hills, including Acton, Georgetown and Norval. I support the town’s efforts and am working with them.

The government is promising $134 billion in infrastructure spending over a 10-year period; $16 billion has been set aside for the greater Toronto and Hamilton area. Halton Hills is in the GTA, and we need to know where we are on this list.

Last week, I approached the minister to request a meeting to discuss these issues. The minister was very receptive, and this week his staff responded to my office. We have arranged a meeting for January 20 at Queen’s Park. I’ve invited Mayor Bonnette and council to join us, as well as Halton regional chair Gary Carr. I hope that the other Halton-area MPPs can attend as well.

Working together, we can make progress.
JAY KEDDY

Miss Monique Taylor: Last Wednesday, December 3, just before 6 p.m., Jay Keddy was riding his bike up the Claremont Access in Hamilton when he was struck by a truck and died at the scene.

Jay was one of those people who make our city a community. He was an elementary teacher who took an active interest in the lives as well as the education of the children that he served. Jay worked at Prince of Wales school in the lower city and lived on the mountain, in my riding. He was an avid, careful cyclist and was no stranger to the route he was taking; he cycled to school each and every day.

He was also an active member of the West Highland Baptist Church, where he was a deacon and board member.

At the time of the tragedy, Jay was on his way from cheering on the school volleyball team to a prayer meeting at the church. He had a profound commitment to his faith at home and abroad. In fact, he and his wife Ingrid spent time as missionaries in Africa.

I knew Jay personally. He volunteered in my campaigns, and it was always a delight to see him walk through the door of the campaign office, often still wearing his bike helmet. I saw his dedication to the job at hand and his willingness to take on any task—just the type of person you want on your team. I know he brought the same commitment to all of his other endeavours.

He will be missed by many, and our city is a poorer place with his loss. Our thoughts are with his family.

COMMOTIONS CÉRÉBRALES

M. John Fraser: J’aimerais prendre un moment pour vous encourager à appuyer le projet de loi 149 cet après-midi.

Ce projet de loi a été motivé par des circonstances tragiques. En mai 2013, à l’âge de 17 ans, Rowan Stringer a subi trois commotions cérébrales en quelques jours, la dernière étant fatale.

Rowan était une personne généreuse et courageuse. Avant sa mort, elle s’est inscrite au Réseau Trillium pour le don de vie. Cette décision a amélioré la vie de plusieurs jeunes Ontariens et Ontariennes.

De plus, ses parents, Gordon et Kathleen, ont décidé de faire ce qu’ils ont pu pour sensibiliser le public aux conséquences des commotions cérébrales. Grâce à leurs efforts, une enquête du coroner a été formée. Les recommandations de cette enquête ont inspiré la création d’un comité législatif. Parmi d’autres éléments, le comité consultatif étudiera comment les entraîneurs, les joueurs et les parents sont éduqués sur les commotions cérébrales dans les sports.

La loi Rowan aiderait à assurer que tous les Ontariens, particulièrement les enfants et les jeunes adultes, participeront à des activités physiques en sécurité. Pour cette raison, je vous encourage d’appuyer ce projet de loi.

DUTCH TREATS

Mrs. Julia Munro: Every community has local small businesses that quickly become a community staple. I rise today to recognize one such establishment in my riding of York–Simcoe, Dutch Treats.

This year, Dutch Treats in Bradford celebrated 60 years. Cor Den Bleker and his wife Louise have owned and operated this business for the last 10 years. The Den Blekers are the fourth owners of Dutch Treats since its 1955 opening. For context, Leslie Frost was Premier and Louis St. Laurent was Prime Minister.

What makes this restaurant so special is its longstanding tradition in the community. In fact, the Den Blekers were customers long before they became owners. What started as a local gathering place for the Dutch community is now a specialty shop and café enjoyed by all.

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While the years have come and gone, the food has remained delicious and traditional. On a more personal note, my favourite is our oliebollen. This is enjoyed by the Dutch to celebrate New Year’s.

Small business owners are vital to Ontario’s economy, Ontario’s communities and Ontario’s character. According to a recent report, only 9% of small business owners in Canada believe their Premier understands the realities of running a small business; 59% of Canadian small business owners say that provincial taxes discourage them from growing their business.

While I am delighted to see a thriving small business in Bradford, I worry about the many other small businesses in my riding and across Ontario and their opportunity to succeed. It’s important to stand up for small business in Ontario so that others may have the same opportunity for success that Dutch Treats has had. If you are ever in Bradford, I encourage you to stop by for a snack.

HISTORY OF LAW IN WINDSOR AND ESSEX COUNTY

Mrs. Lisa Gretzky: It is my pleasure to rise one last time before the session breaks to speak to yet another community-building initiative in my riding of Windsor West.

Justice Douglas W. Phillips of the Ontario Court of Justice has helped unite the legal community of Windsor and Essex county. Over the past few years, he poured tremendous time and resources into creating a history of law by way of beautiful and informative display boards on the walls of the courthouse at 200 Chatham Street East in Windsor.

The display outlines the history of law in Windsor and Essex county and recognizes the achievements of many legal professionals and community leaders throughout history who have helped shaped our community through their legal work and local initiatives. The display helps demonstrate that the legal history of Windsor is inter-
twined with the development and growth of our region. Having toured this display over the summer, I can honestly say that the history of law and those who contributed to its development is nothing short of inspiring.

I’m proud to be from an area that recognizes the contributions of our legal professionals and community activists. Thank you to Justice Phillips and all law enthusiasts who contributed to this community-building project.

JIM CHAPLIN

Mrs. Kathryn McGarry: I rise today on behalf of my constituents of Cambridge to pay tribute to the extraordinary life of Jim Chaplin, who left us after a 12-year battle with Parkinson’s disease.

A leader in business, politics and community philanthropy throughout his 82 years—many people felt they had a connection with Jim.

Jim dedicated his life to giving back to our community. The Chaplin Family YMCA is an enduring example of Jim’s legacy to Cambridge. As president of the Cambridge Y from 1964 to 1974, he guided the Y through difficult times and gave a large donation that enabled the Y to build its current facility. He stayed involved long after his service as president, and in 2005, he became the recipient of YMCA Canada’s highest award, the Fellowship of Honour.

He helped to build the Bridges, a homeless shelter that assists our less-fortunate citizens. He was also honoured as a Mel Osborne Fellow in 1996 by the Kiwanis of Cambridge for outstanding service to the community.

Jim also headed up his family business of Canadian General-Tower. Under his capable leadership, it grew into a multi-million dollar manufacturing company that employs over 400 people and is renowned for its quality in countries across the globe.

Politics was a lifelong interest, and he served as city councillor and deputy mayor. In the words of one of his daughters, Joan Fisk, “Jim was a dedicated family man who loved to wear cashmere sweaters that earned him many hugs from his large family.”

To his wife, Daisy: We will always remember him. Rest in peace, Jim.

CARPOOLING

Mr. Tim Hudak: I don’t know if you know this, but the member for Haldimand–Norfolk, Toby Barrett, has hitchhiked to 60 different countries. He spent a lot of years hitchhiking—from 1968 to 1973. While Toby has now traded in his thumb for his votes in the Legislature and his beat-up jeans for a suit, technology has changed a lot too.

So let me tell you about BlancRide. BlancRide is a Toronto-based app that helps take the era of hitching a ride with somebody from using your thumb to using your smart phone. It will help connect passengers with drivers, whether they’re coming into Toronto from Mississauga or going from Niagara to London. It’s a great new technology, and it’s Canadian-born, here in the GTA.

The CEO, Hamid Akbari, was a professor at the Oshawa institute of technology. He’s sitting in traffic one day on the DVP, and he looks around and he sees so many cars with single passengers in them that he decides he’ll do something about it, and he invents a technology.

Now, when I talk to Mr. Akbari or to his team, they tell me there are still provincial rules that are standing in the way. For example, if you want to take more than one round trip in a day, you’re actually prohibited by laws that come from the 1970s instead of 2015. Similarly, our laws dealing with compensation are restricting this opportunity.

If we want to grow companies like this, if we want to see them become the Uber of carpooling and create jobs here in Ontario, we need to update our laws. They’ve got great ideas and I fully support them. I hope the government will agree and create some jobs right here.

Nanjing Massacre Anniversary

Mr. Han Dong: I rise today to commemorate the 78th anniversary of the Nanjing Massacre. This incident marks a dark, solemn period in the history of China.

The massacre began December 13, 1937, during the Second Sino-Japanese War. Over a period of six weeks, 200,000 to 300,000 people, including both injured soldiers and civilians, were murdered in Nanjing, the then capital of China. Nanjing was left in ruins. It took decades for the city to recover from these violent attacks.

I had the opportunity to visit the city of Nanjing with the Premier just a few weeks ago. I was moved by the Nanjing Massacre memorial that was built to commemorate those who lost their lives. This memorial pays tribute to the resilience of the Chinese people and humanity. It reminds us that life is beautiful and invaluable.

Many community events will be taking place across Ontario commemorating the Nanjing Massacre this coming weekend. I encourage the members of this House to attend these events and learn more about the Nanjing Massacre.

Lastly, to all members of this House and to all Ontarians, merry Christmas and have a happy new year. We are truly blessed to be in this province.

Seasonal Events

Ms. Indira Naidoo-Harris: It is a pleasure to rise today to wish my constituents and all Ontario residents a safe and happy holiday season.

The festive season is alive and well in my riding of Halton. Every year, I have the pleasure of attending close to four Santa Claus parades, several tree-lighting ceremonies, some major toy drives and a number of local holiday cheer events. It is an honour to be invited to these wonderful festive gatherings, and I want to thank the towns and chambers of Milton, Oakville, Campbellville and the city of Burlington for their part in organizing
these great celebrations. I’d also like to thank the countless volunteers and organizers who work tirelessly to make these gatherings a success.

I was honoured to kick off the holiday season as a judge at the Milton Santa Claus Parade. I also had the pleasure of riding in both the Oakville and Burlington Santa Claus Parades recently, along with my colleague the MPP from Burlington.

You know, Mr. Speaker, participating in a parade gives you a unique perspective. It is a privilege to see the smiling faces of so many children. It’s also wonderful to see great community spirit as friends and neighbours gather around barbecues, on lawns or on porches to celebrate the holiday season. I’m now looking forward to the upcoming Campbellville parade and Milton’s popular Miracle on Main Street event, a great toy drive for needy kids and their families. And coming up this weekend is my second annual family skating party at Milton Memorial Arena.

This is a wonderful time of year. It’s also a time for generosity and to give to those who may need extra help. I’d like to wish all of those friends and families out there, once again, happy holidays and merry Christmas.

**The Speaker (Hon. Dave Levac):** I thank all members for their statements.

### REPORTS BY COMMITTEES

**SELECT COMMITTEE ON SEXUAL VIOLENCE AND HARASSMENT**

**Ms. Daiene Vernile:** I beg leave to present the final report from the Select Committee on Sexual Violence and Harassment and move the adoption of its recommendations.

**The Speaker (Hon. Dave Levac):** Ms. Vernile presents the committee’s report and moves the adoption of its recommendations.

Does the member wish to make a brief statement?

**Ms. Daiene Vernile:** Thank you, Mr. Speaker. I want to say to you and to the House that it was such an honour and a privilege to chair the Select Committee on Sexual Violence and Harassment. I’m very proud of this comprehensive report with its recommendations. There are 67 recommendations in all.

I do want to thank all the members of the all-party committee who united together in a non-partisan environment to work in unison on a very difficult issue. I’d like to mention them, if I could: the members for Haliburton–Kawartha Lakes–Brock, Dufferin–Caledon, London West, Essex, Trinity–Spadina, Brampton–Springdale, Ottawa–Orléans, Cambridge, and Burlington. I also want to recognize the staff of the Clerk’s office for their patience and their hard work; they were on this journey with us from the start.

Most of all, Mr. Speaker, I think that we need to thank the many people in the nine communities across Ontario that we visited who shared their expertise and their personal stories with us. It wasn’t easy for many of them to come forward and to relive their experiences of sexual violence and harassment, but they did so hoping for some kind of positive outcome, and we don’t want to let them down.

Our committee is hopeful that the recommendations in this report are going to be implemented, and I thank everyone.

I move adjournment of the debate.

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

 Debate adjourned.

### INTRODUCTION OF BILLS

**MICRODISTILLERS ACT, 2015**

Mr. Hudak moved first reading of the following bill: Bill 157, An Act to amend the Liquor Control Act and the Liquor Licence Act / Projet de loi 157, Loi modifiant la Loi sur les alcools et la Loi sur les permis d’alcool.

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

First reading agreed to.

**The Speaker (Hon. Dave Levac):** The member for a short statement.

**Mr. Tim Hudak:** The short title is the Microdistillers Act. Before I talk about the bill, I just wanted to thank the legislative drafter, Bradley Warden, who’s a Niagara boy himself—he did a great job, and I thank him for his work here in the Legislature—and Matt Russell, who is an intern in my office from Brock who helped develop the bill.

It amends the Liquor Control Act by adding a new definition called a “microdistiller.” Like other bills have done with microbreweries and with cideries, it sets a lower mark-up to help small microdistillers compete and to grow and hopefully create some new jobs.

There are four basic additional powers that would be given to a microdistiller under the act. If they have multiple licences for spirits, beer or wine, they could sell all three at their location. Right now, you cannot. It sets the ceiling for a microdistiller at 625,000 litres of spirits annually. That’s a comparable level of alcohol sold to the current cap on microbreweries.

It would allow for direct delivery, so if a microdistiller, like Dillon’s in my riding, wanted to send a bottle of vodka to a local restaurant they could do so directly, as opposed to going back and forth to Toronto to the LCBO warehouse.

Fourth—and this will probably surprise members of the House—it would allow microdistillers to actually sell a glass of their product on-site. Right now, they cannot. With a winery or brewhouse, you can sell a glass; you
cannot for spirits. This would get them to a level playing field.

PETITIONS

MEDICAL PRACTITIONERS

Mr. Ted Arnott: I have a petition to the Legislative Assembly of Ontario. It reads as follows:

“Whereas Canadian individuals seek out medical practitioners providing service in Canada to treat and remedy a wide variety of ailments that an individual experiences throughout their lifetime;

“Whereas Health Canada and CCRA have an authorized list of medical practitioners whose payment for services are eligible for an individual to claim on their individual Canadian tax return as a medical deduction;

“Whereas all other medical practitioners not identified on the ‘authorized medical practitioners’ list whose payment for services are then by this definition not eligible for an individual tax deduction claim by the recipient of their services;

“Whereas an ‘authorized medical practitioner’ refers their patients out to a specialist that may or may not be on the ‘authorized list of medical practitioners’ but does so as a necessary part of the patient’s treatment plan;

“Whereas the practitioner who receives the referral from the ‘authorized medical practitioner’ and renders their service to the referred patient and is not identified on the ‘authorized medical practitioner’ list will not have the payment for their services recognized as an eligible tax deduction for the patient by CCRA;

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

“That where a medical practitioner who is identified as an ‘authorized medical practitioner’ for the purposes of having the payments for their services qualify as an eligible expense for the purposes of an individual tax deduction in Canada, provides a written referral to a patient to seek out the services of a medical practitioner which is not identified on the list of ‘authorized medical practitioners’ the payment for their services should be eligible as a tax deduction by the patient who has received these services by virtue of the referral."

It’s signed by a significant number of constituents around my riding, and in adjacent communities as well.

PARTNER ASSAULT RESPONSE PROGRAM

Ms. Peggy Sattler: I have a petition to the Legislative Assembly of Ontario called “Halt the Changes to Partner Assault Response.” It reads as follows:

“Whereas Partner Assault Response (PAR) is the only government-funded program designed to change the behaviours of men who abuse; and

“Whereas the Liberal government has created a crisis in PAR by arbitrarily reducing the length of the program from 16 weeks to 12 weeks, without any research to support this change; and

“Whereas the changes to PAR were made contrary to the advice provided to the government by violence-against-women experts, front-line agencies, PAR providers, and provincial leaders across the sector; and

“Whereas the 2009 report of the Domestic Violence Advisory Council recommended that PAR be enhanced to include voluntary access and differentiated interventions as part of a comprehensive strategy to end violence against women;

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

“That the Ministry of the Attorney General immediately halt the changes to PAR until a comprehensive review of the program can be conducted based on full and meaningful consultation with PAR providers and violence-against-women sector organizations and agencies.”

I fully support this petition. I will affix my name to it and give it to page Ross to take to the table.

ANIMAL PROTECTION

Mrs. Marie-France Lalonde: On behalf of my colleague the member from Ottawa Centre, I would like to bring to the Legislative Assembly a petition:

“Whereas the process popularly known as ‘declawing’ is actually an amputation, that is the equivalent of cutting off a human’s fingers from the knuckle up;

“Whereas the Canadian Veterinary Medical Association considers ‘declawing’ to be an unnecessary cosmetic procedure;

“Whereas research has shown that declawing a cat significantly reduces a cat’s quality of life and leads to behavioural and health problems;

“Whereas declawing eliminates a cat’s ability to defend itself when in danger; and

“Whereas the process is considered to be inhumane and is banned in more than 40 countries;

“Whereas vets, unfortunately, encourage cat owners to declaw cats for the sake of money without discussing with them the consequences of the procedure, and do not offer them other humane alternatives;

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

“To ban the unnecessary and inhumane procedure known as ‘declawing,’ and/or tendonectomy, in the province of Ontario.”

I agree with this petition. I sign it and give it to page Keana.

HEALTH CARE FUNDING

Mr. Robert Bailey: This is to the Legislative Assembly of Ontario:
“Whereas Ontario’s growing and aging population is putting an increasing strain on our publicly funded health care system; and
“Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and
“Whereas the decisions Ontario makes today will impact patients’ access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;
“We, the undersigned, petition the Legislative Assembly of Ontario as follows:
“The Minister of Health and Long-Term Care return to the table with Ontario’s doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario’s families deserve.”
I agree with this petition and will send it to the table with Taylor.

HEALTH CARE FUNDING
Ms. Cheri DiNovo: Before I read my petition, just a point of order: I just wanted to let folk know that if anybody is here for the parent equality bill, it will be debated at 3:10 p.m. I just wanted to let folk know because I suspect that some folk are here for that. Thank you.
“Petition to the Legislative Assembly of Ontario:
“Whereas Ontario’s growing and aging population is putting an increasing strain on our publicly funded health care system; and
“Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and
“Whereas the decisions Ontario makes today will impact patients’ access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;
“We, the undersigned, petition the Legislative Assembly of Ontario as follows:
“The Minister of Health and Long-Term Care return to the table with Ontario’s doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario’s families deserve.”
I agree with the petition and will send it to the table with Taylor.

DISASTER RELIEF
Mme France Gélinas: I have this petition in support of the people of Gogama. It reads as follows:
“Whereas at 2 a.m., March 7th, 2015, a Canadian National train derailed outside of the village of Gogama;
“Whereas this derailment caused numerous tank cars carrying crude oil to explode, catch fire and spill over one million litres of crude oil into the Makami River;
“Whereas the fire spewed toxic black smoke for over 24 hours, spreading ash and residue throughout the surrounding area;
“Whereas no one has given a clear answer on whether or not the fish caught downriver from the derailment site is safe to eat; and
“Whereas this was CN’s third northern Ontario derailment in the period of “a month;”
They petition the Legislative Assembly of Ontario … to “help the people of Gogama and Mattagami First Nation get fair and just compensation from CN.”
I fully support this petition, affix my name to it and ask Benjamin to bring it to the Clerk.

LUNG HEALTH
Ms. Soo Wong: I have a petition addressed to the Legislative Assembly of Ontario.
“Whereas lung disease affects more than 2.4 million people in the province of Ontario, more than 570,000 of whom are children;
“Of the four chronic diseases responsible for 79% of deaths (cancers, cardiovascular diseases, lung disease and diabetes) lung disease is the only one without a dedicated province-wide strategy;
“In the Ontario Lung Association report, Your Lungs, Your Life, it is estimated that lung disease currently costs the Ontario taxpayers more than $4 billion a year in direct and indirect health care costs, and that this figure is
estimated to rise to more than $80 billion seven short years from now;
“We, the undersigned, petition the Legislative Assembly of Ontario as follows:
“To allow for deputations on MPP Kathryn McGarry’s private member’s bill, Bill 41, Lung Health Act, 2014, which establishes a Lung Health Advisory Council to make recommendations to the Minister of Health and Long-Term Care on lung health issues and requires the minister to develop and implement an Ontario Lung Health Action Plan with respect to research, prevention, diagnosis and treatment of lung disease; and
“Once debated at committee, to expedite Bill 41, Lung Health Act, 2014, through the committee stage and back to the Legislature for third and final reading; and to immediately call for a vote on Bill 41 and to seek royal assent immediately upon its passage.”
I support the petition. I’ll give my petition to page Megan Faith.

HEALTH CARE FUNDING

Ms. Catherine Fife: “Petition to the Legislative Assembly of Ontario:
“Whereas Ontario’s growing and aging population is putting an increasing strain on our publicly funded health care system; and
“Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and
“Whereas the decisions Ontario makes today will impact patients’ access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;
“We, the undersigned, petition the Legislative Assembly of Ontario as follows:
“The Minister of Health and Long-Term Care return to the table with Ontario’s doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario’s families deserve.”
It’s my pleasure to affix my signature to this petition and give it to page Ross.

LUNG HEALTH

Mrs. Kathryn McGarry: I have a petition addressed to the Legislative Assembly of Ontario.
“Whereas lung disease affects more than 2.4 million people in the province of Ontario, more than 570,000 of whom are children;
“Of the four chronic diseases responsible for 79% of deaths (cancers, cardiovascular diseases, lung disease and diabetes), lung disease is the only one without a dedicated province-wide strategy;
“In the Ontario Lung Association report, Your Lungs, Your Life, it is estimated that lung disease currently costs the Ontario taxpayers more than $4 billion a year in direct and indirect health care costs, and that this figure is estimated to rise to more than $80 billion seven short years from now;
“We, the undersigned, petition the Legislative Assembly of Ontario as follows:
“To allow for deputations on MPP Kathryn McGarry’s private member’s bill, Bill 41, Lung Health Act, 2014, which establishes a Lung Health Advisory Council to make recommendations to the Minister of Health and Long-Term Care on lung health issues and requires the minister to develop and implement an Ontario Lung Health Action Plan with respect to research, prevention, diagnosis and treatment of lung disease; and
“Once debated at committee, to expedite” the process through to final reading.
I agree with it, affix my signature and give it to page Rachael to bring down.

HEALTH CARE FUNDING

Mrs. Gila Martow: I have a petition to the Legislative Assembly of Ontario.
“Whereas Ontario’s growing and aging population is putting an increasing strain on our publicly funded health care system; and
“Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and
“Whereas the decisions Ontario makes today will impact patients’ access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;
“We, the undersigned, petition the Legislative Assembly of Ontario as follows:
“The Minister of Health and Long-Term Care return to the table with Ontario’s doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario’s families deserve.”
I’m very proud to sign my name and give this to page Brooke.

HEALTH CARE FUNDING

Mr. Paul Miller: “Petition to the Legislative Assembly of Ontario:
“Whereas Ontario’s growing and aging population is putting an increasing strain on our publicly funded health care system; and
“Whereas since February 2015, the Ontario government has made an almost 7% unilateral cut to physician services expenditures which cover all the care doctors provide to patients; and
“Whereas the decisions Ontario makes today will impact patients’ access to quality care in the years to come and these cuts will threaten access to the quality, patient-focused care Ontarians need and expect;
"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"The Minister of Health and Long-Term Care return to the table with Ontario’s doctors and work together through mediation-arbitration to reach a fair deal that protects the quality, patient-focused care Ontario’s families deserve."

I agree with this, will sign the petition and send it with Megan Faith.

GO TRANSIT

Mrs. Kathryn McGarry: I have a petition addressed to the Legislative Assembly of Ontario.

"Whereas the residents of the municipality of Clarington have been promised that the GO train would be extended to Courtice and Bowmanville;

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

"That the province of Ontario keep its promise to Clarington residents and commit to providing the necessary funding for Metrolinx to complete the extension of the GO train to Courtice and Bowmanville no later than 2018."

I agree with this, affix my name and give it to Prasanna to bring to the table.

The Deputy Speaker (Mr. Bas Balkissoon): The time for petitions has expired.

The Minister of Children and Youth Services.

Hon. Tracy MacCharles: On a point of order, Speaker: I believe we have unanimous consent to revert back to motions.

The Deputy Speaker (Mr. Bas Balkissoon): The minister is requesting unanimous consent to put forward a motion. Agreed? Agreed.

Minister?

Hon. Tracy MacCharles: I move that an humble address be presented to the Lieutenant Governor in Council as follows:

"We, Her Majesty’s most dutiful and loyal subjects, the Legislative Assembly of the province of Ontario, now assembled, request the appointment of Cathryn Motherwell as Acting Integrity Commissioner for the province of Ontario as provided in section 23(6) of the Members’ Integrity Act, 1994, chapter 38, to hold office under the terms and conditions of the said act, commencing January 1, 2016, until January 31, 2016."

And that the address be engrossed and presented to the Lieutenant Governor in Council by the Speaker.

The Deputy Speaker (Mr. Bas Balkissoon): Minister MacCharles moves that an humble address be presented to the Lieutenant Governor in Council as follows:

"We, Her Majesty’s most dutiful and loyal subjects, the Legislative Assembly of the province of Ontario, now assembled, request the appointment of Cathryn Motherwell as Acting Integrity Commissioner for the province of Ontario as provided in section 23(6) of the Members’ Integrity Act, 1994, chapter 38, to hold office under the terms and conditions of the said act, commencing January 1, 2016, until January 31, 2016."

And that the address be engrossed and presented to the Lieutenant Governor in Council by the Speaker.

Shall the motion carry? I declare the motion carried. Motion agreed to.

APPOINTMENT OF INTEGRITY COMMISSIONER

Hon. Tracy MacCharles: Speaker, I believe we also have unanimous consent to put forward a motion without notice regarding the appointment of the Integrity Commissioner.

The Deputy Speaker (Mr. Bas Balkissoon): The minister is requesting unanimous consent to put forward a motion. Agreed? Agreed.

Minister?

Hon. Tracy MacCharles: I move that an humble address be presented to the Lieutenant Governor in Council as follows:

"We, Her Majesty’s most dutiful and loyal subjects, the Legislative Assembly of the province of Ontario, now assembled, request the appointment of the Honourable David Wake as the Integrity Commissioner for a term of five years, commencing on February 1, 2016, as provided in section 23 of the Members’ Integrity Act, 1994, chapter 38."

And that the address be engrossed and presented to the Lieutenant Governor in Council by the Speaker.

I will provide this to page Rachael.

The Deputy Speaker (Mr. Bas Balkissoon): Minister MacCharles moves that an humble—

Interjection: Dispense.

The Deputy Speaker (Mr. Bas Balkissoon): Dispense? Agreed? Dispensed.

Shall the motion carry? Carried. Motion agreed to.

WEARING OF WRISTBANDS

The Deputy Speaker (Mr. Bas Balkissoon): The member for Ottawa South on a point of order.

Mr. John Fraser: Point of order: I would like to ask for unanimous consent for members to be able to wear...
wristbands in this afternoon’s debate, in support of Rowan’s Law.

The Deputy Speaker (Mr. Bas Balkissoon): The member has requested unanimous consent to wear a wristband. Do we agree? Agreed.

PRIVATE MEMBERS’ PUBLIC BUSINESS

PROTECTION OF VULNERABLE SENIORS IN THE COMMUNITY ACT, 2015

LOI DE 2015 SUR LA PROTECTION DES PERSONNES ÂGÉES VULNÉRABLES DANS LA COLLECTIVITÉ

Ms. Wong moved second reading of the following bill:


The Deputy Speaker (Mr. Bas Balkissoon): Pursuant to standing order 98, the member has 12 minutes for her presentation.

Ms. Soo Wong: It is an honour to rise this afternoon to speak on second reading of my private member’s bill, Bill 148, An Act to amend the Substitute Decisions Act, 1992 and the Regulated Health Professions Act, 1991.

If passed, the Substitute Decisions Act will be amended to require regulated health professionals to report any reasonable suspicion that a senior is being abused or neglected to the public guardian and trustee office. This is office is then required to investigate in order to determine whether an application for a temporary guardian is warranted.

This requirement applies even if the information is confidential or privileged, unless the information is subjected to solicitor-client privilege. No proceeding may commence against a regulated health professional for making a report in good faith. Coercion, intimidation, dismissal or penalization of regulated health professionals who make a report is prohibited. A health professional who contravenes this act is guilty of an offence and liable, on conviction, to a fine of not more than $25,000 or imprisonment for not more than two years, or both.

If passed, the Regulated Health Professions Act, 1991, will be amended to make it an act of professional misconduct for a regulated health professional who fails to report a reasonable suspicion that a senior is being abused or neglected, as required by the Substitute Decisions Act, 1992.

To begin the discussion on Bill 148, I will put the issue in context. In 2015, for the first time, there are more seniors 65 and over than children under the age of 15, both in Ontario and across Canada. In Ontario, there are currently more than two million seniors aged 65 and over—approximately 15% of the population. This number is expected to double in the next 25 years. The majority of the seniors, like today, will live in the community. Current Ontario legislations protect seniors living in either long-term-care facilities or retirement homes. Both incorporate the residents’ bill of rights and mandate abuse prevention, investigation and reporting.

Bill 148, if passed, will ensure that all seniors living in the community have protection and support by requiring regulated health professionals to report elder abuse or neglect. In the proposed Bill 148, abuse is defined as physical, sexual, emotional, verbal, financial or systemic abuse of a senior. Neglect is defined as failure “to provide care, assistance, guidance or attention to the senior which causes or is reasonably likely to cause serious physical or psychological harm to the senior, or substantial damage to or substantial loss of a significant part of the senior’s property, within a short period of time, unless the failure to provide care, assistance, guidance or attention is medically advisable.”

According to Elder Abuse Ontario, between 40,000 and 200,000 seniors living in Ontario have experienced or are experiencing elder abuse. Elder abuse reoccurs in up to 80% of the cases. Numerous studies showed that abuse against seniors takes many forms and is often perpetrated by family members. Approximately 43% of perpetrators were their adult child. The second most likely family member identified as a perpetrator of family violence against seniors was the individual’s spouse.

Financial and emotional abuse are the most frequently reported elder abuse cases. According to the government of Canada’s justice department, many seniors may not report to the police but may disclose to health professionals, community groups and financial institutions. PC Patricia Fleischmann, of Toronto police, told me that elder abuse is one of the most underreported hidden crimes in the city of Toronto. Victims are often reluctant to report elder abuse due to fear of repercussions; a feeling of shame or guilt associated with reporting the abuser, who may be a relative; financial or emotional dependence on the abuser; fear of the loss of contact with the abuser; and fear or reluctance to relocate to an unfamiliar environment.

Victims may normalize the abusive behaviour or mistakenly believe that they have done something wrong to cause the abuse. They may lack the cognitive ability to report or may not know where to seek assistance. Language barrier, immigration issues and past neglect or abuse may contribute to the underreporting.

Elder abuse cases vary greatly in severity and, in extreme cases, have gained national attention; for example, a 2011 case where an elderly Scarborough woman who suffered from dementia was found in critical condition after her son and daughter-in-law moved her to live in an uninsulated garage for the winter. When the police responded to this call, they found the elderly victim unresponsive and unconscious.
Then there was a case in 2014 of an Orillia woman who was confined in a dark room, dehydrated and suffering from a broken hip. This victim, a retired nurse, was abused and neglected by her daughter and son-in-law. She suffered from significant brain and organ damage from the lack of food and water. She died shortly after being found.

In 2014, Toronto police charged a couple for elder abuse. It was the victim’s pharmacist who reported the potential abuse to the police which led to the investigation and subsequent charges against the couple.

These tragic cases clearly demonstrate a need for this Legislature to address elder abuse in the community. The Ontario government has taken a number of steps to keep seniors healthy, active, safe and independent in their community. In 2013, the government launched their action plan for seniors. Currently, there is provincial e-learning training on elder abuse mandated for uniformed Ontario Provincial Police members. The seniors’ secretariat offers a number of initiatives, like the efficiency and effectiveness in early identification, their round table on the elder abuse strategy to improve engagement. Recently, the seniors’ secretariat completed greater social inclusion, volunteerism and community Community Planning Grant program, encouraging people to interact with the elderly and dependent adults. This same bodies.

I consulted with many seniors and agencies in my riding of Scarborough–Agincourt, Mr. Speaker, and everyone I’ve spoken to supports my private members’ bill mandating our regulated health professionals to report elder abuse to the public guardian and trustee’s office. They include the residents in Villa Elegance, Tam O’Shanter seniors facility—I know some of the residents are here—and Vintage Garden. May Wong, the president of the board of Villa Elegance stated that she is glad to see my initiative on elder abuse as she is a strong advocate for the protection of frail and vulnerable seniors.

In 2002, Carefirst completed a report on elder abuse recommending that, “Health professionals should have the obligation to report any suspected elder abuse, in order to have proper intervention for victims of abuse.” A recent poll commissioned by the Canadian Association of Retired Persons found that 95% of their members agree that the duty to report is necessary for professionals who interact with the elderly and dependent adults. This same poll also found that 50% of CARP members believe that duty to report should be enshrined in law and 35% of them believe it should be mandated by professional bodies.

Mr. Speaker, other organizations like the RNAO, the Registered Nurses’ Association of Ontario, also advocated for a no-blame policy for people who report abuse or neglect. I also consulted with the Ontario Information and Privacy Commissioner, Brian Beamish. He affirmed that there’s a positive obligation to report by regulated health professionals, as proposed in Bill 148. This bill does not conflict with the current privacy legislation.

My colleague Betty Wu-Lawrence, who was here today, the president of the Canadian nurses association of Ontario stated that the proposed Bill 148 will enable health professionals to be the voice for the voiceless, especially those seniors who experience abuse but are unable to report because of a language barrier. Other colleagues, like Dr. Larissa Tam, an obstetrician and gynecologist at Scarborough Hospital, support Bill 148. She stated that “It enables regulated health professionals to report with reasonable suspicion that elder abuse or neglect could be happening in our community and is key to improving our society and upholding our values.” Diane Duncan, the executive director of St. Paul’s L’Amoreaux Centre stated that mandatory reporting by regulated health professionals is a necessary step to improving outcomes for those who are victims of abuse or at risk.

Mr. Speaker, before I conclude my remarks, I want to recognize a number of individuals and groups. First, I want to pay tribute to all the seniors who have spoken to me about this issue, some of whom are here today. I want to thank you for your contribution. This bill is about you and it’s for you.

The proposed Bill 148 is about protecting the most vulnerable seniors in our community. Elder abuse is a complex, multi-faceted societal issue that deserves our attention in this Legislature.

The elder abuse issue does not only affect my riding of Scarborough–Agincourt, it actually affects every riding in this province. I believe, as elected members of this Legislature, we have a moral responsibility to protect the most vulnerable populations like children, women, the disabled and seniors in our communities.

Diane Duncan of St. Paul’s L’Amoreaux Centre also said that “if we put as much effort into the prevention of elder abuse as we do child protection, we will give older adults hope that the abuse will end for them one day.” I believe the proposed Bill 148 will make a difference in the protection of the seniors living in our community. I look forward to the debate this afternoon. Thank you for this opportunity.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Randy Pettapiece: I’ll be sharing my time with the member from Bruce–Grey–Owen Sound.

I am pleased to rise today to join in the debate on Bill 148, Protection of Vulnerable Seniors in the Community...
Act, introduced by the member from Scarborough–Agincourt.

I have the privilege of representing seniors’ affairs on behalf of our caucus. I spend a lot of time meeting with seniors and associations that represent seniors’ issues, both in Perth–Wellington and here at Queen’s Park. I believe that Bill 148 is a step in the right direction when it comes to protecting seniors in Ontario. It also helps to raise awareness of elder abuse and to spur discussion about preventative measures against any type of abuse.

At its core, the bill will require regulated health professionals to report any reasonable suspicion that a senior is being abused or neglected. That means that professionals including, but not limited to, doctors, nurses, dentists, physiotherapists and chiropractors will have a duty to report any suspicions of abuse or neglect against a senior citizen.

Currently, seniors residing in long-term-care homes and retirement homes already have this type of protection through existing legislation. I support this bill’s intent to expand that protection to seniors living in their own homes or in a living environment outside of a regulated facility.

Before getting too far into the specifics of the bill, I must state that I know most health care professionals already do report any suspected abuse, and that they take this responsibility seriously. I thank all health care professionals for their vigilance in keeping us safe and healthy.

Under the requirements of this bill, if a certain health care provider did suspect a senior was suffering abuse or neglect, he or she would report this to a law enforcement officer, the Public Guardian and Trustee, or another prescribed person. It would then be the responsibility of the Office of the public guardian and trustee to investigate all reports of suspected abuse to determine whether or not an application for a temporary guardian is required.

No proceeding could be commenced against a regulated health care professional for making a report in good faith. Moreover, it will become a professional misconduct for a regulated health professional to fail to report a reasonable suspicion of abuse.

We know that our province’s demographics are changing. There are currently two million senior citizens living in Ontario. By 2036, that number is expected to double. It’s important that we have the policies in place to ensure that seniors have access to the health care, residential supports and transportation that they need.

We on this side of the House have stood up for seniors when the government has cut important programs. For example, two years ago the Liberals cut physiotherapy services for seniors by $50 million. As a result of those cuts, physiotherapy services for many seniors were eliminated. In many cases, individuals who still qualify for physiotherapy services must travel to off-site community clinics; that’s not an easy task for seniors who no longer drive, especially in our small and rural communities. We called on the government to reverse this decision and brought the concerns of our constituents to the Legislature.

When it comes to the needs of our province’s seniors, we in the PC caucus stand up for what’s right. That’s why I’m supporting this bill: because any type of abuse or neglect is unacceptable.

I understand that, based on the reported data, many incidents of abuse against seniors are committed by the individual’s adult children or spouse. There’s no doubt that many would find it difficult and emotional to report abuse by a loved one. That’s why I believe it’s important that those responsible for overseeing our health and well-being have a duty to report suspected abuse.

Under no circumstances are abuse and neglect acceptable. If registered health care professionals can protect someone from any further victimization, they should absolutely do so, without fear of professional repercussions.

I am pleased to support this bill to ensure that seniors feel free and feel safe in their communities. If anyone listening to today’s debate is experiencing any form of abuse or is concerned that someone they know is being victimized, please report it. Contact your local police; they are there to help.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Bill Walker: It’s a pleasure to speak today on Bill 148, the Protection of Vulnerable Seniors in the Community Act. I’d like to thank my colleague from Perth–Wellington, our seniors critic, for all of his work on this file.

Ontario has three pieces of legislation that include reporting obligations for senior abuse. They are the Long-Term Care Homes Act and the Retirement Homes Act, both of which have mandatory reporting in place, and the Substitute Decisions Act.

The bill we’re debating today, Bill 148, amends the Substitute Decisions Act and the Regulated Health Professions Act and, if passed, would compel regulated health professionals to report any sign of elder abuse or neglect. It also sets penalties for failure to report.

It’s estimated that 10% of the seniors population, and as high as 30%, have been subjected to some form of abuse. Neglect can come in many forms, from withholding care, denying access to necessary services such as home care, improper use of medication, over/undermedicating, to not providing food, proper clothing or hygiene, and even abandonment.

Mr. Speaker, I’m saddened to tell you a story. Although it didn’t happen to a constituent in my riding, there is a family from my riding involved. This 89-year-old, Flora, was brought back from the United States. She was dropped off in Canada—actually, here in Toronto—and abandoned by her family. It’s a horrendous situation. I can’t even comprehend.

It was very complicated because she had been out of the country for some time. There were issues with immigration, so it had to become a federal issue as well.
as provincial. Because she didn’t have that citizenship, health benefits were in jeopardy.

I do have to commend Health Minister Hoskins’s office for their promptness in ensuring that Flora got medical attention and the care she needed in a very quick time frame, as they went through to resolve this whole dispute and get it all worked out. I do want to applaud the minister for doing that.

According to Stats Canada, what happened to Flora happens to about half of senior victims, where the one who abused or neglected them was their own grown child. It’s hard to fathom, but that’s what the stats are saying. Spouses are the second most likely perpetrators of family violence against seniors—again, almost incomprehensible, but that’s what the stats are telling us.

Seniors are reluctant to report abuse, for fear of retaliation or because of their dependence on the abuser for food and shelter. It’s a sad situation where someone won’t step up and voice their concern because they’re actually fearful of more of the same thing they would be reporting. They’re also reluctant to report on their own son or daughter, the children they raised, because there is a sense of shame and stigma.

In other cases, they don’t report because they are unfamiliar with their rights in the justice system and with the agencies and support services in their community. Sometimes it stems from the fact that some seniors are socially isolated and are not aware of programs such as Elder Abuse Ontario, the Victim Support Line, and/or the Seniors Safety Line.

Bill 148—and I give my colleague Ms. Wong credit—is a good first step. However, mandatory reporting is still no guarantee that the abuse will be confirmed or stopped. That is why it is so important for the government to invest in the needed agencies and support services in communities so that we can identify and respond to elder abuse appropriately.

When it comes to our senior citizens’ health and well-being, I believe this government can do better. My colleague from Perth–Wellington talked about the physiotherapy cuts. As the critic for long-term care, that’s certainly something that I’m hearing a lot about in the province: the concern of seniors not getting that care. It may not be abuse or neglect, but it certainly is the case that we can do a lot better in that area.

There are 25,000 seniors on a wait-list for access to a nursing home bed in Ontario today. The associate minister knows I’m watching this file like a hawk. I’m holding her to account for the bed promises and challenging her to release the schedule of all bed developments in Ontario, and I will continue to do that, because that’s my job. I need to make sure that we have the services and programs, and I hope the associate minister will actually regard me, in doing that, which is actually a support for her, because we do need to do more for those seniors we’ve made commitments to.

Sadly, though, to date, that schedule—much like the promised new nursing beds—remains non-existent. So I will continue—and the minister is here in the House today—to help her in her cause, to get more of that budget for long-term care.

The last report I read by the United Senior Citizens of Ontario talked about the urgency of building more nursing beds and facilities. The same has been recommended by the Ontario Association of Non-Profit Homes and Services for Seniors, the Ontario Long-Term Care Association, the Ontario Long-Term Care Physicians, the Ontario Association of Residents’ Councils and Family Councils Ontario. The pressure is on to deliver the promised beds, especially in light of the projection that Ontario’s long-term care wait-list will double to 50,000 seniors in just seven years.

The government can’t afford not to do anything on long-term care. Consider again the population statistics in my riding of Bruce–Grey–Owen Sound. The boomer generation comprises a significant portion of Bruce and Grey counties. Our population of those 80 years and older has jumped by nearly 20% over the last six years. The senior population is expected to reach 46.5% in the next two decades, and right in my backyard, we have a higher than the provincial average number of seniors. This is a very, very particularly concerning issue for me and one part of my critic role that I take very seriously, obviously.

Fortunately, in my communities, people do rally behind senior citizens. We have a number of clubs and groups. The list is too long for me to get through them all, but I believe there are 32 that I’ve been able to take note of. I’m just going to throw out a couple: the Derby Pioneers Club, the Lion’s Head Head Friendship Club, the Hanover Senior Citizens Friendship Club, the Lads and Lassies of Lindsay, the Maxwell Young at Hearts, the Sauble Sandpipers Club, the McQuay Tannery seniors’ resource centre in Owen Sound and the Silver Cs, just to name a few, as I say. It’s great to see those clubs providing opportunities for those seniors to get together and help. That social network, if nothing else, allows them to stay active in their community.

We have a number of programs and services that provide everything from helping seniors with their groceries and meal preparation to gardening or snow removal. But as always, we can do better. I think we should be empowering seniors through information.

I hope the government will do that with Bill 148. There has to be a public education component to raise the awareness of elder abuse and the protection of seniors. Seniors’ advocates have been calling for years for mandatory reporting of suspected elder abuse to authorities. Under Bill 148, that authority would be the police, who would then report immediately to the public guardian and trustee.

I think it’s also important that the member from Scarborough–Agincourt included whistle-blowing protection to protect those who will report abuse in Bill 148. I commend her for that. It says that a proceeding may not be commenced against a regulated health professional for having made a report in good faith. It’s the right thing to do; it’s the right thing for all people to do. If you see
Mr. Speaker, I support the proposed changes and hope to see a speedy passage of Bill 148. I commend my colleague Ms. Wong again.

The Deputy Speaker (Mr. Bas Balkissoon): Just a reminder to the member: We refer to members by riding.

Mr. Bill Walker: My apologies, Mr. Speaker: Scarborough–Agincourt.

The Deputy Speaker (Mr. Bas Balkissoon): Thank you.

Further debate?

Ms. Teresa J. Armstrong: I’m always proud to rise in this Legislature on behalf of my constituents in London–Fanshawe. Today, I rise to speak to Bill 148, the Protection of Vulnerable Seniors in the Community Act.

As the NDP critic for seniors, I am proud to contribute to the debate on this very important issue. As the critic, I have had the opportunity to speak with seniors from across the province, including Oshawa, Toronto and back in my riding of London–Fanshawe.

Seniors have many issues that they must face on a daily basis, but one of the largest issues is abuse or neglect, whether it’s in the community or long-term-care facilities. I am happy that this bill was introduced by the member from Scarborough–Agincourt and I applaud her for her work on the file.

As we know, this bill amends the Substitute Decisions Act and the Regulated Health Professions Act to mandate that regulated health professionals who have reasonable grounds to suspect a senior living in the community is being abused or neglected must report that suspicion to the police or the public guardian and trustee. Furthermore, health professionals who report such a suspicion in good faith are protected from intimidation, dismissal or reprisal.

Senior abuse is a major problem here in Ontario and across the country. According to the Canadian Nurses Association, nearly 8,000 incidents of elder abuse were reported across Canada in 2009. That is 8,000 too many.

I am happy that this bill extends mandatory reporting for abuse and neglect for seniors living in the community. It is important to note that systemic abuse is included in this legislation, whereas it is absent from the definition of abuse in both the Long-Term Care Homes Act and the Retirement Homes Act.

This is a good piece of legislation, and I intend to vote for it, yet I cannot stand here without pointing out that there continue to be issues surrounding abuse and neglect in long-term-care facilities. Just last week, the Auditor General found that there is a growing backlog of critical-incident and complaints inspections in long-term-care homes. The backlog doubled in just a year and a half, from 1,300 to 2,800. According to the Auditor General, such delays can “place residents at risk.”

Furthermore, and shockingly, the Auditor General also found “that delays by the ministry in conducting complaints and critical-incident inspections and ensuring that homes correct deficiencies identified place residents at risk. We found that the ministry often did not take timely action to ensure residents were safe and their rights were protected.”

This government needs to take responsibility for its inaction on abuse and neglect of seniors in long-term care. Residents of my riding have called and emailed my office with stories of their families and loved ones facing mistreatment in long-term care.

I personally met with Carol Cuthbert about her 92-year-old mother, who was residing in Mount Hope at St. Joe’s. She was attacked by a fellow resident and brutally beaten. In the past, her clothes had gone missing, and she is gravely concerned about security and care. She says she reported the abuse and there was no action.

Gloria Thompson is another resident in my riding, whom I met, whose mother was abused in long-term care but, due to the lack of availability in other facilities, her mother had nowhere to go.

This is a systemic problem, Speaker. In the news, we often hear about abuse and neglect in long-term care. Sadly, it’s often women who are victims of this abuse. In fact, the federal committee on the status of women found that women are generally more likely to be victimized than men. This includes impacts of financial abuse, because women already tend to have fewer financial resources and a greater proportion of senior women live in poverty.

Our seniors deserve better. This bill is a step in the right direction, but we need better protection for our elderly. We need to ensure that those who are most vulnerable in society are being looked after.

I want to finish today by saying that this government really needs to take action. Last week, I asked the government to implement the coroner’s recommendations to improve care for all Ontarians in long-term-care residences. We know that the government has failed to provide the behavioural supports that seniors with dementia need. It’s as a result of the findings in the Auditor General’s report that I make that statement.

When the rights of patients are violated, too many families are left in the dark, as we’ve seen, time and time again. Each and every senior deserves to live in safety and dignity. While I commend the member for introducing this bill and doing the right thing on abuse in the community, I hope that this Liberal government will step up and take real action when it comes to elder abuse in our society.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mrs. Lisa Gretzky: It’s my pleasure to rise today, on behalf of my constituents in Windsor West, to speak to this important legislation, Bill 148. I’d like to thank my
colleague opposite, the member for Scarborough–Agincourt, for bringing this issue forward. I would also like to thank the Ontario NDP critic for seniors, the member for London–Fanshawe, for all the work she does on this file and for her strong advocacy for seniors’ issues in Ontario.

Bill 148, the Protection of Vulnerable Seniors in the Community Act, 2015, is an important and timely piece of legislation, and I am proud to offer my support for this bill.

First and foremost, this bill will raise the awareness of elder abuse and the protection of seniors, which is particularly important as our senior demographic continues to grow. According to 2011 census data, 15.7% of the population of the city of Windsor was over the age of 65, an increase of 7% from 2009. There are currently two million seniors aged 65 and over, or 14.6% of the population, who reside in Ontario. From 2009 to 2011, people over the age of 65 living in Windsor increased by 9%, to a total of 15.7% of our population in 2011. This amounts to approximately 30,000 residents.

Seniors are a growing and incredibly important demographic that contributes so much to my community. That said, the level of senior abuse in this province is nothing short of alarming. Of the estimated two million seniors living in Ontario, between 40,000 and 200,000 seniors have experienced or are experiencing elder abuse. Clearly, more needs to be done to help one of our growing and most vulnerable populations.

If passed, this legislation would amend the Substitute Decisions Act and the Regulated Health Professions Act to mandate that regulated health professionals who have reasonable grounds to suspect that a senior living in the community is being abused or neglected must report that suspicion to the police or the public guardian and trustee. Health professionals who report such a suspicion in good faith are protected from intimidation, dismissal or reprisal. That’s a very important part of the bill. We need to make sure that those people who we expect to advocate for the seniors who are being abused are protected from reprisal for coming forward.

It would be an act of professional misconduct for a regulated health professional to fail to report a reasonable suspicion that a senior is being abused or neglected.

We need to act now to prevent senior abuse. It’s clear that this government has failed to make this a priority over the years. Just last week, the Auditor General found alarming delays for home care assessments. The Auditor General indicated that there are no provincial minimum service levels required for personal support services, and that supports for caregivers are limited and inconsistent across Ontario. I would like to read a quote from the Auditor General’s report that highlights these issues:

“Our audit” of long-term care “found that delays by the ministry in conducting complaints and critical-incident inspections and ensuring that homes correct deficiencies identified place residents at risk. We found that the ministry often did not take timely action to ensure residents were safe and their rights were protected.”

Health Quality Ontario reports in their annual report 2015 that distress is growing amongst informal caregivers who do not have enough supports.

Too many people in southwestern Ontario are experiencing issues with seniors care. Last year, our local CCAC was reassessing home care recipients at an alarming rate. Seniors in my riding were asked to administer their partners’ intravenous medication and were put in other uncomfortable situations.

My bill dealing with these issues has yet to be called to committee, and I can only hope that this bill does not suffer the same delays.

In southwestern Ontario, the Leamington Court retirement home will be closing 24 beds. Residents like Evelyn Nevin and her husband will be displaced and moved to an alternate location. The reason they went to Leamington Court in the first place was due to the shocking wait time at long-term-care homes in the city of Windsor. We need action to reduce wait times for long-term-care homes, but the Auditor General’s report makes it clear that this government is failing Ontarians.

It’s really important that legislation that protects the most vulnerable and those who are put out to advocate on their behalf—that they are protected, that they are taken care of. We all have aging parents who dedicated their lives to taking care of us. Now, as they age, it’s our job to take care of them and make sure that they are receiving the best care possible and that when an issue does arise, the health care professionals that would be able to assess the situation and report it are protected. We often find, in the education system, that the education workers are expected to report suspected abuse of the children in their care, but that if they do come forward and bring that issue forward and it is found that it’s not exactly accurate, there are often reprisals for teachers for showing that they care and that they are concerned. So we need to make sure that the people who are charged with the care of our seniors have the means to come forward without reprisal and report suspected abuse. We need to make sure our seniors are being very well taken care of.

I notice that my time is running short, so I’d like to thank you for allowing me time to speak to the bill today. I fully support the bill. I hope that it doesn’t get tied up in committee, and I hope that we can see some changes when it comes to taking care of our senior population.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. John Fraser: Mr. Speaker, I’ll be sharing my time with the members from Davenport and Etobicoke North.

I’m very pleased today to rise to speak in support of Bill 148. I’m very pleased to hear all the support there is across the House. I want to say congratulations to my seatmate, the member from Scarborough–Agincourt, for putting forward this legislation. As many of you may know, she was a public health nurse—a very honourable profession. My mom was a public health nurse early on in my life.

Interjection.
Mr. John Fraser: I’m getting heckled already.

She was a VON. A public health nurse is a really difficult, challenging job. The member from Scarborough–Agincourt really and truly cares about those people who are most vulnerable.

As you know, Bill 148 would require health professionals caring for seniors who suspect abuse or neglect to report to the appropriate authorities: the public guardian and trustee, a police officer or a prescribed person.

Protecting our most vulnerable population at work and at home is a priority for all of us here in government. For instance, we have similar safeguards around child protection: making sure that young Ontarians are growing up in safe and happy homes. It’s important that we extend these protections to other vulnerable populations, like seniors.

If you take a look at what being a senior is like, in many cases, as you get older, you tend to get a little bit weaker. Your income gets a little bit more crunched. Your friends: Not all of them are always around. Your family is a little bit farther away from you. You become a little bit more isolated. Whether you are a senior or not, whether you are old or not, being in that kind of circumstance makes you very vulnerable. As many of the members said, it’s often vulnerable people who are close to you.

Health care professionals are ideally situated to be able to spot suspected abuse of people. I think it’s prudent that we extend the measures that are in this legislation. I also notice as well that she has extended protection for good-faith reporting. That’s very important. One of the things in reporting things that you suspect is, you’re worried and you say, “Do I know what I’m seeing?”

I know of a circumstance like that—not with a senior but with a very vulnerable, developmentally exceptional woman in our community who has just recently passed away. She was living in a rooming house, and a number of us suspected that something just wasn’t quite right, so we reported that. As a consequence, she was moved out to a residence that was more appropriate. She was being taken advantage of financially and physically, and it was a very sad situation. She was actually a volunteer in our office. I spoke about her a couple of weeks ago. But it took some time to actually make that report. It’s important that we extend those protections to people who make the decision to say, “I think something is wrong, and I want to let somebody know.”

I want to congratulate the member on her bill, and I look forward to it passing today. Thanks for all the support that I’ve heard throughout the Legislature today.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate.

Mrs. Cristina Martins: I rise today to address Bill 148, the Protection of Vulnerable Seniors in the Community Act.

In my riding of Davenport, seniors come into my constituency office every day with questions about what our government has been doing to make Ontario a better place to live for seniors. Davenport is home to over nine seniors’ residences. Seniors represent a large portion of the population in my riding, and it keeps growing every year. There are, as of this year, two million seniors aged 65 and over, or 14.6% of the population, who reside in Ontario.

I am so lucky to have numerous, engaged seniors and organizations like the Davenport-Perth community health centre, Abrigo and the West Neighbourhood House that provide free, multicultural programs in various languages that promote better health, wellness, and social and recreational activities for seniors. These programs, with support from our government, provide exercise, guest speakers, movies, arts and crafts, informal English as a second language, dancing, computer lessons, and much, much more.

However, there is an aspect of caring for our seniors that is more important than any language, exercise or computer class: Caring also includes personal safety and protection from abuse. As you know, Mr. Speaker, our government is committed to protecting seniors in the province and it is our duty as a government to ensure the personal safety of those who are the most vulnerable to elder abuse. Sadly, recent studies show that 2% to 10% of seniors are abused. This means that there are between 40,000 and 200,000 seniors in Ontario who have experienced or are currently experiencing abuse.

Elder abuse also appears in family life, with about four out of 10, or 43%, of senior victims of police-reported family violence indicating that the accused was their own grown child. Spouses are the second most likely family members to be identified in family violence against seniors.

It is our duty as the Ontario government to protect those who are most at harm. Above all else, elder care should be about protecting those who are most vulnerable. If passed, Bill 148, the Protection of Vulnerable Seniors in the Community Act, will amend the Substitute Decisions Act, 1992, and the Regulated Health Professions Act, 1991.

The Substitute Decisions Act, 1992, will be amended to require regulated health professionals to report any reasonable suspicion that a senior is being abused or neglected. The public guardian and trustee is required to investigate the report to determine whether an application for a temporary guardianship is required. This requirement to report suspected abuse or neglect shall apply even if the information that is required to be disclosed is confidential or privileged, unless the information is subject to solicitor-client privilege.

As you know, Mr. Speaker, Ontario is proud to have already put in place regulations that protect residents of retirement homes. This bill will not apply to the senior if the senior is a resident of a retirement home as defined in the Retirement Homes Act, 2010, or if they are residents of a long-term-care home as defined in the Long-Term Care Homes Act, 2007.
One aspect that hinders the reporting of elder abuse is the intimidation, dismissal or penalization of regulated health professionals who make reporting abuse prohibitive. To stop this common problem, the changes will ensure that no proceeding may be commenced against a regulated health professional for making a report in good faith. In some cases, a senior’s relationship with regulated health professionals may be the most active relationship in their lives. Thus, regulated health professionals, who may be the lone point of contact for seniors, will now have the ability to report suspected neglect or abuse.

As I stated earlier, strengthening protections for seniors while changing the attitudes and thinking around the reporting of elder abuse is a part of this government’s duty to protect all Ontarians. Moreover, this bill will raise awareness of elder abuse and the protections for seniors, especially as the seniors demographic continues to grow.

Once passed, I will be pleased to bring Bill 148, the Protection of Vulnerable Seniors in the Community Act, to Davenport as it will protect a growing group in my community. It is truly our duty to protect.

The Deputy Speaker (Mr. Bas Balkissoon): The member for Etobicoke North.

Mr. Shafiq Qaadri: Thank you to my colleagues opposite for the recognition, not only of this bill brought by my honourable colleague from Scarborough–Agincourt, Soo Wong, a nurse—but as you know, I’m pleased to follow as one of the regulated health professionals who will be inspired, implicated, asked, cajoled and welcomed to follow along with this whole idea on elder abuse.

I think there are a number of positive benefits, ramifications and effects of this particular bill. I would, Speaker, with your permission, like to actually inform my colleagues who are regulated health professionals and, by extension, the many, many touch points that we may have, if you might, almost acting as sentinels, almost acting as our, shall we say, “spies,” or at least our surveillance opportunities for this very, very common problem.

They include audiologists, language pathologists, chiropractors, dental hygienists, dental technologists, dentists, denturists, dietitians, kinesiologists, massage therapists, medical laboratory technologists, medical radiation technologists, of course physicians, midwives, nurses, occupational therapists, opticians, optometrists, pharmacists, physiotherapists, psychologists, respiratory therapists, speech-language pathologists and even traditional Chinese medicine practitioners.

That is quite a cohort of eyes and feeling minds that, hopefully, if we work in unison, can bring forward and really act on the best parts of Bill 148, the Protection of Vulnerable Seniors in the Community Act.

I have to say as well that as a practising physician, I see many, many different forms of neglect, senior abuse, elder abuse, whatever terms you want to use. It can manifest in many different ways, whether it’s physical, emotional, psychological, medical, financial—even, if I might say, absence of attention, or attentional. As an example, there are many seniors who have able-bodied members of their own family who will neither visit enough nor care enough nor renew prescriptions enough nor basically attend to their simple human need for attention—forget about this idea of black eyes or hip fractures etc.

All in all, I think this is an important bill brought by my honourable nursing colleague Soo Wong, MPP for Scarborough–Agincourt, because it will help to publicize, dramatize and inspire the many, many regulated health professionals to have an index of suspicion and awareness for this important and unfortunate ever-present idea of elder abuse.

The Deputy Speaker (Mr. Bas Balkissoon): I now return to the member for Scarborough–Agincourt. You have two minutes for your response.

Ms. Soo Wong: I want to thank the members from Perth–Wellington, Bruce–Grey–Owen Sound, London–Fanshawe, Windsor West, Ottawa South, Davenport and Etobicoke North for your remarks and comments related to my bill, Bill 148. I heard overwhelmingly their support for my proposed legislation.

For my last two minutes, I want to clarify the comments made from the opposition party about the changes and amendments to physiotherapists. The information is not accurate, folks; it’s not accurate. We actually expanded the funding for physiotherapy. Moreover, it’s not just a GTA expansion; it’s across the province. Make sure you have the facts when you speak about this bill.

The other piece here is this legislation is about protecting seniors living in their community, not in long-term care and not in retirement homes, because we already have legislation right now to protect those seniors living in retirement homes and nursing homes.

Mr. Speaker, I also want to pay tribute to those who came before us: my good friend and good colleague the former member from Etobicoke Centre, Donna Cansfield; as well as the former minister Rick Bartolucci, who in 2003 brought in a private member’s bill, Bill 30, dealing with the protection of adults/seniors. If that bill would have passed in 2003, we wouldn’t be having this conversation right now.

In my last 30 seconds, I want to thank everybody who I’ve spoken to, but more importantly, the staff here at Queen’s Park: Eric Chamney, legislative counsel—I think there were 12 drafts of my bill; thank you so much, Eric, and in between, there was a baby born—as well as my staff from both the constituency office and here in Queen’s Park.

I want to encourage all the members to support Bill 148. At the end of the day, we have a moral duty in this House to protect everybody, especially those who are the most vulnerable. I want to make sure that it goes to committee for more public hearings.

The Deputy Speaker (Mr. Bas Balkissoon): Thank you all very much. We’ll take the vote on this item at the end of private members’ business.
Ms. MacLeod moved second reading of the following bill: Bill 149, An Act to establish an advisory committee to make recommendations on the jury recommendations made in the inquest into the death of Rowan Stringer / Projet de loi 149, Loi créant un comité consultatif chargé d'examiner les recommandations formulées par le jury à la suite de l'enquête sur le décès de Rowan Stringer.

The Deputy Speaker (Mr. Bas Balkissoon): Pursuant to standing order 98, the member has 12 minutes for her presentation.

Ms. Lisa MacLeod: I will be sharing my time with the member from Ottawa South.

“Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.” Margaret Mead, the late anthropologist, once famously said that, and I must admit that it has become a go-to quote of mine over the past decade when speaking with volunteers. It’s simple yet profound, lofty but true.

I couldn’t help but think of how reflective those words are of the small group of thoughtful and committed citizens from Nepean–Carleton who brought Rowan’s story to multiple people, but the most personal to me was my 10-year-old daughter, Victoria—an athlete who plays soccer, hockey and Bordenball. She is also a gymnast.

I've come to know Rowan Stringer not from going out for coffee with her or watching her play rugby, but through her mother and father. I’ve recounted Rowan’s story to multiple people, but the most personal to me was my 10-year-old daughter, Victoria—an athlete who plays soccer, hockey and Bordenball. She is also a gymnast.

I’ve come to know Rowan Stringer not from going out for coffee with her or watching her play rugby, but through her mother and father. I’ve recounted Rowan’s story to multiple people, but the most personal to me was my 10-year-old daughter, Victoria—an athlete who plays soccer, hockey and Bordenball. She is also a gymnast. Victoria happened to be in the car when I took a media call on Rowan’s Law over my hands-free this past summer.

At first—members will be shocked—I was speechless. I didn’t want to answer. I didn’t know what to say. Most of all, I didn’t want to scare her, but I gave her an honest answer. I told her everything I knew about Rowan Stringer. I told her everything I knew—which was limited at the time—about concussion treatment and awareness, including imparting to her that if she gets hurt in hockey or soccer, she has a responsibility to tell mommy and her coaches if she bangs her head. I’m proud to say that she cared so much about Rowan Stringer and so many other people that I brought her out of school today to be part of this process.

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I've come to know Rowan Stringer not from going out for coffee with her or watching her play rugby, but through her mother and father. I’ve recounted Rowan’s story to multiple people, but the most personal to me was my 10-year-old daughter, Victoria—an athlete who plays soccer, hockey and Bordenball. She is also a gymnast. Victoria happened to be in the car when I took a media call on Rowan’s Law over my hands-free this past summer.

Other members in this assembly will know that sometimes our job can be all-consuming. They will also understand when I say I didn’t realize she was paying attention to my conversation about the death of another child, that is, until the call ended. She heard how Rowan had died. I was alarmed when a very soft voice from the back of the minivan said, “Mama, can you tell me who Rowan is? Will I die from a concussion?”

At first—members will be shocked—I was speechless. I didn’t want to answer. I didn’t know what to say. Most of all, I didn’t want to scare her, but I gave her an honest answer. I told her everything I knew about Rowan Stringer. I told her everything I knew—which was limited at the time—about concussion treatment and awareness, including imparting to her that if she gets hurt in hockey or soccer, she has a responsibility to tell mommy and her coaches if she bangs her head. I’m proud to say that she cared so much about Rowan Stringer and so many other people that I brought her out of school today to be part of this process.

The story of Rowan Stringer is one that every single parent in Ontario needs to be aware of. Rowan was a 17-year-old rugby player. She played for John McCrae Secondary School and the Barrhaven Scottish Rugby Football Club, which, I’m very proud, have joined us here today as well. She was also a ringette player, just like I was.

Rowan was nurturing, according to her mom and her dad, and she wanted to become a nurse. She was a young lady with many interests, and she also had many friends.

Rowan Stringer left us far too young. In a cruel twist of fate, she died playing the sport she loved. She saved other lives, though, not from her nursing career, but from being an organ donor. Hopefully with the passage of this law, she’ll save even more. Rowan Stringer has also become the public face of concussions, so it is only right that the legislation bear her name.

A lengthy and emotional coroner’s inquest was called into Rowan’s death, a death caused by multiple concussions and an injury causing mass swelling in her brain. Rowan likely knew that she had a concussion, as we would later find out, but just as likely, Rowan did not understand that it could be potentially fatal. Nor would she have understood what the term “second-impact syndrome” would be: a rare condition in which a second or third concussion occurs before the first one is healed.

The coroner’s inquest made 49 recommendations, many of which fall under provincial jurisdiction, and suggested it be called Rowan’s Law. By passing Rowan’s Law, Ontario would be a leader in Canada, becoming the first jurisdiction in our country with concussion legislation. I am pleased to have the support of the Premier of Ontario and the Minister of Tourism, Culture and Sport to ensure that this will become law.

The coroner’s recommendations include making concussion awareness mandatory in Ontario’s curriculum, the promotion of an annual brain awareness day, and better tools for coaches, players and others to identify and treat concussions. Presently, there is no mechanism, nor process in the Legislature, that we can use to implement a coroner’s inquest for these recommendations. That is what Rowan’s Law aims to accomplish. We need Rowan’s Law to put these life-changing matters into motion. By passing Rowan’s Law, the Ontario Legislature will empower the Minister of Tourism, Culture and Sport to act on those recommendations.

I’d like to briefly acknowledge some people who are here from Parachute Canada, the Ontario Athletic Ther-
I would be remiss not to point out that the first day that we talked about concussion legislation—I was the education critic at the time—Walter Gretzky was sitting in the Speaker’s chair and it was the day that Sidney Crosby would actually be cleared to play again in the NHL.

Just a couple of weeks ago, Wayne Gretzky opined that when he played hockey, we didn’t really think about concussions. Today, even little girls like young Keeley Baizana from Barrhaven, who plays in the same Nepean Wildcats hockey league as my daughter, deal with concussions. She’s been in and out of school for the past three months.

We have a lot of work to do and I know the members in this assembly are up to doing it. There was an old adage where I grew up in Nova Scotia that said, “Many hands make light work.” Rowan’s Law has proven that old adage true.

It’s now time for me to say thank you to those who have made this happen. In our community, a grassroots team met weekly around the big farmhouse table at Parlour Pizza. Joe and Linda Price welcomed their fellow Barrhaven Scottish Rugby players Barb Gillie, Gary Thomas and Phil Selig; Rugby Canada’s Paul Hunter; as well as community leaders Darrell Bartraw and Bob Wilson; concussion therapist Ashley Powers; Ottawa councillors Jan Harder and Jody Mitic; and my team. They were the driving force behind a province-wide campaign to petition all members of this assembly, who have circulated, supported and shared it in the public record.

To my colleagues in this House today who will speak, I thank you in advance. My gratitude, however, is most extended to the members for Kitchener–Waterloo for co-sponsoring it. I want to thank all of my colleagues here in the Legislature and the Premier for the tremendous support that has been shown for this bill. I want to thank the member from Kitchener–Waterloo for co-sponsoring it. I want to thank the member from Nepean–Carleton for bringing this initiative forward and giving expression to something that was very important to a family in her community, but indeed to all our families.

I don’t have a lot of time, but I do want to say this: Rowan’s death was preventable. Injuries are preventable. That’s what this bill is about. Now, we didn’t hear the whole story of Rowan today, but I want to thank the Stringers, because I want to tell you a story of something that has left an indelible impression on my mind, and that’s why this bill is important.

At a time after Rowan had passed and they had graciously donated her organs to the Trillium Gift of Life, they got a call. They got a call because the media found out about Rowan’s death, a very tragic death. I have three kids. Actually, my oldest daughter played rugby. Many of us in here have children. You can imagine that when the thing we all worry about and fear the most happens to you—something happens to the people who are most precious to you, and then you get a call—you’re kind of ripped wide open, and your intention is to say, “I need to protect myself. I need to protect my family. I need to grieve. I need to be alone. I don’t necessarily want to be out there with everybody.”

As you know, when the media calls, you have a decision to make, because they are going to do something. They made a very courageous decision in a very short period of time. It takes a lot of courage to say, “I think we need to do this. It’s important. I’m leaving myself exposed and vulnerable. I still have these ‘what-if’ questions in my head.”

I wanted to make sure that people understood those circumstances and the efforts that the Stringers have made. I strongly believe that we owe it to them and their efforts: their efforts to get a coroner’s inquiry and their efforts to raise awareness. We owe it to them, and we owe it to all our families to ensure that we pass Rowan’s Law today, and that we move forward quickly to ensure that we get it done and protect the people who are dearest to us.

I’d like to acknowledge you right now, because I think in order for us to carry this forward and make this bill become law, we need a lot more Shannon Halls in this assembly.

With that, I cede the floor to my colleague from Ottawa South. I thank you all from the bottom of my heart for making this a reality.

The Deputy Speaker (Mr. Bas Balkissoon): The member for Ottawa South.

Mr. John Fraser: I want to thank the member from Nepean–Carleton for sharing her time with me. I want to thank all of my colleagues here in the Legislature and the Premier for the tremendous support that has been shown for this bill. I want to thank the member from Kitchener–Waterloo for co-sponsoring it. I want to thank the member from Nepean–Carleton for bringing this initiative forward and giving expression to something that was very important to a family in her community, but indeed to all our families.

I don’t have a lot of time, but I do want to say this: Rowan’s death was preventable. Injuries are preventable. That’s what this bill is about. Now, we didn’t hear the whole story of Rowan today, but I want to thank the Stringers, because I want to tell you a story of something that has left an indelible impression on my mind, and that’s why this bill is important.

At a time after Rowan had passed and they had graciously donated her organs to the Trillium Gift of Life, they got a call. They got a call because the media found out about Rowan’s death, a very tragic death. I have three kids. Actually, my oldest daughter played rugby. Many of us in here have children. You can imagine that when the thing we all worry about and fear the most happens to you—something happens to the people who are most precious to you, and then you get a call—you’re kind of ripped wide open, and your intention is to say, “I need to protect myself. I need to protect my family. I need to grieve. I need to be alone. I don’t necessarily want to be out there with everybody.”

As you know, when the media calls, you have a decision to make, because they are going to do something. They made a very courageous decision in a very short period of time. It takes a lot of courage to say, “I think we need to do this. It’s important. I’m leaving myself exposed and vulnerable. I still have these ‘what-if’ questions in my head.”

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The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Ms. Catherine Fife: It’s a pleasure and a privilege, actually, to join this debate today. I want to say at the
outset that this is one of the first times co-sponsorship of any piece of legislation has come forward for quite some time. I think that we have Rowan and the Stringer family to thank. Some people may think it is nothing short of a miracle that the NDP, the Liberals and the Conservatives are working together, but I think this is actually a model going forward, where we can actually represent the people of this province with greater integrity and principles.

I want to say that the issue of concussions first came to my attention when I was president of the Ontario Public School Boards’ Association. I got a call from a mother whose daughter had had a serious concussion. She was really concerned, because the school board at the time was not accommodating this young woman; in fact, they were fairly dismissive of it. That’s because concussions are actually a silent epidemic in our society right now. You can’t see it and you can’t touch it, but you can see the impact that concussions have going forward.

Because of that experience, she said, “Don’t they understand that my daughter has a brain injury? She has a brain injury, and she is hurting.” Because of that, that started the path around return-to-learning policies in the province of Ontario. I also feel compelled to mention that as well.

The other issue is that as a parent, as the member from Ottawa South mentioned, I personally went through this experience with my son having two serious concussions. I will never forget the moment when the doctor said to me, “He has a brain injury.” I thought there was a ranking for concussions, because there are a lot of stereotypes and a lot of myths around concussions. I said, “Well, how bad is it?” He said, “There’s no such thing as not a damaging brain injury. They’re all bad. So now you need to go forward.” Having that knowledge, actually, was an empowering moment, and that’s very symbolic of the work that we’re going to accomplish today in this House.

I wish that the Stringer family had had that opportunity, but Rowan’s Law, I hope, will ensure that every parent has that knowledge transfer from the medical community so that they can move forward with that knowledge and that power.

As has already been mentioned, Rowan Stringer’s story is heartbreaking, and it was incredibly powerful today to hear Charles Tator say that this was preventable. It was just an incredibly emotional moment that will stay with me and, I think, will stay with everyone who has gone on this journey with the Stringer family. It will stay with them.

The power of this legislation, actually, I don’t think we fully acknowledge yet. Since I first started speaking with the MPPs from Ottawa South and Nepean–Carleton about Rowan’s Law, I’ve been in touch with many people in different fields—constituents and others—all of whom have expressed the significance of putting in place protocols around concussions, and they are very supportive of a legislative option. Many of those people are particularly focusing on protecting the health of young people.

I’d like to mention some of those people and organizations that I’ve been in touch with. First of all, the support has been incredible. It has been coming from across the entire province. I have here with me today Peter Baxter, who is the director of athletics at Wilfrid Laurier University. He’s also the president of the Ontario University Athletics association. This is a very topical issue with them as well.

I’m pleased to welcome Fitz “The Whip” Vanderpool, the winner of six Canadian international boxing championships. He has done incredible work on making sure that athletic safety is first and foremost. I want to thank you for that work. He’s joined by Diane Matyas today as well.

Roly Webster is the director of athletics for the University of Waterloo. Marie Pringle is from the Kitchener-Waterloo Skating Club. Dr. Neilank Jha, who runs the Konkussion research organization, is a well-known neurosurgeon. Carol DeMatteo, from McMaster University’s School of Rehabilitation Science, reached out because of this legislation. Susan Forbes is from the Play Safe Initiative.

Finally, this morning, I had Kerry Goulet here. He is a member of the ice hockey hall of fame and co-founder of Stop Concussions, along with NHL player Keith Primeau. Keith Primeau has gone on the record. I think it’s so courageous and powerful when athletes speak out about their experiences with concussions, because they’re modelling this behaviour for amateur athletes going forward.

Keith Primeau has said, “No matter what equipment or safety gear kids use, everyone involved should be clothed in respect—respect for the game, respect for the opponents, respects for the rules, respect for body and brain.”

Their work on Stop Concussions has focused on education and awareness and making the games safer. I think the key theme here is the prevention piece.

All of these individuals want to be involved in the issue of addressing concussions, starting with awareness and prevention among young people and athletes. It occurred to me, as I got involved in this initiative around concussion awareness, that there is all of this knowledge out there, and there are all of these well-intentioned and researched options. But the coordination piece will be the challenge, I think. That’s why, when this piece of legislation does go to committee, that will be the place where we do greater engagement around youth, greater engagement around an implementation strategy that may require resources from Queen’s Park. That may happen, because we have to move past just the language of protecting young athletes.

Finally, I just want to thank the Stringer family for sharing Rowan with us. I’m just so incredibly impressed with your personal commitment to honour the life of your daughter, but also to ensure that the legislation that
comes from this place is meaningful, that it’s positive, and that it does what we want it to do.

Let’s do that work together. Let’s make sure that this goes to committee, that it moves through committee very quickly and that we get the job done.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Hon. Michael Coteau: I want to start off by acknowledging the family, the advocates, supporters, friends and family who are here today. I just want to thank them for their continued advocacy and support for this bill. I also want to thank the three members who came together. Despite being in different parties, they came together to do the right thing that is important for the province of Ontario.

I’ve had the opportunity to speak to the member from Nepean–Carleton several times on this issue. I want to thank her for her leadership and commitment on this file. She has done an extraordinary job.

I think it’s really important that we as elected officials, as members of provincial Parliament, do all we can do to ensure that young people and all people in this province are kept safe. I know that this bill attempts to do that. I’m very proud to be here today to speak on behalf of the bill. I anticipate that it will go through committee, get back to the Legislature and move over to the Ministry of Tourism, Culture and Sport so we can get the advisory committee going as soon as possible. I think it’s essential to bring forward those recommendations to ensure that young people are protected when they’re playing sports. We know that any life lost or injury in sport is something that we should be responsible for, making sure it is preventable.

I was very surprised when I was doing a bit of research on concussions. I couldn’t believe that no province had moved forward on this. In the United States, there have been many states—in fact, I think all 50 of the states have put forward some type of legislation to dictate laws and legislation around youth concussions. I know that back in 2012, the Minister of Education did put something forward and there was a discussion then, but I’m so happy we’re at the point here today where the members have brought forward something that we can take into the ministry and really work with to strengthen our sports safety here in Ontario.

We know that a lot of things are changing when it comes to science and technology. I was sharing with the member opposite from Nepean–Carleton that there are these experimental blood tests to detect early concussions. Things are happening at a rapid pace in science and technology, and there’s a lot more we could be doing if we have a strategy built in, through these recommendations, to find out what’s happening around the world, take those best practices, bring them here to Ontario and share them with other provinces.

I was happy to hear that there are other provinces that are taking notice of what’s happening here in Ontario and the debates that are taking place. I hope that we find ourselves one day in a place where every single province, our territories and all school boards have strong policies in place to prevent tragedies like this from happening.

Like the member from Kitchener–Waterloo, my first real exposure to concussions was in the exact same situation. As a school board trustee, I had a parent call me, and she had a gifted student, a really bright young man who was going to one of the international baccalaureate schools in my community. He was way ahead in regard to credits. He suffered a concussion, and everything went downhill for him. He couldn’t show up to school and he couldn’t pay attention anymore. I remember it was through the advocacy of my office and other members of the board and staff that they developed a plan that worked well for him. But, in all fairness, the teachers and the principal—no one knew how to actually accommodate this young man who had this challenge.

I know, as the minister responsible for sport, we have made some changes in the last couple of years. Our provincial sports organizations—I know that Rugby Ontario is here—have to have a policy in place to work with concussions in order to receive provincial funding. We’re going to make sure that as the recommendations come forward from an advisory committee, we will strengthen the way in which we engage our sports organizations, our education system and our health care system so we can make Ontario a much safer place for young people.

Bill 149 represents the first in a number of steps to ensure that Ontarians can play safely. We launched our sports plan a couple of weeks ago here in Ontario, and one of the pieces within it is to participate in sport safety. So it’s perfect timing to work with an advisory committee and our sports plan advisory committee on how they can work together to ensure that participation in sport is safe.

I think that right now is the perfect time for this to come forward. I thank the family. I thank all of the friends, the advocates and the organizations that are here today, for working with the members here to show us the direction which you think is best for the young people and all people of Ontario.

I just want to thank—and you’ll have my commitment that I will do whatever I can as the minister responsible for sport in Ontario to protect our young people in this province.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate.

Mr. Patrick Brown: It’s my pleasure to rise in the Legislature here today to speak about this very important piece of legislation. I’d like to start by congratulating my colleague from Nepean–Carleton for her tireless work on this bill. It was her effort, along with the work of her colleagues across the aisle, that made this possible. So I also want to acknowledge and thank the members from Kitchener–Waterloo and Ottawa South. This is certainly an example of how it should be at Queen’s Park, when we see three members of provincial Parliament from three different parties working together on an issue that
unites all parties. This has been a wonderful example of bipartisanship, and you couldn’t find a better cause to channel that energy behind.

Rowan’s Law is named after Rowan Stringer, a high school rugby star from Barrhaven who died tragically from second-impact syndrome after playing through a game with a concussion. She didn’t know and understand the consequences of ignoring concussions, and her peers and her coaches didn’t have the necessary tools to identify concussion-related symptoms.

Rowan had a big heart and a passion for helping, serving and caring for others. I’m told that Rowan had dreams of going on to university and studying to become a pediatric nurse. I think this bill serves as a fitting tribute for this young girl, a legacy of helping prevent further injury and death from concussion.

When the member from Nepean–Carleton called me to tell me about this idea, I instantly told her that it was a phenomenal idea because I had a volunteer in my office, a young girl, Megan Stock, who suffered from a serious concussion as well and had talked to me about the importance of education on concussions. I was just so happy when the member for Nepean–Carleton told me she was embarking on this initiative with the support of the members from Kitchener–Waterloo and Ottawa South.

As many of you know, I’ve taken a passionate interest in hockey over the years, growing up playing the sport. In the last few years, concussions have been brought to the forefront of discussion in the NHL and the larger hockey community. There have been a number of high-profile injuries to players and a number of tragic deaths to retired hockey players due in no small part to the seriousness of concussions suffered during their careers. I know that the member from Kitchener–Waterloo just referenced one example about 10 minutes ago.

Both the NHL and the NHL Players’ Association have taken important steps to mitigate concussions in the game. Whether it’s the new spotter program the league is using, the hybrid icing rule, or the “dark” and “quiet” rooms, these are all important steps which I’m sure will have a positive impact. But this does not address the larger problem. Solutions need to start in our minor hockey programs. Solutions also need to start in our classrooms.

Rowan’s Law addresses the fact that we need more education in the classroom by making concussion awareness mandatory in Ontario’s curriculum. Ontario teachers do not presently have to teach about concussions at all. They don’t have to teach what concussions are, how to prevent them and what to do if you’re injured.

Rowan’s Law also ensures that coaches and fellow players have the tools to better identify and treat concussions when they happen. It ensures that these athletes don’t return to play until they’ve been medically cleared to do so.

Following Rowan Stringer’s death, the coroner outlined 49 sensible, pragmatic recommendations. It’s now our job, as legislators, to do our part. Following passage of this bill, both schools and sports organizations will have a year to figure out how to implement these regulations, meaning that students, children and young adults can continue to lead healthy and active lifestyles and reap the rewards of participating in team sports and do so, most importantly, in a safe manner.

Rowan’s parents addressed members of the gallery in the media studio a couple of weeks ago about Rowan’s Law. They spoke about their daughter’s love for rugby and about the value they saw come out of it. Addressing the concussion problem is not about banning contact in sports or banning contact sports in schools. It’s about the larger problem of education and awareness.

Mr. and Mrs. Stringer also spoke about the need to take action—immediate action—to address this growing problem, so that no other family has to go through what they went through. I can’t imagine how harrowing it was.

While I spoke primarily about hockey here today, concussions are prevalent in all sports—in soccer, football, rugby and basketball, just to name a few—at both the amateur and professional levels. It is estimated that one in five sports-related injuries are head injuries. Concussions can happen in day-to-day life as well, as they are not limited to the athletic sphere. An estimated one million people suffer from concussion-related injuries across North America. Concussions are a problem that we need to address.

Rowan’s Law is an important bill. If passed, it will be the first concussion legislation of its kind in Canada, and we can all be proud of that, in honour of Rowan Stringer. It would be a wonderful legacy.

I am very grateful for the opportunity to speak in support of this bill. I am very proud of my friend and colleague from Nepean–Carleton for her work on this, ensuring that Rowan’s legacy lives on, helping to save lives.

It has been incredible to see the level of tri-partisanship in the launch of this bill, and I hope to see it continue in its passage and through the implementation of the coroner’s recommendations.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mme France Gélinas: I, too, want to thank Rowan’s parents for being here today and for sharing the story of how they lost their daughter and how her tragic death was completely preventable, if only people knew.

I come from the health care sector. I worked in a children’s treatment centre, and I’ve worked with many, many kids who have had a traumatic brain injury, who have had concussions and who have had secondary concussions. I’m a physiotherapist. We would see those kids in physio, and you could see the damage that had been done to their brain function, whether it was what we called a higher-order neurocognitive deficit where knowledge that they used to have, they were not able to recollect anymore, or, in physio, we would see lots of lower-level structure concussions, which are when the brainstem, the spinal cord, the cerebellum—there’s a thing called proprioception. We don’t need to see our body parts to know where they are in three dimensions.
All athletes rely on that, to be able to kick a ball with your foot without looking at the ball but looking at the people coming at you, and to be able to dribble a ball when you play basketball while you look at where you’re going, not looking at your ball. We’re all able to do this, because we have a well-functioning neural system that allows us proprioception.

But once those kids would get a concussion, those tasks would become impossible for them to do. Sure, there are physiotherapy treatments for them, but very few of them are actually identified as a concussion, actually receive treatment and actually make it to physiotherapy. For the rest of them, they’re left with basically living with a traumatic brain injury that was never diagnosed, that was never treated, that was never helped. But all of this, Speaker—all of it—is all preventable.

I see all the goodwill in this House today. If the story of Rowan can be shared with every single person in this province so that the 49 recommendations that have been made after the inquest into her death are actually brought together in a meaningful way to inform the laws of this province, we will have all won. A big winner will be our health care system, because—although it’s not always nice to talk money in these times—we are talking close to $50 million a year that we spend because of first and second concussions that are picked up and treated most of the time a little bit too late.

We have this opportunity here to bring this level of knowledge and education to everyone so that every parent, everybody who works with children, everybody involved in sport can recognize concussions for what they are. They are traumatic brain injuries that require action immediately. They are not something that you negotiate with your coach, “Oh, I will go sit on the bench,” No. It is a traumatic brain injury that needs to be acted upon right away.

To get this message out, we need to continue to get the goodwill in this House, to get Rowan’s story, and to make sure that we take this tragedy and turn it into an action plan that everybody can buy into, so that years from now we will look back and say, “This is when we turned the page. When those brave parents brought their story forward after losing their daughter, we passed this bill and then things started to turn for the better. Now we don’t see those kids in physiotherapy anymore, because they get recognized for what they are the minute that the concussion happens.”

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Ms. Indira Naidoo-Harris: It is with pride that I stand today to speak to Bill 149. I want to start out by extending my sincere condolences to the family of Rowan Stringer, for whom this legislation is named. I also want to thank you for your tireless efforts to move this issue forward in our community and in our province. Thank you for your hard work.

In addition, my thoughts and prayers are with all Ontario families whose lives have been impacted by concussion injuries.

This legislation is the first of its kind in Canada, and I applaud all the members for bringing it forward. With the implementation of Rowan’s Law, the government will increase awareness and education about concussion injuries.

As a mother of two, I know just how nerve-racking it can be to stand on the sidelines while your son or daughter is involved in a sport. Growing up, my kids played hockey, rugby and soccer. Alongside the other parents, I would watch with mixed emotions: As you’re enthusiastically cheering your kids on, you’re also dreading the possibility that they could be seriously hurt. I especially felt that way watching them play hockey and rugby.

In the event that a child does suffer a head injury, Bill 149 will ensure that help is nearby.

Concussions are the most common form of traumatic brain injury. While most people recover within a few weeks, experts say about 15% will keep experiencing significant symptoms for much longer. Diagnosis can be difficult because evidence of a concussion cannot be found using an MRI or CT scan.

This is why it’s so important that people in key roles are informed enough to recognize the signs of a concussion. By providing education on sport-related concussions to athletes, coaches and parents, Bill 149 will give people the right tools to know when to seek medical help. I’ve sat there alongside my kids when they took a hit in hockey and wondered late into the night whether they were okay.

It’s estimated that 160,000 Canadians suffer brain injuries each year and over a million Canadians are living with the effects. While there are numerous ways you can get a concussion, experts say that 30% of all traumatic brain injuries involve young children and youth. Think about that. Most of them happen while taking part in sports and recreational activities.

As parents, we must do everything we can to protect our children. But this can be difficult because the symptoms of concussion can be similar to other illnesses and so often go unnoticed or get mistaken for something else. Of course, this information should in no way deter parents from encouraging their kids to take part in sports—quite the opposite. In fact, parents can be reassured that Bill 149 will provide a safer environment for their children to enjoy sports and stay active. This legislation will ensure the public is better prepared in the event of a concussion and able to prevent further injury because they know when to go and see a doctor. A concussion is an injury to the brain. It’s something that should never be taken lightly.

I want to thank the family of Rowan Stringer for their tireless efforts to increase public awareness on this serious issue. I congratulate all the members who have been working hard on this important piece of legislation that will protect the health and wellness of our young athletes and our children.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?
Mr. Michael Harris: While it’s always an honour to stand in this House, today’s discourse takes on added significance as we in the Ontario Legislature consider the first concussion legislation in Canada for young athletes.

We thank the member for Nepean–Carleton for all her work, her passion on this issue, in bringing forward Rowan’s Law today for the future safety of our young athletes and participants across Ontario.

As we’ve heard and as is well-documented, Rowan’s Law was born from the concerns that emerged and the subsequent coroner’s inquest following the tragic death of 17-year-old Rowan Stringer due to the impacts of a concussion she received playing rugby. While Rowan’s story is the launching point that has brought us to where we are today, I am certain every one of us knows of similar either tragic or alarming stories from the areas we represent, where concussions to our young people have taken their toll.

In my area of the region of Waterloo, a few years ago, we heard stories of a Waterloo region family, the Van Damme family, who were calling for action following their then 17-year-old daughter Jill’s on-court concussion with the Waterloo Tigers volleyball team. In her case it was days later that the concussion was confirmed, after she was crippled by throbbing headaches. She had to quit sports, miss her semi-formal and skip exams. It was four months before she felt normal again.

It’s for that reason that we, as a provincial Parliament here, provide a provincial response. Organizations and individuals are also to be commended for stepping up with programming and awareness initiatives to get that ball rolling on protecting our young athletes from the debilitating impact of concussions.

Locally—as we heard, Fitz Vanderpool is here in the audience—we’ve also seen Kitchener Rangers star defenceman Ben Fanelli’s Head Strong campaign, focused on raising awareness about brain injuries. Ben, whose career was halted by a brain injury, speaks to groups and at events throughout Ontario to increase awareness for brain injuries and, specifically, brain injuries in sport.

I feel that today, with that momentum, we’re building through a united call for a provincial response to head injuries impacting our young people. We are taking very real steps to ensure that help will be available throughout Ontario. That’s why it’s so important that we are discussing this here, on the last day of debate, before we head to our homes and families, because we’ve all heard the stories; we’ve all seen the devastating impacts; and we simply can’t continue to just shake our heads, or shrug our shoulders, thinking it’s all part of the game.

It’s not, Speaker, or at least it shouldn’t be. Concussions should not be part of the game. Headaches, dizziness, slurred speech and nausea—for sometimes months on end—should not be part of the game. Certainly, the fatal tragedy that befell young Rowan should be no part of any game we allow our young people to participate in in this province.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mrs. Kathryn McGarry: I wanted to stand in this House, today’s discourse takes on added significance as we in the Ontario Legislature consider the first concussion legislation in Canada for young athletes.

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The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Steve Clark: I’m pleased to speak in favour of Bill 149. As our party’s critic for tourism, culture and sport, I want to commend my good friend Lisa MacLeod, from Nepean–Carleton, and I also want to thank Mr. Fraser and Ms. Fife for co-sponsoring this bill.

I played a lot of sports over the years, and I played very strongly. I remember the game before my high school football championship, in practice I had a head-to-head, helmet-to-helmet contact; to use the word that Mrs. McGarry used, I had my bell rung. I remember not getting treated, not getting diagnosed, and I remember being told that there were lots of people who were willing to go in that day if I didn’t want to play. I played, and I probably shouldn’t have played. I didn’t get another concussion, but I shouldn’t have played. I should have let those two or three other guys play for me. Things were
To the Stringer family, to all the people who are here today, all the doctors and all the experts: Thank you for doing what you’re doing with this bill. This is such an important bill, not just for Rowan’s life and her legacy, but for all those other children and all the people who didn’t understand what had happened.

I had, I think, my second concussion when I was a men’s league hockey player. Some people call it the “beer league,” and probably that was what I should have been doing rather than playing hockey. The night that I got my head cross-checked to the ice, my brain told me that I just popped up. In reality, I was unconscious for 45 seconds on the ice in a pool of my own blood. While I may have gotten the 12 stitches treated, I should have done a lot more. I should have been more vocal. I should have been a stronger advocate.

As the critic, I have a message for the minister, and all the ministers and all the government. Regardless of Bill 149’s passage, we need this committee. So today, after private members’ business, I believe that the Minister of Children and Youth Services, the Ministers of Education, Health and Long-Term Care and the minister who I question, the Minister of Tourism, Culture and Sport—I think we need to get a few names put together for this committee. Regardless of the legislative process, I think we need to start the work today to have Rowan Stringer’s advisory committee created. I think there can be a lot of work done. There can be a lot of education.

I want to thank my good friend Lisa MacLeod for being the champion for Bill 149. Let’s get it passed.

**The Deputy Speaker (Mr. Bas Balkissoon):** I now return to the member for Nepean–Carleton. You have two minutes.

**Ms. Lisa MacLeod:** To all members of this assembly, I have a deep and abiding respect for all of you, but none more than I do now, for sharing your stories.

I would like to specifically name the members for Ottawa South and Kitchener–Waterloo for going through this journey with me; the Minister of Sport for standing here today and indicating his support; the leader of the official opposition; the third party health critic; the member from Halton; the member from Kitchener–Conestoga; the member from Cambridge—thank you for sharing your story about your son—and of course, my friend from Leeds–Grenville, for sharing his story.

I’d like to acknowledge the member from Durham, who walked across the floor to tell me about his son, an NCAA star in football, who has had a couple of concussions and wants this bill to pass just as much as we do; and the member from Sudbury, who, when he was a federal member, had he been successful, would have had the first concussion law as a federal member of Parliament.

My friends, we have waited for far too long. We have a few months more ahead of us. I am asking each of you to join with me and the Stringer family and the two members who are co-sponsoring this bill to call for its passage before the House rises in June. We have enough time to do that. There is enough will here. It’s not hard work.

I ask you all to join with me and go home today and use hashtag #RowansLaw to continue with the awareness. I ask that you all talk to your friends and your family about their experiences, because I can tell you, in June, when the Stringers first approached me, I really didn’t know a thing about concussions. Today I’m learning so much more about how impactful they can be, particularly to young people, that I don’t think we can wait much longer.

With that, thank you. I would invite all members up to the Progressive Conservative caucus room to celebrate what I hope will be the passage of second reading today, with the Stringer family and all of our invited guests today.

Thank you all very much.

**The Deputy Speaker (Mr. Bas Balkissoon):** Thank you to all members. We will take the vote on this item at the end of private members’ business.

**CY AND RUBY’S ACT**
**PARENTAL RECOGNITION**
**LOI CY ET RUBY DE 2015**
**SUR LA RECONNAISSANCE PARENTALE**

Ms. DiNovo moved second reading of the following bill:

Bill 137, An Act to amend the Children’s Law Reform Act, the Vital Statistics Act and other Acts with respect to parental recognition / Projet de loi 137, Loi modifiant la Loi portant réforme du droit de l’enfance, la Loi sur les statistiques de l’état civil et d’autres lois en ce qui a trait à la reconnaissance parentale.

**The Deputy Speaker (Mr. Bas Balkissoon):** Pursuant to standing order 98, the member has 12 minutes for her presentation. The member for Parkdale–High Park.

**Ms. Cheri DiNovo:** It’s an absolute honour. It seems to be the afternoon of the child here at Queen’s Park. It’s fitting, because we’re moving into the season where we celebrate children. Whether they’re spinning dreidels or whether they’re opening presents under Christmas trees, this is the season for children.

Quite frankly, people here know that I’m a United Church minister by trade, and in the Christian tradition, of course, it’s the season where we celebrate a birth. We celebrate the birth of a particular baby.

This bill, Cy and Ruby’s law, is about babies. It’s about the joy of babies, that we love them, that we celebrate them and that we celebrate them no matter to what family they’re born. Whether they’re born to a same-sex family, whether they’re born with three parents involved, whether they’re born to a man and a woman, we are celebrating those children, and those children should have equal rights, as should their parents.

In fact, it is the day for human rights. It is the United Nations International Human Rights Day, so that’s
another great reason that December 10 be the day that we pass Cy and Ruby’s law.

This is one of those no-brainer bills, and I have to say that up front because, first of all, just about every other province in Canada already has, in their law, a law that covers same-sex and LGBTQ folks at birth. We don’t. We don’t, Madam Speaker, and that is a bizarre oversight.

It’s not only a bizarre oversight; it’s in contradiction to our Charter of Rights. It’s certainly in contradiction to our Human Rights Code that talks about both trans rights, now with Toby’s Act having passed, and also, of course, sexual preference.

I want to give some thanks to some folk. Joanna Radbord is here. She’s the lawyer who really has spearheaded most of the research on this. Kirsti Mathers McHenry is here; I’m going to tell her story a bit. She is one of the mothers of Cy and Ruby. Ruby is here today; Princess Ruby, by the way, it says on her name tag. Cy is one of the mothers of Cy and Ruby. Ruby is here today; McHenry is here; I’m going to tell her story a bit. She is headed most of the research on this. Kirsti Mathers McHenry’s wife was in labour—Kirsti, mother of Cy and Ruby—and the unthinkable happened. There were complications and the doctors warned Kirsti that there was a chance that her wife could die. At that moment, holding her newborn baby, she watched doctors frantically try to save her wife’s life. It also dawned on her at that moment that she might be raising the child as a single parent.

If that nightmare wasn’t horrifying enough, Kirsti also realized she would not be a legal parent to her own child. I’m going to quote her. She said, “As I held my wife’s hand and snuck glances at the two rolls of paper unspooling and recording the two heartbeats, I went through the possibilities. If my wife died, I might not be able to leave the hospital with our baby. Who would be able to? My in-laws. They were supportive. Maybe the hospital would let the baby leave with them. Our sperm donor— he was known to us— was another possibility. Maybe he could pretend to be more than a donor uncle for a morning and get us home.”

She goes on to say that it ended okay: “My wife was okay and our daughter was okay, and we left the hospital together after visits from family. Months later, we obtained a court date and the three of us, with our lawyer, went to court to make me a legal mommy.”

Now, who among us would want to go through an experience like that, then have to pay a lawyer some $2,000 or so, and then go to court to adopt our own children? This is the case in Ontario and this is what Cy and Ruby’s Act would change. It would make sure that lesbian co-mothers who use donor sperm would be able to include both mothers’ particulars on the child’s birth registration form. They can’t do that now.

The act would also allow for the recognition of an additional parent, such as a known sperm donor, if the parents agree. Or if it’s two men, the birth mother—the woman who has carried the actual child. Research suggests that about half of lesbian couples choose a known sperm donor. The current law forces same-sex couples to, as I said, adopt their own children—jump through hurdles for legal recognition.

This is also trans-positive. The act removes all gendered language from birth registration forms. Trans men who give birth will no longer be forced to identify as “mother,” which is discriminatory according to our Human Rights Code, and of course denies their lived reality. This will allow families with more than two parents to register the birth of their child and to be immediately and equally recognized. There will no longer be a distinction between the person who gives birth and the child’s other parents.

Now, the courts have already weighed in on this. In 2006, in the Rutherford case, Justice Rivard found the Ontario birth registration scheme to be discriminatory because it excluded non-biological lesbian co-mothers. It’s almost 10 years later and the government has not cured its discriminatory scheme so as to better recognize assisted reproduction and the equality rights of LGBTQ parents.

In 2007, the Court of Appeal for Ontario ruled that there is a legislative gap in the scheme for parental recognition. They said that it may be in a child’s best interests to recognize more than two parents.

Really, what we’re asking for here is to end this fight and to end potential fights that are upcoming. There will be many charter challenges if this bill is not passed—and by “passed,” I don’t mean just second reading; I mean passed into law.

I met with the Attorney General yesterday. Madame Meilleur was very supportive in terms of trying to make this law as quickly as possible, to preclude the possibility that more parents have to go to court to both adopt their children and also to challenge the Ontario government— taxpayers’ dollars badly not at work in defending what should be a no-brainer.

Let me tell you another story. This is Raquel and Deanna’s story. Here are Raquel’s words:

“A short while after Thora entered the world it became obvious that Deanna was hemorrhaging badly and her body was not responding to the care the midwives were giving her. The midwives transferred Deanna’s care to the surgical team...” She goes on to speak about—I’m
running out of time—a very similar story to Kirsti’s, where her wife was in distress and she didn’t know whether she’d be able to leave the hospital with the baby. Again, it was a possible tragedy which could have been made worse by our discriminatory laws here.

I want to finish with my own story, because I think the personal is political. My partner of 17 years—we are a blended family. My children are not his children. The only child in a Portuguese Roman Catholic family, I have to tell you, and he was the known sperm donor to two of our best friends, who are lesbian mothers in Ottawa. I want to give a shout-out to them, Caitlin and Jodi Fisher, and to our two daughters, Harriet and Stella, who are now 13 and 10 and who were conceived by my partner and those two mothers.

I want to tell you about the fear that everyone went through about possible challenges to their parenting at that time. We made it. We went the lawyer route. We had it all drawn up.

I have to tell you: This is the new Canadian family, folks. This Christmas, those children, Stella and Harriet, who are our children by extension in our new, real Canadian family, will be visiting their grandparents at Christmastime, as they have every Christmas since they were about two years old. They are loved and welcomed as the only biological grandchildren my partner’s parents will ever have.

Quite frankly, if we can work it out, this government can work it out. If we in our family can love our children the way we do, this government can love all of our children the way they should be loved. That’s really what we’re asking here and that’s really what we’re looking for here: to make that love recognized in law so that we don’t force parents to go through the hurdles that they need to go through, and so that Cy and Ruby—and all the Cys and Rubys in the future, all the gaybies in the future—don’t have to go through what they had to go through and what our children in Ottawa had to go through as well.

I’m going to leave some time. I’m sure I’ve left lots out. The Premier has weighed in on this. The Premier has supported this; thank you, Premier. The Attorney General supports this; thank you, Attorney General. Really, this is a situation that needs to happen. It needs to happen post second reading. It needs to happen quickly.

Again, we have two choices here. Really, they’re Christmas, Hanukkah, Festival of Lights and Kwanzaa choices. They’re choices for children or against children; for equal rights for all babies and all families or discriminatory laws that see some babies as more legitimate than other babies and some families as more legitimate than other families.

I’ll leave it at that. Thank you, Madam Speaker.

The Acting Speaker (Ms. Indira Naidoo-Harris): Further debate? I recognize the member from Kingston and the Islands.

Ms. Sophie Kiwala: Thank you, Madam Speaker. I have to say, it’s nice to see you in that chair.

It is with the greatest honour that I rise today to speak in support of Bill 137, Cy and Ruby’s Act (Parental Recognition), 2015. I would like to thank the member for Parkdale—High Park for introducing it and for all of her hard work advocating for the LGBTQ community.

This bill is an important part of an important conversation about one of the personal and significant decisions that a person will ever make: to become a parent. I have three amazing daughters whom I love with all my heart, even in their teenage years, and who are such a large part of my decision to run as an MPP. I want to do my part to create a better, stronger and more inclusive province for them.

I was very happy to state my support for this bill last week on social media, and I want to thank the many constituents from Kingston and the Islands who wrote to me and called my office in support of this bill. It is this type of belief in fairness and commitment to equality for all that I know and expect from my community. This was also when I learned that Kirsti Mathers McHenry, one of Cy and Ruby’s mothers and the force behind the change in this legislation, calls Kingston her hometown and earned her law degree at Queen’s University.

After each of their children was born, Kirsti and Jennifer had to go through a long, expensive, emotionally challenging and sometimes humiliating process to get the law to recognize Kirsti as a parent to their two children. I could only imagine Kirsti’s fear when her pregnant wife experienced medical complications during her pregnancy. Had the worst happened, Kirsti would have had no legal recognition as Ruby’s parent. Nobody should have to go through this.

Currently, in our province, if the sperm donor is known to the two women, a woman married to a woman who gives birth is not automatically considered as a parent. However, if the donor is not known, then the legal parental rights are automatic.

This scenario begs the question, why does a marital spouse who has conceived, planned for the child and rejoiced at his or her birth have to go through a legal process to obtain their equal parental rights? In fact, if you just think about it, same-sex parents have a lot more planning to do than heterosexual parents.

Currently, there is a presumption of legal parental recognition that differentiates LGBTQ couples. Kirsti and Jennifer have applied their legal expertise to make sure that other families do not have to face these challenges when they should be focusing on the overwhelming joys of just being a parent. I want to sincerely thank them for their advocacy.

Now, we’ve heard it all before, but it is 2015, folks, and modern families in our province come in many different shapes and forms—single parents, two dads, two moms, blended families—and the law needs to address the needs and circumstances of every single one of these families.

I wholeheartedly support the principles underlying this bill, but I want to emphasize that any law reform in this area would need to consider all of the potential scenarios that can arise when assisted reproduction is used, in-
cluding the use of surrogate mothers and multiple parents, while always promoting what is in the best interests of the children involved. I know that there are many people across the province who have stories and experiences to share, and I would encourage them to do so to help us get these changes right and address the needs of all families, including Cy and Ruby’s.

Mr. Speaker, I also want to mention an important point about government forms and promoting inclusivity. The current practice when registering births does allow parents the option of manually crossing out the titles “mother” or “father” and replacing them with “parent”. However, ServiceOntario and Ontario Shared Services are currently developing a PDF version of the Statement of Live Birth to be provided on request. This form provides a drop-down menu of additional titles a parent may choose when certifying their child’s birth.

Our government administers thousands of forms in ServiceOntario and, in consultation with Ontario Shared Services, has been reviewing these forms to make further alterations, if required, to improve inclusiveness and equality. That’s a good step forward, and I want to thank the Minister of Government and Consumer Services for making this a priority.

I will always advocate and be committed to supporting all Ontario families and protecting the best interests of children. Ontario is well known for its equity laws and championing diversity and inclusion. We were among the first to legalize same-sex marriage, more than a decade ago. It is time to build on this reputation and ensure that LGBTQ parents have equal legal parental rights. We are committed to working with the member opposite to carefully consider the impacts of these changes.

It is so imperative that we take the time to get this right and consider the implications of any changes we make, so that other families do not have to go through this process that Kirsti and Jennifer did. I look forward to working with the member from Parkdale–High Park to ensure that we do exactly that.

Thank you. Merci beaucoup. Meegwetch.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Tim Hudak: My colleague from Thornhill and I will be addressing the bill from the member from Parkdale–High Park this afternoon.

I just want to start out with a story, as I sometimes do. Growing up in the border town of Fort Erie, a child of the 1970s and early 1980s, I lived in the north end of town. It was a great neighbourhood to grow up in—a lot of boys—great for road hockey, playing baseball and taking hikes through the woods.

One friend of mine named Bob—we’ve known each other for a long time. It’s hard to remember now exactly what year it was. I think it was sort of late 1970s. I think I was about 11 or 12 at the time.

As the expression goes, his father came out of the closet and announced that he was a gay man. At the time, in Fort Erie, this was scandalous. Jack was his name. I can still picture Jack. He always had a smart business suit on. I think he actually worked in Buffalo. He was a business leader; he just looked totally corporate—a friendly guy, with a tough streak. That’s the last I ever saw him. He disappeared. I remember parents around us kids talking in hushed tones. This wasn’t a topic that you addressed. The only thing I remember is one of the parents talking about, “Oh, move to the Village in Toronto.”

Now, to me, Toronto was sort of the Eaton Centre, Maple Leaf Gardens and then Yonge Street up and down the middle. The biggest city—I didn’t know what the heck a “village” was in Toronto. “They’re living a bohemian lifestyle” was another thing that they said back at this point in time. We didn’t have, obviously, Google at that point. I looked up “bohemian” and then pictured people wearing Hawaiian shirts, and the village like in Gilligan’s Island or something like that. I tried to figure out what this all meant.

Fast-forward to today, raising my own daughters in a very different world—thankfully, one with a lot less discrimination and a lot more understanding. There will be new forms. It’s not gone; it still exists, sadly so. But my daughter Miller will have a different experience. She’ll know parents; two moms, two dads. She’ll know parents who identify as “parent” and “neither”, or three.

Maitland is too little, but Miller will now visualize, I think—my colleague talked about Christmas. If there’s a three-parent family, she’s going to first think, “Well, that’s six grandparents. That’s a lot of presents for Christmas-time.” That’s how she’ll visualize that.

I know that if you were suffered persecution or discrimination, if you were denied benefits, this would probably be offensive, to an extent. But there has been, considering my time, when we started, more progress and, in the grand scheme of civil rights battles, rapid progress. I see my own evolution in my thinking as an individual, as an MPP, on issues like equal marriage.

I commend the member for Parkdale–High Park, who has, in her initiative here, forced members of the assembly to contemplate a new round of rights issues where, quite frankly—we walked through the examples—we’re far behind the times. I’ve always known the member, since when she was elected in 2006, to be one who will stand up for rights and push us to make sure that we update our laws to match those rights.

There are three components of her bill that I want to speak to. I realize that just with my anecdote, I’ve taken up a lot of my time.

First, the bill allows partners in a same-sex marriage to have a child through the use of a donor or surrogate and for both members of the same-sex couple to be considered parents of that child legally. It makes a lot of sense. The member gave some heartwarming, moving examples of such. The bill removes the terms “mother” and “father” from birth certificates and replaces them with “parent.”

The third part I wanted to talk about is that the bill allows for more than two parents to be included on said birth certificates. The member’s staff was kind enough to
give me a lot of background material too on the legislation and actually said that this bill will bring Ontario in line with other provinces and remove a major source of unnecessary stress and legal costs for LGBTQ parents, who are forced to fight a discriminatory system.

In 2006, there was a case before the Ontario Superior Court of Justice, M.D.R. v. Ontario, the deputy registrar of the province at the time fighting two women to be counted as parents of a child. The court applied section 15 of the charter, discrimination based on sex, and ultimately agreed with the applicants. Despite this, our legislation since 2006—it shocked me when I looked into this—had not been updated to reflect that reality.

During the M.D.R. case, a young 12-year-old girl affected by the legislation had moving testimony. She said:

“I just want both my moms recognized as my moms. Most of my friends have not had to think about things like this—they take for granted that their parents are legally recognized as their parents. I would like my family recognized the same way as any other family, not treated differently because both my parents are women.

“It would help if the government and the law recognized that I have two moms. It would help more people to understand. It would make my life easier. I want my family to be accepted and included, just like everybody else’s family.”

From a 12-year-old girl at the time. So good for the member in bringing this forward, a change in the legislation.

I am going to raise a concern that I hope will be addressed in committee—and I am supporting the legislation today. I think committee will help us look at things. It talks about making the term “parent” for neutrality here. I understand that a trans man who gives birth may not want to identify as “mother” or “father”; they will use the term “parent.”

One thing you learn too intuitively: We all know we love our kids and the attachment. When you have them, you just get that in your gut, that amazing connection. This is what it’s all about: love, at the end of the day. I still have the same thing about being a father and a dad. I wonder if the member will consider, as part of this, that on the birth certificate we could use “father,” “mother” or “parent,” if that works. I’m sure we’ll hear at committee if people have strong opinions on either side, but I think that actually is inclusive and includes all options for the parents in how they identify themselves.

I’m taking up too much time. On the third one, the notion of three parents, as she brought up, again, there are strong court indications about why this is necessary, and past time as well. In A.A. v. B.B., the court talked about how there was no doubt that when the law was written, nobody would have anticipated that reproductive technology would have come that way to allow for this option—another good initiative that the member has in her bill, and I certainly support that change.

I apologize to my colleague; I’ve spoken too long. I’m proud to support the bill.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Miss Monique Taylor: I would just like to start by thanking my colleague the member from Parkdale–High Park and letting her know how proud I am of the work that she’s done in the LGBTQ community, in always bringing issues forward to change the date of how we’re looking at our families and how we’re moving forward. Huge kudos to her for the work she’s done across the entire community.

I would like to also thank and commend others who I’m sure have put lots of hours and work into this bill. I know it takes a community; it takes a lot of people and a team to make good legislation, and to make sure that that legislation gets to the place where it needs to be. So congratulations to all of them.

The basic notion of this bill is really quite simple: All parents should have equal rights under the law. It sounds straightforward enough, but the law, and changing the law, as we all know, is very complex, at best. It’s made quite evident by the 21 pages that make up the bill.

A huge amount of work has gone into this, and the member for Parkdale–High Park, as I said, deserves all of our gratitude, along with her staff, for the work that they’ve done.

I would also like to thank Kirsti Mathers McHenry, whose personal experience with her own children encouraged her to be the driving force behind this legislation. I’m sure that many others have added their thoughts and advice along the way.

As I said, the idea that all parents should have the same rights is a pretty straightforward concept. It makes sense that loving families, no matter what sexual orientation, should have the same protections and rights, to allow their families to thrive and be secure.

As the NDP critic for children and youth services and also as a mother, I always think about what is best for the child. There is no doubt in my mind that every child should have the right to grow up with the full support of loving parents, whoever they may be. I know it isn’t always possible, but the very least we can do is not put obstacles in the way that would deprive them of that. But that is what we are doing under our current laws. The fact that Ontario law is not keeping up with Ontario society is problematic.

The history of LGBTQ rights in Canada is one of court case after court case after court case over a number of years—of battles that have been won. We have moved forward, but for some reason our laws have not kept up with the inevitable results of those winning battles.

It has been legal for same-sex couples to adopt since 1995. In Ontario, same-sex marriages have been legal for 12 years. Thousands upon thousands of healthy children are growing up in loving homes with same-sex parents. Their numbers are growing each year, but it’s not a new thing; it’s been happening for years. As we grow to better understand, respect and celebrate our differences, our appreciation for everyone’s human rights becomes healthier. That’s what is happening in a developing society.
Scientific advances also force us to reconsider the laws we have. Development of in vitro fertilization and surrogate motherhood demand that we move beyond the so-called traditional definition of parents. Yet still, there is a gap in our laws that says a woman who is married to a woman who gives birth is not automatically a parent if they use a known sperm donor. They may have been together in a stable relationship for years; they may have thought very carefully about what it meant to bring a child into this world, as many of us consciously make that choice, and together, made the decision that yes, that was what they wanted: that together they were committed to raising a child. Yet still, we would need to go to court and go through an adoption process before they could give the child the security it deserves. We know the court process in Ontario and the long, excruciating forms of paperwork, time and money that would go into that process. It’s really not necessary to have to have all that red tape.

We have already heard of the anguish that can be caused when a parent is not guaranteed the right to look after their child if something should happen to the birth mother. That is bad for the child. That’s not right: Same-sex parents should not have to adopt their own children, and the courts agree. In 2006, as we heard from the previous speaker, Justice Rivard found the Ontario birth registrations process to be discriminatory because it excluded non-biological lesbian co-mothers.

In 2007, an Ontario Court of Appeal said that there is a legislative gap in the scheme for parental recognition. It may be in a child’s best interests to recognize more than two parents.

It’s time to close that gap. Today, this bill has been brought forward for us, and it’s time to move it forward and to catch up with places like Quebec, BC, Manitoba and Alberta. It’s time that our laws reflected society’s reality and stopped discriminating against LGBTQ families and, quite frankly, families of all different types, whoever they may be in this province, knowing that if we put the child’s best interests first in our minds, this is what the child would want: for both parents to be legally their parents without having to go through a tremendous exertion of time and energy. How would that make that child feel? That their family had to go to court to make them legitimate, I think, is a sad way for a child who is loved by both of their parents already.

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So I again commend the member, my colleague from Parkdale–High Park, and all of the people who are here today to support this wonderful, fabulous initiative, moving forward into a future that is definitely more inclusive and brighter and safer and better for our children in a loving, healthy, family environment. Thank you, Speaker.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate?

Mr. Han Dong: Before I begin, I want to say another hello to Princess Ruby. You look fantastic today, and you will receive many, many gifts in the upcoming Christmas.
In terms of applications, Mitchell said that it’s “anti-quated,” but it doesn’t ruin his life. Then he also said, “But leaving gender out wouldn’t hurt anyone” either. I think those are very good points, and it’s not just about birth certificates. It’s about school applications, applying for summer camps, as well as after-school programs or on weekends.

I asked Mitchell about co-parenting, and he said that he actually has friends—two females and two males—who have been co-parenting very well for 12 years without any problems, but he knows of other situations where things got difficult. It’s interesting—he said, and I’m quoting again, “For my friends, I think it’s great,” but he does have some concerns about how complicated it can become. We all know, Mr. Speaker, that as soon as you involve even one more parent, the complication rate isn’t just slightly more; it’s probably 10 times more complicated because relationships change, people want to move away and have career changes. You can see the real tug of war in terms of co-parenting when there are more than two parents, but it doesn’t mean it can’t be done. There are many successful examples. Again, I look forward to hearing what co-parenting parents have to say, as well as some of the experts in the field.

We heard the member from Hamilton Mountain, as well as the member from Parkdale–High Park, who spoke about other provinces, ServiceOntario and how people have had to adopt their own children. It’s hard to even say those words. As a parent myself of four children, it’s very self-explanatory: These are your children; they’re going to stay your children and nobody can ever take that away from you, no matter what happens in your relationships, your health or your partner’s health.

In a way, this is the new multi-multiculturalism, Mr. Speaker: different types of relationships and different types of nuclear families. Just as it was a struggle for many Canadians to understand different cultures, different neighbourhoods, different communities, I think sometimes it’s a struggle for people to address changing dynamics. It’s not enough to just watch Modern Family on TV. There’s more to it than that. There are the legal ramifications. There are ramifications in terms of having health care benefits with your work, whether that child is covered, under whose benefits in terms of life insurance, in terms of even the beneficiaries on bank accounts, RSPs, investments and things like that.

I think that’s what’s important for us to address, not just to come up and talk about Mitchell and Oren and all the other wonderful people who are here today and all their relationships, which we support of course, but to talk about the legal ramifications and what it all means in terms of work, insurance and things like that.

It’s the holiday season. Mitchell, Oren, Eytan and Yael are going to be celebrating Hanukkah this week, as am I. But to the many children who are going to be celebrating Christmas soon, it’s the holiday time and it’s very important that we focus on what is in the best interests of the children, because that’s what it’s really about and that’s what we’re here to ensure.

I’m looking forward to seeing Mitchell, Oren, Eytan and Yael in Mexico because we’re going to be kind of overlapping on all of our extended families and all of our different connections. I’m looking forward to seeing them around the new year time and celebrating with them.

The Deputy Speaker (Mr. Bas Balkissoon): Further debate.

Ms. Jennifer K. French: It is, of course, my privilege to stand in this Legislature and add my voice to the debate.

I’d like to take a moment to welcome the families here today who obviously, of course, love their children and who are here at Queen’s Park advocating for their families.

It is my honour, as always, to rise in this Legislature to discuss a piece of legislation on behalf of my constituents in Oshawa and people across the province. Today it is especially an honour as we are discussing a very important bill that will defend the rights of same-sex parents in Ontario.

I would like to start by thanking my colleague the member from Parkdale–High Park for putting this bill forward and bringing this issue to light. As always, she is a strong advocate for the marginalized and a constant defender of human rights within our province. Today is no different, and for that and for many other things, we thank her. We applaud her efforts, and I look forward to continuing to work with her for years to come in the fight for fairness, equity and social justice. But on to the order at hand.

Today, we are discussing Bill 137, also known as Cy and Ruby’s Act, in regard to parental recognition. I would be remiss, Speaker, if I didn’t also cordially welcome Princess Ruby here to the Legislature of Ontario.

Sometimes legislation falls behind where we should be as a society. Fortunately, as legislators, we have the ability to make those necessary changes. We just need to keep our eyes open for where the gaps and opportunities are. Often, they are issues of inequality; issues where one group is treated differently than others; issues where the voice of the marginalized has been overlooked and ignored.

What we are discussing today is pretty simple: Heterosexual couples don’t have to ask to be recognized as parents; they just are. Queer parents should not have to adopt their own children. Think about what that means. Imagine having to defend the fact that a child is yours because of who you are. Empathy is a powerful thing and it is often what allows us to overcome oppression. Plain and simple, this is a denial of rights. It is a discriminatory practice, and today we have the opportunity to end it.

We’ve heard about what this bill will do, but I’ll explain here as well. If passed—excuse me, when passed, and I’m sure that it will—Cy and Ruby’s Act will amend the Children’s Law Reform Act and the Vital Statistics Act to eliminate the distinction between the person who gives birth and the child’s other parents and allow for the
Mrs. Cristina Martins: I rise today to address and support this important bill, Bill 137. I would like to once again welcome everyone who has joined us here today to listen to this very important debate, including Princess Ruby, and I know there are a few constituents as well from my riding of Davenport here.

I want to thank the member opposite from Parkdale–High Park for presenting this bill today. And I want to thank the many constituents of my riding of Davenport for reaching out to me this past week to share their thoughts and stories on this bill and how it lends itself to the important conversation about the deeply personal decision to become a parent.

On this side of the House, we are committed to supporting Ontario families and protecting the best interests of children. Our government is also firmly committed to ensuring that Ontarians, no matter their ethnicity, language, religion, belief, gender identity or sexual orientation, see their rights represented within our borders.

Today, families in our province come in many different shapes and sizes, as we’ve heard this afternoon: single parents, two mothers, two fathers and blended families. The truth of the matter is that our laws need to address the needs and circumstances of every single one of these families. That’s such an integral part of recognizing and respecting the rich diversity here in our province.

I can proudly say that we support the principles underlying this bill. As we continue to debate this bill and as it makes its way through the legislative process, we will have to closely consider the many potential situations that may arise in cases of assisted reproduction, while, most importantly, putting the interests of children first.

Mr. Speaker, I am committed and our government is committed to working with the member from Parkdale–High Park to carefully consider and work through what the impacts of the changes might be and what to do exactly, and to make sure that we do it right.

It has been my pleasure to stand in this House this afternoon in full support of Bill 137.

The Deputy Speaker (Mr. Bas Balkissoon): I thank everyone for their comments.

I now return to the member for Parkdale–High Park. You have two minutes.

Ms. Cheri DiNovo: Thank you to everyone who weighed in on this. It truly is a moment. As a queer woman, I remember the first demonstration back in 1971, when it was a gay demonstration for rights, on Parliament Hill—and here we are today, where all parties agree. It’s actually a moment. It’s a progressive and wonderful—it’s a holy moment, might I say. I want to thank everyone who is here and everyone who supported this.

Yes, it is shocking that we have to do this. I was shocked that this hadn’t changed. We were also shocked last June when we learned that conversion therapy for LGBTQ kids was still going on in this province. So it’s time to do the obvious. It’s time to get this to committee.

I really appreciated the non-gendered language discussion here, and I appreciated, yes, the implications the member from Thornhill was talking about. It’s not just about birth certificates; it’s about your whole life. That’s true, too.

I want to say a big thank you to my executive assistant, Andrea Houston, for the work she has done on this.

Applause.

Ms. Cheri DiNovo: Yes, absolutely.

She is a true activist. Thank you, Andrea—drinks to follow.

Again, this is part of a long progression, and I think it’s absolutely time to do the right thing.

With that, I’ll just say, have an incredibly happy holiday, everyone. I think I’m the last speaker in this
House before we break. Have a wonderful time with all of your diverse families.

To all the children that we get to share our Christmases, our Hanukkahs, our Kwanzaas, our festival of lights, and everything else we do, may they all have a wonderful, wonderful life.

The Deputy Speaker (Mr. Bas Balkissoon): The time provided for private members’ public business has expired.

PROTECTION OF VULNERABLE SENIORS IN THE COMMUNITY ACT, 2015
LOI DE 2015 SUR LA PROTECTION DES PERSONNES ÂGÉES VULNÉRABLES DANS LA COLLECTIVITÉ

The Deputy Speaker (Mr. Bas Balkissoon): We will deal first with ballot item number 12, standing in the name of Ms. Wong.


Is it the pleasure of the House that the motion carry? I declare the motion carried.

Second reading agreed to.

The Deputy Speaker (Mr. Bas Balkissoon): Pursuant to standing order 98(j), the bill is being referred to—

Ms. Soo Wong: The Standing Committee on Social Policy.

The Deputy Speaker (Mr. Bas Balkissoon): The member has requested that the bill be referred to social policy. Agreed? Agreed.

ROWAN’S LAW ADVISORY COMMITTEE ACT, 2015
LOI DE 2015 SUR LE COMITÉ CONSULTATIF DE LA LOI ROWAN

The Deputy Speaker (Mr. Bas Balkissoon): Ms. MacLeod has moved second reading of Bill 149, An Act to establish an advisory committee to make recommendations on the jury recommendations made in the inquest into the death of Rowan Stringer.

Is it the pleasure of the House that the motion carry? I declare the motion carried.

Second reading agreed to.

The Deputy Speaker (Mr. Bas Balkissoon): Pursuant to standing order 98(j), the bill is being referred to—

Ms. Lisa MacLeod: I refer this bill to the legislative assembly committee.

The Deputy Speaker (Mr. Bas Balkissoon): The member has requested the bill be referred to the legislative assembly committee. Agreed? Agreed.

The Deputy Speaker (Mr. Bas Balkissoon): Ms. DiNovo has moved second reading of Bill 137, An Act to amend the Children’s Law Reform Act, the Vital Statistics Act and other Acts with respect to parental recognition.

Is it the pleasure of the House that the motion carry? I declare the motion carried.

Second reading agreed to.

The Deputy Speaker (Mr. Bas Balkissoon): Pursuant to standing order 98(j) the bill is being referred to—the member for Parkdale–High Park.

Ms. Cheri DiNovo: Regulations and private bills.

The Deputy Speaker (Mr. Bas Balkissoon): The member has requested that it be referred to regulations and private bills. Agreed? Agreed.

Orders of the day?

Hon. James J. Bradley: I believe you will find that we have unanimous consent to revert back to motions.

The Deputy Speaker (Mr. Bas Balkissoon): The deputy House leader has requested unanimous consent to revert to motions. Agreed? Agreed.

COMMITTEE SITTINGS

Hon. James J. Bradley: I believe we have unanimous consent to put forward a motion without notice with respect to Bill 132, An Act to amend various statutes with respect to sexual violence, sexual harassment, domestic violence and related matters.

The Deputy Speaker (Mr. Bas Balkissoon): The member has requested consent. Do I have consent? Agreed.

Deputy House leader.


The Deputy Speaker (Mr. Bas Balkissoon): The deputy House leader has moved—

Mr. Gilles Bisson: Dispense.

The Deputy Speaker (Mr. Bas Balkissoon): Dispense.

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

Motion agreed to.

The Deputy Speaker (Mr. Bas Balkissoon): Orders of the day?

The Deputy Speaker (Mr. Bas Balkissoon): The deputy House leader has moved adjournment of the House. All those in favour, please say “aye.”

The guy who says “no,” I’m throwing you out. All those against, please say “nay.”

Interjection: Nay.

The Deputy Speaker (Mr. Bas Balkissoon): He’s ejected.

In my opinion, the ayes have it.

Mr. Steve Clark: On division.

The Deputy Speaker (Mr. Bas Balkissoon): On division. Carried. You sure are a difficult gang.

Before I let you go, I would just like to say to everybody, please have a happy holiday and a prosperous new year. We’ll see you on Tuesday, February 16, at 9 a.m.

The House adjourned at 1623.
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STANDING COMMITTEES OF THE LEGISLATIVE ASSEMBLY
COMITÉS PERMANENTS DE L’ASSEMBLÉE LÉGISLATIVE

Standing Committee on Estimates / Comité permanent des budgets des dépenses
Chair / Présidente: Cheri DiNovo
Vice-Chair / Vice-présidente: Monique Taylor
Bas Balkissoon, Chris Ballard
Grant Crack, Cheri DiNovo
Han Dong, Michael Harris
Sophie Kiwala, Todd Smith
Monique Taylor
Committee Clerk / Greffier: Christopher Tyrell

Standing Committee on Finance and Economic Affairs / Comité permanent des finances et des affaires économiques
Chair / Présidente: Soo Wong
Vice-Chair / Vice-présidente: Peter Z. Milczyn
Laura Albanese, Yvan Baker
Toby Barrett, Victor Fedeli
Catherine Fife, Ann Hoggarth
Peter Z. Milczyn, Dairene Vernile
Soo Wong
Committee Clerk / Greffier: Katch Koch

Standing Committee on General Government / Comité permanent des affaires gouvernementales
Chair / Président: Grant Crack
Vice-Chair / Vice-président: Joe Dickson
Mike Colle, Grant Crack
Joe Dickson, Lisa Gretzky
Ann Hoggarth, Sophie Kiwala
Jim McDonell, Eleanor McMahon
Lisa M. Thompson
Committee Clerk / Greffière: Sylwia Przezdziecki

Standing Committee on Government Agencies / Comité permanent des organismes gouvernementaux
Chair / Président: John Fraser
Vice-Chair / Vice-présidente: Cristina Martins
Robert Bailey, Vic Dhillon
John Fraser, Wayne Gates
Marie-France Lalonde, Harinder Malhi
Cristina Martins, Randy Pettapiece
Lou Rinaldi
Committee Clerk / Greffière: Sylwia Przezdziecki

Standing Committee on Justice Policy / Comité permanent de la justice
Chair / Président: Shafiq Qaadri
Vice-Chair / Vice-président: Lorenzo Berardinetti
Lorenzo Berardinetti, Bob Delaney
Randy Hillier, Michael Mantha
Cristina Martins, Indira Naidoo-Harris
Arthur Potts, Shafiq Qaadri
Laurie Scott
Committee Clerk / Greffière: Tonia Grannum

Standing Committee on the Legislative Assembly / Comité permanent de l’Assemblée législative
Chair / Président: Monte McNaughton
Vice-Chair / Vice-président: Jack MacLaren
Granville Anderson, Bas Balkissoon
Chris Ballard, Steve Clark
Jack MacLaren, Michael Mantha
Eleanor McMahon, Monte McNaughton
Soo Wong
Committee Clerk / Greffier: Trevor Day

Standing Committee on Public Accounts / Comité permanent des comptes publics
Chair / Président: Ernie Hardeman
Vice-Chair / Vice-présidente: Lisa MacLeod
Han Dong, John Fraser
Ernie Hardeman, Percy Hatfield
Lisa MacLeod, Harinder Malhi
Julia Munro, Arthur Potts
Lou Rinaldi
Committee Clerk / Greffière: Valerie Quioc Lim

Standing Committee on Regulations and Private Bills / Comité permanent des règlements et des projets de loi d'intérêt privé
Chair / Président: Indira Naidoo-Harris
Vice-Chair / Vice-présidente: Kathryn McGarry
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Monte Kwinter, Amrit Mangat
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Dairene Vernile, Bill Walker
Jeff Yurek
Committee Clerk / Greffier: Christopher Tyrell

Standing Committee on Social Policy / Comité permanent de la politique sociale
Chair / Président: Peter Tabuns
Vice-Chair / Vice-président: Jagmeet Singh
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