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Second Session, 41st Parliament

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**Official Report
of Debates
(Hansard)**

**Journal
des débats
(Hansard)**

Thursday 20 October 2016

Jeudi 20 octobre 2016

Speaker
Honourable Dave Levac

Président
L'honorable Dave Levac

Clerk
Deborah Deller

Greffière
Deborah Deller

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CONTENTS / TABLE DES MATIÈRES

Thursday 20 October 2016 / Jeudi 20 octobre 2016

ORDERS OF THE DAY / ORDRE DU JOUR

Time allocation

Hon. Yasir Naqvi	875
Mr. Lorne Coe.....	876
Mr. John Vanthof.....	878
Hon. Michael Coteau	879
Ms. Lisa MacLeod	880
Mrs. Lisa Gretzky	881
Debate deemed adjourned.....	884

INTRODUCTION OF VISITORS / PRÉSENTATION DES VISITEURS

Hon. Helena Jaczek.....	884
Mr. Bob Delaney.....	884
Mr. John Fraser	884
Ms. Peggy Sattler	884
Mr. Lou Rinaldi.....	884
Hon. Reza Moridi.....	884
Mme France Gélinas	885
Hon. Glen R. Murray	885
Ms. Sophie Kiwala.....	885
Hon. Deborah Matthews	885
Ms. Daiene Vernile	885
Ms. Teresa J. Armstrong.....	885
Ms. Peggy Sattler	885
Ms. Cheri DiNovo.....	885
The Speaker (Hon. Dave Levac).....	885

ORAL QUESTIONS / QUESTIONS ORALES

Energy policies

Mr. Patrick Brown.....	885
Hon. Kathleen O. Wynne.....	885
Hon. Glenn Thibeault.....	886

Energy policies

Mr. Patrick Brown.....	886
Hon. Kathleen O. Wynne.....	886
Hon. Glenn Thibeault.....	887

Electronic health information

Ms. Andrea Horwath.....	888
Hon. Kathleen O. Wynne	888
Hon. Eric Hoskins	888

Privatization of public assets

Ms. Andrea Horwath.....	888
Hon. Kathleen O. Wynne	888
Hon. Charles Sousa.....	889

Arts and cultural funding

Mr. Steve Clark.....	889
Hon. Eleanor McMahon.....	889

Health care funding

Mme France Gélinas	890
Hon. Eric Hoskins	890

Aboriginal land claim

Ms. Daiene Vernile	891
Hon. David Zimmer	891

Health care funding

Mr. Jim Wilson.....	891
Hon. Eric Hoskins	891

Public transit

Ms. Cheri DiNovo.....	892
Hon. Steven Del Duca.....	892

Senior citizens

Ms. Sophie Kiwala.....	893
Hon. Dipika Damerla	893

Health care

Ms. Lisa MacLeod.....	893
Hon. Eric Hoskins	893

Hydro rates

Ms. Jennifer K. French.....	894
Hon. Glenn Thibeault.....	894

School transportation

Mr. John Fraser	894
Hon. Steven Del Duca.....	895

Hydro rates

Mr. Ernie Hardeman.....	895
Hon. Glenn Thibeault.....	895

Notice of dissatisfaction

The Speaker (Hon. Dave Levac)	896
-------------------------------------	-----

Correction of record

Mr. John Fraser	896
-----------------------	-----

MEMBERS' STATEMENTS / DÉCLARATIONS DES DÉPUTÉS

Highway funding

Mr. Lorne Coe.....	896
--------------------	-----

Diwali

Miss Monique Taylor	896
---------------------------	-----

Applefest

Mr. Granville Anderson	896
------------------------------	-----

Small business

Mr. Victor Fedeli.....	897
------------------------	-----

Larung Gar

Ms. Cheri DiNovo.....	897
-----------------------	-----

Flu immunization	
Mr. Bob Delaney	897
Christopher Pennington	
Ms. Lisa M. Thompson	897
Energy policies	
Ms. Teresa J. Armstrong	898
Children’s Vision Awareness Month	
Mr. John Fraser	898

Agriculture industry	
Ms. Lisa M. Thompson	901
Hospital funding	
Mme France Gélinas	901
Hydro rates	
Mr. Lorne Coe	902
Private members’ public business	
The Deputy Speaker (Ms. Soo Wong)	902

INTRODUCTION OF BILLS / DÉPÔT DES PROJETS DE LOI

Municipal Statute Law Amendment Act (Councillor Pregnancy and Parental Leave), 2016, Bill 46, Ms. Vernile / Loi de 2016 modifiant des lois en ce qui a trait aux municipalités (congés de maternité et congés parentaux des conseillers municipaux), projet de loi 46, Mme Vernile	
First reading agreed to.....	898
Ms. Daiene Vernile	898
Protecting Rewards Points Act (Consumer Protection Amendment), 2016, Bill 47, Mr. Potts / Loi de 2016 sur la préservation des points de récompense (modification de la Loi sur la protection du consommateur), projet de loi 47, M. Potts	
First reading agreed to.....	898
Mr. Arthur Potts	899
Peter Kormos Act (Repealing the Safe Streets Act), 2016, Bill 48, Ms. DiNovo / Loi Peter Kormos de 2016 sur l’abrogation de la Loi sur la sécurité dans les rues, projet de loi 48, Mme DiNovo	
First reading agreed to.....	899
Ms. Cheri DiNovo.....	899

PETITIONS / PÉTITIONS

Hydro rates	
Mr. Ted Arnott	899
Dog ownership	
Ms. Cheri DiNovo.....	899
Hydro rates	
Ms. Lisa M. Thompson	899
Dental care	
Mme France Gélinas	900
Highway ramps	
Mrs. Julia Munro.....	900
Privatization of public assets	
Mr. Michael Mantha	900
School closures	
Mrs. Gila Martow.....	900
Police ticketing	
Ms. Cheri DiNovo.....	901

PRIVATE MEMBERS’ PUBLIC BUSINESS / AFFAIRES D’INTÉRÊT PUBLIC ÉMANANT DES DÉPUTÉS

Health care	
Ms. Lisa MacLeod.....	902
Mr. Percy Hatfield.....	904
Mr. Lou Rinaldi.....	905
Mr. Michael Harris.....	905
Mme France Gélinas	906
Mr. Bob Delaney	907
Mr. Jeff Yurek.....	907
Hon. Indira Naidoo-Harris	908
Mr. Bill Walker	908
Ms. Lisa MacLeod.....	909
Domestic and Sexual Violence Workplace Leave, Accommodation and Training Act, 2016, Bill 26, Ms. Sattler / Loi de 2016 sur le congé et les mesures d’accommodement pour les employés victimes de violence familiale ou sexuelle et la formation dans le lieu de travail, projet de loi 26, Mme Sattler	
Ms. Peggy Sattler	910
Ms. Sophie Kiwala	912
Mr. Ted Arnott	912
Mr. Michael Mantha.....	913
Hon. Tracy MacCharles	914
Mrs. Gila Martow	915
Mme France Gélinas	916
Mrs. Julia Munro	916
Ms. Peggy Sattler	917
Bangladeshi Heritage Month Act, 2016, Bill 44, Mr. Berardinetti / Loi de 2016 sur le Mois du patrimoine bangladais, projet de loi 44, M. Berardinetti	
Mr. Lorenzo Berardinetti.....	917
Mr. Lorne Coe.....	919
Mr. Jagmeet Singh	919
Mr. Arthur Potts	920
Mrs. Gila Martow	922
Ms. Jennifer K. French.....	923
Hon. Glen R. Murray.....	924
Mr. Lorenzo Berardinetti.....	924

Health care	
Motion agreed to	925
Domestic and Sexual Violence Workplace Leave, Accommodation and Training Act, 2016, Bill 26, Ms. Sattler / Loi de 2016 sur le congé et les mesures d’accommodement pour les employés victimes de violence familiale ou sexuelle et la formation dans le lieu de travail, projet de loi 26, Mme Sattler	
Second reading agreed to	925
Bangladeshi Heritage Month Act, 2016, Bill 44, Mr. Berardinetti / Loi de 2016 sur le Mois du patrimoine bangladais, projet de loi 44, M. Berardinetti	
Second reading agreed to	925

ORDERS OF THE DAY / ORDRE DU JOUR

Time allocation	
Mr. Arthur Potts	925

Ms. Jennifer K. French	926
Motion agreed to	927
Patients First Act, 2016, Bill 41, Mr. Hoskins / Loi de 2016 donnant la priorité aux patients, projet de loi 41, M. Hoskins	
Mr. Jeff Yurek	927
Ms. Cheri DiNovo	934
Mr. Arthur Potts	934
Ms. Lisa M. Thompson	935
Mr. Peter Tabuns	935
Mr. Jeff Yurek	935
Mr. Peter Tabuns	936
Hon. Jeff Leal	938
Ms. Lisa M. Thompson	939
Ms. Cheri DiNovo	939
Hon. Glen R. Murray	939
Mr. Peter Tabuns	940
Second reading debate deemed adjourned	940

LEGISLATIVE ASSEMBLY
OF ONTARIO

Thursday 20 October 2016

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Jeudi 20 octobre 2016

The House met at 0900.

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

Prayers.

ORDERS OF THE DAY

TIME ALLOCATION

Hon. Yasir Naqvi: I move that, pursuant to standing order 47 and notwithstanding any other standing order or special order of the House relating to Bill 37, An Act to amend the Early Childhood Educators Act, 2007 and the Ontario College of Teachers Act, 1996, when the bill is next called as a government order the Speaker shall put every question necessary to dispose of the second reading stage of the bill without further debate or amendment and at such time the bill shall be ordered referred to the Standing Committee on Finance and Economic Affairs; and

That the Standing Committee on Finance and Economic Affairs be authorized to meet on Thursday, October 27, 2016, from 9 a.m. to 10:15 a.m. and from 2 p.m. to 6 p.m. for the purpose of public hearings on the bill; and

That the Clerk of the Committee, in consultation with the committee Chair, be authorized to arrange the following with regard to Bill 37:

—Notice of public hearings on the Ontario parliamentary channel, the Legislative Assembly's website and Canada NewsWire; and

—That the deadline for requests to appear be 3 p.m. on Monday, October 24, 2016; and

—That witnesses be scheduled to appear before the committee on a first-come, first-served basis; and

—That each witness will receive up to five minutes for their presentation followed by nine minutes for questions from committee members; and

—That the deadline for written submissions be 6 p.m. on Thursday, October 27, 2016; and

That the deadline for filing amendments to the bill with the Clerk of the Committee shall be 12 p.m. on Monday, October 31, 2016; and

That the committee be authorized to meet on Thursday, November 3, 2016, from 9 a.m. to 10:15 a.m., and from 2 p.m. and 6 p.m. for the purpose of clause-by-clause consideration of the bill; and

That on Thursday, November 3, 2016, at 4 p.m., those 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 to dispose of all remaining sections of the bill and any amendments thereto. At this time, the Chair shall allow one 20-minute waiting period pursuant to standing order 129(a); and

That the Committee shall report the bill to the House no later than Monday, November 14, 2016. In the event that the committee fails to report the bill on that day, the bill shall be deemed to be passed by the committee and shall be deemed to be reported to and received by the House; and

That, upon receiving the report of the Standing Committee on Finance and Economic Affairs, the Speaker shall put the question for adoption of the report forthwith, and at such time the bill shall be ordered for third reading, which order may be called that same day; and

That, when the order for third reading of the bill is called, two hours of debate shall be allotted to the third reading stage of the bill, apportioned equally among the recognized parties. At the end of this time, the Speaker shall interrupt the proceedings and shall put every question necessary to dispose of this stage of the bill without further debate or amendment; and

The votes on second and third reading may be deferred pursuant to standing order 28(h); and

That, in the case of any division relating to any proceedings on the bill, the division bell shall be limited to five minutes.

The Speaker (Hon. Dave Levac): Mr. Naqvi has moved notice of motion number 2. Mr. Naqvi.

Hon. Yasir Naqvi: Thank you very much, Speaker. This piece of legislation is one more example of our government's commitment to improve student safety and well-being so our children have every opportunity to succeed.

Teachers need to know that if there are allegations made against them, the discipline process will not drag on unnecessarily. It is important for parents to know that the college has taken swift and appropriate action when discipline is required. By passing this piece of legislation, we can increase the already-strong public confidence in the vast majority of teachers who dedicate their lives to helping our students succeed every day.

This proposed legislation, if passed, would strengthen the authority of the Ontario College of Teachers to take action while ensuring the process is open and transparent for everyone involved.

I'm glad that we all agree to support this bill. As we have heard during debate, everyone in this House agrees that student safety and a transparent discipline process are paramount. Passing this bill is an important step in that direction.

This is the third time this piece of legislation is being introduced in the House. We are now acting expeditiously to reintroduce the Protecting Students Act, 2016, which this House has debated for almost seven hours already. It's important we move forward with Bill 37 and bring it before the committee. It is now time to move this legislation forward in a timely manner. We owe it to our teachers, our students and, of course, their parents. It is time that we end second reading and refer the bill to committee.

In committee, of course, stakeholders will present their views. We'll be able to hear directly from teachers and parents their thoughts on this very important bill. Committee members will also have an opportunity to move amendments to the bill as well.

I look forward to the support of all members of this House on this very important piece of legislation so that this House can move to substantive debate on other very important matters also. There are a number of important pieces of legislation that have to be introduced and debated that we would like to have a chance to debate in the House and move through the legislative process, such as: Bill 7, the Promoting Affordable Housing Act; Bill 27, the Burden Reduction Act; Bill 39, the Aggregate Resources and Mining Modernization Act; Bill 41, the Patients First Act; and Bill 45, the Election Statute Law Amendment Act. These other important pieces of legislation need to go through the legislative process before the end of the session, and that is why I have moved this motion, Speaker.

I urge all members to support this motion. Bill 37, as I said, is a very important piece of legislation. Protecting the safety of our children and students and maintaining the integrity of the teaching profession is absolutely paramount. If passed, the Protecting Students Act and subsequent regulations will make the Ontario College of Teachers disciplinary processes more efficient, help better protect students and teachers and reduce the potential for conflicts of interest.

Speaker, I end my debate now and urge all members to support this motion.

The Deputy Speaker (Ms. Soo Wong): Further debate.

Mr. Lorne Coe: Thank you, Speaker, and good morning. As the official opposition critic for advanced education and skills development, I appreciate the opportunity to rise in the Legislature once again to address Bill 37, the Protecting Students Act, starting with the government's time allocation motion. What's clear is that Bill 37 is an extremely important piece of legislation affecting the future leaders of our great province and the teachers, like my daughter, who each day play a significant and important role in moulding the minds of young men and young women.

0910

Earlier this week, I stood in the Legislature and discussed the government's lack of a substantive, coherent and focused agenda. The government will be moving time allocation, as they've done, on a bill that they've introduced three times here in the Legislature, Speaker—three times. They're moving time allocation on a bill that they've had plenty of time to pass, and demonstrate their commitment to the principles of the proposed legislation as a priority. And when they finally do bring the bill forward for debate, they limit that debate—they limit the debate—and the amount of time elected representatives of this Legislature have to discuss it. Speaker, the people of Ontario sent us here to do a job. They sent us here to be their voices on legislation that affects their families and their livelihoods.

Speaker, when in opposition, the chief government whip and the member of provincial Parliament for St. Catharines, based on his years of experience, which I greatly respect, summed up the way governments use time allocation by saying, "What you have with this time allocation motion, with this closure motion, is a government that, every day it comes into this House, gets worse in the way it deals with the democratic process"—the democratic process. I could not agree more with the chief government whip's opinion—based on his years of experience and sterling career here in the Legislature—because it's an apt way to describe his government's approach to the business of this Legislature, and indeed their view of the democratic process.

I think my colleague the member for Renfrew-Nipissing-Pembroke said it best when describing the Premier and her government: "They have long since forgotten and do not care about what is right for the people of Ontario. They have long since tossed that right under the bus.... They don't care about what is right or good for Ontario anymore. They are in the third quarter of the football game, and they're trailing. They're now trying to come up with some kind of a strategy to try to somehow pull this one out of the fire."

Since the LeSage report was released in 2012, this government has had three different education ministers, and in that period there's been no movement on this file—until now. Let me repeat: Four years have gone by and the government has done little on this file. Speaker, this government wants you to know that this legislation is a priority for them, but four years have gone by. In fact, it's such a priority that the Associate Minister of Education, the member of provincial Parliament for Halton, spent a majority of her time during the debate of this bill, earlier this week, talking about the government's other priorities and not substantively about Bill 37 at all.

The government prorogued the House in a hurry this past September, killing all the legislation before this Legislature, including Bill 37, which was at that time named Bill 200. Why, Speaker? So they could reintroduce all the bills that were sitting on the order paper and start counting again from zero. This government stopped the process of several important bills affecting hard-

working Ontario families by proroguing the Legislature to offer Ontarians a too little, too late attempt at changing the conversation from their failed record. Otherwise, this government has reintroduced the old bills that were on the order paper during the last session, and they've called it a grand new direction.

Speaker, given the number of times this government moves time allocation, I know they don't hold the opposition's opinion in high regard, and by association the thousands of people that the opposition members represent.

Let's turn back to the content of Bill 37. It's my understanding that the Ontario College of Teachers welcomes the proposed changes: greater transparency and investigation in disciplinary matters; faster complaint resolution; and making the complaint process more accessible to the public.

The college's registrar, Michael Salvatori, said, "We are committed to ensuring that our teachers are supporting the success and achievement of our students. And that is why we have been working with the government to strengthen the disciplinary processes at the college. In the rare cases where discipline is required, teachers, parents and students will know that a fair and transparent process will be in place."

Speaker, I'm sure you would agree that the public needs to know that a process is in place that will create prompt reaction and resolution. They don't want to be kept in the dark. It's a reasonable expectation, isn't it?

Late last month, Speaker, City TV ran a piece on their news channel in which they asked the government what ever became of this legislation, Bill 37, and before that, Bill 200, and whether they had any intention of ever passing it. The Minister of Education, while ignoring the questions of why this bill hasn't moved anywhere, said that the bill was a priority for them, and then, of course, a week later, brought forward their bill for the third time—for the third time—stating it was a priority for them. They tried to seize a moment with the speech from the throne, but it's a moment that has already come and gone, Speaker. It has come and gone.

That being said, we are supportive of the proposed legislation that's reflected in Bill 37, the Protecting Students Act, a bill which I believe is much needed. While it can be improved—and we will take that opportunity, Speaker, to bring forward amendments during its time at committee, and I look forward to being at committee as the official opposition critic for advanced education and skills development—it addresses in large part the outstanding recommendations from the LeSage report released in 2012.

When this bill was first introduced in 2013, as Bill 103, the Ontario Progressive Conservative caucus did not feel it went far enough, and we still have that opinion. At that time, my caucus offered support for the bill as a good first step, though we certainly felt there were elements missing from the bill that needed to be entrenched in the legislation.

Now, however, we're pleased, to a degree, to see that Bill 37 will ensure a teacher's certificate is automatically revoked if he or she has been found guilty of certain forms of sexual abuse or acts related to child pornography.

Sexual abuse and exploitation of children are unacceptable crimes on one of the most vulnerable populations in our society, and there should be zero tolerance for these types of acts. There's no place for child exploitation in this province, or in any part of society, for that matter, and we expect all individuals, regardless of profession, who engage in this behaviour to be brought to justice.

I would also like to highlight a few other key provisions within the legislation that help strengthen the current educational system.

The bill will require employers to inform the college, the Ontario teachers college, when they have restricted a teacher's duties or dismissed him or her for misconduct. Further, it will allow the college to share information with the school board if the subject of the complaint is subject to an interim restriction or suspension because he or she poses an immediate risk to a child or student. These amendments to the current regulations will help make it easier for the Ontario College of Teachers, and school boards, for that matter, to work together to ensure the safety of our children in our schools.

The bill also sets clear rules for dispute resolution and improves timelines for the investigation and consideration of complaints. This is a much-needed update to a process that, at the moment, is confusing and lacks transparency and accountability.

0920

In addition, the bill would improve the investigation and disciplinary processes of the College of Early Childhood Educators by establishing limitations on when and how often a member of the college can apply to have terms, conditions or limitations varied or removed from his or her certificate. These are much-needed steps and legislative directions which we as a caucus in the Ontario Progressive Conservative Party support.

That being said, there are still areas where this bill can be improved. My colleague the member for Haldimand-Norfolk, in his speech during debate of this bill, put forward an interesting possible amendment, Speaker, that I'd like to share with the members here in the Legislature, including yourself. When noting that the original proposed legislation was being amended to require a hearing if an offender wishes to work with children again, the member for Haldimand-Norfolk proposed that the school board that will end up listening and making decisions on these hearings should be made up of subject matter experts on sexual abuse and child pornography, to ensure that these decisions are being taken in a manner that is in the best interests of the students.

A number of members of the Legislature have also pointed out during debate of Bill 37 that we need to make sure that within the proposed legislation, there are safeguards for teachers and early childhood educators who

are falsely accused. We need to make sure that this legislation protects all concerned in the process. This aspect is something that we will examine and discuss further when this legislation arrives in the standing committee.

As I said earlier this week, and I believe it bears repeating, I want to stress that the overwhelming majority of teachers are there to excel—including my daughter—to teach our next generation of leaders and to ensure that they're on the path to success and to succeed.

Teachers are entrusted to shape and mould the minds of tomorrow. They're called upon to go above and beyond for our children every day, every month, every year. While this legislation embodied in Bill 37 is most certainly aimed at a very small portion of the profession, there's no doubt in my mind that it's a necessary piece of legislation in order to ensure that we're doing what is necessary to protect and mould our next generation.

While the government has once again brought down the guillotine known as time allocation to stifle and limit debate, we will continue our diligence to monitor and evaluate this bill as it moves from the Legislature into standing committee and clause-by-clause, and propose amendments where we feel this bill can be strengthened and help the youth of our province to succeed in the way that they deserve to.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. John Vanthof: It's always an honour to stand in the House, but today, we're speaking, once again, about another time allocation motion. The motion is regarding Bill 37, Protecting Students Act. My colleague from Windsor West, in her remarks, will focus more on the act; I plan to focus more, as interim House leader, on the actual reasons why this act in particular did not need to be time-allocated.

We tend here to use parliamentary language and big words and long words, and it all sounds very important. But the way it actually works is, the government won the election, so they get to put forward legislation. They put forward legislation. We have a meeting once a week at House leaders—all three parties—and we try to work out the rules of engagement. That's basically what House leaders is: You work out the rules of engagement.

The rules of engagement—they put forward a bill and the time slots where they would like to debate it. Usually, the question comes up: "How many speakers would you like to put forward on this bill? How much time would you like to put forward on a bill?"

If there are bills we totally disagree with, we will put up the maximum amount of speakers, to make sure that we hold the government to account. But with this bill—I listened very intently to the debate—we are all in agreement. We all believe it could be made better, and we all have our ideas on how, but about the spirit of the bill, we are all in agreement.

Yet the government never even asked if they could move this bill forward without time allocation. They never bothered to use the true parliamentary process of

asking the other parties if they would be willing to make sure that this bill went through as quickly as possible.

It's not necessary to have to time-allocate a bill that we can all agree on to bring it through the House. I get along very well with the House leader from the Liberal Party and with the Conservative House leader. I think that we could—

Hon. Yasir Naqvi: We don't miss Gilles at all.

Mr. John Vanthof: Just for the record, I very much miss the member from Timmins–James Bay. Hopefully, he's watching. I will be glad to have him back.

The process wasn't followed. At no time was I asked, "How many speakers would you like to put up to this bill?" They didn't know, because they never asked. So we didn't need to go the route, in my opinion, of time allocation.

Particularly on a bill like this, where due process is crucially important, for the government to not even employ what is traditionally due process and bring the hammer down right away, without even bothering to ask if we could work together on this one, is really concerning.

The government House leader, in his remarks this morning—and I would have to agree with his statement that everyone in this House agrees that student safety is paramount. This is not a bill that lends itself to political one-upmanship, to political wrangling. There is a bit of that in this House. No one is going to deny that. But this bill isn't one of those, because every member in this House wants to do the right thing for children. Every member in this House respects the teaching profession and respects teachers, and understands the position of trust and responsibility they're in.

So it's incredibly troubling to us that at no point did the government even try to say, "How many speakers do you want to put forward?" They never gave us the chance. They never bothered. Why that's concerning is, is that the trend that this government is going to continue with how this bill goes forward? I don't think we needed to be time-allocated. I think we could have just let the debate die its natural process. But they never bothered to ask.

0930

They also had in the time allocation motion the amount of time that the public could speak. I think on this bill also the stakeholders—and they're very well-identified—have their points that they would like to put on the record. This isn't a bill that would demand months and months of public hearings; I don't think that's the case here. This is a bill where, actually, the government could have demonstrated how it could be and should be done; and that they didn't even bother is the toughest thing to understand.

The parliamentary process has been going for a long time, and we all rail against time allocation and, at times, you know what? From what I understand, we've all been guilty of it. But in this case there was absolutely no reason for it. You have to wonder, Speaker, is the government just unable to manage its timetable or unwilling?

Or, quite frankly, are they just—and I hope this isn't the case—either too lazy for the democratic process or just don't care? I think it's a question that needs to be put on the record because specifically this bill is the most egregious example I've seen.

I've only been here five years, Speaker, and I don't pretend to know all the rules and all the history, but this one, of all the bills, I didn't hear anyone speak against in the debate. I heard a lot of people talk about how the spirit of this bill has been introduced—or bills like it—the third time. One time it was stopped by the election, the second time by prorogation. But at no time did I hear anyone say that they were going to stop this, no matter what, and employ every tactic possible. No one has said that. There was no reason for time allocation. It's an egregious—I don't know how to describe this. How disappointed we are that the government doesn't bother to use the democratic tools that it has the power to use. For a government to continue to talk about openness and transparency, yet continue to use the hammer where it's absolutely not necessary, is truly disappointing. I think it doesn't bode well for the future.

With many of the other bills that the government House leader brought forward that they want to open up the schedule for, we may have some serious concerns. We may put up as many speakers as possible. But with this one, that was not the case. We were never asked. They just didn't bother, Speaker, and that's a travesty in our democracy.

The Deputy Speaker (Ms. Soo Wong): Further debate.

Hon. Michael Coteau: It's a pleasure to stand today to talk about this time allocation motion. I think it's an important thing for us to move forward on. The protection of young people in our education system is something that I know every single person in this Legislature agrees is an important thing. Madam Speaker, you would know very well, being a former school board trustee—you and I served for many years at the Toronto District School Board as trustees. I know that this type of legislation, if passed, would strengthen our education system by protecting young people here in Ontario.

It's something that the member from Timiskaming–Cochrane, the member from Whitby–Oshawa and many other members in the Legislature have spoken in support of. In fact, I have a couple of quotes from members here. The member from Lambton–Kent–Middlesex says, “Speaker, we obviously have an unequivocal responsibility as a society to protect our children and students.”

The critic from the third party says, “We all, whether MPPs, parents or teachers, recognize that we must have proper oversight and measures in place to ensure crimes are punished and kids are protected.”

It goes on and on. The member from Stoney Creek says, “As far as protection of the kids, there's no doubt about it. They should be protected 100% from any kind of abuse in their school setting.”

Madam Speaker, I always thought, when I got here to the Legislature, that sometimes the process was a bit

slow. At the school board and municipal councils you move forward with motions. You debate the issue. You move forward and there's a vote taken. Sometimes, in this process, it moves very slowly. We have an agenda, of course, as a government, to continue to make change here in the province of Ontario to support the students, children, youth, families and the people of Ontario.

Think about what is being held up in this Legislature right now if we don't move forward with this type of legislation, which everyone agrees is a good thing. The Promoting Affordable Housing Act, Bill 7, which was debated yesterday and the day before: We all know this is a great piece of legislation that's going to be able to build more affordable housing here in the province of Ontario through inclusionary zoning.

Madam Speaker, Bill 27, the Burden Reduction Act: This bill, if passed, will remove a lot of red tape when it comes to businesses being successful. It's interesting, because the opposition is always talking about setting up businesses for success here in the province of Ontario. The fact is, over the last several years, we've moved forward to remove a lot of red tape but we want to continue to remove burden for business. You would think that the opposition would want to move forward with that in a way which was quick and speedy.

We have the Aggregate Resources and Mining Modernization Act that's on the table; the Patients First Act; and the Election Statute Law Amendment Act, Bill 45, which I believe got a bit of press this morning. It looks at ways to modernize our electoral system here in the province of Ontario by allowing—and this is an interesting thing, since we're talking about students—it will provide us with an opportunity to have younger people, 16- and 17-year-olds, to register for elections. It will provide us with a better opportunity to engage young people, to get more young people engaged in the democratic process, and allow for them to register early so they can vote in the next election.

We've got a lot of items that we want to bring forward as a government, a lot of proposed pieces of legislation that I think would continue to make Ontario the great place that it is. We need to make sure that we can continue moving forward on a pathway that doesn't allow us to get caught up in the politics of this room, the process in this room, that takes a long time to move along pieces of legislation that we know everyone agrees with.

Every single person in this room thinks that this is a great piece of legislation. It's something that we need to do. It's been discussed and debated in this Legislature not only now but in the past many times. It's something that we know the College of Teachers would embrace. We know that parents would embrace this piece of legislation.

It would protect our young people here in the province of Ontario. As the minister responsible for children and youth here in the province, I think anything we can do to ensure that young people are set up for success—and protection is a huge piece of that—is something that we have an obligation as lawmakers to do.

So I think that we need to come together. We need to support this motion and we need to move forward to discuss other pieces of potential legislation that we may not necessarily agree on but, through the committee process, through the Legislature, we can work towards agreeing with.

0940

I want to just say thank you to the members who spoke earlier. I understand that they have concerns, but there's no question that they agree with the proposed legislation. I think that as MPPs, as elected members representing our ridings, we have an obligation to move forward with pieces of legislation that are logical, that make sense, and that will support the future of Ontario, Madam Speaker, which is our children and youth.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Ms. Lisa MacLeod: It's a pleasure to be here this morning with my colleagues to debate an education bill. But unfortunately, I take exception to the comments made by my friend and colleague the Minister of Children and Youth Services.

I think that far too often in this assembly, we rush through important pieces of legislation, only to amend them later on, or repeal them, or make regulatory changes to them because we haven't put enough effort into the consideration of whether the legislation is good or bad.

The other thing I find very difficult is, I find that when I'm sitting in the chamber and I'm hearing, from my colleagues, talk about the important issues of the day—and certainly education legislation is always very important—it's also something that when I feel like I have been denied the privilege and the honour to stand in this assembly to talk about that legislation and take part in the debate, then I think that we have failed in this assembly. I think that we should be encouraging all members to participate in topics that interest them. I know, for example, when I get the sheet that sometimes the government is good enough to provide us, with the information of what we will debate the following week, I'll look at the schedule and I'll think, "Wow, I would really like to talk about that education bill, or the energy rebate bill." But unfortunately, it's not my duty day. I might be in committee; I could be meeting with stakeholders. I may not have the opportunity to, and then I find that we're now moving into time allocation.

I was elected almost 11 years ago, and I can remember sitting in this chamber—and I was way at the back, at the very back. Actually, the only people who were further over were Bill Murdoch and Gerry Martiniuk. Christine Elliott and I sat just behind here. We remember in the early days, when John Tory was our leader and the McGuinty government had just formed a government, that we used to read quotes from people like Jim Bradley and others in this assembly who would be protesting the guillotine motion, as my colleague from Whitby–Oshawa would say. They would be so angry and so adamant that the government was shutting off debate, under Mike Harris.

So what we would do, Speaker—and I'm sure you remember some of those debates—is we would drag them all up, from David Caplan, at the time, Michael Bryant, George Smitherman—you name it. We were bringing up these—

Mr. Robert Bailey: Sandra Papatello.

Ms. Lisa MacLeod: Sandra Papatello was one. They were so adamant. And now I look back and I think, after 13 and a half years, I think these guys—if I actually did a study, I bet you, in 13 years, that the Liberal caucus over there, the Liberal government, has brought in the guillotine motion—time allocation, closure—more than Mike Harris ever did. I'd like to see somebody do that study, and I'd like to also see them compare it to Stephen Harper, who was elected for a decade federally.

The beauty of talking about a time allocation motion is I'm actually allowed to talk about time allocation. I would really like to talk about matters that are important for the day, but I find, increasingly in this assembly, we're starting to see this rush just to dump the bill and rubber-stamp it and then move on to something else. I think it's eroding the confidence of this assembly when they do that, and I think it's unfortunate.

I want to also point out one of the things that I've noticed has eroded in the past decade that I have been here. There used to be a lot more collegiality on our committees, and we used to travel the province a lot more, to talk to people about some of the issues that we would have here in the assembly.

But when you look at time allocation measures, it's not just legislation that is time-allocated in the House. We're also seeing an increasing number of committees being time-allocated. I find that that's a problem. It doesn't create, I don't think, an ability for members of this House to work together on a common purpose. I think that we all have it in us. I know that this is a very exciting time in Ontario because, in a year and a half, there will be a change in government, and that's very exciting for all of us on this side of the House. That is for sure.

Hon. Yasir Naqvi: You said the same thing in 2014.

Ms. Lisa MacLeod: I also said it in 2011 and 2007.

Interjections.

The Deputy Speaker (Ms. Soo Wong): Order.

Ms. Lisa MacLeod: Speaker, it's good to see that you're awake.

The Deputy Speaker (Ms. Soo Wong): Okay. You know the rules of engagement. I respectfully heard the government side, and I want to ask everybody to respect the opposition. It's her turn.

The member from Nepean–Carleton.

Ms. Lisa MacLeod: Thank you very much, Speaker. I appreciate you defending me from my colleagues across the way. When they don't like what they hear, they always try to shout me down. It happens so frequently. It's a good thing my voice is much louder than theirs, so I can get it through.

Speaker, it's good to have the chief government whip here and the government House leader here, because I would make this one appeal to them: Give us a bit more

time to debate the issues of the day. Have confidence that we will come here representing our constituents' views, and we'll actually put some thought into the legislation, talk to the stakeholders and potentially make amendments or suggestions that would improve legislation in the province of Ontario, whether that's in health care or in education or in transportation or in infrastructure or in energy. I think that we have a number of people who are very committed on all sides of the House, who want to take part and participate. I would encourage the government to allow us to do that and stop these time allocation, closure, guillotine motions. Free us; let us speak. That would be my one ask of the government.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mrs. Lisa Gretzky: It's my pleasure to rise on behalf of my constituents of Windsor West and also as the NDP education critic to not talk, unfortunately, about Bill 37, but to talk about the fact that the government would like to end the debate on Bill 37.

I don't think there's any doubt that this is a very important piece of legislation. Nobody on this side, from my caucus, is disputing that it's an important piece of legislation. Because it's so important, it really deserves a fulsome debate to make sure that everyone who has a stake in this legislation—whether it's a student, a parent, an educator or administration within a school board—has an opportunity to have a say when it comes to the legislation, to make sure we get it right.

This legislation before us will deeply affect the lives of any students who may come in contact with a teacher who exhibits poor decision-making and misconduct. It will also affect educators who may be falsely accused of misconduct. So I think it's very important that we don't shut down debate, that we actually encourage the voice of our communities and those affected by this legislation. The only way to do that is to allow the members of this House to get up and actually share the voice of their communities, share the voice of the people who elected them to be here and speak on their behalf.

Before I get too far into the debate around whether or not we should be shutting down debate, I'm going to ask you to indulge me, because we are talking about education, so it is relevant. I did want to mention that this week is Local Government Week in Ontario, and I just want to thank all the municipal sector workers, and more specifically, school board trustees—because we are talking about education—and acknowledge the valuable work that school board trustees do.

By pushing through this legislation—as my colleague from Timiskaming–Cochrane had mentioned earlier, there's no need to do a time allocation on this. Nobody is arguing the validity and the necessity to have this legislation. What we're asking is that we have an opportunity to share the voice of our communities and share the voice of the stakeholders, to give them an opportunity to have input into this very important and serious bill.

0950

Speaker, currently in Windsor, we have support staff that are working for the Catholic school board that are

out on strike. They are out on strike because they feel that their democratic right to have a say is not being respected. So they have gone out on strike to say that they want to be heard, that they want to have an opportunity to share their concerns and have debate. Their issue right now is around bargaining and the fact that it's not happening. They want to engage in discussion. I think that's relevant to what we're doing here, and I applaud their efforts to say that they don't want to be shut down, they want to be heard, and that they're willing to go out on strike.

We all know that nobody wants to go out on strike. Nobody wants to do that. It's a financial hit. Many of them experience unpleasant comments when they're out on the picket line. They also have support; I need to point that out too. Nobody wants to be on a picket line, but they're willing to do that in order to say that they want their democratic right to have discussion and debate, specifically, in this case, about a collective agreement.

I think that sends a pretty good message to the government side, showing that the stakeholders, the very people we are talking about, want to make sure that their voice is heard when we're talking about legislation that is going to affect them, their colleagues, the students and the families that they work with.

It's interesting. On Monday, when I had an hour to actually discuss the bill—and I'd like to point out that I actually did discuss the bill. I stood here for 45 minutes, I believe, of my hour, and it was all dedicated specifically to the bill—what was in the bill and how that would affect teachers, students and families—and the LeSage report that came forward that made 49 recommendations that led to the drafting of the bill. I spent 45 minutes talking in depth about the bill, and 15 minutes kind of expanding on the education system in a broader scope.

But the Minister of Education, the Associate Minister of Education and the parliamentary assistant to the Minister of Education—the Minister of Education is the member from Scarborough–Guildwood, the Associate Minister of Education is the member from Halton, and the parliamentary assistant to the Minister of Education is the member from Durham. In their hour, they spent the large majority talking about how wonderful the government is and the incredible things they're doing for the education system. They spent the majority of their time, rather than actually explaining to the people of the province what the bill is about and trying to bring a better understanding to the people of Ontario about what this bill is about and what it would mean as far as the rights of students, the rights of families and the rights of educators—rather than doing that, they spent the majority of their time talking about the good work they're doing and patting themselves on the back.

I think that was a mistake. No, I don't think it was a mistake; I know it was a mistake for them to not address what's in the bill, to get that information out to the people of Ontario, because those are the people who, once this goes to committee, may want to come to committee and have their voice heard, share their questions,

their concerns about the bill, to get more information about how this particular legislation will relate to them.

I think that was a missed opportunity on the side of the government to do exactly what they say their mandate is and what their goal is, which is to be more open and transparent. In fact, by bringing forward a closure motion, they're not being open. They're trying to close debate. They're trying to close conversation.

I would suggest that this is a wrong move and that, rather than moving to close debate and stifle voices, what they should be doing is taking every opportunity on something that's as important as this.

I need to be clear: With this legislation before us, we're talking about possibly, in some cases, criminal charges against an educator. When we're talking about something as serious as that, we need to make sure that every voice is heard. We don't want to see anybody's life adversely affected by potentially a false accusation. We don't want to see somebody not have fair and due process—which is interesting, when we're talking about fair and due process, because what we're seeing today from the government side is actually the exact opposite of fair and due process. This is something that this bill was hopefully meant to address, giving an educator who was accused of something fair and due process—the right to a fair trial, if you will. Yet the government is saying, “That's what we want for our educators, but we're not willing to do that in the Legislature during debate with the other elected officials in the room.” I think it's interesting. I guess it's one more example of talking the talk but not really walking the walk.

The push to end the debate so quickly and move it into committee is really unnecessary when you look at the history of the bill that we're discussing. As the member from Timiskaming–Cochrane pointed out, this is the third time that this type of legislation has come forward. Three times since Justice LeSage made his recommendations, legislation very similar to this has come forward. This is really the only time that we've had an opportunity to start debating it. I'm going to say “start debating” because now that we've moved possibly to time allocation, I can't say that we've actually debated it because they're shutting it down. The government side is shutting down the voice of everybody on this side of the room, so I can't say we've really had a debate when it's been mostly one-sided.

I have to ask: If it was so important to the government side to get this legislation passed, then when the report came forward from Justice LeSage years ago—I believe it was five years ago—why did they wait for two years to introduce the first bill? Bill 103 was introduced in 2013. Why did they wait if this was so important? I'm not arguing that it isn't important but I'm arguing that if it was so important to the government side that we are now to the point where they're trying shut down debate and push it—ram it—through with little to no discussion, if it's that important now, why wasn't it so important in 2011 when Justice LeSage brought his report forward? Why did it take so long for them to even consider acting on it?

And then again in May 2016, so this year, they brought forward Bill 200. Rather than debating the bill, this important piece of legislation, this legislation that they feel is so important that they don't want to actually talk about it, discuss it and debate it with the people in the House, with the elected officials in the House—why did they prorogue? Why would they prorogue government and put an end to the bill and the opportunity to discuss it? When they brought it forward in May 2016, we could have had a healthy debate around this bill, and likely by now, after everybody had an opportunity to follow the due process that we have here in the Legislature and everybody had their opportunity to debate as is allowed under the rules, we probably would already have this bill in committee, or it may have already moved through committee and become law.

Had they not prorogued after they introduced Bill 200 in 2016, we probably would have already dealt with this bill. But instead of doing that, they felt it was more important to prorogue and come back and deliver a throne speech that was really nothing new, all full of sunshine and roses and all kinds of promises—which the people on this side of the room and, I think, the people of Ontario don't really believe, because time and time again we see promises being made and not followed through on, especially when we're talking about openness and transparency from the government side. Again, this process of time allocation is not open. It's not transparent. It means, “We don't want to hear from you.”

So if it was so important, why would you prorogue and put an end to this piece of legislation? And not just this legislation, actually: The member from Don Valley East, the Minister of Children and Youth Services, talked about many other bills that they'd like to see get passed through. The Attorney General, the member from Ottawa Centre, talked about how there's other legislation that we have to get through before the end of this session. We could have done that, following proper process, if they had not chosen to prorogue and run their own agenda rather than doing what is best by the people of our province.

1000

The Minister of Children and Youth Services quoted some of my comments from my hour debate on Monday. They were my comments. I'm not arguing that, and I stand by those comments. But what the minister didn't mention was that in my comments on Monday, I actually referred to the accommodation review process for school closures and how the government has shortened that process. They have drastically reduced the ability for community members to come forward and have a say when it comes to the closure of schools in their communities and their neighbourhoods. We've seen that they've shortened that process so, again, they are stifling community input by shortening that process.

When I referenced that particular process, I said—it was almost as though I had a crystal ball and I knew this was going to happen. Maybe it's just because we see it happen over and over and over again. This is kind of the

way this Liberal government does business now, so maybe, from history, I knew it was coming. But at the time when I was talking about the accommodation review process and how they have shortened the process and limited community input, I also mentioned that that is a parallel to when the government moves for time allocation on a debate.

Lo and behold, we are here four days later—it took four days, barely four days, for the government to come forward and say, “We’re going to do exactly what you had thought we might do. We are going to move to close down debate.”

I think that for the people of Ontario, that’s an alarming practice. I think they’re going to start to see that this is a business-as-usual kind of direction that this government is going. They want to talk about wanting to hear from the people. They want to talk about how they’re here to listen and how, when it goes to committee, they’re going to sit and listen to the stakeholders. But time and time again, we’re seeing them actually shut down discussion and shut down debate.

Although the government may not think it, the people of Ontario are starting to see that. They want to be able to access the people that they have elected to stand in this place and represent them. They want an opportunity to be able to go to the government and let them know when they do or don’t agree with the direction that the government is going. And they certainly don’t appreciate when the government side says, “We’re really not interested in hearing what you have to say. So we’re going to shut down debate. We’re going to limit the number of people who can come to committee. We’re actually going to make the process of speaking to us more difficult.”

I just found out this morning the schedule for the committee. So if it goes and when it goes—well, let’s face it: It’s going to go through to committee. They’re going to shut down debate; there’s no doubt. They have a majority government, so they’re going to do whatever they want. That’s the way they do it.

When it goes to committee, their plan is to have witnesses scheduled on a first-come, first-served basis and those presenters, those witnesses, will be given five minutes to present, with nine minutes for questions, divided equally among three parties. So each person is going to have only three minutes to answer questions.

I remember, when I was first elected, that to stand here for three minutes, or to have to carry on a discussion in committee and ask questions and that kind of thing—three minutes seemed like a really long time. Three minutes is not a long time, especially when we’re talking about a piece of legislation that could very drastically affect someone’s life. Three minutes for questions is not nearly enough.

The deadline for a request to appear is Monday, October 24. What’s the date today? It’s October 20, I believe.

Interjection: It’s the 20th.

Mrs. Lisa Gretzky: So in four days—not to mention we’re going into a weekend. People have four days to put in their request to appear before this committee.

Again, I’m not arguing the importance of this legislation. I cannot make clear enough how important this legislation is. We want all students to be safe, we want all students to know that the educators and the other professionals within the education system are there looking out for their best interests. The vast majority, the large number of educators in our system will never, ever be affected by this legislation. This will never apply to them because they are professionals and their goal is only the best interests of our children and our students.

But four days in order to get your name in, to be able to present; four days for students, for parents, for educators and for other professionals within the education system, anybody who is interested in having a say in this particular bill, this very serious bill—four days is not enough for someone to have to give notice.

Many people will be coming from outside of Toronto—and that’s an important piece to point out as well. The committee is meeting here in Toronto. For people in my community of Windsor, that can be, in some cases, a five-hour drive. And when you’re talking about people who have young children—so they either have to find child care, and we all know how difficult it can be to find affordable child care in this province, thanks to the Liberal government; they have to find child care, or we’re talking about putting young children in cars and travelling with them for a great distance—four days is not reasonable. We’re talking about families, educators and other interested parties who work, who have to arrange to get the time off work.

To point out—that’s how important the legislation is: that they’re willing to take a day off, likely without pay, to come to speak to the legislation. You’re giving them not even four days because, really, we’re just debating this today, so by the time the information gets out there to the public, you’re probably talking another day or two before they find out that they have to request to appear by Monday, October 24. So you’re talking about very little notice for someone who has to arrange time off work—

Mr. Wayne Gates: Over the weekend.

Mrs. Lisa Gretzky: Over a weekend, yes; that’s an important point—to be able to get here.

It appears that what the government is trying to do is drastically limit who could actually come to committee and share their concerns, which is interesting. I don’t think you will find anybody who is strongly opposed to the legislation before us. They may offer a few suggestions, a few minor amendments, issues that maybe we don’t see, and it’s important that they have the opportunity to do that, but I don’t think you’re going to find anybody who really opposes the legislation. Even if there was, they have the right to come to committee and be heard; and they have the right, as do the educators who we’re talking about with this bill, to fair and due process. They have a right to come.

You’re not giving them enough time to be able to arrange to come. Some of my northern colleagues, their constituents—there’s absolutely no way they would be able to make it, given the guidelines, the timelines. My

colleague from Kenora–Rainy River takes almost 15 hours to get here and, bless her heart, she does it with a very young child sometimes. So imagine others who are struggling to do that. There's no way it would work within these deadlines.

The deadline for written submissions is Thursday, October 27—a week from today people have to put their thoughts down on paper and get them to the committee. Again, it's not really fair or due process, not really being open and transparent.

I know I'm running out of time, but I just want to drive the point home that the Attorney General, the government House leader, had talked about how there are other important bills to discuss and move through the legislative process before the end of this session, and there are. There is no doubt that there's other legislation that we can be discussing. Especially in the case of something like this that could affect somebody's future, whether that's a student or whether that's an educator, I don't think that it should be, "This legislation is more important than that legislation, so we're going to push this through as quickly as we can so that we can move on to something that we think is more important." I don't believe that that's the correct way to be looking at this.

Again, I cannot stress enough that this is important legislation. It's life-altering legislation for anybody who would be affected by it, and I don't think we should be taking the process lightly. I think it should be a fulsome process. I don't think the government should be shutting down the opportunity for those of us in the House who aren't on the government side to share the voice and the concerns of our constituents and our stakeholders.

Frankly, because of the timelines—the unreasonable timelines—that are being set by the government side as far as getting your request in to appear at the committee or your written submission, I think you'll find that those of us in opposition will get quite a few people contacting us saying, "Well, we want you to be our voice. We can't come, we can't meet these deadlines, so we want you to share this on our behalf."

They're rushing through the committee. One day of committee, 2 to 6 p.m., is all you're getting, 2 to 6 p.m. in committee to discuss the bill. I believe they're shutting down—debates on amendments will stop at 4 o'clock. So it's not even a full four hours in committee for people to be able to come and present; it's two hours. So not only is it an unreasonably short deadline for those who want to appear or those who want to submit something in writing, but now you have a very short time frame.

Should you actually make the long trek to Toronto from the southern part of Ontario—the deep south, as I refer to my riding—or from up north, should you be able to manage to get here, they're only going to give people two hours total, out of all of the people who want to come to discuss this legislation. I think that's really unfair.

If I could put an exclamation mark on what I'm saying, I think that it is an abuse of power on the government's part to not only shut down debate in the chamber

and stifle the voice of the other elected officials in the room, but it's an abuse of power to shut out the voice of the people who would be affected by this legislation, and anyone who would like to offer their input. To say, "We have very tight timelines, very unreasonable deadlines, to get your information in to us to come or to come in to present, and then when you get here, we may or may not have time to hear you"—I think that's, like I said, an abuse of power on the government side, and I think that's very, very unfortunate.

That's not what they were elected to do. They were elected to listen to the people of Ontario, to listen to opposition, and to do what's right by the people of Ontario. The direction they're moving in today, and then, ultimately, in committee, is an affront to democracy. I think that it's just really unfortunate that a government would abuse their power in this way.

Ny second now, Speaker, you're probably going to cut me off, so I will wrap up.

We support the legislation. Absolutely, we support the legislation. What we do not support is the government trying to shut down discussion around it.

Debate deemed adjourned.

The Deputy Speaker (Ms. Soo Wong): Seeing as it's almost 10:15, I will recess the House until 10:30.

The House recessed from 1014 to 1030.

INTRODUCTION OF VISITORS

Hon. Helena Jaczek: Please help me welcome, in the east members' gallery, two constituents from my riding of Oak Ridges–Markham: Ian Stewart and his daughter Tiffany.

Mr. Bob Delaney: Soon to join us in the members' east gallery will be Mushtaq and Nasera Khan. Mushtaq Khan is the president of the Jamia Riyadhul Jannah mosque located in Mississauga–Streetsville and a very good friend. Please welcome them.

Mr. John Fraser: I'd like to welcome Doug DeRabbie from the Ontario Association of Optometrists. I had a great meeting with him this morning, and I'm looking forward to the work that they're doing around children's vision.

Ms. Peggy Sattler: Today I am pleased to welcome Harmy Mendoza and Carla Neto from the Woman Abuse Council of Toronto, or WomanACT, as well as Alejandro Gonzalez from MCIS Language Solutions, who joined me today for my press conference.

I also want to introduce Leslie Muñoz, who is my OLIP intern. I am delighted to have her in my office.

Mr. Lou Rinaldi: I want to introduce to the House Ken and Sandra Tully from the great municipality of Trent Hills. Ken is a councillor in the municipality of Trent Hills. Welcome to Queen's Park.

Hon. Reza Moridi: It's a great pleasure to welcome Dr. Mark Poznansky and Dr. Robin Harkness from Ontario Genomics. They are visiting the House today.

There's a genomics reception in the House this afternoon and I invite every colleague in the House to visit.

M^{me} France Gélinas: I'd like to introduce a good friend of mine, Mr. Joe MacDonald, who is a professor and program coordinator in the government relations management program at Seneca College, and a few of his students who are here with us: Tanzila Ahmed, Alexander Cerelli, Michael D'Amelio, Mandy Jagt, Mark McCleary, Rachael Neumayer, Ashfaan Purvez, Elvan Tayhani Karatas, Maritza Calle, Wellie Chichaluca, Danielle Gregov, Narmetha Karunanandan, Mary Namara, Michael Perkins and Samir Siddiqui. Welcome to Queen's Park.

Hon. Glen R. Murray: Our page from Toronto Centre, Carter Edwards—I introduced his father the other day. Here today is his mother, Marisa Edwards, his brother Declan Edwards, his grandmother Nancy Vander plaats and grandfather John McKean. There's an enthusiastic family invested in their children.

Ms. Sophie Kiwala: I'd like to introduce some wonderful constituents from my riding of Kingston and the Islands who are joining us in the gallery this morning. Let's give a warm Queen's Park welcome to Heather Morrison, Alfred and Louise Morrison—and, from home, Mr. Daniel Couture, this province's most loyal watcher of the proceedings of this House. Welcome.

Hon. Deborah Matthews: I'm delighted to welcome two guests with us today from the Ontario Undergraduate Student Alliance, known as OUSA: Jamie Cleary, who is not only the president of OUSA, but also vice-president of the Western University Students' Council; and Amanda Kohler, the director of communications at OUSA. Welcome.

Also, Speaker, we have a very important day to celebrate today, and that is the birthday of Reza Moridi.

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

Further introductions?

Ms. Daiene Vernile: I'm very delighted to welcome to the Legislature today teacher Scott Jones and his grade 10 civics class from Forest Heights Collegiate Institute in my riding of Kitchener Centre. They're up behind me here.

The Speaker (Hon. Dave Levac): Welcome.

Ms. Teresa J. Armstrong: I am pleased to introduce page captain Catherine Pelicano. She has a guest here: Her father, Danny Pelicano, has come to visit. Welcome to the Legislature.

The Speaker (Hon. Dave Levac): Welcome.

Ms. Peggy Sattler: I know he's already been introduced, but I want to say a special welcome to a fellow Londoner, Jamie Cleary, who is president of the Ontario Undergraduate Student Alliance and vice-president of the Western University Students' Council, as well as Amanda Kohler, communications director from OUSA. Welcome.

The Speaker (Hon. Dave Levac): Welcome.

Ms. Cheri DiNovo: Just in case nobody else does, I just want to welcome back the Shurmanator, Peter Shurman, to the House.

The Speaker (Hon. Dave Levac): Excuse me.

Interjections.

The Speaker (Hon. Dave Levac): Close, I was so close. In case you didn't know, in the west members' gallery is former MPP Peter Shurman from Thornhill in the 39th and 40th Parliaments. Welcome.

We welcome all of our guests. It is now time for question period.

ORAL QUESTIONS

ENERGY POLICIES

Mr. Patrick Brown: My question is for the Premier.

The people of Ontario will pay for this government's loss of the Windstream lawsuit for years and years to come. The \$28-million judgment is just the tip of the iceberg. The tribunal stated that the \$5.2-billion contract is still valid and in force. That means the Liberals have two choices: build the project and pay out \$5.2 billion, or enter into settlement negotiations to try to convince Windstream to take less. Either way, Ontario is on the hook for billions.

Mr. Speaker, when do the Liberals plan on handing over \$5.2 billion to Windstream? Is this gas plant 2.0?

Hon. Kathleen O. Wynne: I appreciate the question from the member opposite.

As I have said, we can confirm that we have been advised of the tribunal's decision. What's interesting is that the tribunal dismissed the majority of claims made against Canada and Ontario, Mr. Speaker. The final award was significantly less than the damages being sought by Windstream. Ontario officials are reviewing the decision and we understand that Canada's doing the same in order to determine next steps.

Mr. John Yakabuski: Gas plant 2.0, 3.0, 4.0.

Hon. Kathleen O. Wynne: It's interesting, Mr. Speaker, as I hear the heckling from the other side—

The Speaker (Hon. Dave Levac): Oh, I caught it. The member from Renfrew, come to order.

Carry on, please.

Hon. Kathleen O. Wynne: We are taking a cautious and a responsible approach to offshore wind to allow for the development of research and coordination—particularly in the area of decommissioning requirements and noise over water. We're looking for evidence and research in those areas.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Patrick Brown: Mr. Speaker, back to the Premier: Not only will we be on the hook for billions of dollars because this government had to save two Liberal seats, and not only are we going to have to pay \$28 million to Windstream already, but there are untold millions of dollars spent fighting the legal cost involved in this case.

We know the Canadian government sent 10 representatives to the tribunal at a cost of \$8 million in legal fees.

Ontario sent 20 representatives to the tribunal. It's fair to assume the costs will be significantly more.

My question to the Premier: You may not want to talk about the \$5.2 billion, but at least tell the Legislature—tell the people of Ontario—how much you've spent in legal costs. How many taxpayer dollars have been spent fighting this Windstream contract that you mistakenly committed Ontario to?

Interjections.

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

Premier?

1040

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: I'm very happy to rise and outline to the Leader of the Opposition what truly is happening right now.

Ontario is carefully reviewing the decision, and we understand that the federal government is doing the same, in order to determine the next steps. It has been less than a week that we've been advised—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. Not very good. Let's bring it down, please.

Finish.

Hon. Glenn Thibeault: Thank you, Mr. Speaker.

Ontario has been advised of the tribunal's decision in the NAFTA chapter 11 dispute between Windstream and Canada. The tribunal dismissed the majority of claims, with the final \$25 million being significantly less than what was originally sought.

But when it comes to dollars and wanting to know the amounts, when they want us to rip up contracts, that's billions and billions and billions of dollars. I'd like to know what their amount is, Mr. Speaker, because they don't have a plan.

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. I'm seeking some assistance from members to allow me to hear the complete answer or the complete question. I may have to make a decision to move to areas that you know I don't like, but I will.

Final supplementary?

Mr. Patrick Brown: Back to the Premier: First, it was the complete botching of the OESP and paying \$9 million for consultants instead of helping low-income families pay their hydro bills. Now it's millions and millions of dollars spent to lose a lawsuit that has cost us \$28 million so far, and likely to be significantly more down the road.

Why won't the Liberals tell us how much they spent? We know the federal government spent \$8 million on legal fees. We know Ontario had a much bigger delegation. I couldn't get the answer from the Minister of Energy.

I'll ask the Premier again: How much did the Premier's government spend on legal fees trying to fight this foolish commitment that this Premier has made, once again, on energy?

Hon. Glenn Thibeault: I think it's important to let the Leader of the Opposition know that we're still reviewing the decision. It's really too early to jump to—

Interjections.

The Speaker (Hon. Dave Levac): The member from Bruce-Grey-Owen Sound, come to order.

I have two others in my mind; if they say it again, we'll go to you.

Carry on.

Hon. Glenn Thibeault: So you know what? We're going to let it take its course, Mr. Speaker—

Interjection.

The Speaker (Hon. Dave Levac): The member for Stormont-Dundas-South Glengarry—and because of that, we'll move to warnings. Thank you.

As soon as I sit—

Interjection.

The Speaker (Hon. Dave Levac): The member for Glengarry-Prescott-Russell is warned.

Anyone else? Thank you.

Finish.

Hon. Glenn Thibeault: Thank you, Mr. Speaker.

We're very proud of renewable energy on this side of the House, unlike the pro-coal party on that side. We will continue to ensure that we invest and do the right thing when it comes to renewable energy in this province.

I know the Leader of the Opposition talked about the OESP program and the OEB. The OESP program is actually doing great work. We're helping 145,000 families with \$21 million in benefits so far, and that's only in 10 months.

ENERGY POLICIES

Mr. Patrick Brown: My question is for the Premier. The Auditor General revealed that Ontario overpaid by \$9.2 billion for renewable energy contracts. That's the Auditor General being very specific: an overpayment of \$9.2 billion. We also know the Ontario Liberal Party received \$1.3 million in donations from 30 companies that received renewable energy contracts.

So my question is straightforward to the Premier—and I realize it may be uncomfortable for her to answer. Why did Ontario overpay by \$9.2 billion for renewable energy contracts that every single Ontarian is now paying on their hydro bills?

Interjections.

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

Ms. Lisa MacLeod: You're making America great again.

The Speaker (Hon. Dave Levac): The member for Nepean-Carleton is warned.

Premier?

Hon. Kathleen O. Wynne: Thank you very much, Mr. Speaker. I know the Minister of Energy is going to want to speak to this question.

We made a decision to complete the shutdown of all of the coal-fired plants in Ontario, and we made a

decision to replace that energy with clean electricity. The electricity grid is 90% emissions-free in Ontario.

Interjections.

Hon. Kathleen O. Wynne: I know that the heckling on the other side is coming from a party that wouldn't have done that, doesn't believe in it, doesn't believe in clean energy and would take us back to coal generation.

We know that having no smog days is in the best interest of every person in this province, but it's especially in the best interest of kids, who are growing, whose lungs are growing, and who might have asthma. It's an incredibly important initiative that we have taken.

Mr. Speaker, it is our responsibility to remove pollution from the air. We've done that—

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

Interjections.

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

Supplementary?

Mr. Patrick Brown: Again to the Premier: I know it's the Liberal talking points to say this is about coal. It's not about coal. The Progressive Conservatives announced the phase-out of coal. This is about an overpayment of \$9.2 billion. This is about the Liberal Party accepting \$1.3 million in donations.

I'm tired of the diversions. I'm tired of the Liberals' speaking points. People in Ontario are struggling, and they seem oblivious to it.

Mr. Speaker, \$12 million to pay for high-priced consultants and ads for the OESP; untold millions of dollars spent fighting the Windstream lawsuit; overpaying \$9.2 billion that's on our bills now—when it comes to Liberal energy policies, my question is this: Why is it always Liberal lawyers, Liberal consultants and friends that get rich while the people of Ontario are stuck with higher and higher hydro bills?

Interjections.

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

Premier?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: I'm very pleased to rise and answer the opposition's question once again.

You know what? The Leader of the Opposition makes it very clear that they wouldn't have built any new supply, that they would have continued to leave the system crumbling, to make sure that when we have a blackout like we did in 2003—

Interjections.

The Speaker (Hon. Dave Levac): The member from Oxford is warned, and the Minister of Transportation is warned. There are a couple of others that are up here.

Hon. Glenn Thibeault: Back in 2003, we didn't have enough generation. We didn't have enough capacity, so when we took over, we had to build that capacity. We made sure that we built that capacity, making—

Interjections.

The Speaker (Hon. Dave Levac): I'll play this all day. The member from Hamilton East–Stoney Creek is warned.

Carry on.

Hon. Glenn Thibeault: We're very proud that we've made a green system. We've eliminated coal. We no longer have to send out warnings to families right across the province—telling them that they don't have to go outside to breathe. That's something that we should all be proud of. Unfortunately, this government is very proud of it; the opposition is not. We know they're the pro-coal party because they want to continue to find cheaper ways to make electricity.

We understand that some families are struggling. We've got programs to help.

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

Mr. Patrick Brown: Mr. Speaker, back to the Premier: The Minister of Energy says they've got programs that are helping. Well, let's talk about their programs. There are still 355,000 low-income families in Ontario that have yet to receive the Ontario Electricity Support Program—

Interjections.

The Speaker (Hon. Dave Levac): Stop the clock. No, sorry, start the clock.

The Deputy Premier is warned. The member from Kitchener–Waterloo is warned.

Finish, please.

Mr. Patrick Brown: Mr. Speaker, to talk about their programs—because they spent so much on consultants rather than helping low-income families, 355,000 low-income families in Ontario that were meant to get this help aren't getting it. And then there's the 1.2 million rural families in Ontario that the Liberals have excluded from the rural or remote rate protection. What kind of help is this? The only people that I can see that are being helped by this government's foolish energy policies are Pennsylvania or Michigan or New York.

My question to the Premier is, when are you going to stop making America great and make Ontario prosperous?

Interjections.

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

Minister?

1050

Hon. Glenn Thibeault: I know the Leader of the Opposition keeps quoting Donald Trump because he believes in Donald Trump's philosophy, but on this side of the House, we do not. Love trumps hate.

What we've done is made sure we've invested in programs like the OESP. In 10 months—in 10 months—45,000 families have been helped by the OESP. We don't believe that's enough, so we budgeted \$225 million to get as many of them as possible onto this program.

This is a great program to ensure that every MPP actually promotes this. I know when I was at AMO, there were opposition party mayors who were coming from

their ridings and they said that they didn't know about the program. So you know what I'm going to do? I'm going to make sure that my ministry sends to every MPP these OESP programs again, so they can ensure that these families get on this program when they need it.

Interjections.

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

Interjections.

The Speaker (Hon. Dave Levac): I think I've made it kind of clear that I want a semblance of respect here. Thank you.

New question.

ELECTRONIC HEALTH INFORMATION

Ms. Andrea Horwath: My question is for the Premier. Will the Premier rule out privatizing some or all of Ontario's eHealth assets?

Hon. Kathleen O. Wynne: Mr. Speaker, we've been very clear. I've been clear, the Deputy Premier has been clear, the Minister of Energy has been clear—

Hon. Deborah Matthews: Minister of Health.

Hon. Kathleen O. Wynne: Sorry, the Minister of Health has been clear—he's been clear, too—that we are not selling eHealth. We are not selling patients' personal health information. There have been millions of dollars that have been invested in digital medical initiatives in this province through eHealth, and we need to understand the value of that. We need to understand how we can improve service to patients. That's what this is about. That's what the Minister of Health has asked Ed Clark to give us advice on.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Yesterday, the Liberals said they would be valuing our digital health assets, and after valuing, they would be leveraging them. That's what the Liberals said yesterday in this chamber. It sounds a lot like what the Liberal plan was for Hydro One, which the Premier called “unlocking value” and “leveraging” our assets.

How many private companies has Ed Clark or the government spoken to about being either a private partner in our eHealth services or purchasing our assets?

Hon. Kathleen O. Wynne: The leader of the third party might know that Canada Health Infoway has estimated roughly \$1 billion in annual benefits to Ontario as a result of the investments that have been made in eHealth and almost \$6 billion in cumulative benefits since 2007. It's important that we undertake this review so we can better understand the value of the digital assets as we move toward a new vision for digital health in Ontario. The mandate of eHealth expires in 2017.

I've mentioned in this House before that Ed Clark also conducted important work to improve the LCBO and the Beer Store to maximize the value of our assets, and that's what has happened. There has been no sell-off of the LCBO.

I know the leader of the third party will say that that's very different than eHealth, and it is different; but in terms of an asset that is owned by the people of Ontario, it is the same thing. How do we make sure we understand the value and how do we make sure we maximize the value of that for—

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

Ms. Andrea Horwath: If the government wants to improve eHealth, they should improve eHealth. But it's not what the Premier has said. Nothing Ed Clark has said and nothing the minister has said explains why they need to find out the open market value of our eHealth assets in order to improve it. Nothing the Premier has said, nothing the minister has said and nothing Ed Clark has said tells us why they need to know this open market value, and she continues to not answer that question today.

Has Ed Clark, or anyone else, been given instructions to talk to private companies about private partnerships to provide eHealth services, or the private operation of parts of our eHealth system?

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

Hon. Eric Hoskins: Mr. Speaker, we are not selling or privatizing eHealth or Ontarians' personal health records—full stop, period. We are not selling eHealth.

I can't understand why the leader of the third party doesn't realize the value, as Canada Health Infoway has, to actually look at the investments made—

Interjections.

Hon. Eric Hoskins: With a mandate due to end at the end of 2017, with incredible opportunity in the digital health realm, including in this province, looking at the investments that we've made, where 80% of family doctors are using electronic medical records—most of our diagnostics are digitized. We have incredible opportunity. It behooves us, quite frankly, to have an expert like Ed Clark look at the assets and look at how we can actually improve upon the system we've created.

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

Ms. Andrea Horwath: Thank you, Speaker. The answers did not make me feel very confident.

PRIVATIZATION OF PUBLIC ASSETS

Ms. Andrea Horwath: My next question is also for the Premier. When the Premier decided to privatize Hydro One, Hydro One was given a \$2.6-billion tax holiday by the Liberals. A \$2.6-billion tax holiday was given to Hydro One when the Liberals privatized it. Hydro One wants to keep the benefit of that tax holiday for its investors. New Democrats think that tax holiday, that \$2.6 billion, should benefit Ontarians who are struggling with their hydro costs. Will the Premier ensure that this \$2.6-billion tax break goes to Ontario ratepayers and not to private investors?

Hon. Kathleen O. Wynne: I know the Minister of Finance is going to want to weigh in on this in the

supplementary, but let me just say this: The leader of the third party does not support the investments we are making in infrastructure, roads, bridges and transit as a result of the decisions we have made, including the broadening of the ownership of Hydro One. She doesn't support those investments. She doesn't support, I suppose, by extension, the economic growth we are seeing in this province as a result of those investments.

Ontario is one of the leaders in the country in terms of economic growth. We're outstripping other provinces, other states, North American jurisdictions and G7 countries. The growth that we are seeing as a result of the plan that we are implementing, including investment in infrastructure, is not something that the leader of the third party supports, but she should.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Andrea Horwath: Nobody believes what this Premier says at the best of times, and they're certainly not going to believe that. But what they want to hear is what's going to happen to the \$2.6 billion. That's what I'm asking this Premier to come clean about with the people of this province.

Hydro One's annual report says that keeping this \$2.6 billion tax gift "will result in ... net cash savings over the next five years due to the reduction of cash taxes payable by Hydro One." They warn their shareholders in their annual report, in the same report, that the OEB could actually force them to ensure that the benefit of this \$2.6 billion goes to ratepayers instead of private, for-profit shareholders.

The question is: Is the Premier going to stand with Hydro One's private investors, or is she going to stand with the people of Ontario?

Hon. Kathleen O. Wynne: Minister of Finance.

Interjections.

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

Minister of Finance.

Hon. Charles Sousa: I appreciate the question. The reference is made as to how we were proceeding to facilitate greater value for a corporation owned by the province and the people of Ontario, which we still retain, by the way, at this point, and we will continue to always be the largest shareholder, benefiting from those endeavours. Furthermore, the exemptions that were put in place were in lieu of taxes, which are still then going to be net-benefited to the province.

1100

The member opposite makes reference to the transaction that enabled us to maximize our value. At the same time, the OEB, independently, will continue to foster and look at those rates—which, by the way, was zero increases this time around, recognizing the tremendous opportunities, that Hydro One and others have been able to be more efficient in their systems. Of course, that will also benefit ratepayers in the end, and all of Ontario.

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

Ms. Andrea Horwath: The Liberal privatization of Hydro One means that Hydro One is definitely getting

this \$2.6-billion tax break. The Minister of Finance just acknowledged that. The OEB is absolutely going to decide whether that benefits Ontarians or whether that is going to benefit private investors.

The government can issue a directive today—in fact, I'm asking the government straight up today to commit to putting a directive forward to the OEB so that the savings of Hydro One that they're getting for that tax break, that \$2.6 billion, is actually directed to the benefit of Ontario ratepayers and not to the benefit of private investors. Will they make that commitment to the people of Ontario today?

Hon. Charles Sousa: The transaction that ensued as a result of that very exemption—all of it is going to the benefit of infrastructure and investments to be made by the province of Ontario, to build new roads and infrastructure. It's going directly into the Trillium Trust for the benefit of all Ontarians and the people of Ontario.

The member opposite should know that, and if she doesn't, she should see how the transaction occurred so that we could reinvest those proceeds in other activities and other projects—again, something that the member opposite and that party have no plan to ensue. We will reinvest those monies, dollar for dollar, for the purposes of making greater assets and greater returns for the province of Ontario.

ARTS AND CULTURAL FUNDING

Mr. Steve Clark: My question is to the Minister of Tourism, Culture and Sport.

A so-called "regionalization scheme" to slash the Ontario Trillium Foundation's catchment areas from 16 to just five continues. Already, Trillium is allowing its 16 grant review teams to wither away.

These volunteers are the program's heart and soul, who truly understand their communities. The minister should know that her ministry's memorandum of understanding with Trillium requires those teams to have at least 18 members, but according to the agency's website, only Toronto now has the minimum. The average of the others is just nine.

Speaker, will the minister tell Trillium to stop downsizing by stealth and uphold its agreement by acting to fill those vacancies?

Hon. Eleanor McMahon: I want to thank the honourable member for his question. The reason I want to thank him is because I know that he knows, as I do, that Trillium remains one of the most important mechanisms in our country for funding the not-for-profit sector and for building capacity in organizations right across our province.

That's why on this side of the House we're investing in the Trillium Foundation. We've held the funding steady and, in fact, Speaker, I'm proud to say that next year, with our 150th anniversary on the horizon, we're investing even more in programs and projects across this province.

If the honourable member wants to have a conversation about his ideas on how we can make more robust

infrastructure, I'm happy to listen to them. We can have that conversation.

We remain committed to Trillium. We are filling those vacancies apace in our local communities and those local grant teams.

I look forward to the supplementary.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Steve Clark: Back to the minister: I raised this with the previous minister, and he was obviously surprised by what was going on. It's full steam ahead under this minister's watch.

Grant review teams are being starved of volunteers critical to ensuring that granting decisions have the most local impact. Multiple catchment areas have no local staff to help volunteer groups navigate the application process.

If the minister doesn't believe me that this is wrong, I ask her to talk to front-line staff. They know that their hands-on work with agencies cannot be replaced by a 1-800 number.

Trillium wants this plan finalized by April, but it can't happen unless this minister signs off. Speaker, will the minister commit to maintaining Trillium's local roots by pledging not to sign a new MOU with fewer than 16 catchment areas?

Hon. Eleanor McMahon: Again, I'm happy to take the member opposite's question. The only thing that surprises me and people on this side of the House is that the honourable member would ask that kind of question when he knows full well that this government has been committed to the Ontario Trillium Foundation for years and will continue to be. That commitment remains strong, and our local grant teams are critically important, as the honourable member knows. Why? Because they give us the kind of local advice that helps us and helps them make the critical investment decisions that further the work of our not-for-profit sector.

Finally, Speaker, I just want to tell the House that, as a former Trillium-funded organization—and a leader of a not-for-profit organization that benefited from the Ontario Trillium Foundation, I, my ministry and our entire government are committed to seeing those local teams remaining strong and in place so that we can continue to fund a robust not-for-profit sector. That's what we're doing on this side of the House.

Interjections.

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

New question.

HEALTH CARE FUNDING

M^{me} France Gélinas: Ma question est pour la première ministre.

Speaker, when you're waiting in pain for hip or knee surgery, you should be able to look at the official government wait-time-for-surgery website and trust that what is written there is actually accurate. But the good people in London and across southwestern Ontario know that they can't trust those numbers. They are waiting months

longer than the government will admit or publish for the surgeries that they need. In fact, local surgeons say that the real times for hip and knee surgery in London are twice as long as what the ministry-published data online states.

Why does the Premier think that it is right to publish surgical wait times that are not accurate?

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

Hon. Eric Hoskins: There are different aspects, obviously, once a decision has been made to refer to a specialist. That individual may or may not require surgery at the end of that visit with the specialist and then there is a separate period of time if the decision by the specialist, by that front-line clinician, is made that surgery is warranted. Then there is a period of time, obviously, that ensues prior to that operation taking place.

It is important for all of us, I think, to recognize that it is largely at the discretion of the front-line clinician and specialist to determine the level of priority for both of those situations.

We are working closely with our front-line providers but we're also investing incredible amounts of money—\$2 billion—only on wait times to bring them down and to be able to provide more hip and knee surgeries and other types of surgeries. In the last decade we've invested roughly \$2 billion.

The Speaker (Hon. Dave Levac): Supplementary.

M^{me} France Gélinas: I know exactly how wait time is calculated in Ontario and so do the surgeons in London, and what you have on your website is not accurate.

In northern Ontario—or throughout Ontario—people should not have to wait 200, 300, 400 days for the surgery. It just should not be happening. In London, after the surgeon says that, "Yes, you need a hip or knee surgery," after the clock starts ticking for this website wait time, the government says you will wait seven months. But every surgeon in London knows that it will be at least 11 months before you will get your hip or knee surgery.

Will the Premier stop publishing inaccurate wait times and, even more importantly, make sure that the people get access to surgery in a timely manner?

Hon. Eric Hoskins: I know the member opposite understands the difference that I described earlier between wait ones and wait twos. It's critically important that we reduce both of those waiting periods, and we're doing that. I have to recall from the Fraser Institute—and I think if the Fraser Institute is saying this we not only need to be surprised but I think we can appreciate with confidence what they're saying. They've given us straight As in the Wait Time Alliance Report Card in five key service areas, including hip replacement surgery, knee replacement surgery, cataract procedures, cancer radiation, and coronary artery bypass grafts.

Is there more work to be done? Of course there is. Are we looking at wait times, including their measurement? Yes, we are. I need to remind that party, as well as the PC Party, that neither party measured any waits at all when they were in government. We're doing it. We're at

the top of the list in terms of the shortest wait times in this country and we're continuing to improve, Mr. Speaker.

ABORIGINAL LAND CLAIM

Ms. Daiene Vernile: My question is for the Minister of Indigenous Relations and Reconciliation. On Tuesday, the minister was in Ottawa for a very important event marking an historic moment for Canada, the province of Ontario and the Algonquins of Ontario. We've heard that, unlike many First Nations, the Algonquins of Ontario never entered into a formal treaty with the crown, with a claim dating back 250 years. The Algonquins' land claim is one of the largest and most complex in Ontario.

1110

Speaker, could the minister please elaborate on the significance of the event that took place on Tuesday?

Hon. David Zimmer: Yes, it was a truly significant event, the signing of a historic agreement in principle between the federal and provincial governments and the Algonquins of Ontario. It marked the start of a new treaty relationship, working together in the spirit of reconciliation to resolve a very long-standing land claim that covers an area of 36,000 square kilometres in eastern Ontario.

More than a million people share this land with the Algonquins of Ontario. The historic treaty will provide balance for the rights and interests of all concerned and allow long-overdue reconciliation to provide economic opportunities by creating an environment of true partnership with all.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Daiene Vernile: I'd like to thank the minister for his response. It's very encouraging to see that the government has worked very hard in partnership with the Algonquins of Ontario and the federal government to reach this very significant milestone. Might I add that we are pleased now that we have a federal party, a federal partner in Ottawa, that cares about indigenous issues and has actually come to the table.

Land claim and treaty negotiations give us the opportunity to resolve long-standing disputes concerning land in a balanced way that respects the rights of indigenous peoples. It's a remarkable example of reconciliation in action.

Speaker, could the minister please tell us what Ontarians should expect from this historic agreement in principle?

Hon. David Zimmer: Let me highlight just some of the key components to the Algonquin agreement in principle. The agreement was first shaped by consultation with 10 Algonquins of Ontario communities and other indigenous groups. The agreement sets out the main elements of a settlement, including that the Algonquins of Ontario receive capital funding from Canada and from Ontario and the transfer of provincial crown land to the Algonquins. Importantly, no privately owned land will be

taken away from anyone to settle the claim, and no one will lose access to their private property. Very importantly, Algonquin Park will remain a park for the enjoyment of all.

Speaker, and to members of this chamber, I can tell you that the negotiating parties took great, great care to craft this agreement.

Interjections.

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

New question.

HEALTH CARE FUNDING

Mr. Jim Wilson: My question is for the Minister of Health.

Recently, Mr. Robbie Ross of Collingwood wrote to me to say that he requires knee replacement surgery. Mr. Ross met with his orthopaedic surgeon at the Collingwood General and Marine Hospital, who told him recently that the joint surgery budget is used up for this fiscal year. Mr. Ross is now on a waiting list, and the fiscal year for the surgery budget doesn't start again until April 2017. Mr. Ross has no idea how long he'll be on that waiting list. Mr. Ross is frustrated and his surgeon is, too.

This type of situation is unacceptable. It signifies how the government's wasteful spending, mismanagement and scandal has harmed our health care sector. We warned you, Minister and Premier, that this would happen.

Speaker, what does this minister have to say to Mr. Ross and the many other residents in my riding who have similar stories?

Hon. Eric Hoskins: Mr. Speaker, I would say to Mr. Ross that it's important that he work with his local primary care provider and with his specialist. There are some specialists who have longer wait times than others. The LHIN is in a position—and often does, with individual patients—to work with them to find perhaps a specialist, a surgeon or a hospital nearby that has a shorter wait time.

It's also the responsibility of that specialist to prioritize. So those who truly most urgently do require that hip or knee replacement or cataract surgery—it's completely within the realm of that hospital and completely within the realm of that specialist to actually put that person at the top of the list. We need to make sure that triage is taking place.

We need to, as a province, invest, as we are, \$2 billion just to reduce wait times for important procedures. That's what has got us to the top of the list in Canada for the shortest wait times across the board.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. Jim Wilson: Clearly, the government is going to have to do better. We're only halfway through the fiscal year, and hospital after hospital and surgeon after surgeon has run out of money.

You blamed us for not voting for your budget. Well, your budget passed and made things worse, so thank God we didn't vote for it, I say, Mr. Speaker.

Lisa Henderly is a 46-year-old Wasaga Beach resident who needs hip surgery, but, like Mr. Ross, she has been told there's no money left for her procedure and so she has to wait until at least April 2017. Ms. Henderly says she's in pain. She says it's hard for her to work and do physical activities with her children.

Ms. Henderly has a question for the minister, and it's this: If the minister's wife or mother needed to have surgery but there was no more funding left for them and they had to wait a year or longer and he saw them in such pain on a daily basis, would the minister find this acceptable?

Hon. Eric Hoskins: Thank God that Ms. Henderly and her family didn't need that hip surgery 15 years ago when that government was in power because it would have taken her twice as long.

We've reduced the length of time to wait for hip surgery by 50% since we came into government. In fact, 86% of Ontarians receive a knee or hip replacement within six months in this province. That's 7% better than the national average and it's better than almost every jurisdiction around the world.

They didn't vote for this budget. They voted against additional investments to further reduce those wait times. When we came into government, they didn't even measure it. When we started measuring wait times, they left the worst wait times in this country to us to fix. We fixed it. We're continuing to do the job, no thanks to you.

Interjections.

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

A reminder that you are to speak to the Chair.

New question?

PUBLIC TRANSIT

Ms. Cheri DiNovo: My question is to the Premier. This week we learned that the Hurontario LRT is going to be run by a private company; it will not be run by any public transit agency. The NDP strongly supports the LRT project but we strongly oppose the government's aggressive push into privatized transit. Privatized transit is more expensive. Since this government refuses to provide funding for local transit operations, we know that Mississauga riders will pay much higher fares.

Will the Premier keep Mississauga public transit public by removing maintenance and operations from the scope of the Hurontario LRT contract?

Hon. Kathleen O. Wynne: Minister of Transportation.

Hon. Steven Del Duca: I do thank the member opposite for the question and for her interest in this particular project, a project in Peel region that will help transform not only Mississauga and southern Brampton but the entire greater Toronto and Hamilton area as it relates to building the seamless and integrated transit network that we are committed to build.

Speaker, I can tell you that just a couple of days ago I was very proud to be in Mississauga, at Mississauga city hall, alongside my colleague the member from Mississauga East-Cooksville, the minister responsible for seniors; the mayor of Mississauga; members of council and somewhere in the neighbourhood of a couple of hundred residents who were there for an open house on this particular project.

This, as most members in the House will know, is a project, this LRT line along Hurontario, that will have 22 stops, including three stops within downtown Mississauga. It will connect into some of our GO corridors and it will connect to and support municipal aspirations.

As per usual on the transit file, the leader of Ontario's NDP and that particular member and that entire caucus are misguided.

The Speaker (Hon. Dave Levac): Supplementary.

Ms. Cheri DiNovo: Back to the Premier: The Auditor General found that Ontario's public-private partnerships cost \$8 billion above base costs. This is equivalent to a 30% cost overrun on every single P3 project. Most of this extra money went to Bay Street and the banks.

P3s take longer to build as well. The TTC has a century's worth of experience with surface rail transit and could get the Hurontario LRT running in four years, but the government will waste an extra two years just to package this into an investment vehicle for private financiers.

1120

Will the Premier save time and hundreds of millions of dollars by keeping this public transit project public?

Hon. Steven Del Duca: I don't think members of this Legislature need to take my word for exactly how transformational the Hurontario LRT will be. In today's Toronto Star, there is a wonderful article entitled "15 Years to Mid-rise Manhattan." It is all about the renaissance that Mississauga is going through.

This article in today's Toronto Star highlights specifically that this government's LRT project along Hurontario will help with a \$56-million investment in a brand new Mississauga research and development facility. It will lead to, along the LRT corridor, a planned 166-acre urban farm, including historic farm buildings, and about 33 acres of mid-rise residential development, including street-level cafés, restaurants and boutiques. Speaker, the article goes on to deliver so much more good news.

Because we're investing in Mississauga, because we're investing in this LRT, we're getting it right. The question is—

The Speaker (Hon. Dave Levac): Thank you. Stop the clock.

I would like to remind the member that when I stand, you sit.

Interjections.

The Speaker (Hon. Dave Levac): I found that inappropriate—dismissive.

Hon. Steven Del Duca: My apologies.

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

New question.

SENIOR CITIZENS

Ms. Sophie Kiwala: My question is for the minister responsible for seniors affairs. Minister, many Ontarians who have lived in and contributed to their communities their entire lives are beginning to enter their golden years. Their communities are also growing older, and with that comes a new set of challenges.

A few weeks ago, you told us about the ambitious Seniors Community Grant Program, which is funding programs for seniors' organizations across Ontario. With our good friend the Minister of Health, you announced free shingles vaccinations for seniors aged 65 to 70, providing peace of mind and financial relief to 850,000 seniors.

But even with these important investments, it is still vital to support basic accessibility projects that help seniors continue living in their communities.

Mr. Speaker, can the minister responsible for seniors affairs please inform the House what supports the Ontario Seniors' Secretariat is providing communities in order to meet the needs of their seniors?

Hon. Dipika Damerla: I'd like to start by thanking the hard-working member from Kingston and the Islands for her question.

Mr. Speaker, I'm delighted to update the House and let them know that since becoming the minister responsible for seniors, I've toured the province to learn first-hand how our seniors are benefiting from the programs that this province has created specifically for seniors.

One area that I do want to focus on today is the idea of age-friendly communities. As Ontario ages, the one thing Ontarians are telling us is that they want to live on their own for as long as they can. That is why we are funding 56 communities across Ontario to help them become more age-friendly. Thanks to this program, communities from Arnprior to Wawa will now have the tools and knowledge to make their communities easier places for seniors to live in.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Sophie Kiwala: I want to thank the minister for her answer. I am pleased to hear that this government is making investments that help seniors who want to stay in their communities, and I'm proud to be part of a caucus that recognizes the valuable contributions that seniors make to Ontario.

As our population ages, it is vital that we make these investments today in order to accommodate the needs of tomorrow. By sharing experience and guidance with local communities, we eliminate messy or ineffective guesswork.

I am, however, still very interested to hear how the Ontario Seniors' Secretariat helps communities prepare for the future needs of seniors. Can the minister please inform the House about the specific supports that are offered to communities who are working to become age-friendly?

Hon. Dipika Damerla: Again, I want to thank the member for her very important question. I'm happy to

speak more specifically as to what we are doing around age-friendly communities.

In 2013, as you may know, Mr. Speaker, we released the Age-Friendly Community Planning guide, which offers age-friendly planners a great deal of resources. In 2014, we launched the Age-Friendly Community Planning Grant, which provides \$1.5 million to 56 communities across Ontario.

Let me give you some examples of the communities we are funding. As my neighbour, the MPP for Ottawa-Orléans, just reminded me, the city of Ottawa has received funding to help develop a plan to install automatic doors in city buildings and add benches to parks and roadways. In Hamilton, this program has improved accessibility to retail centres and raised awareness about services for seniors. Here are some examples of how we are making Ontario age-friendly one city at a time.

HEALTH CARE

Ms. Lisa MacLeod: My question is to the Minister of Health.

Ottawa resident Lisa Garland has three beautiful children and two of them have cancer. If that's not horrific and stressful enough, Lisa tells me that the injections alone cost \$3,000 a month and the anti-vomiting drugs cost over \$800 a month.

And that's not all. Special food, taking time off work and parking at the hospital added up for Lisa and her family. They were forced to fundraise, which is why I think Ontario needs a compassionate and catastrophic care plan for our patients in exceptional circumstances, like Lisa Garland's family.

Minister, a top priority for all Ontarians is health care. I just want you to be part of this plan, and I'm hoping that you agree with me that Lisa's family shouldn't be fundraising for her children with cancer.

Hon. Eric Hoskins: I appreciate the question. I do agree with you that there are, regrettably—often it's too common—families that are facing catastrophic situations, particularly when they involve children. It's difficult, I think, for all of us to imagine just how challenging that can be for a family to cope with and manage.

As the member opposite knows, we do have a catastrophic drug program in the province that provides support to families, including families with children, for a variety of medical and drug challenges that they might face. It is an important program which has provided, together with other programs offered by the province, a degree of support which is reassuring to a lot of families that do find themselves, regrettably and unfortunately, in that extremely challenging and difficult situation.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Lisa MacLeod: I appreciate the words from the minister, but I think that we could be doing more because more and more people are maxing out their credit cards, they're setting up GoFundMe campaigns or they're doing other fundraising events. Others rely on the generosity of drug companies.

Brian Monty and his wife, Erica, also live near Ottawa. His wife has multiple myeloma, an incurable cancer of the blood plasma. She's undergone a stem cell transplant and was prescribed Revlimid and it has kept her alive for three years. Private medical insurance covers up to \$100,000 a year, but that runs out by September, leaving \$36,000; they're left at the mercy of the drug company for the rest of the year. This year that's changed and Brian is afraid his wife might die without the drug. That is why Ontario needs a compassionate and catastrophic care plan. She's only alive at the mercy of a drug company.

Will the minister take the lead on this today and will he support my motion for a compassionate and catastrophic care plan for the province of Ontario?

Hon. Eric Hoskins: I appreciate the clarification at the end, because this is actually about the member's private member's bill or motion this afternoon, which I understand actually goes quite beyond what we've been discussing, at least in the first aspect. It talks about creating a fund to fund experimental treatment for individuals.

I think Ontarians appreciate the fact that we do have Trillium, which does provide support for individuals and families that do find themselves in catastrophic or extreme, financially challenging situations. But for 96% of the applicants that come forward—many, many thousands—we do fund treatments and procedures that may not be available in this province.

I know the private member's bill that the member opposite referenced at the very end actually speaks largely about a different fund, which is to fund experimental treatment. We need to make sure that our funding is focused on evidence, best clinical practice and guided, quite frankly, by the specialists who should be making this decision in the first place.

1130

HYDRO RATES

Ms. Jennifer K. French: My question is to the Premier.

Last month, I began collecting hydro bills from my constituents to show the Premier what the reality is for hydro users in Ontario. Families in my community are at a breaking point and I have got over 100 bills sitting here on my desk to prove it. While dropping their bills off, I've heard from families and seniors in Oshawa who set alarms to do their laundry in the middle of the night and lower their food budget just to keep the lights on. This is the reality in my community.

Will the Premier offer real solutions to hydro users in Oshawa or should we just continue living in the dark?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: I'm very pleased to rise and answer the question from the member of the opposition.

It is important for us as a party to ensure that we do put programs in place to help families like those in Oshawa—like those in all parts of the province—and that's why yesterday I was so pleased to see that our bill

that's helping families with the 8% reduction passed through this House unanimously. I think that's very important.

We also have the OESP program, which I know helps families save up to \$45 a month and, in some cases—if they qualify, if they have a medical condition that they need to use equipment for—they can get up to \$75 a month.

Some other good news that's going to help families: Yesterday, the Ontario Energy Board has announced that residential and small business electricity prices will not increase for the next six-month period. We've got the OEB as a quasi-judicial organization making sure that they're protecting Ontario ratepayers as well.

The Speaker (Hon. Dave Levac): Supplementary?

Ms. Jennifer K. French: Back to the Premier: Under the Liberal government, hydro bills have nearly quadrupled since 2003, and it's Ontarians who have been forced to pay for Liberal mismanagement and mistakes.

While dropping a hydro bill off at my office, a constituent named Jeff told me that his plan for the winter is to turn his thermostat down to 62 degrees and rely on a heavy housecoat and warm slippers. Again, this is the reality in my community.

Will the Premier commit to lowering hydro rates in Ontario, or should my constituents just keep turning the thermostat down instead?

Hon. Glenn Thibeault: Thanks for the supplementary question.

I think the important thing that we can tell all of our constituents is that, as of January 1, rates will be going down in this province by 8%, Mr. Speaker. That's something that I know this government is very proud of because we recognize that some folks are having a difficult time when it comes to paying their electricity bills. We understand that and that's why we acted.

We had to do all the heavy lifting to ensure that we have a clean, safe, reliable system, and we've done that, Mr. Speaker.

We've got the OESP—

Interjections.

The Speaker (Hon. Dave Levac): Finish, please.

Hon. Glenn Thibeault: Thank you, Mr. Speaker.

We'll ensure that they have the OESP program and the LEAP program in place, and, as I mentioned, we've also eliminated the debt retirement charge. We're also making sure that, come January 1, they will actually have an 8% reduction on their bills, Mr. Speaker. We're doing a lot to help families right across the province.

SCHOOL TRANSPORTATION

Mr. John Fraser: My question is for the Minister of Transportation.

We all know that school buses carry precious cargo. When a parent or a caregiver waves goodbye to a child stepping onto a school bus, they want to know that their child will have a safe ride to and from school.

Ontario is known for the safety of its roads, and I know the minister reminds this House often that our roads are among the safest in Ontario. We all know that when it comes to the safety of our children, Ontarians need an extra sense of security: that safety is our top priority.

Speaker, would the minister please let the members of this House know what our government is doing to ensure the safety of children on school buses, not only today but for years to come?

Hon. Steven Del Duca: I thank the member from Ottawa South for the question, of course.

This is something that I, as the Minister of Transportation, do think about year-round, but it is particularly at the forefront of my mind this week as it is School Bus Safety Week.

The member from Ottawa South is absolutely correct: Parents and all caregivers deserve the extra assurance that, at the end of the school day, their child will return home safe and sound. That's why I am proud to say that school bus transportation is the safest form of transport for schoolchildren in Ontario. According to research by Transport Canada, travelling on a school bus is 16 times safer than travelling in a regular motor vehicle, based on the number of passengers and kilometres travelled.

Speaker, we'll continue to work diligently on this file because our government is committed to continually improving school bus safety, and we want to assure all families that safety will always be a top priority for our government.

The Speaker (Hon. Dave Levac): Supplementary?

Mr. John Fraser: I want to thank the minister for the answer to the question.

Our government and indeed everyone in this Legislature is committed to the safety of our children, not only when they are in our schools but also when they're on the road to get there. Transporting over 800,000 students a day is a huge safety responsibility, and I know that families in my community and communities across Ontario will be reassured by the safety record of school buses in this province.

It is especially critical for all of us to have the opportunity to talk about the importance of public awareness in ensuring the success of safety campaigns like School Bus Safety Week. Mr. Speaker, would the minister be able to please provide members of this House with any additional information on the importance of School Bus Safety Week?

Hon. Steven Del Duca: Again, I thank the member from Ottawa South for the follow-up question.

I want to start off by saying I'm extremely pleased, as always, to work alongside many of our ongoing safety partners on all aspects of road user safety. These campaigns, the campaigns that our partners are responsible for developing and delivering alongside MTO, are critical drivers with respect to raising public awareness about road safety and issues specifically around school bus safety.

School Bus Safety Week sees such success stories because there are organizations in the province of

Ontario that care as much about the safety of our roads as we do. This is another great example of how we can make Ontario stronger by working together.

It's my privilege to say to the member from Ottawa South and, of course, all of our road safety partners how grateful we at MTO are for their extraordinary work. I look forward to having the chance to work alongside them for many years to come.

HYDRO RATES

Mr. Ernie Hardeman: My question is for the Premier. Premier, I've heard from hundreds of people about the hardships caused by their hydro bills. They've told me their stories and wanted me to ask the Premier for her response.

One pensioner said that he has to work two part-time jobs just to make ends meet because of hydro increases. His wife is on disability. He has said that he wants to stay in his own home and not be forced to move at his age, but the price of hydro is making this harder and harder.

The government assistance programs aren't solving the problem. What does the Premier have to say to this pensioner working two jobs just to pay his hydro bill?

Hon. Kathleen O. Wynne: Minister of Energy.

Hon. Glenn Thibeault: I thank the honourable member for the question.

It is very important for us on this side of the House to ensure that all families, all seniors know the programs that are available. One of the important things that we do have is the OESP program. I know I talk about it often, but the one section of the OESP program gives seniors up to \$75 a month. I hope this senior has contacted his LDC to find out what he qualifies for because that \$75, I know, can go a long way when you put that on top of the things that we've already done to help. We have eliminated the debt retirement charge, which is a \$70-a-year piece as well, on top of the 8% off that he will see on his bills come January 1.

We recognize that some families and some seniors are having a hard time with those bills, and that's why we acted. We're very proud that that bill passed yesterday.

The Speaker (Hon. Dave Levac): Supplementary.

Mr. Ernie Hardeman: Well, Mr. Speaker, if the Premier cares, I think my constituents would like to hear her response.

The rebate and assistance programs the minister speaks about are not enough.

Another story I received comes from a senior who lives on a fixed income in a mobile home that is 12 feet by 60 feet. Since 2010, her hydro rates have increased by 150%. After paying for hydro each month, she only has \$57 left to cover the cost of food. Soon, she will have to make difficult choices between eating and paying for her prescription drugs.

What does the Premier have to say to this senior who is choosing between paying for hydro and basic necessities? And I'd like to hear that from the Premier.

Hon. Glenn Thibeault: I do again acknowledge the question from the honourable member and the import-

ance of making sure there are programs in place to help families and to help individuals with their electricity bills.

We have done a lot of the heavy lifting. We have invested in making sure that we can have a clean, safe, reliable system.

I've talked about the OESP program. In his riding, I hope he's talking about the OESP program and also talking about the Ontario Energy and Property Tax Credit that these families and individuals can apply for.

If they need help right away in an emergency situation, we have the LEAP program. Families can even make sure that they can apply for the saveONenergy program. Conservation helps them reduce their bills and helps the overall supply. It's a very important program and something very key for families to be part of. We have many programs that are in place: 8% coming January 1—

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

NOTICE OF DISSATISFACTION

The Speaker (Hon. Dave Levac): Pursuant to standing order 38(a), the member for Leeds–Grenville has given notice of his dissatisfaction with the answer to his question given by the Minister of Tourism, Culture and Sport concerning the Ontario Trillium Foundation. This matter will be debated next Tuesday at 6 p.m.

CORRECTION OF RECORD

The Speaker (Hon. Dave Levac): A point of order from the member from Ottawa South.

Mr. John Fraser: Speaker, I'd like to correct my record. I believe in my initial question I said we had the safest roads in Ontario. What I meant to say was the safest roads in North America. Thank you.

The Speaker (Hon. Dave Levac): That is a point of order. All members are free to correct their own record.

There are no deferred votes. This House stands recessed until 1 p.m. this afternoon.

The House recessed from 1141 to 1300.

MEMBERS' STATEMENTS

HIGHWAY FUNDING

Mr. Lorne Coe: I'm pleased to rise in the Legislature today to tell you with certainty that Durham region needs infrastructure help. Durham region is replete with a lot of frustrated drivers. On the 401, rush hour gridlock starts early in the morning in Bowmanville and continues past Pickering. During the same time period, traffic along the east-west corridor of Taunton Road in the north-central part of my riding is often impossible.

Incredibly high house prices in Toronto are further driving the population movement east, and now 42% of Durham's population commutes outside the region for

work. Initiatives aimed at increasing local jobs and improving public transit are laudable, but time is not an ally of residents in Durham region.

This government seems to feel that traffic problems end in Ajax–Pickering. They do not. Durham is lagging behind other areas of the GTA, particularly Whitby–Oshawa. It continues to wait, but patience is waning. The region needs help now, and the time for action is now.

DIWALI

Miss Monique Taylor: It is always a pleasure to rise in this House in recognition of people and/or events that happen in my beautiful city and in my riding of Hamilton Mountain.

One of the greatest things about living in Ontario and Canada is the growing diversity of our cultures and traditions. On October 30, Hindus around the world will be celebrating Diwali, also known as the festival of lights. Diwali stands out as a celebration of great joy. It has meaning to all of us who seek a better world, regardless of our cultural background. Diwali spiritually signifies victory of light over darkness, good over evil, knowledge over ignorance and hope over despair.

This past weekend, I was fortunate enough to attend a Diwali celebration in my community at Hamilton city hall. It was a wonderful event with colourful displays of different regional traditions, talented children dancing, and family and friends coming together.

The event was organized by the Hindu Samaj Women's Outreach Group. This is a very active group in Hamilton and does wonderful work to share their culture with a lot of joy. I would like to extend my thanks to them for planning the event and showcasing the wonderful traditions that their families will be sharing. I really appreciate their invitation to participate.

On behalf of New Democrats, happy Diwali.

APPLEFEST

Mr. Granville Anderson: I rise today to tell you all about Applefest, which is an event I attended this past weekend in my lovely riding of Durham. Every year, I have such a great time meeting constituents and eating apple-based treats.

As many of you know, I represent a riding that is abundant in agriculture and farming. Every year, our local farmers supply pounds of goods to be sold at this festival. I am so pleased that my constituents have the opportunity every year to come to Applefest and buy locally produced apples and other baked goods.

Applefest is one of the great events that take place annually in historic downtown Bowmanville. It's a great example of how hundreds of constituents from Durham and its surrounding areas can come together and feel a sense of community. I would say that my favourite thing about this event is being able to meet all of my new families who have just moved to the area and who are experiencing this festival for the very first time. They are always so impressed.

Thank you to all the volunteers who have worked tirelessly on this event from start to finish. My staff and I are pleased to participate in this festival every year and to see the good work our community is doing on behalf of its citizens.

SMALL BUSINESS

Mr. Victor Fedeli: I'm proud to rise today to recognize Small Business Week on behalf of the Ontario PC caucus and our leader, Patrick Brown.

We all know the numbers from our experiences that Ontario's small and medium-sized businesses are vital to our economy and to our communities. This week, we're recognizing the hard work that entrepreneurs and business owners do every day, all year long. They and their families often make great sacrifices to build their businesses, to support their community and to create jobs. They are the lifeblood of our economy and a beacon of possibility. These tremendous contributions are made in the face of great challenges, so we appreciate the dedication, the guts, the ingenuity and the straight-up hard work that these business owners and employers put in every single day.

We celebrate you this week, and we want to take this occasion to let you know that your concerns are being heard. The Ontario PC caucus will continue to fight to create the conditions which allow you to grow and prosper. Your success moves our whole province forward.

Speaker, to all of the small businesses, we say congratulations. We're with you on Small Business Week.

LARUNG GAR

Ms. Cheri DiNovo: As I read this, the destruction of Larung Gar by the Chinese government in Tibet is continuing. Larung Gar is the largest Buddhist community in the world. It provides homes to over 10,000 people and serves as a key place for the understanding and preservation of Tibetan culture, language and community.

The destruction of Larung Gar comes from the perpetuation of oppressive policies and acts and brings hardship to innocent and peaceful people. It also places Tibetan culture at risk as the community around Larung Gar is broken and dispersed. The monks of Larung Gar preach values of tolerance, compassion and understanding, from which all people in the world can benefit.

This is an international issue that deserves international solidarity and action. The actions of the Chinese authorities have been condemned by human rights groups worldwide. We ask that this relentless interference and destruction come to an end and that the Tibetan people be allowed to choose their own path in how best to practise their own religion.

I want to thank the Students for a Free Tibet, the Canadian Tibetan Association, and of course all who support human rights everywhere for signing our petition.

FLU IMMUNIZATION

Mr. Bob Delaney: Once this warm and lingering summer weather is replaced by the cold breath of Ontario autumn winds, we will all close the windows and breathe the same indoor air. That means it's time for every Ontarian to take the flu shot.

The influenza virus can be lethal. The flu shot protects you. You can get a head cold, but that's not the seasonal flu, with its weeks-long aches and pains, sneezing and coughing, and feeling like death warmed over.

When the H1N1 virus scared people several years ago, they lined up to get the flu shot. Deaths and hospitalizations fell sharply from flu-related causes during the H1N1 scare—proof that the flu shot works.

Once the H1N1 scare abated, too many people shrugged off the need to be vaccinated against the seasonal flu. Flu-related deaths and hospitalizations shot right back to their historical levels.

The flu shot is absolutely free and available from your doctor or at many pharmacies and clinics. The flu vaccine is made from eggs, and it's made right here in Canada. It's safe and it sure beats having the flu. You need the flu shot every year. However you get it, take the annual flu shot. It matters.

CHRISTOPHER PENNINGTON

Ms. Lisa M. Thompson: I've got a statement that I know you're going to like today, and it's because I'm taking a moment to recognize Christopher Pennington, a brave and compassionate 11-year-old from Brussels, Ontario.

Christopher isn't your ordinary 11-year-old. Two years ago, he was diagnosed with HSP, an autoimmune disorder which can cause chronic kidney disease. But he does not let that slow him down at all. Christopher is an accomplished baseball and hockey player, but he's also a champion in his community for other reasons.

1310

Christopher was the honorary chair of the Kidney Walk in Goderich this past fall, and I was there to witness this inspiring young man in action and was blown away by the manner in which his passion, motivation and determination inspired his community and the entire riding. It was this determination that garnered big results. Before the walk even began, the Kidney Foundation of Canada announced that his event raised \$11,200. Half of that was raised by Christopher's friends, known under Christopher's handle as Christopher's Crew.

I also want to recognize Christopher's parents, Cathy and Mark. They unconditionally are supporting every step of the way that Christopher takes in ensuring people are aware of kidney disease and in order to make a difference. Cathy was recognized as a Remarkable Citizen in Huron-Bruce just this past January, and clearly Christopher is proving to be remarkable in his own right. Thanks for all you do, Christopher.

ENERGY POLICIES

Ms. Teresa J. Armstrong: Today, I'm proud to rise and speak on behalf of my constituents in London–Fanshawe as well as people across Ontario to address this important issue that has reached crisis status in our province: the privatization of hydro, and skyrocketing hydro costs. While this issue is deeply affecting individuals, families and businesses, I am most concerned about how it is also affecting seniors throughout the province.

My office organized a round table with seniors, and what they told me was appalling and shameful. They told me how they are struggling to pay for basic needs on fixed incomes. They told me how they are forced to choose between hydro and food or prescription drugs every month. One senior noted that she didn't qualify for the Trillium fund and couldn't afford her hearing aids, let alone her hydro bill.

This is an issue that affects everyone in Ontario, but for our most vulnerable communities this issue is reaching a critical tipping point. Eighty-three per cent of Ontarians oppose your privatization scheme, and 165 community councils and municipalities have passed motions opposing this course of action. This government is absolutely lacking a mandate from Ontarians yet they are digging us all in deeper.

New Democrats will continue to oppose a sell-off of public assets. We don't do it for votes; we do it because it's the right thing to do for this province, for seniors and families and for our future. It's time for the government to stop the sale of Hydro One and start putting the needs of the people above the needs of the Liberal Party.

CHILDREN'S VISION
AWARENESS MONTH

Mr. John Fraser: It's my pleasure to rise today to recognize Children's Vision Awareness Month. We see the world through our eyes. In fact, 80% of learning is visual. Good vision is a key determinant in a child's learning and development. It enables them to achieve their full potential.

Speaker, we know that routine eye examinations are fully covered for Ontarians under the age of 20. Despite this, approximately 86% of children do not get their vision tested before the age of six, and one out of six children requires a vision correction. There are a number of initiatives, like the Eye See ... Eye Learn program, the government's partnership with optometrists to raise awareness with families. As well, ophthalmologists and researchers are actively engaged in a number of studies and initiatives regarding effective and affordable vision screening for children. Earlier this morning, I had the opportunity to meet with members of the Ontario Association of Optometrists, where we had a chance to talk about this very issue. I want to thank them for taking the time to meet with me here at Queen's Park.

As legislators, grandparents, doctors and educators, this is an issue that should be of concern to all of us. Mr.

Speaker, we all have a role to play, and I would like to suggest to all members that we take this opportunity to remind our neighbours of the importance of having their children's vision tested.

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

INTRODUCTION OF BILLS

MUNICIPAL STATUTE LAW
AMENDMENT ACT
(COUNCILLOR PREGNANCY
AND PARENTAL LEAVE), 2016LOI DE 2016 MODIFIANT DES LOIS
EN CE QUI A TRAIT AUX MUNICIPALITÉS
(CONGÉS DE MATERNITÉ
ET CONGÉS PARENTAUX
DES CONSEILLERS MUNICIPAUX)

Ms. Vernile moved first reading of the following bill:

Bill 46, An Act respecting pregnancy and parental leaves of municipal council members / Projet de loi 46, Loi sur les congés de maternité et les congés parentaux des membres des conseils municipaux.

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.

Ms. Daiene Vernile: This private member's bill addresses the inequity that Ontario mayors and municipal councillors currently face under the Municipal Act as it's written. If they're gone on maternity or parental leave for more than three months—many people may not know this—they can lose their seats. We wish to amend this.

PROTECTING REWARDS POINTS ACT
(CONSUMER PROTECTION
AMENDMENT), 2016LOI DE 2016 SUR LA PRÉSERVATION
DES POINTS DE RÉCOMPENSE
(MODIFICATION DE LA LOI SUR LA
PROTECTION DU CONSOMMATEUR)

Mr. Potts moved first reading of the following bill:

Bill 47, An Act to amend the Consumer Protection Act, 2002 with respect to rewards points / Projet de loi 47, Loi modifiant la Loi de 2002 sur la protection du consommateur en ce qui a trait aux points de récompense.

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. Arthur Potts: The bill amends the Consumer Protection Act, 2002, with respect to rewards points. The definition of a consumer agreement will be amended to include agreements under which rewards points are provided, and a new section is added that prohibits consumer agreements from allowing the expiry of rewards points. Any rewards points that expire on or after October 1, 2016, will be credited back to the consumer on the day this section comes into force.

PETER KORMOS ACT (REPEALING
THE SAFE STREETS ACT), 2016

LOI PETER KORMOS DE 2016
SUR L'ABROGATION DE LA LOI
SUR LA SÉCURITÉ DANS LES RUES

Ms. DiNovo moved first reading of the following bill:

Bill 48, An Act to repeal the Safe Streets Act, 1999 /
Projet de loi 48, Loi abrogeant la Loi de 1999 sur la
sécurité dans les rues.

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.

Ms. Cheri DiNovo: The Safe Streets Act, 1999, is
poorly conceived legislation that persecutes the poor by
making it illegal to solicit money on streets, in parking
lots, at transit stops or near bank machines.

Therefore, Her Majesty, by and with the advice and
consent of the Legislative Assembly of the province of
Ontario, enacts as follows: The Safe Streets Act, 1999, is
repealed.

The Speaker (Hon. Dave Levac): Might I remind all
members that debate or comment on such legislation is in
debate, not in the introduction of the bill—taken, usually,
from the explanatory notes.

PETITIONS

HYDRO RATES

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

“Whereas the price of electricity has skyrocketed
under the Ontario Liberal government;

“Whereas ever-higher hydro bills are a huge concern
for everyone in the province, especially seniors and
others on fixed incomes, who can’t afford to pay more;

“Whereas Ontario’s businesses say high electricity
costs are making them uncompetitive, and have contrib-
uted to the loss of hundreds of thousands of manufactur-
ing jobs;

“Whereas the recent Auditor General’s report found
Ontarians overpaid for electricity by \$37 billion over the
past eight years and estimates that we will overpay by an

additional \$133 billion over the next 18 years if nothing
changes;

“Whereas the cancellation of the Oakville and
Mississauga gas plants costing \$1.1 billion, feed-in tariff
(FIT) contracts with wind and solar companies, the sale
of surplus energy to neighbouring jurisdictions at a loss,
the debt retirement charge, the global adjustment and
smart meters that haven’t met their conservation targets
have all put upward pressure on hydro bills;

1320

“Whereas the sale of 60% of Hydro One is opposed by
a majority of Ontarians and will likely only lead to even
higher hydro bills;

“We, the undersigned, petition the Legislative Assem-
bly of Ontario as follows:

“To listen to Ontarians, reverse course on the Liberal
government’s current hydro policies and take immediate
steps to stabilize hydro bills.”

Madam Speaker, I agree with this petition, and I will
affix my signature to it as well.

DOG OWNERSHIP

Ms. Cheri DiNovo: “To the Legislative Assembly of
Ontario:

“Whereas aggressive dogs are found among all breeds
and mixed breeds; and

“Whereas breed-specific legislation has been shown to
be an expensive and ineffective approach to dog bite pre-
vention; and

“Whereas problem dog owners are best dealt with
through education, training and legislation encouraging
responsible behaviour;

“We, the undersigned, petition the Legislative Assem-
bly of Ontario as follows:

“To repeal the breed-specific sections of the Dog
Owners’ Liability Act (2005) and any related acts, and to
instead implement legislation that encourages responsible
ownership of all dog breeds and types.”

I add my name to the thousands and I give it to Dylan
to be delivered to the table.

HYDRO RATES

Ms. Lisa M. Thompson: “To the Legislative Assem-
bly of Ontario:

“Whereas household electricity bills have skyrocketed
by 56% and electricity rates have tripled as a result of the
Liberal government’s mismanagement of the energy sec-
tor;

“Whereas the billion-dollar gas plants cancellation,
wasteful and unaccountable spending at Ontario Power
Generation and the unaffordable subsidies in the Green
Energy Act will result in electricity bills climbing by
another 35% by 2017 and 45% by 2020; and

“Whereas the Liberal government wasted \$2 billion on
the flawed smart meter program; and

“Whereas the recent announcement to implement the
Ontario Electricity Support Program will see average

household hydro bills increase an additional \$137 per year starting in 2016; and

“Whereas the soaring cost of electricity is straining family budgets, and hurting the ability of manufacturers and small businesses in the province to compete and create new jobs; and

“Whereas home heating and electricity are a necessity for families in Ontario who cannot afford to continue footing the bill for the government’s mismanagement of the energy sector;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to immediately implement policies ensuring Ontario’s power consumers, including families, farmers and employers, have affordable and reliable electricity.”

On behalf of the good people of Teeswater, I’m proud to affix my signature to this petition and send it to the table with Cooper.

DENTAL CARE

M^{me} France Gélinas: I’m happy to present this petition on behalf of my colleague Cindy Forster from Welland, who has collected over 2,000 names on a petition called “Expand Public Dental Programs.

“Whereas lack of access to dental care affects overall health and well-being, and poor oral health is linked to diabetes, cardiovascular, respiratory disease, and Alzheimer’s disease; and

“Whereas it is estimated that two to three million people in Ontario have not seen a dentist in the past year, mainly due to the cost of private dental services; and

“Whereas approximately every nine minutes a person in Ontario arrives at a hospital emergency room with a dental problem but can only get painkillers and antibiotics, and this costs the health care system at least \$31 million annually with no treatment of the problem;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to invest in public oral health programs for low-income adults and seniors by:

“—ensuring that plans to reform the health care system include oral health so that vulnerable people in our communities have equitable access to the dental care they need to be healthy;

“—extending public dental programs for low-income children and youth within the next two years to include low-income adults and seniors; and

“—delivering public dental services in a cost-efficient way through publicly funded dental clinics such as public health units, community health centres and aboriginal health access centres to ensure primary oral health services are accessible to vulnerable people in Ontario.”

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

HIGHWAY RAMPS

Mrs. Julia Munro: My petition is to the Legislative Assembly of Ontario.

“Whereas the town of Bradford West Gwillimbury will continue to have robust growth of population and commercial activity in proximity to the Holland Marsh, Ontario’s salad bowl, which consists of 7,000 acres of specialty crop area lands designated in the provincial Greenbelt Plan and is situated along the municipal boundary between King township and the town of Bradford West Gwillimbury, as bisected by Highway 400;

“Whereas the Canal Road ramps at Highway 400 provide critical access for farm operations within the Holland Marsh allowing for efficient transport of product to market, delivery of materials and equipment and patronage of on-farm commercial activities; and

“Whereas the loss of that critical access to Highway 400 may threaten the significant financial benefits that the Holland Marsh contributes to the Ontario economy;

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

“That the council of the corporation of the town of Bradford West Gwillimbury hereby advises the Honourable Steven Del Duca, Minister of Transportation, that the town does not support the elimination of the Canal Road ramps at Highway 400, and further, that the town requests that the duration of the temporary closure of Canal Road between Wist Road and Davis Road be minimized to the greatest extent possible during the Highway 400/North Canal bridge replacement project.”

As I am in agreement, I have affixed my signature to give it to page Carter.

PRIVATIZATION OF PUBLIC ASSETS

Mr. Michael Mantha: I think I’m going to be getting a few more hundreds of these on Saturday at the minister’s office in Sudbury.

“Hydro One Not for Sale! Say No to Privatization.

“Petition to the Legislative Assembly of Ontario:

“Whereas the provincial government is creating a privatization scheme that will lead to higher hydro rates, lower reliability, and hundreds of millions less for our schools, roads, and hospitals; and

“Whereas the privatization scheme will be particularly harmful to northern and First Nations communities; and

“Whereas the provincial government is creating this privatization scheme under a veil of secrecy that means Ontarians don’t have a say on a change that will affect their lives dramatically; and

“Whereas it is not too late to cancel the scheme;

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

“That the province of Ontario immediately cancel its scheme to privatize Ontario’s Hydro One.”

I wholeheartedly agree with this petition and present it to page Nicolas to bring it down to the Clerks’ table.

SCHOOL CLOSURES

Mrs. Gila Martow: I have a petition to the Legislative Assembly of Ontario:

“Whereas a staff report has recommended Upper Canada District School Board close numerous schools across eastern Ontario; and

“Whereas access to quality local education is essential for rural communities to thrive; and

“Whereas the Ministry of Education removed community impact considerations from pupil accommodation review guidelines in 2015; and

“Whereas local communities treasure their public schools and have been active participants in their continued operation, maintenance and success; and

“Whereas the Ontario government should focus on delivering quality, local education services to all communities, including rural Ontario;

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

“(1) To reinstate considerations of value to the local community and value to the local economy in pupil accommodation review guidelines; and

“(2) To work with all school boards, including Upper Canada District School Board, to modify the funding model to include appropriate funding that considers student busing times, extracurricular and inter-school activities, the schools’ role as a community hub and its value to the local economy.”

I’m affixing my signature and giving the petition to page John.

POLICE TICKETING

Ms. Cheri DiNovo: “To the Legislative Assembly of Ontario:

“Whereas the 2000 Safe Streets Act criminalizes poverty by ticketing panhandlers, squeegee kids, the homeless and people with mental health issues, and has cost more than \$1 million in police time to hand out at least \$4 million in tickets, 99% of which remain unpaid;

“Whereas for many people, tickets issued through the Safe Streets Act haunt them for years. Outstanding fines count against a driver’s licence and can make it difficult to obtain credit. That creates a barrier for people to getting employment and housing;

“Whereas money spent enforcing the Safe Streets Act could be better spent on affordable housing, employment, mental health and addiction supports and an investment in prevention so that people don’t become homeless in the first place;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to support MPP Cheri DiNovo’s ‘the Kormos Act,’ named after former NDP MPP Peter Kormos, to repeal the Safe Streets Act.”

Of course, I agree. I’m going to sign it and give it to Suryakant to be delivered to the table.

1330

AGRICULTURE INDUSTRY

Ms. Lisa M. Thompson: I’m pleased to rise today to share this petition, as I continue to get tens of hundreds of signatures on an important issue. It’s Bill 4. It reads:

“Say Yes to Supporting Employment Opportunities for Certified Crop Advisers.

“To the Legislative Assembly of Ontario:

“Whereas beginning August 31, 2017, an exclusionary clause in ON Reg. 63/09 will prohibit a professional pest adviser from completing a pest assessment if they receive an income from a manufacturer or retailer of a class 12 pesticide; and

“Whereas Ontario currently has 538 certified crop advisers providing services to Ontario farmers; and

“Whereas the implementation of this regulation will significantly reduce the number of certified crop advisers capable and willing to conduct pest assessments in the province to approximately 80”—that’s a significant drop; and

“Whereas Ontario is the only jurisdiction within North America to adopt this exclusionary clause; and

“Whereas this regulation will impact farmers by forcing an end to the effective professional partnerships they have established with experts who understand their unique crop needs, soil types and field conditions;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario and the government of Ontario to support measures that will remove the exclusionary clause and ensure farmers can continue to work with the professionals they have built a relationship with, and who are familiar with their land and crop needs.”

I totally agree with this petition. I’ll affix my signature and send it back to the table with Cooper.

HOSPITAL FUNDING

M^{me} France Gélinas: I’d like to thank Mr. Lawrence Walter from ONA, who dropped off these petitions that have been signed by people from Whitby and Ajax. It reads as follows:

“Whereas providing high-quality, universal, public health care is crucial for a fair and thriving Ontario; and

“Whereas years of underfunding have resulted in cuts to registered nurses (RNs) and hurt patient care; and

“Whereas, in 2015 alone, Ontario lost more than 1.5 million hours of RN care due to cuts; and

“Whereas procedures are being offloaded into private clinics not subject to hospital legislation; and

“Whereas funded services are being cut from hospitals and are not being provided in the community; and

“Whereas cutting skilled care means patients suffer more complications, readmissions and death;”

They “petition the Legislative Assembly of Ontario as follows:

“Implement a moratorium on RN cuts;

“Commit to restoring hospital base operating funding to at least cover the costs of inflation and population growth;

“Create a fully-funded multi-year health human resources plan to bring Ontario’s ratio of registered nurses to population up to the national average;

“Ensure hospitals have enough resources to continue providing safe, quality and integrated care for clinical

procedures and stop plans for moving such procedures into private, unaccountable clinics.”

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

HYDRO RATES

Mr. Lorne Coe: “To the Legislative Assembly of Ontario:

“Whereas electricity rates have risen by more than 300% since the current Liberal government took office; and

“Whereas over half of Ontarians’ power bills are regulatory and delivery charges and the global adjustment; and ...

“Whereas the ill-conceived energy policies of this Liberal government that ignored the advice of independent experts and government agencies, such as the Ontario Energy Board (OEB) and the independent electrical system operator (IESO), and are not based on science have resulted in Ontarians’ electricity costs rising, despite lower natural gas costs and increased energy conservation in the province;

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

“To take immediate steps to reduce the total cost of electricity paid for by Ontarians, including costs associated with power consumed....”

I agree with the content of this. I’ll affix my signature and provide it to page Carter for delivery to the Clerks’ table.

PRIVATE MEMBERS’ PUBLIC BUSINESS

The Deputy Speaker (Ms. Soo Wong): I beg to inform the House that, pursuant to standing order 98(c), a change has been made to the order of precedence on the ballot list for private members’ public business such that Mr. Brown assumes ballot item number 32 and Ms. Jones assumes ballot item number 45.

PRIVATE MEMBERS’ PUBLIC BUSINESS

HEALTH CARE

Ms. Lisa MacLeod: I move that, in the opinion of this House, the Ministry of Health and Long-Term Care should appoint an advisory committee to review jurisdictions where a process is in place to consider life-saving experimental and high-cost health care treatments and otherwise exceptional circumstances for patients. The MOHLTC advisory committee should consider Australia’s Special Access Scheme; New Zealand’s Exceptional Circumstances Framework and High-Cost Treatment Pool; and the UK’s National Health Service’s Experimental and Unproven Treatments Policy with the view to establish a compassionate catastrophic care

program in Ontario for those suffering from rare disease or whose treatments may be experimental or complementary but are not yet covered by the Ontario health insurance program.

The Deputy Speaker (Ms. Soo Wong): Ms. MacLeod has moved private member’s notice of motion number 29. Pursuant to standing order 98, the member has 12 minutes for her presentation.

Ms. Lisa MacLeod: It’s my pleasure to be here today with my colleagues to discuss health care in the province of Ontario and how important that is to many of us.

This motion, if passed, could help thousands of Ontario patients whose exceptional health care circumstances have forced them to fundraise or to deplete their savings to pay for life-saving or life-extending treatment, complementary therapies and even drugs.

I’d like to point out that I think there was a misconception in this House today that this was just for experimental treatment. That is not the case. This is for those people who may have experimental treatments, but it could be complementary or it could be drugs that are not yet covered by the Ontario health insurance program.

I’d be remiss not to point out—I heard a wonderful speech earlier today from Minister Moridi as he talked about the genome and the advances that we’re making here in Ontario. He pointed out something that was very important to me in the context of this debate and gave me a bit confidence as I came here today. He reminded me that, very shortly, we will be celebrating, in this province, the 100th anniversary of insulin. He also told me something I didn’t know: Pacemakers were created right here in the city of Toronto. I thought to myself, “Isn’t that amazing?”

As we talk about health care and advancements in health care and innovation in health care, we were talking at one time—these two things that our Canadian medical system is so proud of happened, probably, right on this street. They happened here, and they were once experimental, but now they save millions of lives throughout the world.

It’s important that we continue to challenge ourselves and the province of Ontario on how to make our health care system more nimble, more relevant—and the ability to adapt to the changing needs of the health care system that we have.

I want to say thank you to Minister Moridi for that, because I think it really put into context why we must continue to evolve in our health care system in Ontario. I think that this is an opportunity for us to do that.

I have a few people in the gallery here today who are suffering from various rare diseases. Karolena Dempsey is here; she’s got Schnitzler syndrome. She’s here with her son, Blake, and his friend Sarah.

Angela Covato is here, and Fritz Rieger, Riyadh Elbard, Hilary Wong-Rieger and Mary Ann Weber. Angèle and Jean Bourdon are here today with their daughter. Is Mélanie here? Mélanie is here. Mélanie is 13 years old. I got to meet her just about half an hour ago.

Speaker, sometimes you remember, when you’re on the floor of this House, that there are people who you

fight for, each and every single day. I want Mélanie to know that we are here today to talk about you, and to make sure that the health care system in Ontario adapts for you. I want to say thank you for being an inspiration.

Today we're calling on the Ministry of Health to establish an advisory committee that would review jurisdictions with exceptional circumstances policies, with a view to creating a compassionate and catastrophic care plan in the province of Ontario.

I was asked earlier about those jurisdictions, and I want to highlight them a little bit. There are three in particular in the Commonwealth that have looked at the types of issues that we're contemplating here with rare diseases and experimental therapies and those drugs that aren't covered by insurance policies.

In Australia, they have the Special Access Scheme. The SAS provides arrangements for unapproved therapeutic goods for patients on a case-by-case basis. It takes into special consideration patients who are "seriously ill with a condition from which death is reasonably likely to occur within a matter of months, or from which premature death is reasonably likely to occur in the absence of early treatment." We don't have a program like this.

In New Zealand's Exceptional Circumstances Framework is the patient pharmaceutical assessment. It considers funding decisions for exceptional circumstances that fall outside of funded drugs and treatments on a case-by-case basis. The consideration is whether the patient has tried all existing alternatives.

1340

They also have a High-Cost Treatment Pool, which is a fund set aside by the Ministry of Health for one-off treatments that are not funded by the public health system.

What I like about this is that these are Commonwealth countries. We have so much in common, with our parliamentary system, the way we've set up our ministries and the views that we share. In the United Kingdom's Experimental and Unproven Treatments Policy, the Cancer Drugs Fund helps people in the UK to access drugs not approved by the National Health Service. These funds are available after all NHS funding options have been explored, and provide for funding in exceptional circumstances. The UK also has a statewide policy that allows local, clinical commissioning groups to make decisions on whether to fund drugs or treatments that are not approved by the National Institute for Health and Clinical Excellence.

I raise this, Speaker, because I've noticed in my own community that far too many people are maxing out their credit cards, creating GoFundMe campaigns or hosting fundraisers like benefits or bake sales to pay for their basic health care. This is an increasing trend in Ontario, and it means that too many patients are falling through the cracks.

Just this weekend I was at the Rosses' Independent Grocer, where I do my grocery shopping—my friend owns this small, independent grocery store—and I was shocked when I was at the checkout that I had seen yet

another person having to do fundraising on October 16 for their cancer care. After having learned about all of the different people that I have started to get to know as a result of this work, I was quite shocked.

I'll tell you when it really turned me, Speaker: this summer. A friend of mine and his wife lost their jobs. The mother had cancer and beat the cancer. Their daughter also had cancer. It came back, and it's terminal. She's in her early 20s. She had to deplete her life savings. Her oncologist had suggested that she have some complementary therapy. It costs about \$120 a week. So our community—and our rugby community, because that is a very important family to me—came together and we raised the money so that this young girl who has terminal cancer could get those therapies that her physician said she needed to take in order to make her life a little bit better in the time she has left here. Our community raised \$12,000. I saw what wonderful people I represent—I already knew it, but I saw it right then and there.

About a month after that, I got a phone call from a man named Hector Macmillan. Everyone here is aware of Hector. When I spoke with Hector, he was pretty disappointed and disillusioned. His battle with pancreatic cancer rivalled his battle with the Ontario health insurance program as he desperately tried to have them fund his life-saving surgery. OHIP refused. He raised the money and now he is successfully recovering in Germany, where he took that operation.

I also mentioned today in question period an Ottawa mother who lives in my constituency. Her name is Lisa Garland. She has two sons with cancer, and she told me that the injections cost \$3,000 a month; another \$800 for anti-vomiting drugs; then there is the special diet and the parking at the hospital. They had to resort to fundraising.

I don't know, as a mother, Speaker, if I could take all that has been thrown at her. We all have challenges in our lives. I know that when my dad died of cancer in his fifties—I was in my early thirties—it was the most devastating thing that could ever have happened to me. He died very quickly. I don't know if I could watch my child—let alone two—go through it and have to fundraise at the same time. I can't even imagine.

These cases prompted me into action, and I've begun to see how many Ontario patients are forced to fundraise as they suffer. I think it is a bit of a contradiction of our view of the health care that we have in Ontario.

I think—and I think every member would agree—that the number one budgetary priority for all of us in this assembly is the health care budget. There is no question.

I think also we would recognize that every single Ontarian that sends one single red cent to Queen's Park expects that we fund their personal number one priority, which is health care.

I acknowledge that we are doing that. Yet, now more than ever, patients and their families are paying out of pocket just to keep well or to stay alive. That's why I'm appealing to all members of the Legislature to come together and to vote for this simple, yet what I would consider meaningful, motion.

I believe it will spark thoughtful consideration of how we can best help those with exceptional needs with a compassionate and catastrophic-type health care policy. It will bring our health care in line with trends that we are experiencing at a time when health care innovation, pharmaceuticals and treatment in many illnesses are advancing.

I want to go back to the words I heard Minister Moridi speak today at the innovation luncheon on genomes. We are advancing; we are changing. We need a health care system that can adapt to those changes. We need to be nimble, and I believe we can be, but we can be on two sides of this too. We can pretend everything is fine and we can leave it as it is, or we can come together. We can acknowledge that everything isn't perfect and that there are a few people out there we can help, and we can be on the side of "let's fix that problem."

A couple of weeks ago, one of my best friends, Tim Hudak, left this chamber, and his parting advice to everyone in this assembly was, "You have a microphone. Use it." With that, Speaker, I'm using my private member's time to put a level of debate, both in the assembly and through the media and in our community, on how we can best address the health care challenges we face.

I'm proud to be part of a government, part of a Legislative Assembly and part of a caucus where we can have that exchange of ideas and hopefully support each other for the better. I want to build off the good work of Michael Harris on his rare diseases, the good work of our health critic, Jeffrey Yurek, who has been a very effective advocate, and the good work of other members in this House who have put forward health care reforms and have seen them pass.

All I'm asking for is a committee—to the minister—that will make considerations on the people who have joined us in the House today.

With that, I look forward to the debate. I want to thank all colleagues in advance for putting forward their ideas in this debate.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. Percy Hatfield: Good afternoon. As you know, I've been a member of this House for a little over three years. When I first got here, I recall feeling uncomfortable when we dealt with issues indirectly related to this motion.

I remember the former member from Halton, my friend Ted Chudleigh. Ted is a grandson of Thomas Laird Kennedy. Kennedy was the 15th Premier of Ontario. He served as interim Premier from October 1948, when Premier George Drew lost his seat in a provincial election, until the spring of 1949, when Leslie Frost was elected Conservative leader and Premier. Kennedy served as the Minister of Agriculture until 1953. He remained an MPP until he died in office in 1959 and was replaced by Bill Davis. In 1995, Ted eventually followed in his grandfather's footsteps and served here at Queen's Park until 2014.

Now, back when I first got here, Ted was very passionate about a case he was making for special fund-

ing for a young constituent. He would invite her and her mother to sit in the gallery, basically point to them and tell the health minister at the time, Ms. Matthews, that this young person would surely die if the minister didn't give immediate funding to this case for an expensive drug that wasn't yet covered in Ontario.

Ted wasn't the only member who would do this from time to time, but as a new MPP, I felt uncomfortable when this occurred. I still do. That's just me; it's just the way I am. Speaker, I mean no disrespect to those who do this from time to time; that's their choice.

Now, the health minister at the time would always respond with compassion and say that the government didn't play politics with these cases; they left the decisions to others. They relied on a team of outside experts who use science and evidence-based history to determine which drugs or treatment are covered by our health insurance plan.

1350

This motion by my friend from Nepean–Carleton seeks to tap into the science and evidence-based case history in other jurisdictions to see whether we could adopt something similar. It's a motion that merits support from all sides of the House.

Other jurisdictions, as we've heard, have plans in place for such life-saving experimental health care treatments, regardless of the cost. They're done on a case-by-case basis in exceptional circumstances. Maybe the advisory committee that the member is asking for will develop a made-in-Ontario plan that will serve us well. Maybe some real good will come from this motion. I compliment the member from Nepean–Carleton for bringing this forward. I know the motivation behind her motion is based on compassion.

Speaker, I was at AMO in Windsor in August. The health minister was asked at the bear-pit session about experimental treatments and special funding in exceptional life-and-death circumstances. I thought his response was the most compassionate I've ever heard from any minister since I've been here.

The minister said that he couldn't begin to imagine what people facing such circumstances were going through and the impact it was having on their friends and family. He said that by far the most difficult part of his job is looking into the eyes of such people and admitting that he wasn't the best person to make such life-and-death decisions, that even though he's a practising doctor, he wasn't trained or skilled in all specialty areas. He relies on a team of experts, a body of highly trained specialists who would assess such circumstances in a non-partisan environment. Their decisions would be based on best practices and evidence-based science. The Minister of Health and Long-Term Care said that there was nothing more important to him than finding opportunities to improve an outcome for patients facing such challenges. He spoke of his moral and ethical responsibility to work within the health care system to make it better.

I believe this motion will assist the minister in that regard.

There are other jurisdictions all around the globe who have wrestled with this dilemma. They did their homework. They looked at the science. They looked at the evidence. They took the politics out of the equation. They found a way to give people hope, real hope, that they would have a future. They showed them some love. They found a way to help people facing exceptional life-and-death circumstances. They drew a line in the sand that said we want to help those in despair and not treat them as statistics. They said that we have to find ways to meet the needs of these patients as best we can, to give them something to be optimistic about for a change. They developed procedures using fact-based science that led to responsible and compassionate treatment for some, maybe not for all. But, Speaker, if they can do it in Australia and New Zealand and in the United Kingdom and any place else around the planet, then we can do it here in Ontario, and we can do it now.

I urge all members to support this motion. It will help make the minister's job easier and the decisions the minister makes more compassionate and less confrontational. Let's take away the anger that comes naturally when we don't have a solution at hand. I'm not suggesting by any means that the motion is a magic wand and all the answers are just around the corner, but what's the harm in actually looking around the corner to see what may be hiding there in plain sight? There's no shame in adopting practices developed by someone else. Heck, that's how we stumbled our way into modern medicine.

Let's find new ways of treating the people who need our help the most. Let's not think of them as statistics. Let's give them hope.

What was it that Jack Layton said? "My friends, love is better than anger. Hope is better than fear. Optimism is better than despair. So let us be loving, hopeful and optimistic. And we'll change the world."

The Deputy Speaker (Ms. Soo Wong): Further debate.

Mr. Lou Rinaldi: Thank you, Speaker. Normally, as you probably know, my face is not around this place during private members' bills on Thursday afternoon. I'm battling the traffic to try to get home and do some constituency work. But today, Speaker, I made a point of being here. I want to congratulate my friend from Nepean-Carleton for bringing this motion forward.

Saying that, I guess why I want to be here is a bit selfish. My good friend, as Ms. MacLeod just said a minute ago, is in Germany and had an operation. I got a text from him a week or so ago, and he said things were going fine. I'm delighted. I spoke with Hector prior to him going to Germany, and I certainly wish him all the best.

Over my lifetime—we all run across challenges. I know what the Macmillan family is going through—I'm trying to be a bit selfish here, so bear with me, because I do know his wife, Sandy, and his family. He's a hard-working businessman, and certainly a leader in his community. He's the mayor.

I think I was one of the very first ones who Hector told that he had cancer, some five or six years ago. It was

during the ROMA convention at the Royal York. He pulled me aside and said, "I'm going home early, because I think I've just been diagnosed with the big C." Speaker, it was tough.

Anything that we can do—I know I can tell you, Speaker, that my office and my staff have worked with Hector to the best of our ability to try to get the best possible treatment here in Ontario. Certainly we came across some challenges. What the member from Nepean-Carleton brings to the table today is something that I think we should support.

The challenge with that, I want to say up front—when I looked at this for the first time early on this week—I want to make sure for the people who are here today, the likes of Hector and many more, that we don't raise their expectations too high that this is a magic wand. I just hope that we don't do that, Madam Speaker, to raise those expectations, because I know how desperate they are.

I don't know what I would do. It's hard for us to say under the circumstances that we know how you feel. That's not true, Speaker, because unless you're there, unless you're in the trenches, you don't know how they feel. Sandy, Hector's wife—my wife doesn't know how she feels. We know it's hard, but we're not experiencing those kinds of things.

Anything that can move the yardsticks—technology is changing today. I remember the days—this is probably dating me a little bit—when a lot of people died from natural causes. That doesn't happen very often today. There's always something attached to it. That attachment, for whatever reason we end up on the other side of the grass—there's something attached to it, and we're always looking for a solution.

We've come a long way, Speaker. We have come a long way, and I think that by supporting this motion it will just make all of us in here a little more cognizant of those challenges and to move those yardsticks.

I know a couple of my other colleagues—or at least one other colleague of mine—want some time on this, so I just want to first of all express my thoughts on this motion, but wish all the people who are waiting for a solution hope that we can move those yardsticks.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. Michael Harris: Thank you to my caucus colleague from Nepean-Carleton for taking this important next step in our continuing efforts to ensure that the people of Ontario—all the people of Ontario—have access to often life-saving treatments, whether here or around the world.

It was just seven months ago, Speaker, that I stood in the Queen's Park media studio with rare-disease sufferers who were seeking, yet had been denied, access to treatments by this provincial government, many of them who had been forced to scrape up the needed funds themselves or suffer in silence. We stood side by side with rare-disease sufferers from across the province to champion a motion for an all-party select committee into rare-disease treatment here in the province.

Seven months after the government refused to support that call, we stand here in this Legislature again today with sufferers, with the member from Nepean–Carleton and with the continued support of our PC caucus and leader to take our next step toward access to life-saving treatments. We take that step together today as we did earlier this spring, Speaker, to stand for those whose pleas for support have for far too long been ignored, for families like the many I met when I brought the “treat rare disease tour” across the province at the beginning of the year.

1400

We stand for people like Lesley Kimble of Kingston, who told us that her husband “lives with alpha-1 antitrypsin deficiency, a rare, hereditary lung disease for which there is no cure. The only drug available slows the progression of the disease, but is not covered by OHIP.... At \$2,000 per week, continuing the drug, which has kept him healthier longer, will not be an option.”

We stand for people like Deb Burton from Sudbury, who told us she has struggles with complex regional pain syndrome, an “incurable disease that holds the top-most position on the McGill pain index.... Treatment is costly and not readily available in Canada.” She told us, “Only patients with financial means can access out-of-country treatment” which can run between \$10,000 and \$25,000 a year.

We also stand with people like Loren Gibbs of Capreol, who suffers from AAS and told us, “My body feels like I’m 80, my medication runs in the \$3,000-a-month mark without coverage and some days I can’t leave my house due to many different ailments and pains but I’m alive.”

And closer to home I continue to be reminded about the stories in my area of those suffering with EDS, one of the many rare diseases that convinced me to ask government to #TreatRareDisease well over a year ago. The Crawford family of St. George spoke at the March news conference about their struggles in accessing any treatment in Ontario and then being forced to fundraise and max out their resources to allow their daughter Erika life-saving, out-of-country treatment.

These people represent just a handful of the heart-wrenching stories we heard and continue to hear following the defeat of my motion. They are the reason why I’m proud to stand here today—with them and with our colleague from Nepean–Carleton—to continue our fight and address this government’s unmet duty to provide adequate health care and treatment for Ontarians—all Ontarians.

The Deputy Speaker (Ms. Soo Wong): Further debate?

M^{me} France Gélinas: I too am happy to add my voice to this debate and to say that the NDP is pleased to support the motion brought forward by the MPP from Nepean–Carleton. What she brought forward is, really, let’s look at what we have now. We have a system where, if somebody suffers from a rare disease, if somebody needs access to a very expensive drug or to a treatment

that is in the scientific stage, they have to put their story out there on the front page of the paper. They have to show the world that they are that far away from dying, and then sometimes the system will magically start to have a bit of compassion and care for them.

This is not compassion. This is disrespectful. This is not the way the system should work. What she wants us to look at is how it’s done in other parts of the world. There are people with rare diseases everywhere on this planet. There are new inventions in health care everywhere on this planet, and there are other legislatures that have faced the same dilemma with a public health system and that have found better ways forward to show compassion and to bring results.

Let’s look at who we are talking about here. We are talking about people with rare diseases. This is something we just heard about. The Minister of Health—and I support him when he says it—says that health decisions should be made on a strong body of scientific evidence. And he is absolutely right. But the problem with rare diseases, Speaker, is that they are rare. So how do you build a strong body of scientific evidence when you only have one or two cases a year, and sometimes not even that? That doesn’t mean that those people should be forgotten. That means that we should have a system in place that recognizes that rare diseases are not dealt fairly with the system we have in place. That doesn’t mean that we turn our back on evidence. That just means that we realize that sometimes a strong body of scientific evidence cannot be brought forward, simply because the numbers are not there.

Then there are all of the expensive drugs. Everyone in our offices will have constituents coming to us who want access to very expensive drugs. What the member is asking is, let’s look at how other jurisdictions are dealing with this, because not only will we look at putting pressure on the government to fund those drugs, but it also gives us an opportunity to put pressure on the people who manufacture those drugs to come down.

There is this pharmacist in Toronto who comes to see me. He has dual citizenship. He works in Portugal and he works in Ontario as a pharmacist. Every time he goes and works in Portugal, he comes to my office and shows me the difference in costs. We have to go from euros to Canadian dollars, but it’s easy to do. We will find that the exact same drugs from the exact same manufacturer will cost \$10,000 a course of treatment in Ontario and \$700 in Portugal. The drugs came from the same manufacturer, were distributed, and were basically sold at whatever the market can bear. Apparently, in Ontario, we can bear a lot, so that drug manufacturers can go back to the \$1 billion a month in profit on the drugs that they sell.

There are other new drugs. When you look into the biologics and when you look at some of the new cancer drugs, you’re looking at \$100,000 a course of treatment. Who can afford that? Nobody. So they turn toward the government and they want government’s help. I have no problem with that; the government is there to help people when they’re sick. But we’re also there to say, “Look at

that. The same drugs that are sold to us at \$100,000 a course of treatment can be bought for \$20,000 a course of treatment in another jurisdiction.”

What she’s bringing forward will not necessarily mean more cost to Ontario. It just means that we will have a formal process to bring compassion to those people who need access to expensive drugs, who need access to new procedures, who deal with a rare disease, and give them the chance to be looked at in a compassionate way rather than a bureaucratic way.

The Deputy Speaker (Ms. Soo Wong): Further debate.

Mr. Bob Delaney: I’m pleased to stand and speak to the motion brought by my colleague from Nepean–Carleton. Not surprisingly, government members, I am very confident, will vote in favour of this motion.

I was listening to some of the comments made by others and I thought it would be worthwhile looking at what programs are, in fact, already available that do much of what the motion asks for. I think it’s important to put a few of these on the record.

The province has conducted a preliminary review of the countries specifically identified in the member’s motion. What we found is that, similar to Ontario, none of these programs offers access to funding for experimental purposes.

Further, Ontario has several programs in place that offer benefits similar to Australia’s Special Access Scheme, New Zealand’s Exceptional Circumstances Framework and High-Cost Treatment Pool, and the United Kingdom’s National Health Service’s Experimental and Unproven Treatments Policy. Like the programs in these other countries, Ontario’s Out of Country Prior Approval Program and its Public Drug Programs’ Compassionate Review Policy provide an option for patients in exceptional circumstances to have their cases reviewed on an individual basis. Speaker, it does mean that you’re going to have to have your case reviewed by some experts and, of course, rely on medical evidence when making these decisions. However, since 2014, participation in clinical trials outside of Canada has been funded through the ministry’s Out of Country Prior Approval Program when all other regulatory requirements have been satisfied.

Last year, in 2015, the province approved more than 17,000 out-of-country applications, or 96%. That amounts to some \$73 million in out-of-country care.

While the motion suggests that the province should consider funding for experimental treatment in catastrophic circumstances, the ministry suggests that this consideration should take place within the context of our government’s responsibility to protect the public from untested, unsafe or ineffective medical treatments.

1410

Further, to talk about some of the specific programs, the Compassionate Review Policy is for cases where drug requests are made in the absence of formal evidence review—largely what the member has been asking for. The program is offered on a case-by-case basis, and it

can provide access for drugs without the formal evidence review process where there is immediacy for life-, limb- or organ-threatening conditions and where, of course, specific criteria are met.

Another one is the Exceptional Access Program, which reviews requests on a case-by-case basis in circumstances where drugs are not listed on the Ontario drug benefit formulary. This program provides support for patients where formulary drugs were ineffective or were not tolerated, or where no listed approval was available. In this process, urgent drugs are given the highest priority. Last year, the ministry received more than 70,000 applications and approved 83%. That’s five out of six.

Speaker, thank you. I know one of my other members would like to weigh in on this as well. I just want to assure the member that we’ll be supporting this motion.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. Jeff Yurek: I’m proud to stand up here and support the member from Nepean–Carleton’s motion today. I think it’s quite timely, considering the amount of requests that have been increasing in this province for people who are falling outside of the list of programs the member opposite just listed off. He almost makes it sound like, why are we even here if they have the perfect program up and running? But in fact, we do have a situation in this province that needs to be dealt with.

It was mentioned earlier that with the advent of medical technology and advancements that our medical and research communities are making throughout the world, we need to have a system that is more flexible to meet the needs of the people of this province. Unfortunately, the system we have right now isn’t keeping up. It isn’t able to meet the increasing demand for cases that each and every one of us is hearing about in our offices, day in and day out. We need a process that becomes more efficient and ensures that families aren’t leading towards bankruptcy or having fundraising campaigns to get the treatments their families need.

I want to thank the member for doing this today. We only get one piece of legislation to bring forward to this Legislature every probably 98 times, if we remove cabinet or whatever. I’m thankful that she is using this motion, and I want to thank the MPP from Kitchener–Conestoga for the work he did with the rare-disease bill.

Everybody has their stories to tell. I’m going to mention three cases that have come up to my office. When I first got elected, there was a gentleman who wanted access to Avastin. He had a brain tumour. You could use Avastin for other treatments in Ontario. In Alberta, you could use Avastin for the treatment of cancer, for brain cancer, but he had to fundraise in order to get that medication. It wasn’t going to cure him, but it was going to prolong his life.

I have a six-year-old girl in my riding who has pulmonary hypertension. It’s unheard of for a six-year-old to get that diagnosis, and life expectancy is terrible. The doctors have decided that she needs triple therapy to

keep her out of hospital and to give her some semblance of a life. Unfortunately, the province only recognizes two of the treatments because they're basing it on the adult treatment protocol—and that's something that is a problem in the system, not only with rare diseases but also cancers.

I don't think we have enough support going into research and development of protocols for the children who get these diseases. The parents have two of the medications covered, but unfortunately, the third one they have to fundraise for to ensure that their six-year-old daughter has a quality of life.

The other one is Diamond-Blackfan anemia. I have a constituent, and her daughter—I think she's eight or nine—has corticosteroid therapy. It has to be run through a pump. They use the same pump that diabetics use. If you're diabetic, the government will pay for that pump, but because she has a form of anemia, she doesn't get covered for that pump.

It's these little differences that are out there. I think this committee, which could be created out of this motion, would benefit us by advising the minister of the inflexibility of the current system and how we can modernize the system to keep up with the advancement of technology and have that flexibility in place.

I think the government has done a great job of removing the politics out of the system. I just think the government needs to follow up now and create the process that balances out the system with the politics removed. Because I agree, I don't think it should be up to one person to decide, but I do think this committee needs to be created so that we can return care and compassion back to our health care system.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Hon. Indira Naidoo-Harris: Madam Speaker, I am pleased to rise today to speak to the opposition's motion on out-of-country health care.

Keeping our friends, neighbours and family members healthy is one of the most important services, supports and responsibilities that a government can have. We all know what it's like to have a child or a family member be ill, vulnerable and needing help. That's why I'm so proud—so proud that our government is putting patients and Ontarians' health first. That's why, Speaker, we are transforming our health care system so that patients can get the care they need when and where they need it. These aren't just words. We are doing things and are transforming our health care system to enable it to be faster and enable it to be more flexible, as one of the members opposite mentioned.

How are we doing this? Well, we're doing it by increasing funding, for example. Funding for health care has been increased by \$1 billion, taking it to \$51.8 billion in Ontario. That's just this year alone—\$51.8 billion. That's not a small amount. Absolutely, there is more work to do, but we recognize that this is an investment in our people, in our future, in our friends, our neighbours and families.

We're also doing this by increasing access. We're increasing access on a number of different levels: through primary care; through our desire to have people who want to get the care they need at home; through communities; by funding hospitals; by reducing wait times; and also by increasing the kind of health care that we're delivering when it comes to mental health and the kinds of drugs that are available and so on.

I want you to know, Madam Speaker, that our government is always willing to look at other jurisdictions to determine if there are ways Ontario can improve our health care system. We're always looking for new ideas and innovative ways to deliver our health care and deliver it well.

In fact, our government has already conducted a preliminary review of the countries identified in the member's motion. What we have found is that similar to Ontario, none of these programs offers access to funding for experimental services, and that Ontario has several programs in place that offer, as one my colleagues mentioned, similar benefits to Australia's program, New Zealand's and also the UK's National Health Service's Experimental and Unproven Treatments Policy.

Like the programs in these countries, Ontario's Out of Country Prior Approval Program and Public Drug Programs' Compassionate Review Policy provides an option for patients in exceptional circumstances to have their cases reviewed on an individual basis. We're making sure that people are getting their cases looked at.

Our government works hard to ensure that Ontarians get the access to the care they need right here in Ontario. We rely on the medical expertise of our doctors to recommend the best course of care for patients based on the best evidence available. Our government does this by taking the politics out of the process; and we do fund, when needed, out-of-country medical treatment when it is determined to be the best course of care by our experts.

The Deputy Speaker (Ms. Soo Wong): Further debate.

Mr. Bill Walker: I support better outcomes for every Ontarian, young and old, suffering from any rare or life-threatening disease not covered by our public health system. Imagine, if you will, being forced to beg to your life, to empty your life savings and to sell your family home to pay for life-saving or life-extending treatment. It's a losing battle. It's a battle one should never have to fight, let alone fight alone. Yet it's happening to so many Ontarians today.

So, on behalf of these Ontarians, I rise to support the motion of my colleague Lisa MacLeod from Nepean-Carleton that will compel this government to study jurisdictions like Australia, New Zealand and the United Kingdom that have successfully resolved this funding gap.

1420

In Ontario, 35,000 people suffer from multiple sclerosis, for which there is no cure. A good friend of mine, Mary Lou Schultz, sister of our MP, Larry Miller, as well as Dianne Hepburn and Kathy Broeckel are just a couple

in my riding who suffer. These MS patients have been clear in their message: They need better support from us as they seek life-saving treatments. They shouldn't have to travel to Italy or Bulgaria to get chronic cerebrospinal venous insufficiency—CCSVI—treatment. They should be able to get access to treatments here, where we already have CCSVI experts.

Why is it that we're prepared to recognize these Canadian experts—Christopher Alkenbrack, Linda Hume-Sastre, Michelle Walsh and Dr. Sandy McDonald—with Diamond Jubilee medals for their exceptional work in CCSVI, but then turn around and fight them on clinical trials?

Similar to MS patients, the same is happening to the estimated 150 Ontarians living with the rare brain-threatening disease PKU, phenylketonuria. I commend my colleague in Kitchener—Conestoga, MPP Michael Harris, for championing this cause earlier with a motion for an all-party committee to study to improve the system for those with rare diseases. Sadly, the Liberals did not support that. Why doesn't this government want to ease the burden and increase access for these patients?

Consider Kuvan. This is the first and only pharmaceutical treatment for PKU, yet years after the public drug program listed Kuvan, this medication remained out of reach in Ontario. I've met blood disorder sufferers in my riding: six-year-old Michael McManaman, born with PKU, and one-year-old Darcey Papineau, diagnosed with aHUS, atypical hemolytic-uremic syndrome, a rare blood disorder. Darcy's mom said to me, "It is heart-breaking to think that at some point, money, or rather a lack of, will dictate our daughter's quality of life. To think that as parents we'd be unable to afford to give her that feeling all the time is simply heart-breaking."

Is this government really so blind to the suffering of these young patients? Consider the predicament of two-year-old Lena Klein from Elmwood, who was diagnosed with cystic fibrosis at just two days old and takes multiple medications a day to help her digest her food and to fight recurring lung infections. Her parents are holding fundraisers to help cover the cost of inCourage, an airway clearance therapy vest. The vest will help break apart mucus in Lena's lungs and help her breathe easier. This vest would give her freedom to move and play while getting some very important life-changing therapy. The cost of one of these vests is 15,000 American dollars. How many of you here have had to do this: to fundraise or beg for money to save your child's life?

We can stand here and laud the fact that we have marked the 50th anniversary of the introduction of the newborn screening program, which tests every child born in Ontario for these diseases, including PKU. That's great, but the government's job doesn't stop after the diagnosis. So let's not rest on our laurels. Let's keep improving the system so that all patients can have access to the medical treatment they need and that we're obligated to provide here in Ontario.

It was quoted in the press event we had a little while ago, and my colleague Lisa pointed out, that insulin was

once an experimental drug. Look at how many lives that has changed for many, many years. My colleague Jeff Yurek, a pharmacist and a great MPP from Elgin—Middlesex, referenced cancer. We're getting to the point where every cancer has, in many cases, its very own specific treatment system. The drugs there at some point were experimental. Every drug, if you think about it, was experimental until it was proven to actually work. So at some point, Madam Speaker, we have to ensure this.

It's good, as my colleagues have applauded the government, for taking the politics out. It's good that we're not doing this on a partisan political basis; it should never be, when it comes down to people's health care. But I think what my colleague is asking for is a committee—which has been tried and proven in other jurisdictions to work—to ensure that people in these catastrophic, compassionate situations have a body they can turn to ensure that there is hope, that there is the ability for them to care for their loved ones and ensure that they get the treatment they deserve in a timely manner.

Madam Speaker, I hope everyone in this House, all 107 MPPs, will step up and support this very worthy motion by my colleague the member from Nepean—Carleton, Lisa MacLeod.

The Deputy Speaker (Ms. Soo Wong): I return back to the member from Nepean—Carleton to wrap up this debate.

Ms. Lisa MacLeod: It's my pleasure to be here. I would like to say thank you to my Conservative caucus colleagues but also extend my thanks personally to the New Democrats as well as the Liberal caucus members who spoke to this bill and indicated that they will be supporting it.

Speaker, this is my second private member's initiative in five months. Five months ago I passed, with all of these wonderful people in this assembly, Rowan's Law. In the summer, as you know, the rugby community became close to me as we dealt with the concussion legislation. In the summer, the young girl whom we raised money for that I talked about in my speech earlier—her parents were part of that Rowan's Law team. That's how tightly knit we became. That's what really prompted me here. So for my second private member's bill that it appears will pass in five months, it's quite humbling to me, and I want to say thanks to members of the assembly.

I want to point out very quickly: What we're calling for here isn't just for experimental treatment. I think many colleagues here have indicated that insulin and pacemakers, those wonderful innovations that came from Ontario, were once experimental, so we must keep an open mind.

Secondly, we do have people in Ontario who are falling through the cracks. I appreciate the fact that some members have looked at other jurisdictions and said, "Okay, well, we're already doing that," but we aren't doing everything. I think everyone recognizes that. We certainly have a gallery full of people who experience that every day.

But if I can say this, Speaker: I'm really humbled. I appreciate the Minister of Health being here for the entire

debate. That really meant a lot to me as a private member that you took the time out of your busy schedule to be here to debate private members' business. What I was also very proud of was that for this last hour, there was no partisan bickering. I must say, I don't know if it's my advanced age or the number of years I've been here, but it really was refreshing to hear a quote from Jack Layton that I could applaud and to listen to my friend from Northumberland-Quinte West talking about his friend who is suffering from cancer, who is a mutual friend.

With that, I want to say thank you for the opportunity.

The Deputy Speaker (Ms. Soo Wong): We will vote on this motion at the end of private members' public business.

Before I go on to the others, I want to remind all members that you are not to address each other by first name or last name, but by riding. You know the rules, okay? If I hear that again—I don't want to go around with my notes. You know the rules: by ridings, please and thank you.

DOMESTIC AND SEXUAL VIOLENCE
WORKPLACE LEAVE,
ACCOMMODATION
AND TRAINING ACT, 2016
LOI DE 2016 SUR LE CONGÉ
ET LES MESURES D'ACCOMMODEMENT
POUR LES EMPLOYÉS VICTIMES
DE VIOLENCE FAMILIALE OU SEXUELLE
ET LA FORMATION DANS LE LIEU
DE TRAVAIL

Ms. Sattler moved second reading of the following bill:

Bill 26, An Act to amend the Employment Standards Act, 2000 in respect of leave and accommodation for victims of domestic or sexual violence and to amend the Occupational Health and Safety Act in respect of information and instruction concerning domestic and sexual violence / Projet de loi 26, Loi modifiant la Loi de 2000 sur les normes d'emploi à l'égard du congé et des mesures d'accommodement pour les victimes de violence familiale ou sexuelle et modifiant la Loi sur la santé et la sécurité au travail à l'égard des renseignements et directives concernant la violence familiale et sexuelle.

The Deputy Speaker (Ms. Soo Wong): Pursuant to standing order 98, the member has 12 minutes for her presentation.

Ms. Peggy Sattler: I am very pleased to bring this bill forward once again for second reading debate. I am hopeful that we will once again see MPPs from all three parties come together, as we did in March, to support this bill, which will enable employees who have experienced domestic violence or sexual violence to get the supports they need to heal and return to productive work.

I want to begin my remarks by acknowledging some of the many organizations across the province that have endorsed my bill. These include the Ontario Coalition of

Rape Crisis Centres, the Ontario Association of Interval and Transition Houses, the Canadian Resource Centre for Victims of Crime, the Canadian Network of Women's Shelters and Transition Houses, the network of women with disabilities, YWCA Toronto, End Violence Against Women Renfrew County, Halton Violence Prevention Council, the London Coordinating Committee to End Woman Abuse, the Peterborough Domestic Abuse Network—I could go on and on.

The Ontario Federation of Labour supports my bill, along with the Canadian Labour Congress, CUPE, ETFO, OECTA, OPSEU and Unifor. My bill has been endorsed by public health units like Toronto Public Health, the Middlesex-London Health Unit and the Windsor-Essex County Board of Health.

Speaker, the economic security that comes with employment is critical to all Ontarians, but it is especially critical when there is a relationship of abuse. If you are a woman living with an abusive partner, going to work might be the only avenue available to you to escape the violence, even if it's only for a few hours a day. When you are at work, you might confide in a co-worker or a supervisor about the violence at home, and that disclosure could connect you to the community services that could help.

If you do not work, it is unlikely that you will ever feel that you are able to leave the abusive relationship, especially if there are children involved. The risks of leaving without any kind of financial security are just too great. That's why many abusers try to prevent their partners from working. It is why so many women feel trapped in abusive relationships and unable to leave.

1430

Too often, the violence that women experience at home follows them to work. The violence can become lethal, as we know when we remember the tragic and horrific deaths of Theresa Vince and Lori Dupont, women who were murdered at their workplaces by their abusers, women whose deaths could have been prevented if legislation like Bill 26 was in place. The flexible workplace provisions of Bill 26 would have allowed these women to request changes to their hours of work or to transfer to different locations. The mandatory training provisions of the bill would have ensured that employers and co-workers of these women were trained in how to recognize the warning signs of domestic violence.

The violence can also follow people who are experiencing violence to work, in the form of harassing phone calls, texts or emails constantly throughout the day. Abusers may stalk their partners, showing up in the parking lot or at their place of work. Abusers may call employers or co-workers, looking for information about their partners' whereabouts. These actions can cause women who are experiencing violence to change jobs frequently or even to lose their jobs, which is often the end goal of their abusers. We know this from the research, which shows that women with a history of domestic violence have a more disrupted work history than other women. They change jobs more often. They

are more likely to be precariously employed in casual or part-time positions. As a result, they are more likely to be low-income or to live in poverty.

What we also know from the research, Speaker, is that being employed is a key pathway to enable women to leave an abusive relationship. The financial security that comes with employment can allow women to escape a violent relationship and rebuild their lives. That's why Bill 26 is so important. It allows women who have experienced domestic violence or sexual violence to deal with the violence without jeopardizing their employment, to get the supports they need to heal from the trauma and return to work as productive employees.

Bill 26 amends the Employment Standards Act to require employers to provide up to 10 days of paid leave, as well as reasonable unpaid leave, if necessary, to workers who have experienced domestic violence or sexual violence or whose children have experienced those forms of violence. The leave can only be taken for specific purposes related to or arising from the violence. These include seeking medical attention; accessing services from a victim services organization, rape crisis centre, sexual assault centre, women's shelter or similar community agency; getting psychological counselling; meeting with police or lawyers; or finding a new place to live, which is often an urgent challenge for women and their children who are fleeing violence.

My bill encompasses both domestic violence and sexual violence because of what I heard during hearings of the Select Committee on Sexual Violence and Harassment. The people who spoke to the committee emphasized the importance of survivor-centric responses to ensure that the needs of survivors are front and centre in government responses to domestic violence or sexual assault.

From this perspective, whether the violence was experienced at home, on a date, at work or anywhere in the community, the basic needs of survivors are the same. They may need medical attention from a nurse or a doctor. They may need to talk to a psychologist or a crisis counsellor. They may need time to meet with lawyers and the police, to go to court and go through the justice system. They may need time to find a new place to live. They should not have to jeopardize their employment because of the harm that they experienced.

We know that a number of US states have already passed legislation to provide unpaid leave for domestic violence, sexual assault and stalking, but many survivors of domestic violence and sexual violence cannot afford to take unpaid leave, especially those who are most vulnerable.

My bill is modelled after the District of Columbia, which provides paid domestic violence and sexual assault leave, as well as the province of Manitoba, which became the first Canadian province to provide paid leave for domestic violence under the leadership of the former NDP government.

Speaker, some may ask about the fairness of asking Ontario employers to pay for the leave. The reality is that

employers are already paying for domestic violence and sexual assault violence in the workplace. There is a cost to employers when their employees who have experienced violence are distracted and unable to perform to their full capacity; when they are often late or absent from work; or when they resign and must be replaced. These costs were quantified in major studies by the federal Department of Justice, which estimate that Canadian employers are already paying \$78 million annually due to domestic violence and more than \$18 million annually due to sexual violence. There is a significant financial burden on employers associated with domestic violence and sexual violence. Bill 26 shifts these costs to helping employees recover from the violence so they can return to work as productive employees.

Bill 26 is also informed by research conducted in 2014 by the Canadian Labour Congress and Western University's Centre for Research and Education on Violence Against Women and Children. This national study, called *Can Work Be Safe, When Home Isn't?*, was based on a survey of more than 8,400 employees, the majority from Ontario. One third of these respondents had experienced at least one incident of violence from an intimate partner in their lifetime. Not surprisingly, 82% said their job performance suffered as a result of the violence. Nearly 40% said it made them late for work or unable to go to work altogether. And almost one in 10—8.5%—said it got them fired.

Less expected, as a result from the survey, was that the violence not only affected the employee who was being victimized, but also those around them. Close to half of workers experiencing violence said they disclosed to someone at work, and almost one third of those co-workers said their own work performance suffered because of the stress and concern they felt for their colleague.

Some may ask whether paid leave is going to cause financial hardship for Ontario employers. However, we know from the experience of Australia, where almost one third of workplaces are covered by paid leave provisions, that employees who access the leave generally request only small periods of time, an average of just one to three days.

I want to touch quickly on two of the other very important provisions of my bill. The first is the requirement for mandatory workplace training on domestic violence and sexual violence. Although the Occupational Health and Safety Act currently requires workplaces to provide information on domestic violence, we know that many employers are not meeting these basic obligations, and because training is voluntary under the act, very, very few workplaces are investing in domestic violence training for their employees.

As I stated earlier, workers who experience domestic violence are very likely to disclose to somebody at work. Mandatory workplace training can help co-workers recognize the warning signs of domestic violence and respond effectively if a co-worker discloses. It will also assist with the implementation of the new reporting

requirements under the Sexual Violence and Harassment Action Plan Act.

The final comment I would like to make is with regard to the flexible work arrangements under the bill. This fall, the federal Liberal government announced that similar flexible work arrangements are being developed for all federally regulated workplaces. My bill would introduce the same flexibility into Ontario workplaces for workers who have experienced domestic violence or sexual violence.

I want to close with an email I received earlier this week. It read, “Had such accommodations been in place when I was working in Ottawa, I would not have been forced to leave my job but rather could have been assisted because of an abusive and manipulative ex-husband. I support your bill 100%.”

Speaker, I ask all MPPs to do the right thing and not only pass this bill today, but let’s move it quickly to committee, let’s get public input on the bill and let’s see it become law in the province of Ontario.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Ms. Sophie Kiwala: I’m honoured to rise today in the House to speak on Bill 26, which seeks to amend the Employment Standards Act, 2000, in respect of leave and accommodation for victims of domestic or sexual violence and to amend the Occupational Health and Safety Act in respect of information and instruction concerning domestic and sexual violence.

I will also be sharing my time with the minister responsible for women’s issues.

1440

I want to thank the member from London West for drawing attention to this very, very important topic. Ending sexual violence and harassment is a priority for our government, and for me in my riding of Kingston and the Islands.

We understand and recognize the severity of this issue as well as the impact it can have on individuals in their workplace and at home. It is something that will simply not be tolerated.

Our government believes that all women in Ontario should feel safe in their communities. That is why we have launched a groundbreaking action plan, It’s Never Okay, which is investing \$41 million over the next three years.

We have implemented many initiatives to raise awareness of domestic violence and to strengthen supports for the victims. Indeed, our action provincially has motivated and guided my own work at home in Kingston and the Islands, which has included a social media campaign and a petition calling for the end of sexual violence and harassment in Kingston and the Islands, as well as bringing together organizations and service providers for a sexual violence and harassment community networking and advocacy session.

These conversations were very, very powerful. It was fantastic to see everybody together in the room, and I really do want to acknowledge all of the program service

providers in Kingston and the Islands for their work in this very challenging area.

The goal of the session was to discuss, with numerous stakeholders, best practices and areas to improve. We probably had about 15 or 16 people there, I think. It was fantastic. I’m really proud of the work being done in my community as well as across the province.

For many people—and in this room especially—the majority of our day is spent at our place of work. It’s essential that employees feel safe and protected at work accordingly. The Ministry of Labour’s Occupational Health and Safety Act is the only legislation of its kind in Canada to require employers to take every precaution reasonable in the circumstances to protect a worker when domestic violence may occur in the workplace.

Workplaces in Ontario are also required to have workplace violence policies, programs, measures and procedures in place to protect workers from violence in the workplace, including domestic violence that may enter the workplace.

With the passing of Bill 132, our commitment to the safety of workers has increased by ensuring that employers are doing all that they can for the men and women who work for them each and every day. However, it is my belief that we can always do better, and I want to thank the member from London West for engaging this important discussion.

Madam Speaker, I lend my full support to Bill 26.

Merci beaucoup. Meegwetch. Thank you.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. Ted Arnott: I’m glad to have this opportunity today to speak on behalf of the people of Wellington–Halton Hills in response to the member for London West’s Bill 26, the Domestic and Sexual Violence Workplace Leave, Accommodation and Training Act, 2016.

I want to acknowledge the member for London West for bringing forward this bill. She gave a thoughtful speech this afternoon and I know her comments were meant sincerely.

It’s important to note that this bill would amend the Employment Standards Act, 2000, and also the Occupational Health and Safety Act.

It’s also worthwhile to point out that this is the very same initiative that she brought into this House as Bill 177 in March of this year, which passed second reading in the previous session of this 41st provincial Parliament and was referred to a standing committee of the Legislature, where it sat until the House was prorogued in early September.

I will quickly reiterate what this bill is intended to do.

The Employment Standards Act would be amended and an employee would be able to take a leave of absence if they had experienced domestic or sexual violence. They would also be in a position to take a leave of absence if their child had experienced domestic or sexual violence. They would also be able to use the leave for certain purposes, such as seeing a doctor, going to victim services organizations, or perhaps meeting with a lawyer.

The leave would last for a reasonable time, or for a time provided by regulations made under the act, and workers would be entitled to be paid for up to 10 days of paid leave in each calendar year. They'd also be entitled to reasonable accommodation with respect to their work hours and their needs in the workplace.

The Occupational Health and Safety Act, as I said earlier, would also be amended if this bill passes into law. The employer would have to ensure that every manager, supervisor and worker receives information and instruction about domestic and sexual violence in the workplace.

Madam Speaker, I recall quite vividly my first election as a candidate, some 26 years ago, and some of the issues that were brought forward during that campaign. The problem of domestic violence was an issue that came up time and time again in 1990. The need to do more to support victims was something that we all agreed on. We know that through the intervening years, unfortunately, we continue to have to identify victims' needs, and the scourge of family violence has not gone away.

As I said, I think this bill is well intentioned and well meaning. It reminds us that all victims of domestic and sexual violence need our support—not only the support of the government but the support of our society as a whole. We think that this bill should be sent to a standing committee of the Legislature for further discussion and public hearings so that more discussion can take place and interested parties can come forward and offer their ideas and advice so that all can be heard.

I know that we're in the early days of this second session of the 41st Parliament. Because of the fixed election date, so many MPPs are now focused on June 7, 2018, and planning towards that date, but we still have a job to do in this House on behalf of the people of Ontario. I would hope that if this bill passes, the government will allow it to have meaningful public hearings and not just think about the politics of this issue.

Yes, there are many other jurisdictions reviewing this issue, and some are currently providing unpaid leave for employees. I understand that last November the province of Manitoba became the first province to introduce legislation to provide paid leave for victims of domestic violence. When we checked the website for the province of Manitoba and their Legislature, we learned that the bill received royal assent on March 25, 2016. Parts of the bill were proclaimed on April 1, but it appears that some sections have yet to be proclaimed.

Our Ontario PC caucus believes that employers need to be consulted on this issue because this bill, if passed, would potentially add to their payroll costs. We would ask the question if it's fair to ask employers to foot the entire cost, because we would also ask why the Criminal Injuries Compensation Board isn't doing more to support the victims of domestic and sexual violence. We know that the Criminal Injuries Compensation Board was created to support victims of violent crime in a timely and compassionate manner and can award compensation to victims for a number of expenses, including the loss of their income.

I would say, Madam Speaker, in sum, we support this bill in principle because we agree that more must be done to support the victims of domestic and sexual violence and that there is a need for employers to support their employees if they are victims.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. Michael Mantha: It's again always a privilege and a pleasure to stand in my place on behalf of the good people of Algoma-Manitoulin, especially today, speaking to my colleague from London West's private member's bill. Why reinvent the wheel when you have one that's working perfectly fine? We've already had many of these discussions, and it's time that we moved on. It was a good bill then, it's a good bill today and it will be a good bill tomorrow. We need to take those opportunities, when those bills do present themselves that we all agree upon, that we find a way to move them beyond the shelves, because what happens after today is that these bills sit on the shelves and collect dust. We can't let that happen. We have to pull up our sleeves and make sure that this one doesn't see the fate of the lint that's going to collect on the shelf.

As we know, the effects of domestic violence or sexual violence go beyond the immediate physical injuries suffered at the hands of abusers. Frequently, domestic and sexual violence survivors suffer from an array of psychosomatic illnesses and devastating mental health problems, like post-traumatic stress disorder. Many abused victims find it difficult to function in their daily lives because of the effects of domestic violence. Absences from work often cause them to lose their jobs, making them less able to leave their abusive situation.

1450

The bill amends the Employment Standards Act and the Occupational Health and Safety Act to require employers to provide reasonable and necessary leave to workers who have experienced domestic violence or sexual violence or whose children have experienced domestic violence or sexual violence.

Support can make all the difference. Your response to their situation is really important.

The proposed leave includes up to 10 days of paid leave, as well as reasonable unpaid leave, per calendar year. This would be a tremendous relief and would help minimize the worries associated with the aftermath of suffering a violent situation, such as job loss. Domestic violence doesn't stop when a worker arrives at work.

I would like to point out a few facts that we should all keep in mind while we are debating this bill. Canadian employers lose \$78 million annually due to the direct and indirect impact of domestic violence, and \$18 million due to sexual violence. Women with a history of domestic violence change jobs more often, of course, have lower personal incomes and are more likely to be precariously employed than women without violence. Forty-three per cent of individuals experiencing domestic violence disclose to their co-workers, and domestic violence frequently follows the individuals to work.

Why do employers need to be involved? It is important to understand that domestic or sexual violence affects not only the victim but those who surround them. Companies and/or employers benefit from workers' personal safety and well-being. That's the bottom line.

My colleague's bill incorporates a number of recommendations on domestic violence and sexual violence, as well as workplace training. It asks that the Ontario government also amend the Occupational Health and Safety Act to make education about domestic and intimate-partner violence in the workplace mandatory for managers, supervisors and workers. In addition, the bill demands that the Ministry of Labour provide greater resources and tools to help employers train and educate employees on workplace sexual violence and harassment, focusing on creating a greater awareness of employees' rights, available resources and recourse options.

I strongly believe that granting employees a 10-day paid leave is the least an employer can do to support their workers who are already living a difficult and traumatic situation. Offering victims of domestic violence paid and unpaid leave from work helps guarantee their job security in the event that they have to take time off in order to seek safety away from the abuser.

It's simple, Speaker: People should not be penalized at work when they are victims at home. We can take a big step towards correcting that or, at least, take an opportunity to challenge ourselves to have that discussion, making sure this time that we don't let this bill collect dust on the shelf.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Hon. Tracy MacCharles: As the minister responsible for women's issues, of course, it's a priority for me that women and men in Ontario feel safe in their homes, in the workplace and in their communities. We all know domestic violence is a very serious problem that crosses societal boundaries and will not be tolerated in Ontario. So I am pleased to get up and speak to Bill 26, being brought forward by the member from London West.

Ms. Ann Hoggarth: It's 27.

Hon. Tracy MacCharles: Pardon?

Ms. Ann Hoggarth: It's Bill 27.

Interjections.

Hon. Tracy MacCharles: It's Bill 26, Domestic and Sexual Violence Workplace Leave, Accommodation and Training Act, 2016.

We understand how important this bill is, and I want to reiterate what some others have said. This bill was before the House before; it received unanimous consent before. I'm hopeful that will happen again here today. So I thank the member for bringing this bill back.

I also want to thank the many individuals and organizations who have reached out to me in support of this bill. To them I say, "I am hearing you," whether that's email or Twitter or here in person. It is important that we continue to engage with you and other folks and stakeholders on this very important issue because our government does believe that all women in Ontario should feel safe.

We have, of course, implemented a number of initiatives to raise awareness of domestic violence and to strengthen supports for victims, which I'll talk about a little later. But I also want to recognize the member from London West for her work on the Select Committee on Sexual Violence and Harassment. I know this has informed her work, as has other work, so I just want to acknowledge her and thank her for that.

Speaker, we know that with the passing of Bill 132 earlier—the Sexual Violence and Harassment Action Plan Act—our commitment to safety of workers has actually increased by ensuring employers are doing all they can for the men and women who work for them, the employers, each and every day. We are proud of the steps that we have taken thus far to protect workers in Ontario.

As we know in this House, the Minister of Labour, my colleague the Honourable Kevin Flynn, was tasked to review Ontario's system of employment and labour standards to consider reforms that reflect the realities of our modern workplaces and economy. The Changing Workplaces Review interim report outlines the submissions that have been received by the special advisers in the first phase of consultations.

It's important to note that a new job-protected domestic or sexual violence leave is one of the things in the changing workplaces interim report. I know that everyone in the House, the Minister of Labour in particular, is looking forward to receiving the final recommendations and seeing how our laws will be updated to benefit all employees in Ontario workplaces.

Again, it will be important that we engage stakeholders on any kind of job-protected domestic violence or sexual violence leave. Those voices need to continue to influence where we go from here.

Just to touch briefly on what is going on in Ontario around domestic violence support and strategies since the release of our Domestic Violence Action Plan in 2014: Our women's directorate has implemented a number of initiatives to raise awareness of domestic violence and strengthen supports for victims.

Just to highlight a few, if I may: The Neighbours, Friends and Families public education campaign reaches out to communities across the province, including franco-phone, indigenous, immigrant and refugee communities.

There has been training for more than 34,000 front-line professionals and service providers to recognize the signs of domestic violence and to learn how to support victims effectively.

There's also the Employment Training for Abused/At-Risk Women Program, which provides women with specialized supports and services to increase their employability and income-earning potential. Since 2006, more than 3,200 women have participated in this program, and 77% of graduates have found jobs or pursued additional training within six months of graduation.

We also have our Language Interpreter Services program, which helps victims of violence, including human trafficking and other forms of violence, who face language barriers or who are deaf or hard-of-hearing to

access services. In 2015-16, over 14,000 victims accessed interpreter services through 755 agencies, and more than 47,800 hours of interpreter services were provided.

Those are some of the initiatives that are under way or have been under way in terms of addressing domestic violence in Ontario and providing supports to survivors. This bill, of course, speaks specifically to leave provisions in the workplace and accommodations and training.

I am very appreciative that the member's bill has done that jurisdictional scan of what has been done in other jurisdictions. I certainly paid attention to that as well myself when I was at the UN earlier this year. There were presentations from a number of jurisdictions on leaves for victims of domestic violence because we know that women or men who have been victims of this kind of violence have to get to doctors, they have to get to lawyers, they have family to take care of, or they may have family who have experienced domestic violence as well and who need support.

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So I think this is a very important bill that the member has brought forward. I think it aligns with some of the other work this government has been doing. Of course, as I've said, the Changing Workplaces Review has specifically touched on this issue as well, so I'll be supporting this private member's bill this afternoon. I hope my colleagues will too.

I think job-protected domestic violence or sexual violence leave is an important thing we have to look at. There are many provisions to support employees in Ontario workplaces today, but as the minister responsible for women's issues and the minister responsible for carrying the domestic violence policy in Ontario, I remain committed to understanding and seeing how we can advance on this issue, and most importantly, working with other members, colleagues in the Legislature, on our permanent Roundtable on Violence Against Women—we have opinions on this as well—and all the stakeholders, the people who have been writing to me and to the member from London West. I think it's just one of those bills we can all work on together, and I'm hoping that it will again receive unanimous consent today.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mrs. Gila Martow: I'm very pleased to rise for the second time to speak in support of this bill. It's now called Bill 26, and it deals with victims of domestic and sexual violence being able to get time off—10 days' paid leave—if they've been a victim, and also a reasonable amount of accommodation if they need to take more leave than that, if they themselves are a victim or if they are the parent of a victim of domestic or sexual violence.

Unfortunately, there were quite a few bills that were victims themselves of the government proroguing, so we have to renew the debate here in the House. Of course, we all feel bad for the victims of every type of domestic—this is a House, so I would say that's somehow domestic, a little bit.

On a very serious note, I want to say that I got a letter emailed to my office from Carol—I'm not going to say her last name. She says:

"Dear Mrs. Martow,

"I've never written anything like this before, so I'm afraid I don't know how to begin or how to convince you"—well, Carol, just by writing me, you've convinced me. She's begging me to support this bill. The bill was put forward by the member from London West. The bill "would guarantee survivors of sexual abuse and domestic violence 10 paid days off work in Ontario.

"I am a survivor, and the time off work to cope and get myself together after my rape would have been instrumental, invaluable, and made all the difference in my life. As it were, I did not have the luxury of taking time off work, and I did not get the support I desperately needed as I simply could not afford to take time off.

"Please give this bill your full support." I'm not saying that she wrote it just to me. I believe she's writing it to everybody here, and I'm sure that everybody's office got it as well.

"Those 10 days could make all the difference in someone's life. I know I needed it." Carol, we're all here for you and we're all listening.

I also want to mention Julie S. Lalonde, who I mentioned last time. I follow her on Twitter. Here's somebody who is strong. You can see by the articles she writes that she's very strong, she's very smart and very savvy—media-savvy and streetwise-savvy, I would say, too. Basically—her story was published in Maclean's last year—she was the victim of domestic violence and sexual violence. The happiest day, I would say, so far in her life might have been when she got a message that the person who was stalking her and abusing her was no longer with us here on the earth. I'm not sure what happened to him; she hasn't told me.

But basically, part of the problem—and that sort of concerns me with this legislation—is that a lot of times, victims are also trying to protect their families, their friends, their neighbours and the people they work with, so they don't always confide, even though maybe they should. Maybe they would get some support, some help or some protection, but they don't confide because they are actually revictimizing themselves by not sharing their horror story and their problems.

I wish that there was a way that we could promote that people should see the signs at work, at home, with their neighbours and offer help and support. I know people have told me that they've offered help and support and been rebuffed and have been told, "No, there's nothing wrong," only to find out afterwards that there was.

Obviously, as the member from Algoma-Manitoulin just said, victims' problems affect those who surround them. Exactly. That's part of the whole issue here, and I would really appeal for people who are victims of violence of any kind—sexual or not; domestic or not—to really confide. Confide in your member of the Legislature. Confide in your doctors. Confide in your neighbours, your families, your friends and your co-workers. We're all here to help you.

The Deputy Speaker (Ms. Soo Wong): Further debate.

M^{me} France G elinas: I want to start by saying how proud I am of the member from London West for bringing this forward. She has done the work in an area that not very many people want to think about: domestic violence and sexual violence. She has done the work to bring forward a bill that will make a tangible difference, that will finally bring a little bit of justice from the loss that exists in this province for victims of domestic violence and sexual violence. She does this in a way that is measurable but also in a way that is very doable. She has done the research. She has looked at how it is implemented elsewhere.

We have in front of us a bill that has the chance to work, that does not cost the taxpayers anything and that will help mainly women—and a few men—who are victims of domestic violence and sexual violence. Why is this important? Because so many women still face domestic violence and sexual violence.

I used to work in a big orthopaedic clinic for follow-ups. We knew that, if we looked around at all these women on Monday morning, a lot of these women who were sitting in front of us had broken bones because of domestic violence. But of the dozens of them who were sitting there, very few would ever say that it was their spouse who had broken their arms; it was their spouse who had broken their legs; it was their spouse who had broken their ribs—they wouldn't. That was 30 years ago.

Fast-forward 30 years on: It is a little bit easier to talk about this. Now if we pass this bill, it will become a whole lot easier for workplaces to become places of support for people who are victims of domestic violence.

I can remember 20 years ago—I'll call her Carmen. That's not her real name. She was a petite woman that I worked with. One day she came to work, and you could tell that she had been pushed around pretty hard. She was covered in bruises, with an arm in a sling and all of this. You can't help but say, "What happened to you?" She was very reluctant to tell us what had happened to her until about an hour later, when the police came to our workplace and asked for a debriefing of everybody in the workplace, to tell us that it was her husband who had beaten her up really badly and that there was a good chance that he was going to show up at her office. Therefore, the police had thought it safer to come and do a debriefing with us so that we would all know exactly what to do if he would happen to show up, which he did.

This was really hard. I had worked with her for a long time. I had seen her with bruises and cuts and tender parts, I would say. She always said, "Oh, I fell." She never opened up. It was only after the police came to the workplace and warned us that she finally got the courage to open up, that she had spent the night with the police giving testimony and that she and her three kids, two boys and a girl, were now at a shelter. And yet she was there at work. She was there at work because she needed the money, just like everybody else, and if she didn't show up for work, she wouldn't get paid.

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Her youngest son had witnessed the attack and ended up having to go to therapy for quite some time. There again, it was always trying to arrange the therapy sessions after school, trying to come in early. It was not always easy to organize her schedule so that she could be there to pick him up to bring him to therapy.

It would have been so, so much easier if the law that hopefully we're about to pass had been there so that she would have been able to go pick up her son after school and have him not miss a therapy session, and she would have been able to stay home and get her life in order rather than show up for work the next day.

Then, about 10 years later, I was the executive director of the community health centre at the time when one of my nurses, one of my very good nurses—I loved her and I still love her—didn't show up for work. I got a phone call that she was in a shelter with both of her girls. Here again, there was no mechanism. She ended up having to take holidays off using her holiday bank in order to be able to stay in the shelter with her children and not come to work. As an employer, I felt terrible. I felt like, "Why is it that her vacation bank went down to zero, she came back to work, and then she didn't have a day of holidays for the next 18 months because her husband had beaten the crap out of her?" That's punishment on top of punishment, if you ask me.

We have a chance to change all that—I'm sorry; it was really hard. We have a chance to change all that, and I want us to do this. I want this to become law.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mrs. Julia Munro: I'm pleased to add my voice in the debate today on Bill 26. I think that all of us who have roles within the community and know our communities better than perhaps other residents see this as a scourge of the times. We all know that from time to time there has been a need to fundraise for women's shelters and things like that. There has been a gradual, growing awareness of this issue which I think is really important because of the fact that people have no idea of the impact that this will have on the women—it's generally women we're speaking about, as well as their children—who have stayed far too long in an abusive situation because there have not been the support services available.

I think what today's debate is really about is moving this issue forward into a committee setting because we need to look at what are the best ways to provide the kind of support that any woman needs in this kind of situation.

This bill has suggested 10 days of paid leave. I think to myself of all of the people that you would have to go and see, whether it's doctors, lawyers, the appointments that would have to be made, and the disruption to children's lives, which is something that may in fact be very much a long-term problem. The notion that 10 days is enough, even, comes to mind. But it does help us move this process along by the member for London West bringing it forward.

My biggest hope from this is that it will go to committee, where it will have an opportunity to have a public

hearing, where perhaps things like the Criminal Injuries Compensation Board would have a bigger role to play; where a particular recognition of the kind of emotional damage that is done and physical damage that's done—and the opportunities to support our employers, who may only have two, three or four employees, and who are then looking at a family member trying to fill in the space of someone who is in this position.

I want to say how much I recognize the need for this, but we need to have better supports in place, because the victim is there, the employer is there, but not the perpetrator.

The Deputy Speaker (Ms. Soo Wong): I return back to the member from London West to wrap up.

Ms. Peggy Sattler: I want to thank all of my colleagues today for their very thoughtful, informed, sensitive comments on this bill. In particular, I want to thank the member for Nickel Belt for sharing the impact that domestic violence in the workplace had on her personally.

I went to Kingston and held a round table on this bill, and I was really inspired by one of the women who participated in the round table. She talked about the fact that she had been living in a violent, abusive relationship her entire life. Her abuser employed all of the typical tools of social isolation. He kept her out of the labour force. She had no workplace experience. Then somehow, amazingly, she found the strength to leave this relationship, even though she had been diagnosed with PTSD and had suffered just horrendous, devastating consequences.

She was looking at entering the workforce for the first time, and she talked about the fact that this bill would enable her to become a productive, contributing member of our economy, of our society—the kind of thing we hope for for everyone—because it would provide the safety net she would need if she had a trigger when she returned to work, if she felt that she needed to access counselling to help her get through and continue to process that trauma she had experienced.

When we're looking at this bill, I think we have to think about the ROI, the return on investment, which is not just to our economy but to our social services—the way that this bill can enable people to recover, to heal, to move on, to rebuild their lives. Hopefully, we will see less reliance on women's shelters and all of those other victims' services that are so critical. We want an Ontario that is free from this kind of violence.

Thank you, Speaker.

The Deputy Speaker (Ms. Soo Wong): Thank you.

BANGLADESHI HERITAGE MONTH
ACT, 2016

LOI DE 2016 SUR LE MOIS
DU PATRIMOINE BANGLADAIS

Mr. Berardinetti moved second reading of the following bill:

Bill 44, An Act to proclaim the month of March as Bangladeshi Heritage Month / Projet de loi 44, Loi

proclamant le mois de mars Mois du patrimoine bangladais.

The Deputy Speaker (Ms. Soo Wong): Pursuant to standing order 98, the member has 12 minutes for his presentation.

Mr. Lorenzo Berardinetti: I'm truly honoured to rise in the House today and lead second reading debate on Bill 44, An Act to proclaim the month of March as Bangladeshi Heritage Month.

With your permission, Madam Speaker, I'd like to quickly start by acknowledging and welcoming a number of distinguished guests from the Bangladeshi community who are here with us: Dr. Reza Mahbub, Bangladesh Centre and Community Services; Kazi Sirajul Islam, Bangladesh Centre and Community Services; Nasima Akter, Bangladeshi-Canadian Community Services; Rokhsana Reza, Bangladeshi-Canadian Community Services; and Shamsul Mukhtadir. Thank you, and welcome to the assembly today. Thank you all for coming, and I wish you a very warm welcome here to the Ontario Legislature.

It is with great pride that I bring forward this bill for the House's consideration. This Legislature and this province have a long, proud tradition of recognizing those who have contributed to the dynamic growth and prosperity of Ontario.

1520

Oftentimes the unsung heroes, we strive to acknowledge those who have nonetheless left an indelible mark on the achievement of our society, those who helped to foster and shape our march towards a better life for all people here in Ontario.

While they may not always receive significant recognition, these groups nonetheless are an integral part of our social fabric. That's why the bill that I'm proposing is such an important one, Madam Speaker. It recognizes one such group, the Bangladeshi community, that has been a long-standing and vital pillar of our province's development and prosperity. If passed, this bill would formally recognize and celebrate the immeasurable impact and numerous significant contributions that the Bangladeshi community has made in this province.

Some might be wondering, why March? Well, the month of March is a very important one for Bangladeshis. That's because it marks Bangladesh's formal declaration of independence, which was made back in 1971. Every March 26, Bangladeshis around the world celebrate their national Independence Day, similar to our Canada Day. It is an incredibly joyous day, marked with parades, concerts, ceremonies of state and various other public and private events that commemorate the rich history and proud tradition of Bangladesh. So I can think of nothing more fitting, Madam Speaker, than to proclaim March Bangladeshi Heritage Month.

The impact of the Bangladeshi community on both the global and local scale is simply astounding. One of the most prominent people from Bangladesh is Professor Muhammad Yunus. This giant in the business sector established the Grameen Bank in Bangladesh in 1983, driven by the belief that financial credit is a fundamental

human right. His goal is to help poor people escape poverty by providing loans and by teaching them about sound financial planning so they could lift themselves up out of poverty and have the means for a sustainable and prosperous life.

Leading this paradigm-shifting movement towards eradicating poverty through micro-lending, Professor Yunus's mark on the international stage cannot be overstated. Today, replicas of the Grameen Bank model operate in more than 100 countries worldwide, helping to fight world poverty and work towards a more fair, more just and more equal society. For his work, Professor Yunus was awarded the Nobel Peace Prize in 2006, and has since gone on to be awarded the Presidential Medal of Freedom and the Congressional Gold Medal.

Moving beyond that, Madam Speaker, we don't need to look far to see the countless ways in which Bangladeshi Canadians throughout the country have enriched our communities and strengthened our national identity here at home.

There is Nazrul Minto, a renowned writer, journalist and chief editor of the *Deshe Bideshe*, Canada's first Bengali newspaper, and CEO of *Deshe Bideshe TV*; Amit Chakma, who currently serves as president of the University of Western Ontario; Naz Hossain, who is a prominent figure in the field of high corporate finance with Investors Group Inc.; Delwar Jahid, a successful journalist, leading academic and respected writer, and the president of the Bangladesh Press Club Centre of Alberta and the Bangladesh Heritage and Ethnic Society of Alberta; and Dana Abraham Hannan, model, actor and amateur boxer.

This is just barely scratching the surface, but it serves to effectively demonstrate the various and significant ways in which Bangladeshi Canadians play a vital role in so many aspects of public life.

More locally, the impact of the Bangladeshi community is just as pronounced. Since the early 1970s, Bangladeshi immigrants started coming to Ontario and were settling here as proud Canadians. According to community estimates, there are more than 50,000 Bangladeshi immigrants who now identify themselves as residents here in Ontario.

They are artists, singers and musicians who speak to our souls and enrich the cultural mosaic that propels our province forward. They are doctors, engineers and scientists, advancing new frontiers and revolutionizing the way we live our lives. They are social advocates and our business leaders, helping to steer our economy forward to lead the way for stronger social and political engagement.

Bangladeshi immigrants are known as a very hard-working community in and around the GTA. Their population is steadily increasing and their household incomes are continuing to grow. We all know this community of people to be friendly, hospitable, easygoing and adaptable to adverse circumstances. Culturally, they're also very active, something that is evident from the enthusiasm and vigour with which they observe national holidays and festivals.

The Bangladeshi community is currently one of the largest denominated visible minority communities in my riding of Scarborough Southwest, and also have a strong presence in a number of other areas as well, something which I'm sure my esteemed colleagues from Beaches–East York and Toronto Centre will be happy to elaborate on.

Just last weekend, I attended a night of world-renowned song and dance in my riding. It was a truly unforgettable evening. The event was held at Midland Collegiate in Scarborough Southwest, and the auditorium was packed with over 700, probably 800 members of the community. And a little funny story, Madam Speaker: I brought my 86-year-old father with me, and I thought he probably wouldn't like the event, but he sat down, listened to the Bangladeshi music and didn't want to leave right until the very end. He kind of embarrassed me because after one song would finish, he would get up and clap his hands and say, "Bravo, bravo." He really liked the music and the night. It really touches not only some souls; it touches all souls.

Taking a step back, Madam Speaker, the relationship between our two great nations is also a source of strength and mutual prosperity. Our two countries have enjoyed a long history of bilateral co-operation. In fact, Canada was one of the first countries to recognize Bangladesh immediately after it declared independence. That relationship has continued on to this day, upon shared values of democracy, freedom, human rights and the rule of law. We benefit from a relationship that is centred around trade and investment, regional security, immigration and a focus on mutual prosperity. Moreover, our two nations enjoy close ties as members of both the UN and of the Commonwealth.

We have a few other things in common, for example, a love of sports. The national cricket team participated in their first Cricket World Cup in 1999, and the following year was granted elite Test cricket status. In 2015, during the world cup, Bangladesh beat England and reached the quarterfinals for the second time in its history. Having seen how we all react to Canada's dominance in hockey, I can imagine the level of excitement and pride that the people of Bangladesh felt. I could go on, but it looks like my time is coming to an end.

Madam Speaker, I can't tell you how proud I am to bring this bill forward. I'm proud of the incredible work that Bangladeshi Canadians have done and continue to do in Ontario and across Canada. I'm proud to work with and learn from the incredible Bangladeshi community members in and around my riding of Scarborough Southwest. I'm proud to have this opportunity to formally recognize in this Legislature the numerous contributions and the indelible mark they have left on this province.

I also wanted to mention another little anecdote here. In my constituency office, I have a large portrait. It has a photograph of the four Beatles and their signatures. I've had a few Bangladeshi Canadians come in, look at the poster and say, "You have the artist here." I said, "No, it's a group." They've said, "No, the artist." I would say, "Who is the artist?" They say to me, "George Harrison." I said, "How do you know George Harrison?"

Back in 1971, when Bangladesh was becoming a country, George Harrison decided to hold a concert in Madison Square Garden—in fact, two concerts. They were done in aid of Bangladesh, which was also suffering from flooding and other problems as well at that time. This was new to the western culture. We now see it quite regularly with concerts like Live Aid or concerts to save the farmers and various other concerts for various needs, and songs like *We Are the World* and so on. But it started way back in 1971, when George Harrison got together with a group of musicians and had two concerts. It was covered pretty well world-wide. Many people did not know what Bangladesh was. He explained it to them and told them Bangladesh is a new country, just formed. He told them that it's a very large, populated country, and they needed the help of the west. This reverberated throughout the United States and Canada and various other parts of the world. It actually raised a significant amount of funds for Bangladesh. The most important thing was it brought tremendous awareness to the world of what Bangladesh was all about.

He had the concert and others went on to get involved in supporting Bangladesh in many other ways, and through the years, through the decades, we've seen Bangladesh become quite important.

1530

One other thing I wanted to mention in my remarks is that they're very involved in textiles. They're one of the largest countries in the world that produces textiles. If I buy a T-shirt or a shirt or a pair of pants, oftentimes it will say "made in Bangladesh."

So they're involved in all different parts of our culture and society.

I'm very happy to have members present today. I look forward to remarks from my colleagues here and from my colleagues across the floor. I really think it's an important bill to bring forward—to recognize March as Bangladeshi Heritage Month.

The Deputy Speaker (Ms. Soo Wong): Further debate.

Mr. Lorne Coe: I'm pleased to speak in support of Bill 44, An Act to proclaim the month of March as Bangladeshi Heritage Month.

What's clear, Speaker, is that Ontario has changed so much over the past few decades and its cultural makeup becomes more diverse as each year passes. That diversity has made Ontario more understanding, more tolerant and more accepting of other religions and cultures. It has also made it a better place to live and raise our families. Bangladesh has played a very major role in that diversity.

Ontario is the primary place of settlement in Canada for Bangladesh-born new Canadians. Many of them live in my riding of Whitby–Oshawa, and many of them are long-time friends and community leaders in the Whitby–Oshawa area.

Prior to my election as the MPP for Whitby–Oshawa and in my former role as a regional councillor in Whitby, I chaired the Local Diversity and Immigration Partnership Council for many years. Members of that council are

drawn from different sectors of our diverse community, including Bangladeshi Ontarians. The Bangladeshi community was instrumental, as part of that council, in developing community development plans—not only developing those plans, but implementing those plans and, in the course of that, making a significant difference in the lives of so many other people living in the region of Durham. My seven-year tenure on this important board not only gave me insight into local diversity issues within the region of Durham, but it provided me with a true appreciation of the challenges faced by newcomers when settling in Durham region and in our province. I witnessed first-hand the valuable contributions that people from different cultures, including those from Bangladesh, add to the social, economic and cultural fabric of the region of Durham and our great province of Ontario.

The relationship between Ontario and Bangladesh is excellent, with a strong focus on development, co-operation, trade and investment, as well as significant immigration and educational links. Highly skilled and educated Bangladeshi professionals view Ontario as a great place to raise a family and to further the development of their business and professional goals. They're always passionate about their new home and contribute to Ontario's economic growth by using the skills and education that they've brought to Canada and, particularly, to Ontario.

Speaker, recently I read an article written by a local doctor who immigrated to Ontario from Bangladesh in 1973—yes, a long time ago. The article addressed several issues. In particular, he addressed the cultural issues that Bangladeshi newcomers face in their new home. He spoke about the religious and family ties that are so important to Bangladeshi Canadians. He said about Bangladeshi Canadians, "Fears haunt us: 'Are we losing our identity as Bangladeshis? Are we losing the traditional essence of family that we consider to be so sacred?'" He also spoke of the struggles that many face in adapting to the societal norms of their new homeland.

The passage of this bill will be a powerful public statement to all Bangladeshis that the strong links between our province and our growing community of Bangladeshi Ontarians is so very important. Most significantly, it will be a great public celebration of the importance that Ontario places on the contributions to our society of those new Ontarians from Bangladesh.

The Deputy Speaker (Ms. Soo Wong): Further debate? I recognize the member from Brampton—

Mr. Jagmeet Singh: Bramalea–Gore–Malton.

The Deputy Speaker (Ms. Soo Wong): Bramalea–Gore–Malton; sorry.

Mr. Jagmeet Singh: Thank you very much. It's my honour to rise and speak in support of Bangladeshi Heritage Month. I'm honoured to do so on behalf of all New Democrats and our leader, Andrea Horwath.

The Bangladeshi people have a very rich history. What's beautiful about Bangladesh is that the community has a long history and it has a rich history, and there are some very unique elements of the Bengali people that

play over both the west and east side and intermix in terms of the concepts and ideas.

One of the things you find if you go to any Bangladeshi event, any Bengali event, is that the community loves music. They love arts and they love culture—they celebrate this. They celebrate philosophy. They've contributed so much. There have been phenomenal writers, poets and artists, because arts and culture are so important to the Bengali people, to the Bangladeshi people—and I think that's a phenomenal thing.

Every event I've gone to that has celebrated Bangladeshi culture has always had a live component of the music. There has been someone singing either folk songs or devotional songs, but there's a live music element, which is so beautiful. There is a heritage that appreciates that.

You'll also note that Bengali cuisine is considered some of the finest in the world, with extraordinary mixtures of flavours and spices and all sorts of different components—vegetables, fish and all sorts of interesting, delicious components. I can say that I used to enjoy more of the food because I was not a vegetarian before, so I could enjoy all the fish and the other foods. Now I can't as much, but I know it's phenomenal.

The other thing is that the community has faced some difficulties, but we see that the community is quite resilient. You'll find that the Bangladeshi community has come together, creating community centres, creating networks—the family ties are very strong. They've worked together, and they've contributed so much to our society and made us a stronger and more vibrant country because of that.

Bangladesh itself is primarily a Muslim nation. Over 90% of the residents of Bangladesh are Muslim. There is a small minority of Hindu and Christian and other communities as well. There's also a small component of Sikhs, I know, who also live in Bangladesh. I have a friend of mine who has a thriving start-up business that is based out of Dhaka. He tells me about his trips to Bangladesh, and I find his stories very fascinating.

In light of this—the fact that the Bangladeshi community has a large Muslim population—the growing trend of Islamophobia is something that impacts the Bangladeshi people as well. I think that having these opportunities, these type of platforms, where we can celebrate the culture, the heritage, the identity of being not only Bangladeshi but also Muslim, tying those together—this month now being acknowledged as Islamic Heritage Month also helps tie these together. It's important to acknowledge the identity, the religion, the culture, the music, the cuisine—all these elements make up the identity of what it means to be a Bangladeshi. I think that's a beautiful thing and I think it's an important thing.

The reason why I think it's so important is because more and more we see this growing trend where people are made to feel like they don't belong, that their identity doesn't matter, that their language doesn't matter and that their religion is a problem. That sends a very powerfully negative message to the people. It makes them feel less

worthy, less valuable, less like they belong. Months like this, when the government recognizes that this is a community that deserves to have recognition, that deserves to have a heritage month, show that as Canadians and as Ontarians we celebrate this mosaic, we celebrate the diversity and we actually believe that you should hold your identity and that having an identity, having a culture and having a language makes you stronger.

I know that many of my friends who are Bangladeshi have tried very hard to maintain the language. The language is beautiful, so I will say a couple of words that I know—only one phrase:

Remarks in Bengali.

What I just said is, "How are you? I hope that you're doing well."

It's very important. I'm particularly happy and honoured to rise today to stand in support of this because we send this powerful message to not just the Bangladeshi community but to all diverse members of the community: You do belong; your culture matters; your identity matters; it gives you strength and gives our province strength.

1540

In closing, I think, one other important point to highlight: We have some evidence that shows that when a young child has a strong sense of who they are, when they have a strong sense of their culture, their identity, their heritage and their language, it gives them an asset. It gives them increased confidence. The different languages have an impact in terms of their ability to—it is a skill set not to be monolingual. If you know more languages, it gives you increased skills and different ways of thinking; it increases creativity.

So I salute you in this endeavour. I want to thank the member for bringing this forward. This is a great initiative and I am proud to support it, so thank you once again. It was my honour to share my voice and my thoughts on this issue.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Mr. Arthur Potts: What a pleasure it is for me to stand here today in support of the MPP from the riding just to the east of me, Scarborough–Rouge River, for this very important bill. Thank you so much for bringing it forward.

The riding of Beaches–East York, you have to understand, Speaker, is almost two ridings: the Beaches section and the East York section. In the East York section, the data shows that the number-two mother language spoken in the East York section of my riding is Bangla.

Applause.

Mr. Arthur Potts: Absolutely. It is the most thriving and growing—and brings such great wealth to my community. I'm absolutely honoured to be able to speak in support of this bill and to welcome people whom I've gotten to know over the last couple of years and to call friends, who are here in the gallery to help and to witness this debate.

Mr. Shafiq Qaadri: Scarborough Southwest.

Mr. Arthur Potts: Scarborough Southwest. Some of them are, but the rest are from Beaches–East York.

Mr. Shafiq Qaadri: It's Berardinetti's.

Mr. Arthur Potts: Oh. What did I say? It doesn't matter—oh, yeah, it says “Scarborough–Rouge River” here in my notes. My apologies. Yes, of course it's Scarborough Southwest. I appreciate the clarification.

Speaker, when I first started to run, the irony here is that I was a stranger to Beaches–East York. I lived a little bit off to the west—on the other side of Carlaw, in fact. When I got to know the community and I was introduced to the community at Crescent Town—it's a vibrant community, and predominantly the Bengali community there—they welcomed me. I got to know them over the course of the campaign, and I made certain commitments to them at the time as they welcomed me and told me about some of the issues they were having.

One of the most pressing issues they were having was getting their children to school. There was a rule in the Toronto District School Board which would not allow their children to be bused because it was 0.1 of a kilometre under the allowable limit. But the reality is that we had Bengali kids in Crescent Town making their way up a very busy street, Dawes Road, to get to George Webster school, and the kids were getting younger because they were no longer able to go to the school in their own community. Crescent Town public school at one point took children up to grade 8, but as the population grew, they moved it to grade 6, and then the grade 5 also had to start going to George Webster instead.

The concerns that the parents had for their children meant that they were being driven in vans to the school. It was great, neighbourly and entrepreneurial, but it was an expensive proposition, so I committed during the campaign that I would help them get a bus. After I was elected, we successfully were able to do it. We worked very closely with WoodGreen community centre and with the community in order to get a bus, and now the children have free busing to George Webster school on a regular basis. It's one of the commitments I made.

As a result of that, I got to know so many of the community so much better. I got to know BCCS, Bangladesh Centre and Community Services, and I got to know the leaders. I see some of the leadership here today. Dr. Reza Mahbub has done so much work in this community—recognizing the challenges being faced by the newcomers to this country in a different culture, looking after their youth and looking after their seniors in isolation. I commend you for the great work that you've done with BCCS. Kazi Sirajul is also here from BCCS. They do extensive work in their community on integrating their community with the rest of society, and I'm delighted to see them here.

I'm also delighted to see my friend Shamsul Muktadir. Shamsul and his friend Abul Azad were very prominent people in my initial campaign, and we've been able to work together on so much other work. Shamsul is now organizing a trade show to connect Ontario-based companies and distributors with companies from all over the

world and back in Bangladesh, and I'm delighted to be able to assist him in that.

Abul Azad for years worked as a salesperson in the plumbing industry, but now has opened his own shop on the Danforth: Azad plumbing services. I'm delighted for the accomplishments that he has been able to bring into this.

I've had the pleasure of bringing the community down here. We raised the Bengali flag at Queen's Park—it's the first time that has ever happened—and we had fantastic representation of the community. It was a proud moment for me.

It was a moment for me that was stirred because of an event that I attended on the Danforth, at midnight, in the winter, in the cold, as we celebrated International Mother Language Day. For those who don't understand and appreciate IMLD, this celebrates a number of students who, in Dhaka, wanted to be taught in their own language and they insisted on being taught in their own language of Bangla. They were persecuted. There was rioting and there were deaths. It celebrates the martyrs: Shafiur Rahman, Abdus Salam, Abdul Jabbar, Abul Barkat and Rafiquddin Ahmed. These students lost their lives fighting for the right to teach a language, which resulted in a revolution, which resulted in Bangladesh independence. It started the movement.

Now we're trying to raise funds to build an International Mother Language Day monument in Beaches–East York. We're working very closely with the community, with Rizuan Rahman, in order to raise the funds necessary for a competition for a monument that sought great input from the public. It's a beautiful design that mimics the monument that we see in Dhaka, which mimics a monument we can see in Vancouver. I believe there's one in London, England, as well. So we will have an opportunity on the 21st of February, at midnight, to celebrate International Mother Language Day, hopefully in Taylor Creek Park, and I'm working very closely with the community to do just that.

One of the other great initiatives I've been working on is within Crescent Town, where a lot of the community first come to live when they come here from Bangladesh. They get integrated, learn the language, learn their English and French; the kids are getting into schools, getting an education. As the parents are finding their feet in our community, they're able to move out of the rental housing, maybe into Massey, where they can buy condominiums, and then into housing in other parts of Toronto and the GTA. It's a fantastic movement.

In Crescent Town, there's a great space of about 10,000 square feet, where I'd like to put in an agricultural farm. Working with people like Dr. Reza Mahbub, we are going to try to grow food hydroponically in the basement, where we can have local produce that you would expect to find in Bangladesh right here in Crescent Town, like lal shak. I would like the Minister of Agriculture to understand, lal shak is a red vegetable. It's a food that we want to be able to grow in Crescent Town so we can have fresh food of the community grown in the community in Crescent Town.

It's a great tradition, an oral tradition, an art tradition—we've heard a bit about that: book fairs. I get to go to this fantastic book fair every year in the community where we're celebrating artists and writers from all over Bangladesh, who come here, and it's extraordinary. What makes it really extraordinary for me is the number of young children who are, in many instances, born here, who come along with their parents to the book fair, who buy the books, read the books, learn the songs, learn the dances and wear the wonderful, colourful costumes.

I have been so honoured to go to Eid dinners, to celebrate with the community, with their music.

I'm just delighted that we can be here to have second reading on this bill from the member from Scarborough Southwest, in order to move this bill forward, so we can celebrate all the accomplishments of the community going forward.

Thank you very much for being here. Thank you for introducing the bill.

I'd like to turn it over to my good friend the Minister of the Environment and Climate Change when he gets the chance to speak, as well.

The Deputy Speaker (Ms. Soo Wong): Further debate.

Mrs. Gila Martow: I'm very pleased to rise today and speak on Bill 44, An Act to proclaim the month of March as Bangladeshi Heritage Month. We've heard quite a few speakers, and we've heard a lot about the history of Bangladesh as well.

I want to start off by mentioning what the member from Bramalea–Gore–Malton touched on when he spoke, and that is about having a strong sense of identity, having strong family connections. If we looked at who in our society is doing well and who is struggling, I think the people who grew up with a strong family unit, a strong sense of community, a strong sense of identity, a strong sense of understanding their history, where they come from, are much better off for it. And then the rest of the community and society is much better off for it. So I want to congratulate the Bangladeshi community for holding on to their traditions and for teaching them to their youth because that type of spirit is exactly what we need more of in Ontario.

1550

I'm also reminded by the member from Bramalea–Gore–Malton that I was at an event in his riding a few months ago. It wasn't a Bangladeshi event; it was more from the South Asian community, and there were parents who spoke Punjabi who came and spoke to me very seriously, and even with a bit of anguish, that there was not enough space in French immersion schools in their community for their children. I really applaud that. I applaud a community that is holding on to their traditions, teaching their young children their language, living in a community that is English-speaking and working there, and still wanting their children to learn French, because, as you know, Madam Speaker, I'm from Montreal and je parle français souvent ici. I often speak French here and I'm often going into communities to help them support the French language and French-language services here in Ontario.

I just want to mention that there are a lot of prominent Bangladeshi Canadians. A couple have been mentioned, but I'm going to mention a few:

—Nazrul Minto is a writer, journalist and chief editor of the *Deshe Bideshe*, Canada's first Bengali newspaper, CEO of *Deshe Bideshe TV*, and is living right here in Toronto;

—Amit Chakma is president of the University of Western Ontario and is from the ethnic Chakma tribe in southeast Bangladesh;

—Dana Abraham Hannan was mentioned: a model, actor and amateur boxer;

—Naz Hossain, in the field of high corporate finance with Investors Group. His parents are from Bangladesh, but he was born in Yugoslavia, and raised in Singapore and Malaysia. That's quite a background;

—Delwar Jahid is a journalist, academic and writer, president of Bangladesh PressClub Centre of Alberta and Bangladesh Heritage and Ethnic Society of Alberta, and still lives in Edmonton, Alberta and, of course, is from Bangladesh;

—Ron Mustafaa is a Hollywood TV actor;

—Shaan Rahman is an actor and a stuntman, and moved to Vancouver;

—Samiul Rian, also an actor and model; and

—Shamit Shome is a soccer player.

We've heard, Madam Speaker, about the community, about the food, about music, folklore, traditions, but we're also hearing how well-integrated the Bangladeshi community is here in Ontario and the rest of Canada, participating not just economically but also in a lot of our arts and entertainment and educational system, and we all definitely applaud that.

We've also heard that Bangladesh got their independence—they were really part of Pakistan—in 1971. The movement that began that struggle for independence is believed to have started with a fight over languages. Here in Canada, I guess you could say that we have had some fights over languages at different times in our country, so we can certainly appreciate that. Basically, what had happened was that Urdu, which was not considered the Bangladeshi traditional language and was considered more a minority language spoken by more elite groups from the Pakistan community, the west Pakistan community—basically, Bangladeshis were told, “We want you to lose your language and your kids will only be educated in Urdu.”

I think, Madam Speaker, that legislators here in Ontario have a big problem with that type of decree and we could certainly sympathize with any group that is being told to educate their children in a language not from their heritage, because we know what that means. Language is the core of tradition, and without the language, I'm sure that slowly but surely the community loses many of their traditions. Cultural identity and even religion can be affected so often by language. People can slowly be transformed or assimilated.

So I think we're all happy to welcome some members of the Bangladeshi community here in the Legislature. We hope to see them a lot more often, and not just for

Bangladeshi events or flag-raising but to participate in other areas as well. We do have a lot of heritage months and special days and flag-raising here at Queen's Park and we do try to promote the different cultural groups here, but a lot of what we do is really focused on legislation to make business stronger in Canada and focusing on health, welfare, different types of aspects. I don't have to convince Madam Speaker, because she has to be in the Speaker's chair very often, listening to all the different debates. What we want to see here at Queen's Park is all those communities come together and not just stay within their enclaves but participate and give us their opinion on all the legislation that is before this House; share it with us through our offices or in person, or come and witness here what we are discussing and ensure that your community is happy with the work that we're doing here.

I want to applaud the member from Scarborough Southwest on his initiative. I think that I join all of my colleagues here in the Legislature by saying that we look forward to many more times to celebrate good and cheerful events with our Bangladeshi friends in the Bangladeshi community.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Ms. Jennifer K. French: Thank you to the member opposite for the opportunity to speak to his private member's bill, Bill 44, An Act to proclaim the month of March as Bangladeshi Heritage Month.

I'd also like to take a moment and again welcome our friends from the Bangladeshi community. Welcome to Queen's Park.

One of the things that I appreciate most about this role is that we are so regularly given the opportunity to learn, not just to teach and share, but to learn and to speak about the rich and varied cultural history and contributions within our province. As you are well aware, today is the perfect example of one of those opportunities.

I'm just going to remind ourselves of what it says in the bill:

"Ontario is home to a large and vibrant Bangladeshi community. Bangladeshi Canadians from across the province have made significant contributions to Ontario's scientific, athletic, cultural and political development, and they continue to help foster growth, prosperity, and innovation throughout Ontario...."

"By proclaiming the month of March as Bangladeshi Heritage Month in Ontario, the province honours the many significant contributions Bangladeshi Canadians have made throughout the province, and highlights their important role in strengthening the multi-cultural fabric that keeps Ontario's communities strong."

So this bill is about recognizing, honouring, celebrating and sharing Bangladeshi history, culture and contributions in Ontario, which is something I'm very happy to support, and I thank the member opposite for this chance.

Speaker, as I mentioned before, one of the things I most appreciate about these opportunities to recognize the many cultures that comprise our province is that I get to learn about the many cultures that comprise our

province. As the member of provincial Parliament for Oshawa, it is my job to represent the interests of my constituents and my community. You may or may not know that the Prime Minister of Bangladesh, Sheikh Hasina, has family that lives in Oshawa. In fact, her daughter, son-in-law and a number of grandchildren all call Oshawa home. It really, really is a small world, isn't it?

She even spent a week visiting the family in Oshawa back in 2011. This was before my time in office, but I have every faith that she fully enjoyed her visit, and I certainly welcome her back to Oshawa any time soon, although I may not know about it or have the chance to cross paths because, according to the local paper at the time, "[Ms.] Hasina did not accept any one-on-one interview requests during her stay. She chose not to meet with any Canadian politicians. 'She was just simply, completely on a personal visit.'"

Mr. John Vanthof: We can appreciate that.

Ms. Jennifer K. French: Yes, we can appreciate that. It sounds like she has her priorities in order: family first, always. I'm glad she was able to visit her family free from political interruption.

Back to the bill: We are discussing Bangladeshi Heritage Month. I find that when we have the chance to talk about a heritage month, it's an opportunity to share broadly across the province, to learn about a group. Or at least it's a great place to start: It starts the conversation by learning about culture, such as music, art, literature, philosophy, science and stories.

1600

In my studies, I have learned that one of the most respected artists and writers within Bengali culture is the poet Rabindranath Tagore. Mr. Tagore has had a massive impact on Bengali culture and is very well known. He was actually the first non-European to win the Nobel Prize in Literature, back in 1913. I like poems, so I wanted to share one with you, if you will indulge me. I would like to share an excerpt from one of Mr. Tagore's compositions, entitled *My Golden Bengal* in the English translation. *My Golden Bengal* was selected as the national anthem of Bangladesh in 1905:

My golden Bengal,
I love you.

Forever your skies,
Your air set my heart in tune
As if it were a flute.

In spring, O mother
The fragrance from your mango groves
Makes me wild with joy,
Ah, what a thrill!
In autumn, O mother
In the full-blossomed paddy fields
I have seen spread all over sweet smiles.

What beauty, what shades,
What affection, what tenderness!

What a quilt have you spread
At the feet of banyan trees
And along the bank of every river

Oh mother mine, words from your lips
Are like nectar to my ears.
Ah, what a thrill!

If sadness, O mother
Casts a gloom on your face,
My eyes are filled with tears!
Golden Bengal,
I love you.

It is a lovely anthem, Speaker, and beautifully written. Thank you for letting me share this.

To finish, I thank the member opposite for this opportunity. As I mentioned earlier, one of the things that I appreciate most in this role is that we're so regularly given the opportunity to learn about our cultures and communities that are our friends and neighbours. It's an opportunity to learn, speak and share about the rich and very cultural history and contributions within our province. And, as you are well aware, this is a perfect example.

So, Speaker, this bill is about recognizing, honouring and celebrating Bangladeshi history, culture and contributions across Ontario, which is something I'm happy to support. Again, thank you to the member opposite for the opportunity.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Hon. Glen R. Murray: First of all, my friend Shamsul was introduced before by the member for Beaches–East York, but these are like my brothers, my family: Emad Hussain, Jamal Hussain and Samy Chowdhury. I want to thank you very much. We've been part of each other's lives, our families—I would not have this job if it wasn't for their hard work. They're very politically competitive. Jamal's son took out Dalton McGuinty, not electorally, but in a basketball game once in the local—not everyone can do that, so I think it speaks to the political ambitions of the family.

A lot has been said about mother language day and midnight and the struggles. I'd like to talk about not so much the Bangladeshi community, which everyone has spoken about—and deservedly so. What an extraordinary culture and extraordinary group of people that we are so proud to count amongst my brothers and sisters.

I want to talk about how they work with other people. My family came from Ukraine—very religious, very socially conservative eastern Europeans. My baba wore a babushka. She never spoke English. In my community, the Bangladeshi community is co-located between the largest gay and lesbian community in Canada. This is often first-generation Muslim communities, and there are a lot of intersections. There are Bangladeshi people who are gay and lesbian, and gay and lesbian people who are Bangladeshi. It's been interesting.

If you watch the US election right now, there is one party right now that is advocating banning Muslims from coming to the United States, which is, to me, horrific. That same party doesn't think people like me should be able to be parents—adopt—and thinks we should be able to be fired from our jobs. They think 11 million Mexicans should be deported.

I want to tell you, in my community, some of the biggest people who fight to support the Muslim community are the gay and lesbian community. We have no tolerance for Islamophobia. We live with Muslim brothers and sisters. We celebrate them. We won't want to live in a country that didn't have them, and we put a lie to everything being said in the United States, because they elect me, Mr. Trump. They elect gay people. They are not terrible people.

I go to mosques regularly. We have incredible celebrations together. We have an iftar together in our communities. We celebrate each other; we don't tolerate each other. And we build family. It doesn't mean we have to agree on everything.

But I have to tell you, how many places in the world can you find communities as diverse and as complicated not just living in peace, but living in a sense of joy and celebration, where we embrace the mosques in our community as a vital part of the life for all of us, as all of us have benefited by that commitment to raise family and children, to have stronger schools and to love, respect and celebrate differences?

Of my staff in Toronto Centre—we have 196 languages. The celebration of mother language day, which we owe to the Bangladeshi community, is celebrated by all my staff, because just in my little political offices, we have people who speak Tamil; Bengali; Ismaili; Gujarati; three African languages, including Congolese and Eritrean; Italian; and Macedonian. My staff speak over 20 different languages. They're all young people, and most of them live in the Toronto area. Can you find a political office—and we often talk about that. Zara tells us about mother language day—and that's such a Canadian thing that is now so global and so Bangladeshi.

We also fight for hard things together. When there was the collapse of the clothing places, where underpaid people were so terribly exploited—some of them by Canadian retailers—we worked in real time together, stood shoulder to shoulder and fought Canadian retailers to raise their standards and to work on international action to ensure that people who make clothes in Bangladesh for Canadians get paid better and can live in safe places. And we were seriously committed—

The Deputy Speaker (Ms. Soo Wong): Thank you.

I return back to the member from Scarborough Southwest to wrap up this round of debate.

Mr. Lorenzo Berardinetti: So much has been said. I want to thank the members from Whitby–Oshawa, Bramalea–Gore–Malton, Beaches–East York, Thornhill, and Oshawa, and the Minister of the Environment and Climate Change—I'd almost like to give my last two minutes to him, which would probably be out of order.

It's nice when the House is able to sit here and all three parties drop our differences and we embrace something altogether. We embraced the Bangladeshi culture today, and we're not fighting with each other. Actually, from listening to the different speeches today, I learned so much from the opposition members and from my colleagues on this side.

There's so much to say, and two minutes does not do it justice. But I want to say, when I was a city councillor back in the city of Scarborough, I was approached by a member of the Bangladeshi community. It was a very small community back in 1997, and he asked me, "Can you do me a favour? We want to celebrate Canada Day." "Okay. Who are 'we'?" "The Bangladeshi community. I want you to close off a road. Ask the city to close off a small, little road." It was actually between my riding and the riding of Beaches–East York, just off the Danforth. They also have a nice little community on the Danforth. It's partly in my riding and partly in the member from Beaches–East York's.

We closed off the road. They invited me for July 1, and I came. They love Canada. They embrace Canada and they want to show everyone they love Canada. The flags and the music—they came from another country. They came here and they want to celebrate and love Canada, which is such a special thing.

From that point on, they've moved on. We've heard all the different speakers here and seen how things have gone out further and further. I'm touched. I think it's a very nice gesture on all parts. I hope the bill passes—I almost said third reading, but I can't do that; really, I'd be out of order—

The Deputy Speaker (Ms. Soo Wong): Thank you. The time provided for private members' public business has expired.

HEALTH CARE

The Deputy Speaker (Ms. Soo Wong): We will first deal with ballot item number 10, standing in the name of Ms. MacLeod.

Ms. MacLeod has moved private members' notice of motion number 29. Is it the pleasure of the House that the motion carry? Carried. Congratulations.

Motion agreed to.

DOMESTIC AND SEXUAL VIOLENCE
WORKPLACE LEAVE,
ACCOMMODATION
AND TRAINING ACT, 2016
LOI DE 2016 SUR LE CONGÉ
ET LES MESURES D'ACCOMMODEMENT
POUR LES EMPLOYÉS VICTIMES
DE VIOLENCE FAMILIALE OU SEXUELLE
ET LA FORMATION DANS LE LIEU
DE TRAVAIL

The Deputy Speaker (Ms. Soo Wong): Ms. Sattler has moved second reading of Bill 26, An Act to amend the Employment Standards Act, 2000 in respect of leave

and accommodation for victims of domestic or sexual violence and to amend the Occupational Health and Safety Act in respect of information and instruction concerning domestic and sexual violence.

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

Second reading agreed to.

The Deputy Speaker (Ms. Soo Wong): I'm going to go to the member as to which standing committee.

Ms. Peggy Sattler: The Standing Committee on the Legislative Assembly.

The Deputy Speaker (Ms. Soo Wong): The member has referred the bill to the Standing Committee on the Legislative Assembly. Agreed? Agreed. Congratulations.

BANGLADESHI HERITAGE MONTH ACT, 2016

LOI DE 2016 SUR LE MOIS DU PATRIMOINE BANGLADAIS

The Deputy Speaker (Ms. Soo Wong): Mr. Berardinetti has moved second reading of Bill 44, An Act to proclaim the month of March as Bangladeshi Heritage Month. Is it the pleasure of the House that the motion carry? Carried. Congratulations.

Second reading agreed to.

1610

The Deputy Speaker (Ms. Soo Wong): I'm going to turn to the member. Which standing committee is this bill going to go to?

Mr. Lorenzo Berardinetti: To the committee on general government.

The Deputy Speaker (Ms. Soo Wong): The member has asked that the bill go to general government. Agreed? Agreed. Congratulations.

ORDERS OF THE DAY

TIME ALLOCATION

Resuming the debate adjourned on October 20, 2016, on the motion for allocation of time on the following bill:

Bill 37, An Act to amend the Early Childhood Educators Act, 2007 and the Ontario College of Teachers Act, 1996 / Projet de loi 37, Loi modifiant la Loi de 2007 sur les éducatrices et les éducateurs de la petite enfance et la Loi de 1996 sur l'Ordre des enseignantes et des enseignants de l'Ontario.

The Deputy Speaker (Ms. Soo Wong): Further debate? I recognize the member from Beaches–East York.

Mr. Arthur Potts: Thank you, Speaker. I'm delighted to be recognized once again in the House at this moment.

I would like to take an opportunity to comment on some of the debate we've been having on this time allocation motion for Bill 37, the Protecting Students Act. From what I'm hearing, I get the sense that the

opposition believe this is a brand new strategy or tactic. The reality is, of course, that when both the NDP and PCs were in power, they used time allocation, closure, and many programming motions. In fact, it was the NDP that made the changes to the standing orders to include time allocation motions. The NDP used time allocation motions when they were in government, as well as the PCs. They used time allocation extensively when they were in government. So this is not a new thing, contrary to some of the debate we may have been hearing here today.

The member of provincial Parliament for Windsor West has argued that the people of Ontario will not be able to engage in the legislative process. Well, this is the third time that this piece of legislation is introduced. We are now acting expeditiously to reintroduce the Protecting Students Act, 2016, which this House has already debated in its present form for seven hours. In committee, of course, stakeholders will present their views, and we will be able to hear directly from the teachers and the parents about their thoughts on this bill. All parties will have an opportunity to move amendments to the bill, as well, at that time.

I want to address another concern that we've heard from the member opposite. She said, "Many people will be coming from outside of Toronto, and that's an important piece to point out as well. The committee is" only "meeting here in Toronto." That was the member for Windsor West. I understand her concern—the concern that the committee will take place in Toronto, the capital of Ontario. That's where our committees are based. It doesn't mean they have to be here exclusively all the time, but that's where they are primarily based. So all committee meetings do take place at Queen's Park. I would like to point out that our legislative process recognizes that not all Ontarians live in Toronto. We have all the tools—modern tools and old-fashioned tools—to ensure that people across this province can and do participate actively in committee.

As you know, there are many ways that Ontarians can access and participate in the legislative process, including, for those following a particular bill, the status of the bill—it's on the website—and a daily transcript of the debate on a bill, available online at ontla.ca.

When a committee intends to hold public hearings, it provides notice through advertising. In this case, notice was advertised on the Ontario parliamentary channel, the Legislative Assembly's website and Canada NewsWire.

When committees take place in one of the designated meeting rooms at Queen's Park, the rooms are equipped for broadcasting public sessions over the parliamentary network. The proceedings are broadcast live, or, if the House is sitting, they're replayed on Friday of the same week. I can't tell you the number of times that I have constituents and friends and family and others who stand up and say, "I saw you on TV last night. I loved what you had to say. Keep up the good work."

During these sessions, Hansard records every word that is said, and it releases transcripts publicly. Further-

more, Ontarians can obtain a copy of any particular presentation or committee session by simply contacting broadcast and recording services. In fact, I intend to make exactly that call myself, or maybe I'll have one of my great staff members like Mr. Bellmore, who works in the ministry office on my behalf, to call the recording studio and see if we can get a copy of the last hours of the debate so we can share with the community that was here, the community that was watching and the community back in their own homes.

We also have a third opportunity. Members of the public may participate in a number of other ways. They may attend committee hearings in person. However, the Legislature recognizes that this may not be possible for everyone, so individuals can also make their submissions in writing. That's what I call the old way.

They can present to the committee by teleconference. That's sort of the medium way. We've been doing teleconferences for years. People understand how that works. People have computers and telephones—it's very easy to facilitate—or they can choose to participate by video conference.

We all know it is a priority of this Legislature that all Ontarians have access to debate, proceedings and the decisions that are made here at Queen's Park, and through accessibility measures, trusted practices and the hard work of legislative staff, I believe they do so.

That, Speaker, is all that was wrote and all I have to say at this time.

The Deputy Speaker (Ms. Soo Wong): Further debate?

Ms. Jennifer K. French: I'm glad to have, again, the opportunity to speak to Bill 37, the Protecting Students Act. I'm of course not surprised but a little disappointed that we're actually speaking about time allocation and rushing this through. I do recognize the importance of this piece of legislation. New Democrats have been very clear that we support this very necessary piece of legislation. We want to protect our students. We want to ensure fair, due process, but absolutely, the teachers in our classrooms, the vast majority, do a wonderful job taking care of the learning needs of our children, have their best interests at heart, and operate professionally and with integrity. Those who violate the trust of that role absolutely must be held accountable, and absolutely we need this piece of legislation.

That said, this is the third time that we've seen this bill. It is important that we move forward, but there's so much to talk about, and to know that we are again going to limit debate and limit discussion—this title gives us the opportunity to talk about issues that are not in the bill, about protecting students. This is the Protecting Students Act, and there are so many ways that we can protect our students, can safeguard their futures and safeguard and strengthen their potential. I'm pleased we've had this opportunity to bring some issues to light.

My colleague the critic for education, the member from Windsor West, has spoken at length about the \$15-billion backlog when it comes to repairs, has spoken at

length about learning conditions, about the climate in our classrooms—literally the climate, from extreme cold to extreme heat and what we're seeing with the chronic underfunding of education. I've spoken at length about the underfunding of our special education system. When we don't ensure that that special education money goes where it needs, when we are cutting special education, we find our schools are doing their very best without the supports, without the resources and now without the options.

Yesterday, I brought to light some of the specifics in my riding, which I know we're going to be hearing about from other ridings going forward, about the violence in some of our classrooms, when our special-needs children are not getting the supports they need and are agitated. When we see that kind of violence, they're not getting the education they deserve. The classroom should not be a violent environment. Students in those classrooms, all students in their classrooms, deserve a safe and secure learning environment. Hold and secure, evacuations and Kevlar-protective equipment should not be the norm in our classrooms. We need to protect our students.

The Acting Speaker (Mr. Shafiq Qadri): I now call for further debate. Is there any further debate on Bill 37? Time allocation: further debate?

Seeing no further debate, Mr. Naqvi has moved government notice of motion number 2. Is it the pleasure of the House that the motion carry? I hear some differentiation.

1620

All those in favour of the motion, please say "aye."

All those opposed, please say "nay."

I believe the ayes have it.

Motion carried.

Motion agreed to.

The Acting Speaker (Mr. Shafiq Qadri): Orders of the day.

PATIENTS FIRST ACT, 2016
LOI DE 2016 DONNANT
LA PRIORITÉ AUX PATIENTS

Resuming the debate adjourned on October 19, 2016, on the motion for second reading of the following bill:

Bill 41, An Act to amend various Acts in the interests of patient-centred care / Projet de loi 41, Loi modifiant diverses lois dans l'intérêt des soins axés sur les patients.

The Acting Speaker (Mr. Shafiq Qadri): Further debate?

Mr. Jeff Yurek: I'm pleased to rise today to begin the discussion on Bill 41 on behalf of the official opposition, the PC Party.

The purpose of the bill is to revamp the way in which health care is being delivered within the province. I want to take the opportunity to commend the minister on his intentions to integrate health care in the province. It's long been needed, and it does take a considerable amount of work to come up with a plan to integrate health care.

Nobody would ever argue here in the Legislature that we do not want to integrate health care in this province.

I hope to utilize this debate to articulate the PC Party's views on this legislation, but I thought I'd start out with a little history on health care, just to see where it came from. First and foremost, the PC Party are very strong supporters of our publicly funded universal health care. We all realize the catalyst of our health care system in the province was in Saskatchewan under Tommy Douglas, who later went on federally. But we can't forget Emmett Hall, who was Chief Justice, and Monique Bégin. Those three pretty much sparked health care in the country. It's interesting to note that no party could lay claim to health care, because each one represented a different aspect of the political parties in this country. Also, let it be noted that John Robarts was the Premier of the province of Ontario when universal health care was commenced.

Health care, of course, is to be publicly administered, comprehensive, universal, portable and accessible. We believe that health care should focus on the patient, and systems are created to include both the patient and the health care worker. We do have to commend the health care professionals working in our system today. We very much support the work they do, day in and day out, on limited budgets. We know that their heart and dedication to helping their patients is noted and commended in this House.

What does our health care system look like today? Well, we have a rationed system. We have surgeries being cancelled and wait times expanding. Over the last few days the minister has taken information from the Fraser Institute. It's quite shocking that this government would actually look at the Fraser Institute, but they're using the Fraser Institute and stating that Ontario is A+, number one, compared to all the provinces in Canada.

However, most people involved in the health care sector always look to the Commonwealth Fund report, which takes a look at health care systems in the world. Unfortunately, Canada places 10th out of 11 nations. We're only better than the United States when it comes to being ranked for quality of health care systems. Britain's number 1, Switzerland's number 2 and Sweden's number 3. In timeliness of care, we're last. So you can look at the Fraser Institute saying we're the best in Canada, but Canada is 12th in timeliness of care. So we're the best of the worst.

I think we can do better than that and I think Canada thinks we can do better than that. So I'm hoping that going forward, the minister will take to heart that we have work to do in the system, and when the opposition brings these cases forward to them, maybe be accepting and supportive of those concerns and make transition in the system to deal with the wait times and/or the rationed system that we do have today.

What else do we have in the health care system? Our ongoing battle with doctors. For the last two years this government has vilified and has had zero relationship with the doctors. In fact, I believe there is no relationship with the OMA, which is the chief representation of doctors.

The OMA, speaking of them, were left out of the consultation of this bill and, in fact, weren't even present when the government reintroduced the bill, which speaks volumes. You cannot rebuild a health care system without the involvement of doctors.

The other item is patients. There were no patient groups here at the announcement of the bill. Although the name of the bill is Patients First, they seem to have been forgotten. Patients will have to work for the system instead of the system working for them.

Another point: bureaucracies. The government here loves to create them, nourish them and grow them. I have not yet read a single study which shows that large, centralized bureaucracies deliver efficient, cost-effective care. In fact, if you look back to when Jim Wilson was health minister, he had three assistant deputy ministers; Tony Clement had four. We are at, I believe, eighteen assistant deputy ministers, eighteen silos within the Ministry of Health. This government is planning on pushing integrated care into our communities when they are far from integrated at the Ministry of Health level. I think the government needs to take some time and relook at how their bureaucracy is created here at the Ministry of Health and ensure that they become integrated, a shining example for the rest of the province.

How many admirals does the Ministry of Health need? How much power is needed at the Ministry of Health in order to micromanage the doctors, nurses and other health care professionals that this bill creates?

Mr. Speaker, I'll go over a little bit of what this bill proposes to do, and then offer some critique. The bill basically touches on—I'll just use five different areas to look at: community care access centres; an expanded mandate for the local health integration networks, the LHINs; the enhanced authority of the ministry; primary care; and service accountability agreements.

Community care access centres, CCACs: The bill will remove CCACs as health service providers. CCAC employees, assets, liabilities, rights and obligations will be transferred into the LHIN. Directors and officers of the CCACs are terminated on the day of dissolution and any annual reports left due from the CCACs will be the responsibility of the LHIN.

The LHINs' expanded mandate: The bill will expand the mandate of the LHINs to make them accountable for primary care planning, management and delivery of home care, and formalizing linkages between themselves and the public health units. New health service provider entities will be added, including not-for-profit family health teams; not-for-profit nurse-practitioner-led clinics; not-for-profit aboriginal health access centres; primary care nursing services; maternal care; interprofessional primary care program services; not-for-profit palliative care services, including hospices; and physiotherapy providers.

The geographic areas of the LHINs are subject to change. I found it interesting last night when speaking to doctors in the Scarborough area that Scarborough is not part of the Toronto Central LHIN, which I thought was

quite shocking, but perhaps under this bill that could be remedied, and perhaps some of the necessary infrastructure and funding that Scarborough needs for their health care system can come. It's amazing, with numerous cabinet ministers and MPPs from the government side, that Scarborough has been left out in the cold for so long.

The LHINs will create sub-LHINs, which will function with the planning, funding and integration of services within the geographical sub-regions, and their plans shall include strategic directions and plans for the sub-regions. LHINs will "identify and plan for the health service needs of the local health system, including needs regarding physician resources, in accordance with provincial plans and priorities and make recommendations to the minister about the system, including capital funding needs for it."

The following objects are added to the LHINs' objectives:

- to provide health and related social services, supplies, equipment and care of persons in the home, community and other settings and to provide goods and services to assist caregivers in the provision of care for such persons;

- to manage the placements of persons into long-term-care homes;

- to provide information to the public about, and make referrals to, health and social services; and

- to fund non-health services that are related to health services that are funded by the minister or the LHIN.

1630

A LHIN can "appoint one or more investigators to investigate and report on the quality of the management of a health service provider," except long-term-care homes. Doctors are not directly placed as subjects of an investigation by the LHIN; however, physicians practising in the service providers will be affected.

Each LHIN will have a board of directors, and the board of directors in the LHIN will increase from nine to 12, although there is room to creep it up to 14.

LHINs are to consult with public health units for their advice on what to include in the development of their integrated health service plans, and create family advisory committees. They may establish health professional advisory committees. It's not a necessity, and I hope the LHINs do create the health professional advisory committees. These are the people that we actually need to talk to in order to create and develop the integrated system.

LHINs can appoint a person as a health service provider that they provide funding to, except hospitals—so no supervisors in hospitals or long-term-care homes—and the supervisor remains in place until the LHIN decides they don't need to be there.

The ministry gets enhanced authority: "The minister may issue operational or policy directives to the" LHIN, which the LHIN must comply with. The minister can make suggestions to the Lieutenant Governor on the

appointment of LHIN supervisors, and these supervisors remain in place until the Lieutenant Governor says so.

Investigators are added to the legislation with great powers. "The minister may appoint one or more investigators to investigate and report on the quality of the management and administration of a local health integration network, or any other matter relating to a local health integration network." The investigator may, without a warrant, enter the premise of a LHIN and inspect the records relevant to this investigation.

The bill amends the Public Hospitals Act so that it would allow the minister to issue operational or policy directives to hospital boards where they believe that it is in the public interest. Hospital boards are required to carry out this directive. The hope is that the ministry is consultative and collaborative in the development of such directives. Their key word is "hope."

The minister can appoint the LHIN as an agent, allowing it to enter into agreements for the payment of remuneration to physicians and practitioners rendering insured services to insured persons on a basis other than fee for service. So basically the government will negotiate the contracts with doctors, but the LHIN will be allowed to administer the contract.

Bill 41 removes the requirement of doctors to report vacancies to the LHINs. However, they still must report certain practice details, including opening, closing, retirements, extended leave—which I haven't seen defined as yet—and physician practice and service capacity to address the population needs. It's my understanding that doctors already report this information to the ministry. I'm not sure why the ministry and the LHINs cannot communicate that information between the two.

LHINs will provide funding to health service providers in their geographic region, and for other networks outside of the geographic region. If service providers do not deliver a rejection notice within 30 days of receiving the service request, then the network and the provider shall comply with that agreement.

The government has a more detailed process of how a LHIN will be able to impose an agreement, and religious organizations will be exempt from providing a service that is contrary to their religion and charter of rights.

I've talked to a few stakeholders. I've had to speak to them again because originally this bill was called 210. The government released it last spring, and there was quite a bit of outrage about some of the items that were in this legislation, and they did make a few amendments. However, there are still some concerns out there.

Since the Ontario Medical Association wasn't consulted—the representative of Ontario's doctors was not consulted—I thought I'd reach out to them and listen to what they had to say. They have a few concerns that hopefully this government can act on through the committee portion of this legislation before instituting the changes.

They are concerned with the expanded powers of the Minister of Health in the LHINs. The minister can make decisions about health care without consulting doctors.

Doctors are concerned with increased reporting to the LHINs, which means less time for patients, and at the end of the day, the minister can override their advice.

There was very little input from doctors that went into this bill. The trust has been eroded between doctors and this government. It's unfortunate that this bill will be rushed through. From what I'm hearing, this should be wrapped up by the end of November. We're hoping the consultation door will be open.

The OMA is concerned about the creation of more expensive bureaucracy, which utilizes our limited health care dollars. I spoke earlier about how we have rationed care. We mentioned 500 surgeries being cancelled last January, February, March and April in southwestern Ontario because there is a lack of funds. We're already seeing in our area—Strathroy is one of them—where they've used up their funding for the year, and it's only October. So anyone needing hip or knee replacements will have to wait until next year's funding comes out, which only compounds the problem.

Mrs. Gila Martow: In April.

Mr. Jeff Yurek: Yes, it's next April when it comes out.

The OMA is also concerned that with the bill, the government will have power to audit, review and investigate health service providers' medical records without a warrant or patient consent, possibly causing invasions of patient privacy. This government last spring passed Bill 119, which the PC Party voted against, which allowed the minister to appoint someone in the Ministry of Health to access private patient records. This bill now gives power to the LHIN to actually send an investigator in to investigate medical records without a warrant or patient consent.

The concern is patient privacy. It's an ongoing concern in this province, with the government's value assessment going on under eHealth. Our hope is that patient privacy is protected during that process.

The OMA is also concerned with bureaucrats telling doctors how to treat their patients. Doctor discretion will be limited and patient participation in their treatment will be removed. Doctors in this province should be enabled, not managed, in delivering care.

The Association of Family Health Teams of Ontario does support Bill 41, but they have concerns as well. They call for the government's need to expand access to comprehensive team-based primary care beyond the 25% of Ontarians who have it. Evidence is increasingly showing that these primary care teams can provide the highest quality of care and reduce overall health costs. To really put patients first, we'll have to go further to expand comprehensive team-based primary care.

Electronic connectivity and deployment of care coordinators is essential to effective primary care. Primary care providers care for whole people, not diseases or body parts, and coordinate specialized services when they're needed. It requires electronic connectivity and deployment of care coordinators from the CCAC to the LHIN and then out to primary care, ensuring consistency across the LHINs.

Family Health Teams of Ontario thinks the ministry needs to play a stronger role in stewardship, making a strong, explicit commitment to strengthen primary care. We need to ensure that the care that's occurring in Toronto is the care that's occurring in southwestern Ontario and is the care that's occurring in northern Ontario.

Ensuring LHINs have the capacity and the appropriate accountability to take on the expanded role: We need to ensure the LHINs are able to do this role and are not rushed into it. We need to ensure, before the transition occurs, that they're able to take on the expanded responsibilities and provide a seamless change in order to maintain medical services.

The Ontario Long Term Care Association is supportive of addressing the structural issues that create inequities in working to facilitate better integration, as proposed in the bill. The association is recommending some changes:

- Ensure well-defined governance structures;
- Clearly delineate provincial standards, reporting standards and accountability measures for LHINs' subregions in the ministry;

1640

- Involve the long-term-care sector in the development and implementation of technology to enhance care;
- Improve access to interprofessional teams in long-term care and allow these staff to work with their full scope of practice;
- Take steps to ensure the placement process for long-term care is streamlined, improving consistency and efficacy;
- Base care coordinators inside long-term-care homes, similar to the way they are based in family health teams, community health centres and hospitals.

It's important that this government takes the time and invests in long-term care in this province to ensure that beds are there as the need grows.

The Association of Ontario Health Centres has proposed some changes to Bill 41:

- Strengthen the objectives of the LHIN to reduce health disparities and inequities;
- Add definitions to clarify the mandate of the LHINs in addressing health and well-being;
- Address concerns about increased LHIN powers.

—Do not—and they're highlighting this—give the LHINs the mandate for service delivery, including care coordination. That's something that we hope we can have a discussion on.

The Centre for Addiction and Mental Health: Bill 41 does not explicitly reference mental health and addictions. The challenge that mental health care lags behind physical health care is well known in this province and is shown in the support and investment. Before mental health can truly be integrated into the broader health care system, acknowledgement of the sector as an integral part of the system and equitable investment are needed.

To facilitate mental health and addictions integration, supports and investments are needed to align and

integrate data collection and analysis across the hospital and community sectors; provide standardized mental health and addictions treatment; and establish a mental health secretariat.

Now, Mr. Speaker, I've gone through a little bit of what the stakeholders have said. I'm sure that as we get this bill into committee, we will see more stakeholders come forward. I'm hoping that the government has the opportunity to open the door again to the OMA and have a discussion on Bill 41 to get their input.

What's concerning about this bill is that you're taking the CCACs and the LHINs and merging them into one. The government likes to say they're getting rid of CCACs, and technically I guess that's true; however, the structure still remains intact. You're basically changing the name.

The Auditor General, last September, really stood forward on CCACs. It highlighted that this government must take urgent action to address the poor state of our home and community care sector. It also confirmed the Donner report and her comments that the home and community care system is dysfunctional. Complaints about Ontario's home and community care system are the number one phone call that many members receive in their constituency offices. I'd say that energy is probably up there as well.

Home and community care has the opportunity to improve health outcomes and cost-effectiveness in the health care system. This government needs to make it a priority. The Auditor General noted that this government, under Kathleen Wynne, implemented three new CCAC programs in 2011 without any cost-benefit analysis. Their policy resulted in 47% of patients not being visited at home within 24 hours following discharge from hospital. It's another example of how this government barrelled ahead with new programs without giving thoughtful consideration before implementation. Again, omitting the doctors in the creation of this legislation on reintroduction raises red flags.

In the 12 years the Liberals have been in government, there has been no thorough evaluation of how the current CCAC service delivery model works, if it is optimally performing. There is no accountability. Only 61%, according to the Auditor General last year, of CCAC dollars goes to face-to-face care while 39% goes to administration and bureaucracy. CCAC CEO salaries skyrocketed by 27% between 2009 and 2013, while patients have been told to wait for needed home care services and personal support worker wage increases were delayed.

Again, Ontario is blessed with dedicated doctors and nurses and PSWs, all of whom work hard to do their best for the patients. Unfortunately, as a result of this mismanagement on the Liberals' part, the home and community care sector is failing. The government needs to take an approach that puts patients first—not administrative waste or lack of accountability—at the centre of decision-making.

That was the report from the Auditor General. The key findings of the review: 61% of CCAC dollars go to face-

to-face care and 39% goes to administration and bureaucracy; private service providers managed to put 82% of their funds to direct care, with only 13% going to administration and 5% remaining for their profit; and only 47% of the patients were being seen within 24 hours by a rapid response nurse.

One CCAC explained to the Auditor General that “this standard is not always met because many patients are discharged on Fridays, and there is no nursing coverage on weekends in some parts of the region.”

CCACs claim that 92% of expenditures go to direct patient care, but that figure drops to 72% when only counting services with direct interaction with patients. That is why face-to-face care is not getting the dollars it deserves.

CCACs pay inconsistent rates to service providers for the same services. In some cases, the same service providers were paid different rates by the same CCAC for the same work.

Another review, just an overview: The CEO salaries skyrocketed. The Champlain CCAC CEO received the highest increase during that time: a 72% salary increase. That’s a heck of a raise. Three CCACs have not implemented the common CEO compensation framework that was developed for them in 2012, meaning their salaries are not in line with the other CCACs.

Total salaries, wages and benefits rose 31% from 2009 to 2013, while purchased services for patients only rose 28%. Salaries at the Ontario Association of Community Care Access Centres, which is the entity that represents the 14 CCACs, increased by 82%.

Eligibility criteria for complex care patients discharged from hospitals vary between CCACs, which means a patient does not receive the same care they would need, simply by where they live—different CCACs, different levels of care.

Care protocols vary among service providers, meaning that if two people have the same health issue in different parts of the province, they may receive different forms of treatment.

The report also revealed that no cost-benefit analysis was ever completed to evaluate the decision to have CCAC nurses directly providing services under these programs. This Liberal government forced CCACs to hire the nurses for these programs without knowing the costs or potential benefits. This bill doesn’t outline how this is going to fix that situation. It’s basically just moving the service under a different title.

Also of concern was a report from the Auditor General in 2015 with respect to local health integration networks. In 2015, during her annual report, the LHINs were audited. The LHINs spent half of their operational expenditures on salaries and benefits. They weren’t really delivering services at that time.

LHINs will now be in charge of health care through service delivery. It’s questionable, after the transition occurs, because the bureaucracies are staying the same—the government’s claiming a 5% savings, but when you look at 40% in administration and another 40% from

your other operations and administration, I would hope they would find more savings than that that can go to front-line care.

The LHINs were created to provide a fully integrated health system. This isn’t a new topic for this government. In 2006, they came out and said that they wanted to integrate the health care system, so their response was to create the LHINs. In 2016, they want to integrate the health care system and give more power to the LHINs.

The Auditor General found that the ministry has not determined what would constitute a fully integrated system, nor has it developed ways of measuring how effectively LHINs are performing, specifically as planners, as funders and as integrators of health care. We’re taking a system which hasn’t met its goal. It hasn’t created a system to measure if they’re succeeding in their goal, and now we’re going to let them be in charge of coordination and delivery of services, even though we have no goals and no measurements spelled out.

1650

“The performance gap among LHINs,” says the Auditor General, “has widened over time in 10 of the 15 performance areas.” It raises questions. Are the inequities in our health care system in Ontario only going to expand, considering the gaps that have been created in the system? LHINs have not been consistently assessing if their planning and integration activities were effective in providing a more efficient and integrated health system. There has been no measurement of if what they’ve been doing has been beneficial.

The ministry takes little action to hold the LHINs accountable to make changes when low performance continues year after year. The ministry responds differently to challenges faced by the LHINs.

The Auditor General also reports that LHINs need to “better monitor health-service providers’ performance.” The LHINs have no common complaint management process. There has been no notable improvement in performance since the inception of LHINs—that’s 10 years.

The Auditor General also found that the ministry needs better oversight of the LHINs, yet this is the organization that the government has chosen to give more power and oversight to. So in addition to the failing of the integration of service, we’re going to give them service delivery without the necessary experience in place in order to do so.

The current authority of the LHIN is to integrate the health care system by changing the funding to a provider; by facilitating and negotiating the integration of persons or entities or the integration of services between a provider and a person or entity that is not a provider; by issuing a decision that requires a provider to proceed with an integration decision; and by issuing a decision that orders a provider not to proceed with an integration. LHINs remain accountable to the minister for the performance of the local health system and its health services.

What will change with these LHINs? The LHINs will now be able to conduct audits and operational reviews,

issue directives to health service providers, appoint investigators and appoint supervisors. They will be the ones who are going to deliver, set the standards for those deliveries and hand out those services.

Questions and concerns that rise out under this legislation that I hope get debated and discussed at committee: The government is creating a system which will be micromanagement from the Ministry of Health to the LHINs, who will micromanage the health care providers.

Our suggestion to that is to take the power that you're creating in the Ministry of Health and the LHINs and move it closer to the patients. Move that ability closer to the health care providers providing the service. Change the philosophy of micromanaging health care professionals to enabling health care professionals. How can we enable them to do the job they've been trained to do, to support them in ensuring that all patients are touched?

Another question: We have not seen what the projected costs of this transformation are. We have heard of potential possible savings, but this government is really lax in doing cost analysis and reporting and releasing what this transformation is going to cost the system. There isn't any more money for the health care system. We're dealing with over \$50 billion, and any money you take out to transform the system and to create a larger bureaucracy is money out of the hands of patient care.

This week we spent all week asking the minister about the wait times that are heading in the wrong direction. Actually, I met with my LHIN last week. They gave me a chart that actually shows the trending of wait times increasing for knee and hip replacement surgeries in the riding.

Ms. Lisa M. Thompson: Michael Barrett shared that with you, at South West LHIN?

Mr. Jeff Yurek: It was nice, yes. Michael Barrett is a credible person. I like him.

It's heading in the wrong direction. The minister, as I said earlier, likes to talk about the Fraser report, but when you look at the Commonwealth report, we're 12th out of 12 countries for timeliness of care. The States beat us at timeliness of care.

So what are the costs? What is this going to cost the health care system, which has this transformation, which hasn't included the doctor? What does this cost? Where is the emphasis in this bill on preventive care? When are we going to get to a point in the health care system where all we do is, instead of just treating the sick, we treat people and prevent them from getting sick—postponing disease down the road? Where is the emphasis?

If you look at health promotion, which used to be a stand-alone ministry and which became a deputy minister's silo in the health care system, it is now a point down the chart. It's not even a major part of this ministry. Why is health promotion being subjected to being lower on the chart?

What are the details of LHINs appointing supervisors? What if an organization receives funding from multiple

sources? What if the LHIN only provides 5% of the funding? Under this legislation, could they appoint a supervisor and take over that service provider? That question needs to be answered.

What is the timeline to move the care coordinators and transition them into the community? I've heard three years. Speaking to ministry officials, I couldn't even get that out of them. We need, and we support, moving care coordination out into the community. It's a way to improve care, it's a way to improve access to care, but what are the timelines for this occurring? Saying it's going to happen down the road I don't think is good enough.

A big flag in the legislation is the Ombudsman. This is an opportunity, in the creation of legislation, to give oversight to the Ontario Ombudsman—independent of this Legislature, who has done great things with regard to pointing out the disaster of hydro. This was the opportunity to include the Ombudsman in this legislation. Instead, they're going to give it to the Patient Ombudsman.

I have nothing against the Patient Ombudsman. I know Christine Elliott. I sat with her in the Legislature. She's a great lady. She has strong integrity. She'll do a great job. However, she's an employee of the Ministry of Health; she's not independent. She answers to Minister Hoskins. It's unfortunate that this side of the House—we don't see the transparency in this government. If her reports were unedited and she didn't have the fear of losing her job if she spoke harshly about this government, we'd support that. That's why we need the Ombudsman to have oversight of the system.

Public health is very important in the system. We want to ensure that public health in this new role plays more than just the role of a member of a committee at the LHIN. They need to be more integrated into the LHIN system instead of playing a less meaningful role and giving some ideas. It's going to be tougher for public health in this province. Twenty-eight health units had their funding frozen indefinitely. There's no end point when that funding will come back. We saw what happened when the government froze funding in the hospital sector for four years. Services were cut, wait-lists increased and RNs were fired. We're now seeing this in the health units. This is the first year, and if it lasts too long, we're going to see public health unit services cut, RNs fired and a decrease in health care in the regions.

The areas where the health units were frozen are the areas of this province that do not have the resources that large urban areas have that they can rely on when there's a lack of service coming from the health unit. These rural areas of the province need a strong health unit to ensure that people have the necessary resources to access.

Auditor General reports have painted negative views of both the CCACs and LHINs. What in this bill changes anything, and why are you giving more increased power to an organization that this government created which failed to achieve its mandate, failed to achieve what it was outlined to do?

I'd like to know, what are the measurements for success? How do we know if this experiment that this

government has come up with is a success? We've seen experiments before. We've seen eHealth—over a billion dollars. We've seen what happened at Ornge; the OPP is still investigating that. We've seen the diabetes registry—20-some-odd million dollars gone; the PSW registry, which was millions of dollars. These are experiments this government comes out with. The LHIN was an experiment with this government; how much does that cost?

Ms. Lisa M. Thompson: CCACs folding into the LHINs.

Mr. Jeff Yurek: Well, this is it. The CCACs heading into LHINs is their newest experiment. I think the people of Ontario are growing tired of 15 years of experiments with their money by this government.

1700

Outside of health, we can go to the energy file. The expensive contracts of this government were an experiment of their own. We are paying for it dearly, and the money that that has taken away from our economy is affecting our health care system.

The debt that has risen—over \$300 billion in debt this government has reached; \$1 billion dollars a month going to pay the interest. Certainly, part of that money could be utilized in our health care sector. Maybe the motion that MPP MacLeod from Nepean—Carleton brought forward—maybe some of that money could have created the compassion fund that she's looking for. That's \$1 billion dollars we'll never see that's just paying off the interest—not even touching the debt, as it continues to grow.

How are we going to fill the inequities in the system? This government is creating the sub-LHIN structure. In my riding, Elgin will be a sub-LHIN structure, which is fine, but Elgin has no hospice. Elgin, for mental health services—I'm getting calls to my office. We don't have youth mental health services in Elgin county; they get shipped to London. But now we're hearing back—we're told that they're not in their service area. They don't count, so they're shipped back to St. Thomas and not getting the services they need.

Interjection: That's a shame.

Mr. Jeff Yurek: That's terrible. So how are we going to fill the inequities with this system, where we're growing management? We need to stop the growth of management in the bureaucracy that has been created.

To highlight that—I got this from the Ministry of Health, and it basically shows what has changed in bureaucracy, in addition to the LHINs and the CCACs. The CEOs of the CCACs will be terminated and the volunteer boards of directors will be dissolved. The OACCAC is going to be replaced with the LHIN shared services organization. So that's basically going to be the same; local health integration networks are going to be the same. We're now going to create sub-regions throughout the province—so there's a new level of bureaucracy that will be created. Health Quality Ontario is being pulled in and creating an integrated clinical council that will develop standards which will tell the doctors how they should work. So we've expanded the

bureaucracy, we've expanded the management in the system, and, unfortunately, that is going to take much-needed money away from services that we hold dear.

I have a few stories that I'm just going to add—as I've raised those questions that, hopefully, will be answered; if not, we'll try to get answers to them in the committees.

The bill is entitled Patients First. I see the power shift away from health care providers to be able to do their job; the patient is not really part of the creation of the system. I see a more centralized power being created in LHINs up to the Ministry of Health. It's unfortunate that—this government is great at titling bills, but it's the details that count.

I have a couple of stories here with a senior lady who was diagnosed with a condition that caused her to go blind and forced her to need home care. The daughter contacted her local CCAC to discuss a meal and medication program, and they told her that they would only provide bathing services. Unfortunately, that never happened. The daughter was left caring for her mother until our office was able to move in and actually make some changes there. I don't think you need MPPs included. We had to have MPPs to try to fix Hydro One's problem with billings. We don't need MPPs involved in coordinating health care in the system; it should deal with itself.

I have another story here about a 91-year-old who was getting home care services, but unfortunately, at the last minute the poor PSW, due to her workload, had to call and say she couldn't come in until 11 p.m. to prepare the 91-year-old lady for evening. I know my parents—my dad is 88 and my mom is 84—don't stay up until 11 o'clock at night. They get ready for bed early. I'm pretty sure this 91-year-old mother needed that care a lot earlier in the day.

You talk to a lot of PSWs. It's unfortunate that there are many stories where their schedule is not being worked out properly. The organization from above isn't doing the job as well as it should be.

Another one in my riding regarding the CCAC—I'm not saying CCAC workers are bad. I'm saying CCAC workers are dealing with the conditions that have been created in the structure of the CCACs, the fact that upper management has allowed the bureaucracy to grow and increase. One of the fixes that we mentioned earlier was that we need to change the power structure in the system. I think we need to take it away from the Ministry of Health, which is consolidating its power to control and micromanage.

We need to ensure that the money is brought forward and sent directly to patient care, because when this government does an announcement on enhancing home care services, I bet you 99% of the public would think that 100% of that dollar is going straight to providing home care services. They don't realize that 40% of it doesn't make it that low. Now we're talking about creating a larger structure, a larger bureaucracy without a cost analysis done on how much it will cost to create this structure, how much less money is going to be reaching those patients.

The PC Party supports reduced bureaucracy, provided that money goes to patients. However, this legislation increases bureaucracy. The PC Party supports the movement of power to enable our health care professionals—our doctors, RNs, nurse care practitioners, PSWs, pharmacists and physiotherapists—ensuring these providers of care have the ability and discretion to do the job that they're there to do. We don't need standards developed in a committee somewhere that dictate how the health care professional needs to perform. We have colleges for health care professionals that detail how professionals should conduct their business.

Madam Speaker, you being a nurse, I'm sure your college has told you many a time, when you first graduated and were licensed, the standards they expected you to maintain. As a pharmacist, I know the standards I'm supposed to maintain, and the doctors in the Legislature do as well.

It's unfortunate that we see one level of bureaucracy being replaced by a larger level of bureaucracy. We're seeing an organization that's not only going to be in charge of health care in areas, they're also going to be in charge of service delivery, and the previous record of these organizations is dismal. We don't have any goals or standards that we'd like them to attain.

It's unlikely that this bureaucratic management and the excessive oversight powers of health care providers in the organization will improve front-line patient care. We're moving the power and, unfortunately, some of the money back into the Ministry of Health, to a group of people who I'm sure are dedicated to their profession and dedicated to their job, but they're not the ones who are treating the patient, which is what this bill is all about: patients first, ensuring that when our parents need to get into a long-term-care home, there's a bed available for them; when some of my constituents need a doctor, that there's a doctor they can actually see; when seniors in my riding need a knee or a hip replacement surgery, the wait-list isn't three or four years; or when I need to see a specialist, the wait isn't too long before it's too late.

We need to ensure that the front-line health care professionals are able to do their job. We need to ensure they have the flexibility to do their job. We need this government to step forward and make it right with the doctors of this province and include them in this legislation. You cannot create a health care system and you cannot create a home care system without the doctors being involved.

1710

Patient-centred care cannot be created as this government continues to cut health care, ration health care and limit the opportunities of our health care professionals. This bill, unfortunately, is designed for the bureaucracy of the system and not the patients. The government has direct control over the LHINs and direct control over our health care providers. We need to move the power away from the bureaucrats and to the patients, and unfortunately this bill goes in the opposite direction. We need to ensure that the Ontario Ombudsman has oversight of the system and not the Patient Ombudsman.

Madam Speaker, I was glad to take the time to discuss and open up the discussion for the PC Party, the official opposition. Hopefully, we'll have some great discussion and debate going forward. I'm hoping the government doesn't move to a time allocation, considering this is one of the biggest transformations we've seen in quite a long while and we need to ensure that we have all the options out on the table in order to make some amendments. I know this is the second time this bill has been brought forward, but it's the first time we're having this debate. So I'm hoping, as we go forward, we will see the government open up, we'll see the government talk to the doctors, we'll see the government listen to the concerns I've brought forward, and ensure that the power they're creating inside the Ministry of Health is transferred to the patient.

Madam Speaker, that is my initial monologue. I look forward to questions and comments.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Ms. Cheri DiNovo: Thanks to the member from Elgin–Middlesex–London for his well-researched dissertation about this act. It's always interesting to me when a Progressive Conservative quotes Tommy Douglas; I like it when Liberals do too. I'm sure that Tommy, if he's listening somewhere in the beyond, loves it. This was the champion of medicare. That's one thing that really gathers us together as Canadians, particularly when we go south of the border—the one thing we all agree on is how proud we are of our single-payer medicare system.

When we were down at various conferences in the States, when Obamacare was being discussed, which, by the way, is not single-payer, but still—when we were down there talking about medicare, all we did was debunk some of the myths about it that were being propagated by the American press. Canadians are proud of it. Tommy Douglas was declared the greatest Canadian ever because of medicare.

Here's what Tommy also said that keeps getting forgotten. He said that if you don't expand medicare, if you don't keep fighting for more coverage, for better-quality medicare, you're going to start losing it. The sad reality is, we're losing it. Instead of having pharmacare, for example, which we should have by now, instead of having dental care, which we should have by now, we have been privatizing.

One way of really robbing medicare of its strength is to nibble around the edges of it. The Conservatives did that, of course, by creating CCACs and by privatizing home care. The Liberals, unfortunately, are doing it too: firing nurses, freezing hospital budgets. This is a problem. It's a problem that drives people to private care.

So, yay, medicare; I like to hear Conservatives talk about it. Let's get on with making it better, not worse.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Mr. Arthur Potts: I'm delighted to have an opportunity to give comment to the member from Elgin–

Middlesex–London, the health critic for the party. From his remarks, he obviously worked very hard, within the legislation, to get a good grasp and understanding. While we may not share the same perspective of where we're trying to go on this piece of legislation, I value the input and the different approach that he put forward and the other ways he and his party would like to see us address some of these issues.

He talked a bit about the doctor relationship. Let's be very clear: Change is hard. What this bill is doing is fundamentally changing the way we're delivering health care—which is becoming a patient-centric approach to health care as opposed to an institutional, and part of that institutional is a physician-centric health care system where we're looking far more towards to teams of health care providers who are working directly with people in their own homes, with patients in their homes, and institutional care that needn't be the hospital or the full long-term care, but some transitional places as well. That's extremely important.

What he sees, I think—and he talked a lot about a consolidation of power within the ministry. I think he's missing the point that we're actually devolving responsibilities down the chain closer to the patient with the coordinating of our sub-LHINs with local community health boards so that there's coordinated planning at a municipal level overseen by the LHIN structure, which the ministry will have—not direct control over, but operational, responsible oversight over.

I think that's the role of government. We should be steering the system but allow those who are on the ground level to do the best they can to respond to the area-by-area, local needs of the patient group. I'd like the member to think very long and hard about whether his pushing to have everything stick at the institutional and physician level is the appropriate way to go.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Ms. Lisa M. Thompson: I'm pleased to add my voice to the debate today. The first thing I want to share with everyone today is that I know I'm speaking on behalf of the PC Party of Ontario as well as our leader, Patrick Brown, when I say that we truly appreciate all of the effort and expertise that the member from—here we go again—Elgin-St. Thomas-London—not in that particular order, but in that neck of the woods—

Mr. Jeff Yurek: Middlesex.

Ms. Lisa M. Thompson: I always do that—Elgin–Middlesex–London. Anyway, the member is doing a phenomenal job, and I appreciate the effort that he and his team put into making sure complex issues get broken down in a manner that makes sense and is attributed to what we really need to be concerned about, and that is our front-line health care.

During his hour leadoff, the member from Elgin–Middlesex–London brought forward some very important aspects that resonate from riding to riding. He spoke about the need for front-line health care and his concern about the bloat of bureaucracy that has occurred over the

last 13 years. His reference point was that the member from Simcoe–Grey, when he was minister, had three deputies. Now we have 18. That's taking away from front-line health care.

He referenced the fact that there are wait times that are just unacceptable—the worst in years. Comparing with other jurisdictions, we come at the very bottom of the heap. That's unacceptable for people living in Ontario and for people who have already paid their dues.

I'd also like to recognize—he gave a shout-out to Michael Barrett. We share Michael in the South West LHIN. He is doing his best, and it's time the ministry does their best as well.

The Deputy Speaker (Ms. Soo Wong): Questions and comments? I recognize the member from Toronto–Danforth.

Mr. Peter Tabuns: Why, thank you, Speaker. It's very kind of you. It's my pleasure to stand and comment on the presentation by the member from Elgin–Middlesex–London. He has spoken about Bill 41, the Patients First Act—a very extensive survey of what is before us.

I have to say that in many ways, the heart of this bill is the elimination of the community care access centres, the CCACs, and the transfer of power, authority and organizational responsibility to the local health integration networks, the LHINs. But that is not going to deal with our problem in long-term care. It's not going to deal with our problem in the home care area. I talk to constituents of mine—Speaker, you would be familiar with them—in the seniors' buildings in my riding who consistently face problems accessing support from personal support workers to come into their units and help them to do the small number of things that would allow them to continue living independently. The reality is that a re-organization, a change of initials from a C-C-A-C to an L-H-I-N, is not going to actually deal with the home care crisis that we face.

1720

I talked to constituents a few weeks ago about a woman in their building who had lost the full use of her hands and could only get a personal support worker in once or twice a week. I don't know what she did the rest of the time, Speaker, to tell you the truth, but I know that this bill is not going to help my constituent who's trying to lead an independent life without those kinds of fundamental physical skills available to her.

This is an important issue to be discussed and one that, unfortunately, I don't think this bill fully addresses.

The Deputy Speaker (Ms. Soo Wong): I return to the member for Elgin–Middlesex–London to wrap up.

Mr. Jeff Yurek: I'd like to thank the members from Toronto–Danforth, Parkdale–High Park, Huron–Bruce—I'm very grateful to work with you—and, of course, Beaches–East York.

Just on the comment the member from Beaches–East York made with regard to doctors—he said that change is tough. I'm hoping he's not referring to this as the change the government's going to where they're not going to talk

about doctors, where they're going to vilify doctors, they're not going to work to agreements and collaboration with doctors. That's the change that has to happen. They need get back to the table and fix the situation with our doctors, have some respect for the profession and appreciate the doctors we have in this province.

The member from Toronto–Danforth is correct: This bill isn't going to fix home care. This bill is not going to fix long-term care. This bill is creating a higher power structure within the ministry, kind of reversing what their former plan was with the LHINs. CCACs had locally picked board members—

Ms. Lisa M. Thompson: Volunteers.

Mr. Jeff Yurek: Volunteer board members. They're going to a system where there are going to be appointed board members. There's no guarantee that each region is going to be represented, so you can't tell me this is going to be more localized care. It's going to be more localized bureaucracy that's created and less care for the patients. It's going to be less enabling of our health care professionals to do their job. It's a step in the wrong direction. It's going to take much-needed dollars out of the health care system that we need. Wait-lists will continue to grow. I hope the ministry takes the opportunity to listen to the comments of the opposition parties and make the changes necessary to improve our health care system.

The Deputy Speaker (Ms. Soo Wong): Further debate? I recognize the member for Toronto–Danforth.

Mr. Peter Tabuns: Speaker, I rise first to ask for unanimous consent to stand down the lead of our party on this bill.

The Deputy Speaker (Ms. Soo Wong): Is there agreement? Agreed.

I return to the member from Toronto–Danforth.

Mr. Peter Tabuns: Thank you, Speaker. I'm pleased to have the opportunity to comment on this bill. As you are well aware, as everyone in this chamber is aware and, as my guess is, those who are watching on TV, this is an extraordinary province. It is an amazing place. It's got its problems. Still and all, it's a wealthy province and certainly a place where, if anywhere in the world can provide high-quality home care to its seniors, to people who need home care for whatever frailty or infirmity they're dealing with, this should be the place where it's possible for that to happen.

But today, as you're probably well aware from your riding, Speaker, and certainly I'm well aware from mine, too many people can't get the home care they need. They aren't getting enough time with their home care worker. They're not getting heard or having their problems addressed in a timely way. Unfortunately, this bill and this Liberal government are not actually addressing the problem—a problem they could address; a problem that, given our wealth, our resources and the spirit of this province, we could in fact take on and solve.

In fact, I have to say that this Premier is making things worse in our health care system. She's continuing to cut the budgets to hospitals and, I have to tell you, giving an increase at or below the rate of inflation when the

demand for health care, with an aging population and a growing population, is increasing, is in effect a cut, no matter what is said. If we're laying off health care workers, if we fail to address overcrowding in our hospitals, if we fail to repair the \$3.2-billion repair backlog with our hospitals, then we're not doing this health care system and the people who depend on it the justice they deserve. The real problems in our health care system are not being addressed.

This bill, Bill 41, will eliminate the CCACs, the community care access centres. As I said in my earlier comments, whether the services are developed by a local health integration network, a LHIN, or a CCAC, a community care access centre, doesn't change the fundamental problem that we're facing. Just changing one alphabet soup of acronyms for another doesn't deal with the central problem.

We do need to improve our home care services. Frankly, we won't be able to do that as long as those services are delivered by for-profit private providers. This bill will not do a number of critical things: It won't eliminate the home care wait-lists, it won't reduce wait times; and it won't improve service quality and consistency across the province. Speaker, as you are well aware, those are the things that are on people's minds. They don't care what we call the bureaucracy that manages and delivers that service. They really don't. It's completely outside their realm of interest. What they care about is, when they or their mother or their grandmother is in need of home care service, do they get a timely response when they make that request? Do they get a timely assessment? Do they get someone assigned to them, and is that person qualified and in a situation where they have enough hours, enough paid time, to actually do the work that is required? That's what they care about.

Unfortunately, in this province, many home care workers continue to be underpaid, undervalued, working sporadic hours and trying to do their very best to provide care. Now, doing their very best to provide care is not an unfortunate thing; it's a very admirable thing. But given the difficulties that they face, the problems that they have with their pay, with the hours that they're given, with the support that they're given, it's a job that is virtually undoable.

You have to recognize, Speaker, that the Liberal government is expanding the mandates of the local health integration networks without having ever completed the five-year mandatory review of those local health integration networks. Who has actually reviewed these organizations to see if they are capable, if they are cost-effective—if they're effective, period? There was supposed to be a review five years after they were put in place; that review never took place. So we may or may not find that LHINs do a better job than the CCACs, but based on the lack of knowledge that we have now, it is very difficult to say with any certainty what the difference is going to be, exchanging one bureaucracy for another.

I have to say, Speaker, that Conservatives aren't the answer to the problems in home care. They set up the

CCACs in the first place. They started privatizing, started contracting out home care services, and they'll keep privatizing health care services, because in the end, that's what Conservatives do—and apparently Liberals as well, now. There's a commonality in their approach to these matters.

The real problem in home care is that Conservatives and Liberals have created a fragmented and privatized system where profits come before people. My colleague from Parkdale–High Park commented on that earlier. The core virtue, the core secret of health care in Canada is the fact that it's publicly delivered. A single-payer, publicly operated system cuts out whole layers of bureaucracy and profit—most importantly, cutting out those layers of profit. That's what makes it possible for us to deliver health care at a much lower cost than is done in the United States, notwithstanding advances under Obamacare. Still, it's a system built on profit, and thus the cost to the society as a whole is much higher than it would otherwise be, and the quality of the care that's offered to those who need that care is going to be lower.

We all have to recognize that private companies operating in the health care field are not exempt from general rules of business. Those rules are that you cut your costs as low as you can and you maximize your profit, because if you're not doing those things, no one's going to invest in you. If they don't invest in you, you don't have capital and you can't do the work. Not out of any meanness, not out of any lack of virtue or concern, these organizations, these companies are driven to maximize their profit. That is incompatible with the kind of care that people need in their homes, in their hospitals, in their long-term-care centres, in their clinics. A privatized system puts the wrong incentives in the minds and hands of those who are running the system itself.

1730

New Democrats have a different vision and a better vision. We support a public home care system that actually works for people. Cut out the private for-profit operations. Take the personal support workers, take the community care nurses and put them on the public payroll, pay them properly, send them out, get the work done, make sure people have the service they need. That, Speaker, is the most efficient way to provide health care.

I know all kinds of arguments get made: “Well, there's a discipline that comes from privatization.” As my colleague Mr. Kormos would have said, bull feathers. In this, the discipline is driven by public control, should be driven by public control and the necessity of making sure that people have high-quality care that improves the quality of their life and extends their life spans.

Home care, like health care, should be about people, not profits for companies. It speaks volumes that the Liberals are taking no steps in this bill—none, not one—towards moving away from a private system and towards a more publicly controlled system. If they don't do that, the fundamental problems that have plagued people, made them unhappy, and reduced their quality of life will continue to roll along. If you don't deal with the core issue, you can't deal with the rest.

Some background information: Home care funding in Ontario is approximately \$2.5 billion per year, which is a fair chunk of money; I'd say it's a fair chunk of money. We've gotten exercised in this chamber about much less than that. We've had fun fights back and forth, from one side of the room to the other, on amounts that are a hundred times less than that.

There are 800,000 clients of the community care access centres. Over 713,000 of them receive home care services. That is a very large population—bigger than Hamilton, bigger than Ottawa. That is a large grouping of people who need a service that makes a difference in their lives on a day-to-day basis. It can be the difference between them living an independent life and having to be institutionalized; and let's face it, Speaker, none of us and no one that we're close to wants to be institutionalized when they don't absolutely have to be. We want to live our lives independently. That can be done with even a very small amount of support, and that small amount of support can be of higher quality and longer duration if it's publicly run and not privately run.

The community care access centres contract with about 160 private sector service providers to provide home care under 260 separate contracts. There are also 800 community support agencies in Ontario to which clients can be referred.

Clients in Ontario are still put on wait-lists and have to face long wait times to obtain personal support services, sometimes up to 200 days for personal support services—200 days, more than half a year, Speaker. I have to say, when people are not able to look after themselves anymore, when people need home medical support, half a year is an awfully long time to wait.

In 2015, the Auditor General wrote, “At one CCAC we visited, nine times more people were on the wait-list at the end of the fiscal year compared to the beginning of the fiscal year in 2014-15. Within the wait-list, the increase was mainly for clients with high and very high needs.” The wait-lists were growing—growing—not shrinking. This bill will not shrink a single wait-list, will not expedite a single person forward to get the home care that they need.

The Auditor General was very plain in what she had to say. People with high and very high needs were waiting half a year and more to get the sort of support that they required. The Auditor General noted, “All three” of the community care access centres “we visited had wait-lists for personal support services and therapy services.... For instance, one CCAC we visited had over 2,000 people with various needs (complex and non-complex) waiting for personal support services, with wait time ranging from 12 to 198 days.”

Twelve days would be too long; 198 days is scandalous. We are an extraordinary province, blessed with prosperity, able to build an economy that is one of the envied economies of the world, and yet we say to people who need complex care, “You're going to have to wait more than half a year.” How on earth can that be?

Clients also face long wait times for initial assessments. The Auditor General found that “65% of initial

home care assessments ... were not conducted within the required time frames....” So not only is there a wait time once they get on the list, but there’s a pre-wait wait-list. You have to wait around to get assessed before you can be put on the wait-list to get support. That makes no sense. This bill will not deal with that problem, and that’s what people want addressed.

I’ll repeat myself: They do not care what the title is of the bureaucracy that is managing the home care; they just want the home care. To have a bill focus primarily on the title and the bureaucratic organization, rather than focus on making sure people get the support they need in a timely way and get assessed in a timely way, is not going to speak to their needs and concerns.

The Auditor General wrote, “All three CCACs” we visited “maintain central wait-lists.... On average, 275 people were waiting for adult day programs and 380 people were waiting for supportive housing/assisted living programs.... Some people waited for as long as two and a half years for adult day programs, and two years for supportive housing-assisted living programs.” That is an extraordinary length of time to wait. I felt bad that people were waiting for more than six months—but two years for supportive housing/assisted living programs and two and a half years for adult day programs? Think about the human misery that those numbers speak to. Think about the length of time that someone was living with stress or depending on a relative or a friend, or was in a situation where that relative or friend was very stressed.

A number of years ago, I was going door to door on one of the streets of my riding. I think it was Egan Avenue, a modest street behind Gerrard Square, in Toronto–Danforth. I came across a woman who was looking after her husband who had dementia. She started weeping at the door because she could not physically and emotionally deal with the burden of care that was on her shoulders.

Speaker, when we talk about two-year wait-lists and two-and-a-half-year wait-lists, we talk about women and men in their seventies and eighties—frail, battling a variety of health problems—who are often, in turn, the caregivers for someone else in their household who is in even tougher shape. When we deal with this kind of legislation, when we deal with this kind of issue, that’s the reality that we need to have in our minds. That’s the sort of problem that we need to be addressing. This bill—and it is tragic—will not be addressing that.

Whether a person receives personal support services and the amount of services provided, if any, depends on where the person lives in Ontario. Clients with the same assessed needs still receive different levels of service depending on where they live in Ontario.

In 2015, the Auditor General wrote, “A client with a home care assessment score of 15 could receive, every week, up to five hours of personal support services in one CCAC we visited, eight hours in the second, and 10 hours in the third.” Well, my guess is that the person who was getting five hours was not getting the support that they needed. I don’t know if the person who was getting

10 hours was getting the support they needed, but a person getting half that, who had a similar score of complexity or acuity, deserved to have that higher level of care.

1740

Will this bill set those standards of care? Not to my knowledge. I look forward to being corrected by the members from the government benches. Perhaps I have not properly read this bill. Perhaps there are regulations that follow from the bill that will do that. I hope that’s the case. For the moment, as I understand it, that is not the case. I think, Speaker, there is a question of equity and justice. People across Ontario, whether it’s downtown Toronto or whether it’s downtown Hamilton or Timiskaming, whether they’re in Schreiber, Thunder Bay, Kenora, Red Rock or wherever, all deserve an equivalent level of care, because they all contribute to building up this extraordinary society, this extraordinary place, Ontario.

Further reported people experienced “missed visits” and a revolving door of home care workers, because home care workers are scheduled in impossible ways—that is, they’re double-booked. They’re not given enough time to drive between homes, not given enough time to perform the care that is required. Even if we deal with the wait-times issue, even if we deal with the whole issue of equity of the amount of time people should be getting service for in their homes, because of other structural problems, they may still not get the care they need, because the personal support workers can’t teleport themselves from one home to the next. They actually have to drive on roads, where there are other cars. They have to take subway trains that sometimes break down. If you schedule people too tightly, you make a job load impossible, and in the end the fallout comes on those who deserve the care.

I can see that my time is running out, but Speaker, this is an issue that will become increasingly larger and more demanding. This bill will not address this issue. I call on the government to work with everyone in this chamber to make the bill better, but to go far beyond that and start to address the structural issues around funding, around moving away from private, for-profit care to publicly funded, publicly administered care and spend a lot less time worrying about the title and name of the organization that actually organizes the home care.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Hon. Jeff Leal: I listened very carefully, actually with my earpiece in, to the member from Toronto–Danforth, who I think, as did others like the member from Elgin–Middlesex–London, contributed significantly to the debate this afternoon. Of course, we heard the opening remarks yesterday by Dr. Hoskins.

I just want to present something. The LHIN that I’m part of, the Central East LHIN, goes from Algonquin Park to Brighton to Scarborough. You can appreciate why, from my area’s perspective, a sub-LHIN is needed, because Peterborough, city and county, is a health care

entity unto its own. We service the cities of Kawartha Lakes and Lindsay, Ontario, and we service down to the lakeshore at Port Hope and Cobourg, because the regional hospital in Peterborough—a brand new hospital built under our watch—is the real hub for that area. So I think it's extremely important that we take a look at it.

Look at Scarborough, for example. Madam Speaker, your part of Scarborough is part of our LHIN, but one street over, the next hospital is in the Central LHIN. I see that you would have more of a relationship with those other health care entities in Scarborough, and though we like you in Peterborough, there's a big difference between us, Durham region, Algonquin Park and Brighton.

So part of what I think the minister is getting at with this bill is to look at some of those geographic problems which provide barriers in delivering health care service. I can't speak for Toronto, because the member is far more knowledgeable in this area than I am, but in my area, we have the Central East LHIN and the Central East CCAC virtually tripping over each other in terms of delivering health care in my area. The premise, from what the minister said yesterday, is that by folding the CCACs into the LHINs, it will start to free up those valuable front-line dollars that are needed to put more resources into the front lines to address some of the concerns that were, in a very articulate fashion, put forward by the member from Toronto–Danforth this afternoon. That's the kind of debate I think we should be having as this bill moves forward.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Ms. Lisa M. Thompson: I'm pleased to offer my voice and comments to the member from Toronto–Danforth. He raised some very good issues this afternoon.

First thing's first: It's interesting that the member from Peterborough just talked about the importance of freeing up front-line health care dollars. That is exactly the basis for our concern over the manner in which the government of the day has completely blown the bureaucracy in terms of size—it has escalated to an unmanageable level. So I think it's a little rich, a little ironic that he's talking, on one hand, that we need to free up valuable front-line dollars but, on the other hand, the member from Elgin–Middlesex–London spoke of the fact that the bureaucracy has increased significantly. You can't have it both ways. We need to think about how we go about this appropriately because we do need those precious front-line health care dollars. That's where I'd like to touch on my appreciation of the member from Toronto–Danforth bringing up the whole issue around PSWs.

Just over the last three weeks alone, I've met with PSW workers in both my constituency office in Blythe, as well as Kincardine, and I've met with seniors, partners and husbands and wives who are issuing and sharing concerns over the—“frustrations,” I think, is a better word to use. We heard a reference to tripping over each other. Well, the fact of the matter is that PSW workers

right now are actually at a disadvantage—the distance they have to travel and the manner in which their schedules are crazy. They're expected to be in Kincardine at one hour and travel an hour and a half to meet with another client. Unfortunately, those clients are not getting the service they need at the right time and with the right care at hand. We have to do better, and I hope we can get there. I'm not sure.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Ms. Cheri DiNovo: As always, the member from Toronto–Danforth gave a well-researched and well-thought-out critique of this Bill 41 and its inadequacies, quite frankly, in addressing the problems that people find with home care, my in-laws among them, who were told by their CCAC that unless my mother-in-law left the stove on, they probably wouldn't get care—a personal anecdote. Then the question is, do you lie or do you let a woman who has early onset dementia and her husband who is failing not get home care? That's not acceptable.

He went over very clearly—you know, just moving CCAC bureaucracy to LHIN bureaucracy doesn't do anything about front-line care. We know, with the Auditor General, that even with the LHINs about 50% of the money goes to administration. Anybody watching the debate last night between Hillary and Donald will know that they were talking about how much money goes to administration and how much is delivered to actual front-line care. Fifty per cent wouldn't satisfy anybody who was contributing to a charity, never mind public dollars.

Privatization and private companies need to make a profit, Madam Speaker. That's the nature of the beast of business. There's nothing wrong with business but those precious dollars are taken out of our public health care system and out of front-line care. Particularly those who have shareholders have to answer to their shareholders with a profit. Where does the profit come from? It comes from somewhere.

Again, the member from Toronto–Danforth's comments gave a very good synopsis of the problems with the bill and the problems with our health care under this government.

The Deputy Speaker (Ms. Soo Wong): Questions and comments?

Hon. Glen R. Murray: It's interesting to me—health care for me in Ontario has been a very personal thing because my partner, Rick, is an operating room nurse. I've watched the improvement in his quality of life from when we were in Winnipeg where, when I was mayor, I think he worked longer hours than I did and got called in for overtime scheduling. When I got back into politics, I had to sign a commitment that I would get four weeks off that we would just spend together, because we didn't want that. It was interesting: This time I didn't have to make the same demand, because he works a regular work week right now. He has better income, better work, better professional supports, a better pension, better benefits. It's probably the best he's been in Canada, because he has worked in a number of different areas.

It's a fairly phenomenal thing that we sometimes take for granted, unless you've experienced it with your professionals. I think nurses and PSWs are the unsung heroes. We take good care of our doctors—and we should; they're fabulous. Our nurses are pretty awesome and our PSWs are finally getting up there, but we have a lot more to do.

My mom is also aging, and I'm her whole support. She lives a couple of blocks from here. I love this woman. She is a hero of mine, if you know her life's journey. She grew up when there wasn't medicare with seven kids and two parents who didn't speak English—a father who had a stroke and couldn't work—so my grandmother basically raised the family. She has had battles with cancer and she is resilient, but the level of care and support that she gets, for a very independent woman in her late eighties, is phenomenal. I've seen a system that works really well.

I take the point that the member from Toronto–Danforth is making, but there is a need for governance change. Certainly the Toronto Central LHIN—I'm very pleased with it. It has certainly taken some of the power that was hospital-based and allowed our community health centres and our community providers—I think rolling the CCACs allows us to actually create a network and a balanced service.

It is a governance issue, primarily. It isn't trying to fix the whole system, but God knows, until we fix the governance system, we're not going to be able to fix the whole system. Otherwise, we'll be playing whack-a-mole from Queen's Park, and that won't work.

The Deputy Speaker (Ms. Soo Wong): I now return to the member from Toronto–Danforth to wrap up.

Mr. Peter Tabuns: My thanks to the Minister of Agriculture, Food and Rural Affairs, the member for Huron–Bruce, the member from Parkdale–High Park and the Minister of the Environment and Climate Change. I appreciate the comments that all of you made.

The Minister of Agriculture, Food and Rural Affairs' thoughtful comments: I appreciated the fact that you were actually listening to me intently. For those who aren't here, it can be an unusual thing. It can be a very unusual thing.

But I think the issue, though, Minister, that both ministers are going to have to address—you're talking about this change in the bureaucracy as freeing up money that will be available to redeploy to the front lines. I think you need to quantify that, because I have a suspicion that there's going to be less of a savings than is currently being touted. But to move this forward: You've made a substantial point. I would ask you to bring substantial backup on that. But again, I appreciate your thoughtful comments.

The member from Huron–Bruce: to have a constituency office in Blyth, Ontario, what a wonderful thing—home to the Blyth Festival, a wonderful town. I take your point quite well. PSWs who operate in your community are ping-ponging back and forth along very wide-ranging road systems, and to keep up from Clinton to Blyth to wherever—Brussels, all around that area—you are going to have to drive awfully fast, perhaps faster than you should be doing, to keep up.

This whole question of making sure that there are enough PSWs, and that they're properly scheduled and properly paid, is one that I think all of us in this House are going to have to deal with if we want community care for our families and, ultimately, for ourselves. I think we need to be thinking about this very personally, as well as thinking about the larger social issues.

Again, thanks to all who commented on a late, rainy Thursday afternoon.

Second reading debate deemed adjourned.

The Deputy Speaker (Ms. Soo Wong): Seeing the time on the clock, this House stands adjourned until Monday, October 24, 2016, at 10:30.

The House adjourned at 1754.

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Jones, Sylvia (PC)	Dufferin–Caledon	Deputy Leader, Official Opposition / Chef adjointe de l'opposition officielle
Kiwala, Sophie (LIB)	Kingston and the Islands / Kingston et les Îles	
Kwinter, Monte (LIB) Lalonde, Hon. / L'hon. Marie-France (LIB)	York Centre / York-Centre Ottawa–Orléans	Minister of Government and Consumer Services / Ministre des Services gouvernementaux et des Services aux consommateurs Minister Responsible for Francophone Affairs / Ministre déléguée aux Affaires francophones
Leal, Hon. / L'hon. Jeff (LIB)	Peterborough	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
Levac, Hon. / L'hon. Dave (LIB)	Brant	Speaker / Président de l'Assemblée législative
MacCharles, Hon. / L'hon. Tracy (LIB)	Pickering–Scarborough East / Pickering–Scarborough-Est	Minister Responsible for Accessibility / Ministre responsable de l'Accessibilité Minister Responsible for Women's Issues / Ministre déléguée à la Condition féminine Minister Without Portfolio / Ministre sans portefeuille
MacLaren, Jack (PC) MacLeod, Lisa (PC) Malhi, Harinder (LIB) Mangat, Amrit (LIB)	Carleton–Mississippi Mills Nepean–Carleton Brampton–Springdale Mississauga–Brampton South / Mississauga–Brampton-Sud	
Mantha, Michael (NDP) Martins, Cristina (LIB) Martow, Gila (PC) Matthews, Hon. / L'hon. Deborah (LIB)	Algoma–Manitoulin Davenport Thornhill London North Centre / London- Centre-Nord	Chair of Cabinet / Présidente du Conseil des ministres Deputy Premier / Vice-première ministre Minister of Advanced Education and Skills Development / Ministre de l'Enseignement supérieur et de la Formation professionnelle Minister Responsible for Digital Government / Ministre responsable du Gouvernement numérique
Mauro, Hon. / L'hon. Bill (LIB) McDonell, Jim (PC) McGarry, Hon. / L'hon. Kathryn (LIB)	Thunder Bay–Atikokan Stormont–Dundas–South Glengarry Cambridge	Minister of Municipal Affairs / Ministre des Affaires municipales
McMahon, Hon. / L'hon. Eleanor (LIB)	Burlington	Minister of Natural Resources and Forestry / Ministre des Richesses naturelles et des Forêts Minister of Tourism, Culture and Sport / Ministre du Tourisme, de la Culture et du Sport
McMeekin, Ted (LIB)	Ancaster–Dundas–Flamborough– Westdale	
McNaughton, Monte (PC) Milczyn, Peter Z. (LIB) Miller, Norm (PC) Miller, Paul (NDP)	Lambton–Kent–Middlesex Etobicoke–Lakeshore Parry Sound–Muskoka Hamilton East–Stoney Creek / Hamilton-Est–Stoney Creek	Third Deputy Chair of the Committee of the Whole House / Troisième vice-président du comité plénier de l'Assemblée législative

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Moridi, Hon. / L'hon. Reza (LIB)	Richmond Hill	Minister of Research, Innovation and Science / Ministre de la Recherche, de l'Innovation et des Sciences
Munro, Julia (PC)	York-Simcoe	
Murray, Hon. / L'hon. Glen R. (LIB)	Toronto Centre / Toronto-Centre	Minister of the Environment and Climate Change / Ministre de l'Environnement et de l'Action en matière de changement climatique
Naidoo-Harris, Hon. / L'hon. Indira (LIB)	Halton	Associate Minister of Education (Early Years and Child Care) / Ministre associée de l'Éducation (Petite enfance et Garde d'enfants)
Naqvi, Hon. / L'hon. Yasir (LIB)	Ottawa Centre / Ottawa-Centre	Minister Without Portfolio / Ministre sans portefeuille Attorney General / Procureur général Government House Leader / Leader parlementaire du gouvernement
Natyshak, Taras (NDP)	Essex	
Nicholls, Rick (PC)	Chatham-Kent-Essex	Second Deputy Chair of the Committee of the Whole House / Deuxième vice-président du comité plénier de l'Assemblée législative
Oraziotti, Hon. / L'hon. David (LIB)	Sault Ste. Marie	Minister of Community Safety and Correctional Services / Ministre de la Sécurité communautaire et des Services correctionnels
Pettapiece, Randy (PC)	Perth-Wellington	
Potts, Arthur (LIB)	Beaches-East York	
Qaadri, Shafiq (LIB)	Etobicoke North / Etobicoke-Nord	
Rinaldi, Lou (LIB)	Northumberland-Quinte West	
Sandals, Hon. / L'hon. Liz (LIB)	Guelph	President of the Treasury Board / Présidente du Conseil du Trésor
Sattler, Peggy (NDP)	London West / London-Ouest	
Scott, Laurie (PC)	Haliburton-Kawartha Lakes-Brock	Deputy Opposition House Leader / Leader parlementaire adjointe de l'opposition officielle
Sergio, Mario (LIB)	York West / York-Ouest	
Singh, Jagmeet (NDP)	Bramalea-Gore-Malton	Deputy Leader, Recognized Party / Chef adjoint de parti reconnu
Smith, Todd (PC)	Prince Edward-Hastings	
Sousa, Hon. / L'hon. Charles (LIB)	Mississauga South / Mississauga-Sud	Minister of Finance / Ministre des Finances
Tabuns, Peter (NDP)	Toronto-Danforth	
Takhar, Harinder S. (LIB)	Mississauga-Erindale	
Taylor, Monique (NDP)	Hamilton Mountain	
Thibeault, Hon. / L'hon. Glenn (LIB)	Sudbury	Minister of Energy / Ministre de l'Énergie
Thompson, Lisa M. (PC)	Huron-Bruce	
Vanthof, John (NDP)	Timiskaming-Cochrane	
Vernile, Daiene (LIB)	Kitchener Centre / Kitchener-Centre	
Walker, Bill (PC)	Bruce-Grey-Owen Sound	
Wilson, Jim (PC)	Simcoe-Grey	Opposition House Leader / Leader parlementaire de l'opposition officielle
Wong, Soo (LIB)	Scarborough-Agincourt	Deputy Speaker / Vice-présidente
Wynne, Hon. / L'hon. Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales Premier / Première ministre Leader, Liberal Party of Ontario / Chef du Parti libéral de l'Ontario
Yakabuski, John (PC)	Renfrew-Nipissing-Pembroke	
Yurek, Jeff (PC)	Elgin-Middlesex-London	
Zimmer, Hon. / L'hon. David (LIB)	Willowdale	Minister of Indigenous Relations and Reconciliation / Ministre des Relations avec les Autochtones et de la Réconciliation
Vacant	Niagara West-Glanbrook / Niagara-Ouest-Glanbrook	
Vacant	Ottawa-Vanier	

**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
Bob Delaney, Cheri DiNovo
Joe Dickson, Han Dong
Michael Harris, Sophie Kiwala
Arthur Potts, Todd Smith
Monique Taylor
Committee Clerk / Greffier: Eric Rennie

**Standing Committee on Finance and Economic Affairs /
Comité permanent des finances et des affaires économiques**

Chair / Président: Peter Z. Milczyn
Yvan Baker, Toby Barrett
Han Dong, Victor Fedeli
Catherine Fife, Ann Hoggarth
Cristina Martins, Peter Z. Milczyn
Lou Rinaldi
Committee Clerk / Greffier: Eric Rennie

Standing Committee on General Government / Comité permanent des affaires gouvernementales

Chair / Président: Grant Crack
Vice-Chair / Vice-président: Lou Rinaldi
Yvan Baker, Mike Colle
Grant Crack, Lisa Gretzky
Ann Hoggarth, Harinder Malhi
Jim McDonell, Lou Rinaldi
Lisa M. Thompson
Committee Clerk / Greffière: Sylwia Przewdziecki

Standing Committee on Government Agencies / Comité permanent des organismes gouvernementaux

Chair / Présidente: Cristina Martins
Vice-Chair / Vice-présidente: Daiene Vernile
James J. Bradley, Raymond Sung Joon Cho
Wayne Gates, Monte Kwinter
Amrit Mangat, Cristina Martins
Randy Pettapiece, Shafiq Qadri
Daiene Vernile
Committee Clerk / Greffière: Sylwia Przewdziecki

Standing Committee on Justice Policy / Comité permanent de la justice

Chair / Président: Shafiq Qadri
Vice-Chair / Vice-président: Lorenzo Berardinetti
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Bob Delaney, Randy Hillier
Michael Mantha, Arthur Potts
Shafiq Qadri, Laurie Scott
Daiene Vernile
Committee Clerk / Greffier: Christopher Tyrell

Standing Committee on the Legislative Assembly / Comité permanent de l'Assemblée législative

Chair / Président: Monte McNaughton
Vice-Chair / Vice-président: Steve Clark
Granville Anderson, Robert Bailey
James J. Bradley, Steve Clark
Vic Dhillon, Sophie Kiwala
Michael Mantha, 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
John Fraser, Ernie Hardeman
Percy Hatfield, Monte Kwinter
Lisa MacLeod, Harinder Malhi
Peter Z. Milczyn, Julia Munro
Arthur Potts
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: Ted McMeekin
Vice-Chair / Vice-président: Joe Dickson
Lorenzo Berardinetti, Grant Crack
Joe Dickson, Jennifer K. French
Ted McMeekin, Mario Sergio
Bill Walker, Soo Wong
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
Granville Anderson, Lorne Coe
Vic Dhillon, John Fraser
Amrit Mangat, Gila Martow
Ted McMeekin, Jagmeet Singh
Peter Tabuns
Committee Clerk / Greffier: Katch Koch