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Président : L'honorable Ted Arnott
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LEGISLATIVE ASSEMBLY OF ONTARIO

Tuesday 5 March 2019

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mardi 5 mars 2019

The House met at 0900.

The Speaker (Hon. Ted Arnott): Let us pray.
Prayers.

ORDERS OF THE DAY

TIME ALLOCATION

Hon. Michael A. Tibollo: I move that, pursuant to standing order 47 and notwithstanding any other standing order or special order of the House relating to Bill 66, An Act to restore Ontario's competitiveness by amending or repealing certain Acts, 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

That at such time the bill shall be ordered referred to the Standing Committee on General Government; and

That the Standing Committee on General Government be authorized to meet on Monday, March 18, 2019, from 9 a.m. to 10 a.m. and from 2 p.m. to 6 p.m. for 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 66:

—That the deadline for requests to appear be 10 a.m. on Friday, March 8, 2019; and

—That the Clerk of the Committee provide a list of all interested presenters to each member of the subcommittee and their designate following the deadline for requests to appear by 1 p.m. on Friday, March 8, 2019; and

—That each member of the subcommittee or their designate provide the Clerk of the Committee with a prioritized list of presenters to be scheduled, chosen from the list of all interested presenters received by the Clerk, by 12 noon on Tuesday, March 12, 2019; and

—That each witness will receive up to six minutes for their presentation, followed by 14 minutes divided equally amongst the recognized parties for questioning; and

That the deadline for filing written submissions be 6 p.m. on Monday, March 18, 2019; and

That the deadline for filing amendments to the bill with the Clerk of the Committee shall be 6 p.m. on Monday, March 18, 2019; and

That the Standing Committee on General Government shall be authorized to meet on Wednesday, March 20, 2019 from 9 a.m. to 10:15 a.m. and from 2 p.m. to 6 p.m. and Monday March 25, 2019, from 9 a.m. to 10:15 a.m. and from 3 p.m. to 8 p.m. for clause-by-clause consideration of the bill; and

That on Monday, March 25, 2019, at 5:30 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 Tuesday, March 26, 2019. 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 General Government, 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 notwithstanding standing order 81(c), the bill may be called for third reading more than once in the same sessional day; and

That in the event of any division relating to any proceedings on the bill, the division bell shall be limited to 20 minutes.

The Acting Speaker (Mr. Percy Hatfield): The minister has moved government motion number 32. Does the minister want to lead off the debate? No? Further debate?

Mr. Sam Oosterhoff: It's a real privilege to be able to rise today in the Legislature and represent the good people of Niagara West as we speak to the various issues that arise in this provincial Legislature.

Of course, today we have the opportunity to speak to a time allocation motion with regard to Bill 66, an important piece of legislation that I feel confident needs to move forward in the legislative process expeditiously. I'm going to be speaking a little bit about that.

Speaker, I first wanted to quote Haruki Murakami in *Dance Dance Dance* when he says, "Unfortunately, the clock is ticking, the hours are going by. The past increases, the future recedes. Possibilities decreasing, regrets mounting."

Speaker, we enter the seventh month of a four-year term that our majority government was given last June. To those of us who were elected prior, it has been an amazing time to see the amount of action that a government such as ours is taking for the good people of Ontario, moving forward with a clear agenda for good jobs, for prosperity, putting money back into the pockets of hard-working Ontarians, cleaning up hallway health care and increasing trust and accountability in government.

It's incredibly inspiring for me, as a young person, to see how quickly our government is taking action to turn this province around, to make sure that there's a bright future for those young people who, quite frankly, up until very recently, had been losing hope, who had seen skyrocketing debt under the former Liberal government, who had seen a lack of jobs and youth unemployment rising, who had seen an increasingly out-of-touch government that failed to see where the future was going when it came to the emerging economy, that had failed to properly equip young people for the jobs of the future, and that, frankly, was indulging in burdensome regulation and red tape that was cutting back on businesses.

Because I'm speaking to a time allocation motion this morning, I want to be very careful with where I go in this regard, but since time allocation is one of those subjects that I know arouses quite a fury of emotions from all the sides of the Legislature, I want to also quote Roy T. Bennett, who, in speaking about time, said, "Don't waste your time in anger, regrets, worries, and grudges. Life is too short to be unhappy"—a very, very wise quote from a wise man. I wanted to, of course, bring that to the attention of those in the opposition who, I fear, may speak to this motion from a concern around this time allocation motion.

We don't do these types of things too flippantly. We do them because it's necessary to move forward with an agenda that will set the future course of Ontario in a prosperous direction, one where there are jobs, one where there is prosperity for all Ontarians. That's really what the motivation is behind Bill 66 as well. It's why we feel it's so important to move this forward.

The last seven months have been a bit of a blur, I think it's fair to say, for all of us now being back here in the Legislature for the last few weeks. I can't believe it has already been a few weeks since we came back. In that time, we've already moved forward with transformative health care legislation. We've moved forward on Bill 66 as well. It's because of these pieces of legislation that I see hope springing eternal in the hearts of youth across Ontario when I speak to them about where our government is going.

One of those reasons is because when we saw what happened under the Liberal government, whether it was quantitatively or qualitatively—the increase in red tape and burdensome, onerous pieces of red tape on the lives of small businesses, on job creators and on individuals, simply was ballooning out of control. The numbers spoke for themselves. Having over 280,000 regulations under the former Liberal regime was a number that we have nothing to be proud of, frankly. When we look at jurisdictions such as British Columbia, with roughly 170,000 regulations—and a pretty good place to live, if I may say so, having some family out there myself and having visited a number of times—it's impressive that the former government was so willfully blind to the damage that they were doing to the entrepreneurial spirit here in the province of Ontario, to those hard-working men and women who wake up every morning hoping to make ends meet, hoping that they can employ one more person, hoping that the risks they've

taken investing their home, taking out a line of credit, perhaps, on their home to start a new business, remortgaging their home, will pay off, that they'll be able to move forward in the economy, that they'll be able to provide for themselves and their family.

0910

One of the things that we heard time and time again—and I know it wasn't just me; it was many members in this Legislature, including those from the opposition benches. We have heard from small businesses in our communities who say, "One of the major problems we're facing is this burdensome, choking red tape"—this red tape that, again, takes time. We're talking about a time allocation motion. Time is money. Time is money for these businesses. Every hour that we stand here debating this legislation, not moving it forward in the next step of the legislative process, means that's another hour that these businesses are facing that burdensome enemy of red tape holding their businesses back.

Benjamin Franklin once said, "You may delay, but time will not." So I want to urge the opposition members, as they speak to this motion, to think a little bit about where this legislation takes us—how it takes us to a place where people don't have to worry about putting food on the table because they know they have a steady, reliable job at the end of the day; where people aren't so concerned about whether or not they're going to have that position in a year, because they know there's a government that's working hard to make sure that there are good jobs, that we're competing with our neighbours south of us, and that we're more competitive than our neighbouring jurisdictions.

It's so important, in this House, as we think about time, as we look at the time that we have left in our mandate, as we look at the time pass, that we consider if what we're doing is for the good of the people, and I'm so convinced that Bill 66 is. I'm so convinced that this time allocation motion is necessary to move the clock forward and make sure that we're doing what is in the best interests of Ontarians.

One last quote, Speaker: I just want to quote Jean de La Bruyère, in "Les Caractères," who says, "Those who make the worst use of their time are the first to complain of its brevity." So I hope the opposition won't complain about my brevity this morning.

The Acting Speaker (Mr. Percy Hatfield): Further debate?

Mr. Gilles Bisson: I'll start like I started yesterday: debating yet another time allocation motion. It does not please me to participate in this debate. Normally, members get up and say, "I'm so pleased and honoured to be able to comment on this law" or whatever it might be. But this is, yet again, another time allocation debate.

Before I get into this particular motion, I just want to respond to some of the comments that were made by the member opposite and to talk about how necessary this time allocation motion is.

My Lord, Mr. Speaker, did you know the world is going to come to an end if we don't pass this time allocation today, and there will be no bread on the tables by tomorrow if we don't do this today? That's essentially the

argument we're getting from across the aisle. They forget that the British parliamentary system, which was designed over a period of hundreds of years, put in place some checks and balances so that governments, being the executive, when they propose a law and bring it to the legislative—which is us here in the chamber—that there is due process and ability for members to adequately debate the bill—I wouldn't argue you have to debate bills ad infinitum—so that the issues can be put on the table, so that the government can reflect: “Oh, we haven't thought about that. Maybe this has to be changed,” or whatever.

More importantly, they established a committee process. A committee process, Mr. Speaker, isn't about you and I as members; it's about the public, and it's the one place in the British parliamentary system in which it was designed that the public can get to us when we draft legislation. Because this is the people's House. We are spending the money of the people of Ontario by virtue of the decisions that we make here in the Legislature and what the executive decides at cabinet when it comes to where they want to spend the money.

I would think that those who give us the money should have the respect of being heard when it comes to what governments are doing, good or bad. If the government has a law that people are happy with, they should have as much right to come before committee to talk about the good parts of the law that they believe in, as a person who comes before committee who may have a problem with the law.

For the government to stand up and say, “Let me quote Benjamin Franklin; let me quote Mr. Bennett and others” about how we have to be moving things quickly because if we slow things down, at the end of the day it's going to be the end of the world, because it's just so darn important, flies in the face of over 300 years of history when it comes to how a Legislature is supposed to work.

The people are what this place is all about, Mr. Speaker. If the Legislature, and, I would argue, the government as the executive, decides that it doesn't want to hear from the public and circumvents the process and shuts the public out from having its say about a bill—good, bad, or indifferent—then shame on them. Because it means to say that the government—in this case, the “government of the people”—is not about the people; it's about corporate interests and the people that they write the laws for.

Does anybody believe that Bill 66 is about constituents in our ridings that are working hard every day, trying to go to work to make a living? This bill is about helping those people that they want to help in the business community.

Now, the government will argue that this is all—

Mr. Sam Oosterhoff: No.

Mr. Gilles Bisson: They're heckling over there, but that's okay.

The government is arguing, “All you've got to do is get rid of all this red tape and everything is going to go away,” and that any government regulation is called red tape. Well, let me put this akin to something: Is the speed limit on a highway red tape? Imagine if you didn't have speed limits on Highway 11 or Highway 7 or whatever highway it was. We'd have a lot more accidents than we have. We

came to a decision. We made a conscious decision about posting speed limits based on experience on highways, in order to provide for public safety and to better give the ability to travel from point A to point B, and to get there in some reasonable amount of time and not be stuck behind a bunch of accidents.

When they talk about regulation being red tape, it's a little bit the same thing. For example, Mr. Speaker, there was a town. I think it was called Walkerton; you might remember it. In Walkerton, the regulations—as they say, “red tape”—were very lax when it came to what they could and couldn't do when it came, as in cities across Ontario and towns across Ontario, to the handling of water. At the time the Premier—I think his name was Harris: another Conservative. And boy, they just didn't want to do anything in order to burden down the private sector in being able to make money and do the things that they had to do, so they were very lax when it came to what kinds of regulations they were going to stand for when it came to the handling of water.

Well, we all remember what happened, Mr. Speaker. The lack of proper regulation, when it came to Walkerton, is what led to the deaths of a number of people. About a dozen people died in Walkerton after they opened the tap in their home and they drank the water. Thousands of people got sick, because the regulations didn't provide for protection of the water, especially what happened in the groundwater. It was a question that the groundwater had gotten contaminated from certain actions. The regulations didn't provide for proper protection of the water, and as a result, people died and people got sick.

So, guess what? The Harris government, the Conservatives—they were the anti-red-tape Conservatives—decided to tighten up the regulations because they understood that all regulations are not necessarily bad.

Are there some regulations that could be changed? I would argue probably yes, but the basic concept of regulations is that when something such as Walkerton goes very badly and people get hurt or killed, we learn from that and then we try to make laws and try to make sure the regulations to those laws are written in a way to make sure that that type of tragedy doesn't happen again. This government argues all red tape is bad, and I'm just saying that that's a very simplistic view.

0920

There used to be a time called the Middle Ages and the Dark Ages when there was no red tape; there were no regulations. The King's word was law; it was as simple as that. If they decided to take your head off, they did it. But over the years, we decided that we have to have laws to protect citizens, protect property and protect various things, and so the people took it upon themselves to create Legislatures in order to protect laws to protect themselves from the avarices of too much power.

These guys across the way are trying to bring us back to the Dark Ages. If I listen to the logic of what the Conservatives talk about in this Legislature when it comes to red tape, their logic is: All red tape is bad. Well, Mr. Speaker, that is not the case. Can some of the red tape and

regulations be made in a way that works better? I would argue that that's probably not a bad thing. But if you want to do that, there's a committee in this Legislature called regs and private bills. There's a whole section in our standing orders about how the government and the members can use that committee to review regulations in order to see if they need to be modernized. I would argue that some of them need to be modernized. But to make an argument such as the government has been making in this bill that we're now time-allocating, that all regulation is bad, is, quite frankly, a pretty dangerous argument, because there are plenty of things that we do in order to protect the people, the environment, and our society.

Let me just give you but one. I come from a place called Timmins. It's kind of a mining centre. We have mines, and have had mines for over 100 years, in Timmins. As you go underground and you develop the underground, or you go open-pit and you develop the pit, and you process the ore, you have tailings dams. We take the rock, we crush it, we mix it with water and various chemicals, we put it through mechanical processes, and we extract the gold or the copper or whatever you might be mining. The residue is what we call, in mining terms, slimes, which go into tailings.

Guess what? There are regulations as to how you build a tailings dam. You think that may be a good idea? Because I'll tell you what's a bad idea. Did you see what happened in South America? How many people died, member from Danforth?

Mr. Peter Tabuns: Forty.

Mr. Gilles Bisson: Forty? The tailings dam failed for Vale—it happens to be a mining company that operates a pretty significant mine in Sudbury. Where there is a lack of regulation, where there is no red tape, where you can do what the heck you want—because, quite frankly, government has given those people the ability to do so—the tailings dam failed and 40 people died. We call that red tape? I call that bad government. I call that a failure on the part of a South American government to deal adequately with how you store tailings behind a tailings dam. If that happened, it happened because of that lack of protections that are needed.

Here in Canada, we have regulations when it comes to tailings dams. You don't see the types of failures that you're seeing in places like South America, because in our mining community—and right now we've got the PDAC, the Prospectors and Developers Association of Canada, in Toronto as we speak. There are mining jurisdictions from around the world that are here—people in the mining sector, people from government—and they come to Toronto to this convention.

One of the reasons they come here is that Ontario, and Canada, is one of the best places to mine, not only because of geology but because we got some pretty good rules about how to do it. We say, when you develop a mine, that you're not going to kill all the workers by way of injecting them with dust and chemicals and fumes. We're going to make sure that the mine is safe; that when a miner goes to work in the morning, he or she can come back home at

night and be relatively sure that they're going to get home; and that whatever we discharge into the atmosphere is done in a way that makes it less harmful to the atmosphere overall.

So I challenge any one of you to come to Timmins and take a look at our mining community and look at our mining operators. They're pretty good customers. They do a pretty darn good job. They make sure that when they dump their effluent into the tailings dam, it's done in a way that is safe and that we protect the environment and the people around it.

I live at a place called Kamiskotia Lake. I hear people back there talk about God's country. I don't have curtains in my place. I've got all windows on the wall facing the lake. That's God's country, every morning, when you look at that lake. But I also happen to live by one of the worst mining disasters, when it comes to a tailings dam, in the history of Ontario and Canada: the old Kam Kotia mine. What happened there, at a time when there was no red tape—the member from Davenport would know this. Is it Davenport? No, not Davenport.

Mr. Peter Tabuns: Toronto–Danforth.

Mr. Gilles Bisson: Toronto–Danforth; sorry. He would know that there was no red tape back during the Second World War. They decided to go after the copper in this mine, and there was another mineral—I can't remember what it was called—that was essential to making steel. The Ontario government gave them an operating permit to start up a mine and to mill the ore as quickly as possible in order to provide for the war effort. They essentially made very poor tailings dams. The tailings dams that the effluent was put in behind were very structurally unsound. They failed. As a result—I invite any of you to come out to where I live, out at Kamiskotia Lake—the environmental disaster that that mine created was horrendous. Essentially, the tailings dams failed, with the entire ground going towards the river, which flows out of the lake I'm on—the tailings dam effluents were going into that river. It was also going north of there into Big Kamiskotia River.

I remember going for a fishing trip with my brother. I got to the point where the groundwater coming up from the ground into the river was red plumes. It was like cyanide. It killed the river. There were no more fish there. Myself and other people, when we saw it, we reported it.

Thank God that when the NDP was in power, we created the mine reclamation act, which provided for regulations about how you do this stuff. It started under the Harris Tories, because the law that we created while we were in government made it that mining companies that operate a mine have to put money aside to make sure that when they close, they rehabilitate the ground back to what it was before they actually started the mine.

In cases of mines like Kam Kotia that were closed, defunct and bankrupt, there was a fund set up that we could draw money from in order to do cleanups. We have spent literally tens of millions of dollars on the Kam Kotia mine cleanup. As you drive there today, we're pulling all of the tailings off of the ground from the Little Kamiskotia River all the way up to the mine and putting it back in new

tailings dams. They're digging into the ground to get that all out.

They've been recycling the groundwater for the better part of 15 years so that the water table can come back. Our lake was not affected. We were lucky, because the spill happened on the outflow of the lake. But if we would have been on the other side—in other words, if it had been the intake—we would have lost the lake entirely, and all of the people who have cottages, and people who live on that lake, like I do, would have had to move. It would have been worthless, all because there was no regulation, all because—exactly what the government wants—there was no red tape.

The mining community back then had no red tape. They just did what they wanted, and they made money; no question. They made lots of money. But guess who's paying for the cleanup today? You and I, out of our taxes. They've absconded with the profits that they made while they ran that mine, until about 1978, and they skipped the country, and they left us holding the bill. It's always you and I, the taxpayer, who are on the hook to pay. That's why governments put in place regulation: in order to prevent that type of stuff from happening.

I listen to this government across the way saying, "All regulation is bad and gets in the way," and we get the scholarly speeches. I just listened to the scholarly speech from my colleague across the way. What they're going on about is that red tape is bad. They're trying to say that regulation equals red tape, and that equals bad for business. I argue that there's a reason why we put regulation in place. When it comes to the Kam Kotia mine, that's exactly why you need to have regulations. If you don't believe what happened to the Kam Kotia mine, take a look at what happened in South America at the tailings dam over there, where over 40 people were killed because there was no regulation to contain tailings behind a tailings dam. So, yes, we have regulation.

0930

The government says in Bill 66, "What we're going to do is that we're going to weaken the provision of the toxic chemical act"—

Hon. Jeff Yurek: Your comparison is weak.

Interjections.

The Acting Speaker (Mr. Percy Hatfield): Minister of Transportation, you're not being helpful this morning carrying on across-the-aisle dialogue as we're trying to listen to the member from Timmins discuss the bill that your government introduced.

The government members will please come to order. It is never too early to be warned or named, just as a reminder. It can happen in the morning and it can carry over into the afternoon and during question period as well.

We'll return to the member from Timmins.

Mr. Gilles Bisson: I had to stop to listen to the heckle because I thought I heard what I heard, and it was as silly as what I heard.

It's actually a right-wing government that's in power there, as you know, and it was a right-wing government for years. There are socialists that have taken over at times,

but, by and large, the regulatory process established in South America is far from what it needs to be. If you're thinking that regulations are a bad thing, I'm just proposing you take a look at the environmental disasters and the lives which have been lost as a result of not having good regulation, and just ask you to look at that for a while.

My argument is this: I'm not arguing that government should be placing a burden on business in order to give them a hard time. What I'm saying is, you have to have rules that allow the public interest to be protected, and the public interest is everything from safety of life, safety to the environment, and the social responsibility that we all have as citizens of this province, both as individuals and as corporations, because we have responsibilities to each other. I can't run a mine in Timmins or run a factory in Waterloo and not have my social responsibility taken seriously. I have to take my social responsibility seriously when it comes to how I'm going to affect the area in which I operate. That's why government writes laws and that's why there are regulations.

The government across the way can argue all it wants that, "Oh, this is so important. If we don't pass Bill 66 today, the end of the world is going to come." I'm just saying, talk to the people of Walkerton and see what they have to say about lack of regulation. We've already seen what they've had to say about this bill. There are people who have spoken out in Walkerton and said that some of the provisions that were originally proposed in this bill, when it comes to water regulations, are pretty darn scary.

Weakening the toxic chemical act: not a good idea. If there's a way of being able to make it so that it's better, I agree with you; let's find ways to make it easier. But there are basic responsibilities that we have, and there are various sections in this act where the government is cutting regulation as a way of being able to supposedly help businesses, but that at the end may put the public at risk.

For example, in the daycare policy, they're making it that we're going to have more kids per daycare worker. There was an inquiry, a coroner's inquest, that was done as a result of deaths in a daycare because there were too few staff per child. The inquiry looked at this whole matter and said, "Here's what we're recommending when it comes to how many daycare workers per child there could be at various ages, either infants or toddlers or kids a little bit older," and it came up with a number. And those regulations—"red tape, burden to business," as these guys would call it—were put in place because we lost children in daycare because there was not enough supervision of the children. The parents of the children and those people involved in daycare participated in the coroner's inquest and said, "Let not this happen again." So there were recommendations that were made and rules were made when it came to what the proper staffing ratio should be.

If the government is saying that it's okay to have fewer daycare workers per child, I want to see the evidence that says you're right, because all I know is what I remember: that when that coroner's inquest took place, they said directly, "Those kids died as a result of not having enough daycare workers per child."

But the government tries to put this forward as a great way of being able to assist the private sector to get government off their backs and government out of the way so that they can make more money. Well, they have a social responsibility, as I do. We, as citizens—all of us in this chamber are citizens. We can't go out on the highway and speed. If you get caught, you're going to get charged. You can't go out and steal at the bank. If you get caught, you'll get charged. You'll be convicted. There are consequences to your actions in a society. That's what makes us a civil society: We have rules about what you can and can't do. To suggest that businesses and corporate entities don't have a social responsibility when it comes to their responsibility to us, to our environment, to the people and to the economy, you're sadly mistaken.

I will argue that this failed ideology on the part of the Conservatives here, in Ottawa and in other places has been proven to be wrong time and time again. So I just say to the government across the way: When I hear people argue that less red tape is all this province needs to get the economy going and working fast—listen, if you want to run to the Middle Ages, you guys can go to the Middle Ages, to the Dark Ages. We got out of that years ago, and I'd just like to make progress. I don't want to go backwards.

Now, specifically to the time allocation motion—that was related to the time allocation motion, as you know, but now I want to speak to the specifics of the time allocation motion. First of all, there's not a bill that this government won't time-allocate, which to me is ridiculous. All the government has to do, the House leader's office—and we've already sent the government a letter in regard to Bill 74, the health bill—we're prepared, as an opposition, to accommodate the government in order to be able to get more time in committee.

And committee is not about me getting time to speak; it's about the public having a chance to have their say, so there are certain bills where we're going to want more time in committee, such as your health bill, to be able to give the public a chance to have their say. We're about to go through what the government calls—this is the government, not me—the “largest health transformation in the last 50 years.” We're about to change health care on its head in this province.

Ms. Goldie Ghamari: Hear, hear.

Mr. Gilles Bisson: Well, you may be applauding. Wait until four years from now, until you're knocking on doors. I don't think you'll be applauding too much.

The difficulty that we have is that even if the government is right—let's say that the argument that the government puts forward is right, that by essentially creating these health teams, it's going to mean that health care in areas is going to be consolidated under one organization. Places like northeastern Ontario, the northeast, may end up under one entity—let's say the Sudbury hospital as an example—that will manage most of our health care services across the north. That could happen under this legislation. The legislation also provides for increased privatization.

Let's say the government is right. Let's say that that's where you have got to go. I disagree, but let's say that they are right. Then why aren't they allowing this bill to go into committee and travel, as we suggested to the government House leader, for a couple of weeks so the public can have their say? If you think that the public is behind you and it's a great bill, don't be afraid of the public. Go out there and hear what they have to say, and learn from what they have told you, so that you can strengthen your bill.

It's the same thing when it comes to this bill, Bill 66. If you're so intent that you think this is the best thing since sliced bread and this is really what the economy needs to get it going—I disagree; I think, quite frankly, that this is going in the wrong direction. But let's say that it is. What are you afraid of? Why wouldn't you allow the bill to go into committee and to get some time and to travel?

It used to be in this place, when I first got here, Mr. Speaker, that a bill would come in in the fall. We'd have a short or a longer debate at second reading, depending on the negotiations about how the bill would proceed, but we would send the bill out in the intersession for committee hearings, and it wasn't uncommon to have two or three weeks of hearings. That happened under our government, the NDP. It also happened under Mike Harris, even after time allocation at the beginning. Even the Tories under Harris allowed bills like the Planning Act to travel. I was on the bill that made changes to the Planning Act, and I think we travelled for three weeks in the intersession, and guess what? The government learned some things as a result of that.

We travelled the bill having to do with the creation of the snowmobile trails across this province. It was a bill by northern development and mines under the Tories. We travelled that bill for maybe one or two weeks across the north. It might have only been a week. But the interesting part of that is, when we did go into communities and heard what the public had to say, we actually learned things that we never contemplated when it came to the drafting of the legislation. And the government—I think the minister at the time was Mr. Hodgson—went, “Whoa, that's a good idea. Maybe we need to amend the bill.” So the government actually amended the bill as a result of the public hearings. It strengthened the bill, and guess what? It's still the rule that we use today, 20-some-odd years later, when it comes to how we run snowmobile trails across Ontario. Ontario has probably the best snowmobile trail system in Canada, and we can take some credit for that because the public hearings allowed that bill to be drafted in such a way that allowed the bill to be strengthened.

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But here's the problem: The government in this bill is saying—this is pretty draconian. You can't make this stuff up. This is the type of stuff you have in horror pictures. We're going to have one day of hearings, on March 18. That's it: one day, in Toronto. We have a bill that has some of the largest changes to regulation in a long time, and this government is going to allow one day of hearings in Toronto—because the rest of Ontario doesn't exist. You know, Kenora, Ottawa, Kingston, St. Catharines, Sault

Ste. Marie, Attawapiskat: None of that exists. Everybody's got to come to the centre of the universe. We've all got to come to Toronto.

I love Toronto; don't get me wrong.

Interjection.

Mr. Gilles Bisson: Oh, Windsor. Don't forget Windsor. But I just want to say—this is not a rant against Toronto. I love Toronto. Toronto is the most dynamic city in Canada and, I would say, one of best cities in the world. I've travelled around the world and this is a very hard city to beat. It's an amazing place. But there are other amazing places across this province, places like Ottawa, Timmins, Windsor or wherever it might be. We're saying the bill will have one day of hearings only, March 18, here at Queen's Park. So if you live in Windsor and any community outside of this place, and you have thoughts about this bill and you don't have the money to get here? Sorry, democracy is not for you. It's only for those who can afford to be here.

This is the government of the people, Mr. Speaker? This is the government that purports to be the government of the people? How can you be for the people when you won't let the peeps in? This is a government of the well-to-do and those who are wealthy enough to gain from what the government is doing.

Then they're giving you a deadline to appear before the committee. If you want to come to this committee on the 18th, you have to apply to the committee by 10 o'clock on Friday, March 8. We're on the 5th today. How are people going to even know the darn thing is in committee unless the government calls them? That's what this is all about. The government is going to call their friends and say, "Come to committee and say nice things about our bill."

Those people who are mildly interested in the bill or very interested in the bill won't see anything being advertised until at least March 6, I would argue, by the time the Clerks are able to put the postings out electronically. And if they put them in the papers at all, people are not going to find out about being able to come before committee and have their say. You have to apply to appear before the committee before March 8, and I'm saying that limits the ability of the public.

I'm saying shame on the government. For the guys who call themselves the government of the people, you're leaving the peeps out. You gotta let the peeps in.

Mr. Kevin Yarde: And the same with Bill 68.

Mr. Gilles Bisson: Bill 68: It's all the same. All their time allocations are the same.

Then the wonderful one is on amendments. Let's say that you take the time—let's say that you live in Windsor, and you find out that you have to apply before 10 o'clock on March 8 to appear before the committee. You apply and you get picked to come to committee. Let's say that your time to present at committee is 4 o'clock, because it's up until 6 o'clock that day, and the committee all of a sudden hears something from the presentation that says, "Oh, this is an amendment that should be written." "Wow, yes, we should fix that. What a great point." The amendment has to be filed by 6 o'clock the same day. How do you draft an

amendment on the fly and essentially capture the change that you're trying to make? Because amending that particular section may affect another section, and it just creates bad legislation.

The government is saying—not only do you not have adequate time to notify people to show up; not only is this committee not travelling; not only are you limited on how much time you can present to committee, but when it comes to amendments, we're virtually not giving legislators the adequate time necessary to draft a meaningful amendment.

Being on committee, if I hear somebody at 4 o'clock coming in trying to propose an amendment to the bill and they're asking me, as a legislator, to write an amendment to the bill and have it filed before 6—I may get it wrong. I would argue that even the Clerks may get it wrong.

Interjection.

Mr. Gilles Bisson: I know the Clerk is saying, "Oh, my God, we never get anything wrong." I can have an argument with you on that one, and we know what we're talking about.

But the point is, we're not going to get it right.

So the government is doing short shrift when it comes to the legislative process—this, from a party that says, "We're all about running this like a business. We're efficient. We're Conservatives. We're business people. We know how to run things. We're better than everybody." You can't run your way out of this place in the dark, or even if I turned on the lights. You're trying to draft legislation in a way that if the private sector were to run their business that way, they would fail.

Imagine going to a business and saying, "All right. You're thinking of expanding your product line. You have till tomorrow to make up your mind. Once you make up your mind, you have to put all the money on the table by this date and it's all over." Well, who's going to invest in that climate? What sane business person is going to put themselves in a position of having to make a decision that is going to cost them thousands, or tens of thousands, or hundreds of thousands, or millions of dollars, when it comes to investing in a new product or service, and not having the time to do the proper market research and the work that needs to be done to make sure that their business plan makes sense? Imagine, if you ran your business that way, what would happen.

Let's say that you're in the retail business and you're thinking of bringing in a new line to sell, and you think it might be a good idea, and you're told, "You've got to make up your mind in 24 hours or 48 hours. If you don't make your mind up in 24 hours or 48 hours, forget it." You say, "Oh, okay, I'm in." Then you find out that, holy jeez, that was a bad decision. What do you do then? You spent the money. That means to say that you probably are going to be in a lot of trouble financially. No business would operate that way.

So why are you, as a government, supposedly a right-wing government—I will argue you are right-wing—and you're supposedly all great business people, managing in a way you would never manage your own businesses?

Nobody would manage their business in the way that you're managing the legislative process here at Queen's Park.

For example, on Bill 66, there is a huge amount of change that is being proposed in this legislation, and you're not giving the business community or the public adequate time to look at the bill and to have their say. We know there are going to be problems with this legislation, because I don't know a government, since I've been here—and I've been here under the guise of three different governments: NDP, Liberal and Conservative—there's not a government that gets legislation right the first time.

The legislative process is meant to be slowed down. It's not slowed down in order to be deleterious; it's purposely slowed down so that you can get it right. It's like a business.

We'll go back to that retail business that wants to get into a new product line. The owners of the business will say, "What do you think? That sounds like a good idea. Let's do a little bit of market research. Let's look at what this means to our costs. What do we have to do vis-à-vis staff? What is that going to do to our bottom line?" There are a whole bunch of questions that have to be answered. Once they've done due diligence on the decision—is it good or not good to invest in this new product?—they make a decision. So at least if they decide to go ahead with a new product line, they've done so in an informed way.

This government is suggesting that this Legislature should close its eyes, hold its nose and pass legislation without due process. And I'm saying to you, no business in Ontario would operate like that. So why is the government—supposedly a government that represents the virtues of the business community—forcing the legislative process to do something as silly as passing bills without proper time in order to hear from the public and proper time to deal with amendments? If you choose to support the amendment or not is entirely up to you, but at least you should hear what the public has to say.

So I say to my friends across the way, you're not doing anybody any favours. When we have speeches like we heard this morning, talking about, "Everything is about time; we've got to go, man—just run," it's silly. The reality is that it takes time to get things right. No corporation, no business in this province makes decisions without really contemplating what's going to happen if they make that decision. They look at the pros and the cons. They study the situation so that when they make the decision, they do so in an informed way.

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Why are we allowing legislation to be passed in this House without making sure that we inform ourselves in the proper way about, is the bill okay in its present form? I may agree or disagree with a bill; that's irrelevant. What's important is that we at least get it right. What I will argue is, you're not going to get the bill right when you do this.

Again, when it comes to the issue of health transformation that the government is moving forward on, the single largest expenditure that the province of Ontario has is

health care. It's almost 50% of what we spend. Our budget is about \$137 billion, and about half of that is health care. Are there ways of running health care differently that might be able to demystify the system for the public and make it more efficient? There are always ways of doing that. Nobody is arguing on any side of the House that just the status quo is okay. My basic problem with what the government is trying to say is that they're trying to say that the system is completely broke. Are there problems? Absolutely. There are problems in our health care system as there are problems in the way that you draft legislation and pass it through this House. But by and large, our health care system does work.

You will know, Mr. Speaker, that about four or five years ago, I suffered a heart attack. I was very lucky. No damage was done. But this was my experience: At 3 o'clock in the morning, I feel a sensation. I end up at the hospital about 3:30 or 4 o'clock in the morning. They had air-ambulanced me to Sudbury in order to do stents by 9 o'clock that day, in the morning. Less than six hours after my heart attack, I was in a bed in Sudbury getting angioplasty. Is that a failure of the system? I think that's pretty darn good.

Are there problems with our health care system? Oh, yes, there are. Sometimes we mess up when it comes to air transfers with air Ornge. I've seen that happen. Sometimes there are errors made by surgeons. Sometimes there are administrative errors that slow things down. Sometimes there are long waiting lists for certain procedures that we need to shorten. We can have those debates. But for the government to argue that our health care system is broken and you've got to fix it is a bit of a weak argument. This is not about fixing health care; this is about transforming health care in your image.

Do you remember the last election? I remember it well. All of us ran in it. Do you remember how the then leader of the Conservative Party, Mr. Ford, would argue, "Oh, they're a bunch of left-wing ideologues. No, you can't put those guys into office." Instead, they gave us right-wing ideologues, and look what we've got in office. They're doing things that, quite frankly, they never ran on. Nobody, when voting Conservative in the last election, was thinking that their health care system was going to be changed in the way it's about to be changed.

We are going to see a massive change in health care when it comes to administration that is going to affect how services are delivered in the province of Ontario. That is not going to be very acceptable to a lot of small, rural and northern communities. We're worried in our area that health care decisions will no longer be made in our communities. If you're in Smooth Rock Falls or Kapuskasing or Timmins or Attawapiskat, decisions are going to be made far away from your home, and that's not what the public wants.

This is about increasing the creep of privatization into the system. That's what this is all about.

Hon. Christine Elliott: No, it's not.

Mr. Gilles Bisson: Oh, the minister says, "No, that's not the way." Read your own legislation. I've actually read

the bill, and what the bill allows you to do, as minister, is to pull together—

Interjections.

Mr. Gilles Bisson: Actually, I have read the bill. Unlike most people in this place, I read the legislation.

The bill does a couple of things. The bill will allow the minister to merge together various health care agencies into some sort of entity. That entity can be either private or public. That's what the bill says.

Mr. Lorne Coe: Time allocation.

Mr. Gilles Bisson: Yes, it is time allocation. It is. Yes, it's all about time allocation.

My point is, we're about to make these massive changes, and the government doesn't want to engage the public when it comes to the process of how you draft legislation. That's what my basic argument here is: If the government is proud of what they're doing, as they are with Bill 66 or they will be with Bill 74, then what they need to do is stand up and be proud of the bill they're bringing forward, and they've got to allow a proper time at committee for people to have their say.

As I said—and I'll leave the rest of the time for some of the colleagues on our side who want to say a few words—the private sector would never run a business in this way. The private sector would never make decisions about how to invest money in the types of timelines you guys use when it comes to drafting legislation. And let me tell you: This is a lot more money than most businesses will spend when it comes to their decisions. Even a large mining company, on a big project of a billion and a half dollars—that is nothing compared to the amount of money that we spend as a result of Bill 66 or Bill 74, and you guys are trying to circumvent the process of making sure you get the legislation right.

I may not agree with what you're doing, and that's fair. You won a majority in the last election. You have the right as a majority government to pass your legislation; rules allow for that. But the point is, you have to have the ability to have your bill stand the scrutiny of the public, and where the public comes in is at committee. You have to allow the public to speak to your bills. If you're proud of them and you think they're great bills, you have nothing to hide; you have nothing to fear. Just go to the public and hear what they have to say. If they think it's great, they'll tell you it's great; right? But if they also tell you it's great and they think changes need to be made, you should listen to that and amend your bill. If you hear that the bill is bad and you have to make changes or withdraw, maybe you should do that as well.

The last point I'll make is this, Mr. Speaker: This is the people's chamber. We spend the people's money here. It's the people of Ontario who pay taxes that provide the money that we spend in this Legislature and that cabinet utilizes in whatever initiative they're doing when it comes to managing their ministries. When we disrespect the taxpayer by not allowing them to have their say, I think it is a grave, grave error. That's what weakens our democracy in the long term, and that's what weakens the strength of the legislation that you're trying to pass.

The Acting Speaker (Mr. Percy Hatfield): Further debate?

Ms. Peggy Sattler: I am—actually, I'm not pleased to rise today, as my colleague the member from Timmins expressed earlier today. It is a pleasure to rise to participate in debates on such substantive bills as are addressed in this motion. Bill 66 is really an omnibus bill that includes—let's see—12 schedules that make a variety of amendments across many different ministries that multiple, multiple stakeholders would like to have an opportunity to weigh in on and perhaps make some suggestions to the government about how the legislation could be improved.

But instead of continuing that debate on Bill 66, this very substantive omnibus legislation, we are, this morning, talking about time allocation on that bill. In particular, we're talking about a process that allows people in this province to apply to appear before a committee by this Thursday. Just a couple of days away is going to be the deadline for people to request to appear before the committee.

I have to say that this government has taken some steps to at least go through the motions of appearing to consult. When we first came back under this new government, what we saw was that bill after bill went straight from second reading to third reading without any committee, without any opportunity for public input. Maybe one could say that this is an advance, that with this time allocation motion—the time allocation motion that we debated yesterday—we see this government putting on a show of pretending to be interested in what people might have to say about the legislation that is being debated.

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But the problem is, Speaker—yesterday my colleague the member for Waterloo talked about it as drive-by consultation. When the consultation is not actually meaningful; when there is not enough time allocated for people to come and present before the committee; when there is not enough time between the last presenter and the debate on potential amendments, we know that this government is not actually interested in hearing what the people have to say. They're not interested in ensuring that the legislation we're debating actually serves the people of this province. All they are interested in is this pretense that they're going to allow public input and they're going to consider recommendations for amendments that could be made to strengthen the legislation. But they've created a process that doesn't allow that to happen.

The process limits the time that people can appear before the committee to such an extent that it's impossible to imagine that a bill that has 12 schedules—and each schedule, I think, addresses a different ministry, so we have stakeholders from 12 different ministries who all may want to weigh in on the sections of these bills. The time that has been allocated for people to appear before the committee to offer their suggestions to improve the legislation is so limited that there is no possible way that the proper due diligence can be accomplished, when you have such limited opportunity for people to appear.

Once again, Speaker, this does highlight the problems with omnibus bills, and why many people raise concerns

about omnibus bills as being a way of undermining democracy. When you package so many different legislative changes in one omnibus piece of legislation, it prevents the kind of analysis, the kind of debate and the kind of input that one should have as the goal to try to achieve.

The same thing goes for public input on omnibus legislation. Of course, when you have such a limited time for people to appear, it's quite possible that there could only be maybe one or two presenters for each schedule that is set out in this bill. That is not the kind of fulsome public debate and discussion that we should be aiming for and that this government should welcome.

This government should want to hear from the people. They should want to hear suggestions for how the legislation could be improved, how it could be strengthened, how it could actually address the needs of the people of this province. But instead, they have set out this process which is not actually a process that will enable public input and scrutiny and analysis and improvements to the legislation.

The other concern, as my colleague the member for Timmins has pointed out—I live in London, and London is two hours away from the Legislature. I have to say, Speaker, as you know, being from Windsor—and we often cross paths on the train on our way in—it's not particularly easy for people from London to get to Queen's Park to come to appear before a committee, and it's not easy for people from your community of Windsor to get to Queen's Park to come and appear before a committee, and it's especially not easy for people from Timmins, northern Ontario and beyond to get to Queen's Park and come and appear before a committee. But what we see here is a process that requires people to travel from all across the province if they want to come and have a say on this bill.

There is a provision to allow written input to be submitted, so I'm sure that this government wants to argue that, "Well, people from northern Ontario, people from southwestern Ontario, people from eastern Ontario, they can participate; they can just send in written input." But you know, Speaker, the timeline—

Mr. Gilles Bisson: It doesn't work that fast.

Ms. Peggy Sattler: Yes. And the timeline that's set out here has the deadline for the receipt of the written input for the last speaker, who is designated to have the final spot in the delegations that are going to appear to address the bill. But then the turnaround for when the amendments have to be filed with the Clerk is just ridiculous. It's nonsensical to think that there are meaningful opportunities for people to come and make suggestions about how it can be improved, and then all of that written input, the public input, is all going to be analyzed, and people are going to do a thoughtful review and really think through what has been said, really think through the kinds of suggestions that people have made to improve this legislation, and then come up with some amendments that actually address some of the gaps and some of the concerns that have been raised. That we're going to be able to do all this in a period of not much more than 24 hours is ridiculous. It's ridiculous. It can't happen. It actually makes a mockery of

the process in which we're engaged. It really makes a mockery of any claims that this government might want to make to being open to hearing what people have to say and wanting to bring forward the best possible legislation.

If that's what they really wanted to do, they would allow maybe a week of public input and maybe two weeks of public input. Travel the province; go to where the people are. Make it easy for people to come and present their ideas about what they want to see in these legislative changes that are proposed.

And then allow a period of time between receiving the input and talking about amendments to the legislation, so that the amendments actually do what they're supposed to do. Amendments are intended to improve legislation. They're intended to make sure that the legislation is responsive to the issues that are identified by the people of this province when they provide input on bills. But that's not what we have in this time allocation motion.

We don't have that one- or two-week opportunity for people to weigh in. We don't have direction for a committee to travel the province to allow people from different regions of the province to participate in the public input process. And we certainly don't have the time that would be necessary to really consider the input that's received and turn that into amendments that would help improve this legislation.

Speaker, I want to give an example of some possible amendments that people in my community in London might be very interested in bringing forward, if they could possibly manage the timeline that's listed here, if they were able to put in their request to submit quickly enough so that they could be one of those very, very few delegations that's going to be scheduled to present at that single day of public input.

I met with the Licensed Child Care Network in London. The Licensed Child Care Network is an organization that encompasses almost three quarters of all early learning and licensed child care organizations in London and Middlesex. They have some very significant concerns, Speaker, about this bill. In particular, they have very significant concerns about schedule 3 of this bill, which makes amendments to the Child Care and Early Years Act and the Education Act to increase the maximum number of children younger than two years old who can be in the care of home child care providers or unlicensed child care providers.

They made a written submission to the government with some suggestions about how schedule 3 of Bill 66 could be improved. One of the things they point out is that the provisions that this government wants to remove around the numbers of children in home child care providers—those provisions were put in place by the Ombudsman following the deaths of infants and toddlers in this province. Those provisions were put in place to protect families, to protect children from being put at risk by having their safety jeopardized.

They raised concerns about evacuation. What if there is a fire and there's a home child care provider with three infants who are unable to walk, and the home child care

provider is supposed to gather up those three infants and gather up the other children who are in that home and safely evacuate them? No, Speaker, this is not an amendment that is in the best interests of children in this province. The Licensed Child Care Network in London and Middlesex may well have wanted to come and appear before this committee to raise some of their concerns.

I was fortunate enough to visit Western Day Care Centre, which is in my riding and is one of the members of the Licensed Child Care Network. They highlighted some of the safety mechanisms that are in place in that child care centre that would be lost if these amendments go through.

This is just one example, Speaker, of why it is so important to have a process that really does enable people to come together to provide input into legislation and really does enable the development of amendments that improve the legislation that's being debated.

The Acting Speaker (Mr. Percy Hatfield): Further debate?

Mr. Tibollo has moved government notice of motion number 32, relating to allocation of time on Bill 66, An Act to restore Ontario's competitiveness by amending or repealing certain Acts. Is it the pleasure of the House that the motion carry? I heard a no.

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

All those opposed to the motion will please say "nay."

In my opinion, the ayes have it.

A recorded vote being required, it will be deferred until after question period today.

Vote deferred.

The Acting Speaker (Mr. Percy Hatfield): Seeing the time on the clock, this House is in recess until 10:30 this morning.

The House recessed from 1014 to 1030.

INTRODUCTION OF VISITORS

Mr. Chris Glover: It's my pleasure to introduce Nicholas Vourakes, who was a volunteer in my election campaign last June. Welcome to the House, Nicholas.

Hon. Bill Walker: He's not a visitor to this House, but he's a very special person. I would like to congratulate Constable Greg Rogers, a valued member of our Legislative Protective Service and the proud grandpa of seven-pound, nine-ounce grandson Kowen Jordan Clarkson. The proud parents are his daughter Samantha Rogers and Jordan Clarkson. Congratulations, Grandpa.

Applause.

The Speaker (Hon. Ted Arnott): Yes, congratulations. Introduction of visitors.

Mr. Joel Harden: It gives me great pleasure to acknowledge some of my Ottawa friends from OPSEU today, and all of the great people from OPSEU who fight for people working for our provincial government every single day. I want to name, in particular, Melissa Coenraad. I see Joe Chang and Smokey Thomas over there. Thank you so much for the work you do in making our work possible. I look forward to meeting with you today.

M^{me} Nathalie Des Rosiers: I am so happy to welcome to Queen's Park, on behalf of the Liberal caucus, the Six Nations elected council to the Legislature today. Welcome to Queen's Park, and we are delighted to have you here. I will have an occasion to speak to you.

Hon. Monte McNaughton: I'd like to welcome, from my riding, Gayle and Pat Ferris, who are here with their son and grandson, Wesley and Parker, to visit their nephew Tom Keys-Brasier, who just recently started the amazing page program here at Queen's Park. Welcome.

M^{me} France Gélinas: It is my pleasure to welcome to Queen's Park members from OPSEU Hospital Professionals Division. They include physiotherapists, occupational therapists, respiratory therapists, genetic technologists, med lab technologists and social workers, just to name a few. I'd like to highlight Sarah Labelle and Smokey Thomas for joining us. Everybody else, thank you for being here.

My second introduction: The Heart and Stroke Foundation is at Queen's Park. I think we will get to talk about them in a few minutes. Welcome to Queen's Park.

Mr. Mike Schreiner: It's a real pleasure today to introduce Rotarians from Guelph who are visiting: Sue Ricketts and Joanna and Robert Penfold. Welcome to Queen's Park.

Mrs. Robin Martin: I would also like to welcome to the Legislature representatives of the Heart and Stroke Foundation who are here at Queen's Park to raise awareness and discuss their efforts to improve access to defibrillation.

Mr. Speaker, if I may, I believe that you'll find that we have unanimous consent to wear red heart pins today.

The Speaker (Hon. Ted Arnott): Sorry, could the member repeat that request?

Mrs. Robin Martin: I believe that you'll find we have unanimous consent to wear the red heart pins today in honour of the Heart and Stroke Foundation.

The Speaker (Hon. Ted Arnott): The member for Eglinton-Lawrence is seeking the unanimous consent of the House to wear red heart pins today in the House in recognition of the Heart and Stroke Foundation. Agreed? Agreed.

Ms. Andrea Horwath: Point of order.

The Speaker (Hon. Ted Arnott): Point of order: the Leader of the Opposition.

Ms. Andrea Horwath: I seek unanimous consent to move a motion regarding a full public inquiry to investigate the appointment of Ron Taverner and the dismissal of Brad Blair.

The Speaker (Hon. Ted Arnott): Ms. Horwath is seeking the unanimous consent of the House to move a motion regarding a full public inquiry to investigate the appointment of Ron Taverner and the dismissal of Brad Blair. Agreed? I heard some noes.

We're still in introduction of guests. The member for Ottawa-Vanier.

M^{me} Nathalie Des Rosiers: I want to note the presence among us of Deb Matthews, who was the former Deputy Premier. She was the minister responsible for free tuition and changing loans to grants. Welcome.

The Speaker (Hon. Ted Arnott): Welcome to the Legislature.

Mr. Rick Nicholls: It's an honour and a privilege for me this morning, having had a fantastic meeting with three wonderful ladies from the Ontario Heart and Stroke Foundation. They are Eden Klein, Stacey Leake and Angela Brown.

Ms. Judith Monteith-Farrell: It's my privilege to welcome Ed Arvelin from OPSEU, from Thunder Bay, to the House today.

Mrs. Marie-France Lalonde: I had a great breakfast meeting this morning with some OPSEU delegates who are providing front-line services to our patients in our hospital system. I would like to welcome, from Ottawa, Hervé Cavanagh, Alana Long and Elizabeth Pickles, who I had the pleasure of meeting this morning.

Ms. Effie J. Triantafilopoulos: I've got the honour today of introducing and welcoming the 540 Squadron, the Golden Hawks, Royal Canadian Air Cadets from Oakville. With them are Major Mike LaCombe, Second Lieutenant Anthony Vukojevic, administrative officer Helen Chen, squadron warrant officer Cynthia Parker, and all of the cadets. Welcome here today.

Ms. Suze Morrison: I'd like to welcome Chief Ava Hill and the council from Six Nations. Welcome to Queen's Park.

Mrs. Nina Tangri: I would like to welcome representatives from Innovative Medicines Canada to the Legislature today. IMC member companies help discover, develop and deliver innovative medicines and vaccines, and also create thousands of high-value jobs that help drive Ontario's economy, many headquartered in the region of Peel.

On behalf of all the members, I welcome Innovative Medicines Canada to the Legislature today. Thank you. Welcome.

Ms. Jessica Bell: I'd like to introduce Kingsley Kwok from OPSEU, Shelagh Pizey-Allen from TTCriders, Sébastien Lalonde from the Canadian Federation of Students and other Canadian Federation students. Welcome to Queen's Park.

Ms. Goldie Ghamari: I'd like to welcome one of my constituents to Queen's Park: Teresa Chafe. She's here with OPSEU, and I look forward to meeting with her later today.

Mr. Terence Kernaghan: It gives me great pleasure to rise today to welcome members from OPSEU—Len Elliott, Philip Shearer, Sandra and June—as well as members from the Heart and Stroke Foundation, including Christine Faubert, Caroline McNamee and Dr. Adam Kassam.

I'd also like to extend a warm invitation to Deb Matthews, the former member from London North Centre. Thank you for coming.

Mrs. Amy Fee: This morning I would like to welcome my two daughters to the Legislature, Sarah and Irene Fee.

Mr. Faisal Hassan: I would like to welcome members of OPSEU: Joe, Jacqueline and Joanne. Welcome to Queen's Park.

Mr. Will Bouma: While I'll be bringing more formal greetings tomorrow, I would also like to welcome the Six Nations elected council to this House today. Not every member has eight nations in their riding; I do. Thank you so much for being here.

Mr. Kevin Yarde: I'd like to welcome the members from OPSEU, as well as Warren "Smokey" Thomas.

1040

Mr. Jamie West: Along with the members from OPSEU, I'd like to welcome Len Elliott and congratulate him on all the work he has done to improve health and safety in the province.

Mr. Paul Miller: I'd like to welcome the Six Nations council here. They're neighbours of ours from Hamilton—good neighbours.

The Speaker (Hon. Ted Arnott): I, too, wish to welcome a former member, Deb Matthews, who has already been introduced. We're delighted to have you back here in the Legislature today.

Also, we have with us in the Speaker's gallery His Excellency Kerim Uras, the ambassador of the Republic of Turkey to Canada. He's accompanied by Mr. Erdeniz Şen, the consul general of Turkey in Toronto. Please join me in warmly welcoming our guests to the Legislature today.

ORAL QUESTIONS

GOVERNMENT ACCOUNTABILITY

Ms. Andrea Horwath: My first question is to the Acting Premier. As acting OPP commissioner, Brad Blair showed incredible integrity and courage standing up for the independence of the Ontario Provincial Police and standing up to the Premier when he tried to install his friend Ron Taverner as the commissioner of the OPP. Why did the Premier have him fired?

Hon. Christine Elliott: To the Minister of Community Safety and Correctional Services.

Hon. Sylvia Jones: I will once again reiterate that Mr. Blair's employment with the OPP was terminated as a result of a nine-member deputy minister committee of the Public Service Commission. To be clear, that recommendation to terminate his employment was in consultation with the commissioner, Gary Couture.

No one is above the law. Whether you are a constable or a deputy commissioner, you swear an oath to uphold the laws of our province. Mr. Blair breached his duties as both a police officer and a public servant. That is why the recommendation was made to terminate his employment and that is why his OIC was rescinded.

The Speaker (Hon. Ted Arnott): Supplementary?

Ms. Andrea Horwath: For months, the Premier and the ministers forced to defend his actions insisted that hiring the Premier's oldest friend as commissioner was a coincidence and that buying an off-the-books van with a reclining leather couch was a cost-saving measure. Now

they want to attack a dedicated career officer who had the courage to blow the whistle on this government.

Why should anyone believe that this is anything but the Premier trying to settle the score?

Hon. Sylvia Jones: Speaker, I think, in the interests of clarity, we'd better read from the dismissal letter that was sent to Brad Blair, which was made public earlier today:

"You have no authority to unilaterally disclose confidential government emails in furtherance of your personal interests.

"The disclosure is both a contravention of your obligations under the conflict of interest regulation made under the" PSOA "and a violation of the oath of office you took as a public servant."

It "is a clear attempt to use your professional status to further your private interests by implying that the legal activities in which you are engaged are part of your official duties and/or sanctioned by the OPP."

This individual chose to sully the reputation of the excellent OPP officers who serve our public and the people of Ontario. He was terminated as a result.

The Speaker (Hon. Ted Arnott): Final supplementary.

Ms. Andrea Horwath: Speaker, every PC MPP should take a moment to ask themselves if their constituents sent them here so that the Premier could install his personal friend into the top job running the OPP and fire anyone who doesn't agree with him.

Maybe it was because Brad Blair blew the whistle on political interference. Maybe it was because he said that the OPP wouldn't make off-the-books purchases for the Premier. Maybe it was because the Premier was worried about the investigation into the 407 data breach. People deserve answers—answers this government has not provided.

Will the government call a public inquiry today to clear the air and give people the answers that they deserve?

Interjections.

The Speaker (Hon. Ted Arnott): Members please take their seats.

Minister?

Hon. Sylvia Jones: Again, in the interests of clarity, I will confirm Mr. Blair's employment was terminated as a result of the nine-member Public Service Commission decision. That recommendation was accepted. We have now moved forward.

We need to ensure that the integrity of the OPP, the integrity of the people who choose to serve in our Ontario Provincial Police and in the OPS—are prepared to withhold and prepared to make sure that they prepare their oath of office.

We have individuals in the OPP who are excellent, and yet we have an individual who chose to—and I will quote again: "You have no authority to unilaterally disclose confidential government emails in furtherance of your personal interests."

He was terminated as a result of a recommendation from the Public Service Commission. That led to a revocation of his order in council. It's done. We need to move on.

GOVERNMENT ACCOUNTABILITY

Ms. Andrea Horwath: My next question is also to the Acting Premier.

I think it's shocking that the minister says it's done, nothing to see here. This thing reeks. It reeks like a stinking mess, and this government needs to clean it up, Speaker. They need to clean it up.

The OPP says that the acting commissioner, Brad Blair, was fired on the orders of Mario Di Tommaso, Ron Taverner's former colleague and the man who changed the OPP commissioner job description in order to lower the bar so that Ron Taverner could qualify to apply. But yesterday, the Minister of Community Safety claimed that the decision was made by the Public Service Commission in consultation with the OPP, independently. Whose version is accurate: the minister's or the Ontario Provincial Police's?

Hon. Christine Elliott: To the Minister of Community Safety and Correctional Services.

Hon. Sylvia Jones: The leader of the NDP can't have it both ways. You asked for an independent public service. You asked that there be no involvement and intervention. Yet, when I explain the process, when I talk about the Ontario public service, the commission that made the decision to terminate Mr. Blair's employment with the Ontario public service and the OPP, you are suggesting that in some way we now need to get involved. I vehemently disagree.

I support the Ontario public service, I support the recommendation, and I'm happy to endorse it entirely.

Interjections.

The Speaker (Hon. Ted Arnott): Members please take their seats.

Supplementary?

Ms. Andrea Horwath: Well, Speaker, I dare say the minister and her Premier had better figure out whether this was a political appointment or it wasn't. They can't have it both ways.

Yesterday the Minister of Community Safety and Correctional Services said that her deputy minister, Ron Taverner's friend, Mario Di Tommaso, recommended the termination of Brad Blair. The minister claimed she didn't ask why Mario Di Tommaso was doing this. Supposedly he didn't give her his reasons for wanting to fire Brad Blair, but she approved the decision anyway. Why would the minister approve terminating an OPP deputy commissioner without seeking any explanation or rationale for the decision?

Hon. Sylvia Jones: Speaker, in the interests of clarity, again, I will read from the dismissal letter given to Mr. Blair:

"You have no authority to unilaterally disclose confidential government emails in furtherance of your personal interests.

"The disclosure is both a contravention of your obligations under the conflict of interest regulation made under the" PSOA "and a violation of the oath of office you took as a public servant."

It “is a clear attempt to use your professional status to further your private interests by implying that the legal activities in which you are engaged are part of your official duties and/or sanctioned by the OPP. This is also a contravention of your obligations under the conflict of interest regulation...”

“You have acted in a manner that is incompatible with the faithful discharge of your position as a public servant.” Enough said.

The Speaker (Hon. Ted Arnott): Final supplementary?

Ms. Andrea Horwath: Well, the Ford government says the OPP decided to fire the acting commissioner, Brad Blair. The OPP says it was a decision coming from Mario Di Tommaso, the deputy minister, who is also a friend of Ron Taverner’s. The Premier has been saying for months that Brad Blair should be punished for speaking out.

1050

Can the Acting Premier tell us: Did the Premier or his chief of staff have any conversations about this matter with the deputy minister before he recommended the firing?

Hon. Sylvia Jones: I’m going to repeat this in the interest of ensuring that everybody is clear: No one is above the law. Whether you are a constable or a deputy commissioner, you swear an oath to uphold the laws of this province. Mr. Blair’s employment was terminated as a result of the Public Service Commission’s nine-member committee. This action was taken in consultation with OPP Commissioner Couture.

I think that it is perfectly appropriate that someone who used their uniform and position as a deputy commissioner to further his own personal gain—he violated the use of his office and, frankly, sullied the reputation of every excellent OPP officer who serves the province of Ontario and the people of Ontario.

We need to make sure that the people who choose to serve in our Ontario public service and with the OPP respect that oath of office. That is what the commission has done by terminating his employment.

GOVERNMENT ACCOUNTABILITY

Ms. Andrea Horwath: My next question is to the Acting Premier. The deputy OPP commissioner was ultimately terminated through an order in council that was signed by the Minister of Community Safety and Correctional Services. Did anyone in the cabinet ask any questions about Brad Blair’s termination before signing the order in council that removed him? Or are we supposed to believe that the Premier asked no questions about this unprecedented termination?

Hon. Christine Elliott: To the Minister of Community Safety and Correctional Services.

Hon. Sylvia Jones: I think, in the interest of clarifying process, it is important to note that the order in council occurred after Mr. Blair was terminated as a deputy commissioner for the OPP. You cannot have an order in council of an individual who is no longer actively engaged

in a role as commissioner of the OPP. That is why the recommendation was made to me, as minister, to revoke the order in council. After the termination occurred on Monday morning, we revoked the order in council, as was appropriate.

The Speaker (Hon. Ted Arnott): Supplementary question.

Ms. Andrea Horwath: The Premier claimed that it was a remarkable coincidence that his oldest friend was awarded the job of OPP commissioner even though he wasn’t qualified to even apply for the initial posting. Now he expects us to believe that impartial civil servants and the OPP decided spontaneously to terminate the decorated officer the Premier has been complaining about for months.

Why won’t the Premier stop asking people to believe the unbelievable and put all of the facts on the table with a public inquiry? That’s what the people of this province deserve. That’s what this government should do. It’s the only way—the only way—to get to the bottom of this cesspool.

Interjections.

The Speaker (Hon. Ted Arnott): Members, take your seats.

Minister?

Hon. Sylvia Jones: It’s pretty clear that the individual who did not ultimately get the offer of employment to serve as the OPP commissioner is a little angry. But that in no way excuses him and allows him to be above the law.

Again, the dismissal letter sent to Mr. Blair, which was made public today: “You have no authority to unilaterally disclose confidential government emails in furtherance of your personal interests.

“The disclosure is both a contravention of your obligations under the conflict of interest regulation made under” the PSOA “and a violation of your oath of office you took as a public servant.”

It “is a clear attempt to use your professional status to further your private interests by implying that the legal activities in which you are engaged are part of your official duties and/or sanctioned by the OPP.”

The Speaker (Hon. Ted Arnott): Thank you.

I’m going to caution the opposition members: Some of the interjections are dangerously close to the line of unacceptability in terms of parliamentary language.

Next question.

TUITION

Mr. Sam Oosterhoff: My question is for the Minister of Training, Colleges and Universities.

Speaker, I know from listening to students and families that skyrocketing fees for university and college in Ontario became increasingly unaffordable under the previous Liberal government. In fact, since 2006, undergraduate tuition for Ontarians has risen from an average of \$5,000 to almost \$9,000.

My classmates at Brock University have been clear to me that a sustainable and affordable post-secondary education is crucial to them and their future.

Can the minister tell us what steps this government is taking to make university and college affordable for students and their families?

Hon. Merrilee Fullerton: Thank you to the member from Niagara West for the question.

Speaker, for years student groups and even the opposition have been calling for relief from unsustainable tuition fees. Our government is taking unprecedented steps to provide tuition fee relief, and for the first time in Ontario's history, we'll be reducing tuition fees across the board by 10%. While the NDP is more concerned about the ability of institutions to handle a 3% reduction in funding, we are focused on delivering a total of \$450 million in tuition relief to students and their families.

In addition to this historic reduction, we are creating the Student Choice Initiative. This initiative will allow students to choose whether or not to support optional fees, so they can find additional savings.

Speaker, our government is putting students first by making post-secondary education more affordable and putting more money back in their pockets.

Mr. Sam Oosterhoff: Thank you to the minister for that response.

It's shameful that under the previous Liberal government, tuition was allowed to skyrocket. Since 2006, undergraduate tuition for Ontarians has risen from an average of \$5,000 to almost \$9,000. Many professional degrees, including medical degrees, computer science degrees and business degrees, are even more expensive for students.

I know that the 10% reduction and Student Choice Initiative will see particularly large savings for students and families in those programs.

Can the minister tell us how much students in my riding could save in these programs because of our government's historic action?

Hon. Merrilee Fullerton: Thank you again to the member for the question.

Speaker, the member is right to say that students and families will see real and substantial savings from our 10% tuition reduction. In the member's riding, a student studying game development at Niagara College will save \$650 next year, thanks to our government's changes; a student studying an undergraduate degree of commerce and business at Brock University will save \$890 next year; and a student studying a master's of education at Brock will save \$1,200.

We were elected on a promise to put more money back in people's pockets, and through our historic tuition reduction and our Student Choice Initiative, we are doing just that.

GOVERNMENT ACCOUNTABILITY

Mr. Taras Natyshak: Speaker, through you to the Acting Premier: Was acting OPP commissioner Brad Blair fired for telling the people of Ontario that the current, part-time Premier requested an off-the-books purchase of a special luxury van complete with a reclining couch, a bar fridge and a widescreen TV?

Hon. Christine Elliott: To the Minister of Community Safety and Correctional Services.

Hon. Sylvia Jones: Mr. Blair's employment with the Ontario Provincial Police was terminated because no one is above the law. Whether you are a constable or a deputy commissioner, you swear an oath to uphold the laws of this province. He chose not to do that when he didn't get the job that he wanted. A decision was made by the Public Service Commission to terminate his employment. That is what happened, in full consultation with OPP Commissioner Couture.

1100

The Speaker (Hon. Ted Arnott): Supplementary?

Mr. Taras Natyshak: That truly is some Trudeau-level spin coming out of this minister.

Speaker, Brad Blair didn't have a lot to gain from blowing the whistle on this Premier, but the Premier had everything to gain from firing Brad Blair. He could clear the way for his appointment of his friend Ron Taverner as commissioner. He could get his luxury van complete with reclining couch, bar fridge and widescreen TV. Our part-time Premier has a proven track record of threatening Brad Blair, so when the Premier said that this has nothing to do with—

Interjections.

The Speaker (Hon. Ted Arnott): You can't impute motive. I'd ask the member to put his question without imputing motive.

Hon. John Yakabuski: And withdraw.

Mr. Taras Natyshak: I withdraw.

Speaker, when the Premier says that this has nothing to do with him, why should anyone in Ontario believe him?

Hon. Sylvia Jones: Speaker, the difference between Prime Minister Trudeau and Premier Ford is that Premier Ford stands behind the women in his cabinet and supports them.

Again, I will quote from the dismissal letter sent to Brad Blair, which he made public yesterday:

"You have no authority to unilaterally disclose confidential government emails in furtherance of your personal interests.

"The disclosure is both a contravention of your obligations under the conflict of interest regulation made under" the PSOA "and a violation of the oath of office you took as a public servant."

It is "a clear attempt to use your professional status to further your private interests by implying that the legal activities in which you are engaged are part of your official duties and/or sanctioned by the OPP," which they were not clearly—

The Speaker (Hon. Ted Arnott): Thank you.

The next question.

HUNTING AND FISHING

Mr. Doug Downey: My question is for the Minister of Natural Resources and Forestry.

Mr. Speaker, our PC government was elected on a promise to make life easier for the people of Ontario. For

15 years, the Liberal Party, with the support of the NDP, nickel-and-dimed Ontarians. They were more concerned with finding ways to raise taxes than with how to make life more affordable. Under the leadership of our Premier, it's a new day in Ontario.

Mr. Speaker, the Minister of Natural Resources and Forestry has been hard at work to make hunting and angling more affordable for the people of my riding, after the Liberals ignored them for 15 years. Recently, the minister announced that hunting and fishing licence fees would be frozen.

My question for the minister is: How much of the money will this initiative put back in the pockets of the folks in Barrie–Springwater–Oro–Medonte who fish in Lake Simcoe and Orr Lake?

Hon. John Yakabuski: I want to thank the member from Barrie–Springwater–Oro–Medonte for the question and his great service to his riding. We're making life easier for hunters and fishers by putting more money back into their pockets. These are great sports enjoyed by people all across Ontario. It's also a big driver of our economy, particularly in rural communities.

With our PC government, Ontario is finally open for business and open for jobs. Cancelling the Liberals' previously approved fee increases, \$2 of service fee increases plus the licence fee increases themselves, will make hunting and fishing more accessible to people all across Ontario so they can contribute to their local economy by spending more money on the things that matter to them—perhaps more money at the bait shop; perhaps more money at the tackle shop.

Speaker, I'm pleased to inform the member that this initiative will put \$4.3 million not into the government's pockets but back into the pockets of the people of Ontario.

The Speaker (Hon. Ted Arnott): Supplementary?

Mr. Doug Downey: Thank you to the minister for that answer. I'm always glad to hear how committed the minister is to making life easier for hunters and anglers by putting more money in their pockets. It's unfortunate that the NDP decided to support the Liberals for 15 years while the cost of day-to-day life became more than Ontarians could bear. However, it's clear the Minister of Natural Resources and Forestry and our government have the right priorities for the people of Ontario, with common-sense initiatives like this.

Mr. Speaker, I know the decision to exempt veterans and active Canadian Armed Forces members who enjoy recreational fishing from needing a fishing licence was also very well received by my constituents, including my friend Aron Garbe.

Ontario is finally on the right track, Mr. Speaker. Can the minister elaborate on the significance of hunting and fishing for Ontario's economy?

Hon. John Yakabuski: I want to thank the member again for his supplementary. We were very proud, as the government for the people, to exempt veterans and active service people from their fishing licence fees.

Ontario is recognized as a destination for both hunting and fishing, and the impact it has on our tourism industry

is significant. We have a bountiful amount of natural resources, and we want people from everywhere to take advantage of that.

Recreational fishing alone is a \$2.2-billion industry here in the province of Ontario that contributes so much to the local economies, particularly in rural Ontario. Hunting is an over \$400-million business here in the province of Ontario. So when we can have people enjoying those pursuits, those sports, particularly with their families, and we can reduce or eliminate additional costs to make them more accessible, that's what we do in Ontario, because this government of the people wants to do the things that the people care about in the province of Ontario.

AUTISM TREATMENT

Miss Monique Taylor: My question is for the Deputy Premier. I've been travelling the province, where hundreds of families have come out to town halls. We've heard from parents who are being flat-out denied enrolment for their children with autism at their local public schools. We're hearing warnings from experts that improper transition out of therapy and into schools is damaging, and parents are feeling the pressure and anxiety of what lies ahead.

Families from all across the province are coming to the front lawn of Queen's Park on Thursday to make their voices heard. Who, from this government, will come out and speak to them to justify their autism program?

The Speaker (Hon. Ted Arnott): The question is to the Deputy Premier.

Hon. Christine Elliott: To the Minister of Municipal Affairs and Housing.

Hon. Steve Clark: Thank you to the honourable member for the question. The system for autism services that our government inherited from the previous Liberal government was both unfair and unsustainable. Currently, just 2,400 children are waiting for a diagnostic assessment. However, more than 23,000 children are presently on the waiting list. Just 8,400 children are receiving the crucial help that they need—

Interjections.

The Speaker (Hon. Ted Arnott): Order.

Hon. Steve Clark:—which means that three out of four children—

Interjections.

Hon. Steve Clark: I really wish the opposition would understand that what's happening is, three out of four are languishing on the wait-list. Our government and our minister made a decision that we didn't want that to happen, that we wanted to reform the system, and that's exactly what our government is going to do.

The Speaker (Hon. Ted Arnott): Supplementary.

Miss Monique Taylor: Speaker, back to the Deputy Premier who used to care about this file: Yesterday, it was the member from Carleton giving parents false hope. Today, I'd like to share the finance minister's previous words of support: "This government has a responsibility to ensure individuals with autism can realize their full potential. Instead, after years of waste, scandal and mismanagement, the Premier is attempting to balance the

budget on the backs of the most vulnerable.” Mr. Vic Fedeli in 2016.

I couldn't have said it better myself—

Interjections.

The Speaker (Hon. Ted Arnott): Once again, I'll remind all members: We refer to each other by our riding names, or a ministerial name if the person's in cabinet.

Place your question.

Miss Monique Taylor: I was quoting Hansard, Speaker. Sorry.

I couldn't have said it better myself, and I wonder if the minister still agrees with himself.

Will the Acting Premier encourage her members to join parents on the front lawn—perhaps the Minister of Finance or the member from Carleton?

The Speaker (Hon. Ted Arnott): The question has been referred to the Minister of Municipal Affairs and Housing.

Hon. Steve Clark: Our government for the people is taking action so more families of children with autism can get the services they deserve.

Over the next 18 months, over 23,000 families will move off the wait-list and get the help they deserve. Again, our government inherited a system that was unfair and unsustainable. Our minister and the members of our government are committed to ensuring that, over the next 18 months, we will clear that wait-list.

Our government's plan is built out of compassion. Again, we want to make sure that we are responding to the needs of parents, but we can't have an unsustainable system where three out of four children languish on a wait-list. That's not fair. That wasn't a good system. We're going to change that, Speaker.

1110

GOVERNMENT ACCOUNTABILITY

Ms. Mitzie Hunter: My question is to the Deputy Premier. The Premier said that he wanted a used van, but thanks to court records, we know that this is not true. What the Premier really wanted was a custom van, fitted out with a 32-inch-screen television, a Blu-ray player, a leather power-reclining bench, a mini fridge and WiFi. The used van was supposed to cost over \$50,000, not including the actual cost of the van. This is the real gravy train.

We learned that what the Premier really wants is a hand-selected OPP detail. Why doesn't he trust the OPP detail that he was assigned? What doesn't he want them to see? We learned all this thanks to a whistle-blower, a man with a 33-year public record of service to our provincial police. But we now know that the Premier's hand-picked deputy minister has fired him. Why the cover-up, Mr. Speaker? Why—

The Speaker (Hon. Ted Arnott): I'm going to ask the member to withdraw her unparliamentary comment.

Ms. Mitzie Hunter: I withdraw.

The Speaker (Hon. Ted Arnott): The question is to the Deputy Premier.

Hon. Christine Elliott: To the Minister of Community Safety and Correctional Services.

Hon. Sylvia Jones: To be clear, there is no used van. There is no van. What we have is a decision made by the Public Service Commission that the individual whose employment was terminated by OPP on Monday clearly had a different agenda that did not match with his oath of office.

I will quote again from his dismissal letter: “You have acted in a manner that is incompatible with the faithful discharge of your position as a public servant.”

We cannot have individuals who have an agenda, because they didn't get the job that they applied for, undermining the excellent work that our OPP officers do every day across the province of Ontario. Mr. Speaker, the—

The Speaker (Hon. Ted Arnott): Thank you. Supplementary.

Ms. Mitzie Hunter: We need to know what the real agenda is. Again to the Deputy Premier: Our Canadian Charter of Rights and Freedoms protects legal rights and allows us to remain free from a police state. Why do you think that the Premier is running the OPP as his own private police force?

Mr. Speaker, make no mistake: A Premier taking control of the OPP in this way is a big red flag. The Premier is undermining the rule of law. How is any Ontarian expected to believe that this police force is independent when the Premier is using them in this way? He has fired the whistle-blower and tried to cover up the purchase of a luxury van, and—

The Speaker (Hon. Ted Arnott): Once again, I'm going to ask the member to withdraw the unparliamentary comment.

Ms. Mitzie Hunter: He is having his staff use their—

The Speaker (Hon. Ted Arnott): Sorry. You have to withdraw the unparliamentary comment, and please place your question.

Ms. Mitzie Hunter: I withdraw.

He's having his staff use their personal emails to carry out this order. When will this Premier do the right thing, not hire Ron Taverner and fire Mario—

The Speaker (Hon. Ted Arnott): Thank you. To the minister to reply.

Hon. Sylvia Jones: You know, Speaker, I've heard a lot of questions in this chamber in the last 10 years. As a former minister of the crown, it amazes me that this member is suggesting that the nine-member Public Service Commission is in any way influenced or impacted by political decisions.

To be clear, the commission made a decision to terminate Mr. Blair's employment with the OPP as a result of him no longer being a member of the OPP because, “You have acted in a manner that is incompatible with the faithful discharge of your position as a public servant.” His order in council was rescinded.

This is an individual who was using his office as a deputy commissioner in the OPP for personal gain and a personal agenda because he didn't get the job—

The Speaker (Hon. Ted Arnott): Thank you.

SERVICES DE POLICE

M^{me} Natalia Kusendova: Ma question aujourd'hui est pour la procureure générale. Nous, de ce côté-ci de la Chambre, avons un profond respect pour le travail important réalisé par les professionnels de la police. Nous savons qu'ils sont des héros de tous les jours qui veillent à la protection de nos communautés.

Le mois dernier, la ministre de la Sécurité communautaire et des Services correctionnels a déposé un projet de loi très important : le projet de loi 68, la Loi de 2019 sur la refonte complète des services de police de l'Ontario. La ministre ainsi que la procureure générale ont travaillé avec la police et d'autres partenaires de la sécurité publique pour corriger le projet de loi 175 du gouvernement libéral précédent, la mesure législative la plus anti-police que nous avons connue en Ontario.

Nos policiers méritent notre respect pour le travail qu'ils effectuent. Pour notre gouvernement, la protection des familles et des agents de première ligne est une priorité absolue. La procureure générale pourrait-elle nous dire ce que les agentes et les agents de première ligne disent au sujet de ces changements proposés par notre gouvernement?

L'hon. Caroline Mulroney: J'aimerais remercier la députée de Mississauga-Centre pour sa question. Notre projet de loi, s'il est adopté, fournit de la transparence et de la clarté aux agentes et aux agents de police, aux chefs de la police et à la population de l'Ontario. Il concentrerait les ressources d'enquête là où on en a besoin pour préserver la sécurité de nos communautés.

Bruce Chapman, président de l'association des policiers de l'Ontario, nous a dit que ses membres sont ravis du projet de loi que nous avons proposé. D'ailleurs, il a rappelé que l'APO « a maintenu que le personnel civil et les agents en uniforme de la police avaient besoin d'outils et de fonds adéquats pour préserver la sécurité communautaire. Nous avons réitéré notre soutien à un système efficace, fondé sur des principes de surveillance, de responsabilité et de transparence, afin de rétablir la confiance du public dans notre profession. »

Monsieur le Président, notre gouvernement est déterminé à faire régner la sécurité dans nos communautés et à donner aux agentes et aux agents de la police les outils dont ils ont besoin pour accomplir leur travail très important.

The Speaker (Hon. Ted Arnott): Supplementary?

M^{me} Natalia Kusendova: Merci, madame la Ministre. Je suis heureuse d'entendre que notre gouvernement a écouté les préoccupations des agentes et des agents de première ligne. Je pense que cette nouvelle législation est équilibrée, respectueuse et équitable.

Monsieur le Président, je sais que les agents de première ligne dans ma communauté à Mississauga et à travers l'Ontario seront heureux de ces changements. Les changements proposés par le projet de loi 68 veillent à ce que nous livrons notre devoir aux agents et aux citoyens.

De ce côté-ci de la Chambre, nous savons que nos femmes et nos hommes en uniforme sont hautement entraînés et qu'ils risquent tout pour que nous puissions

vivre en sécurité. La procureure générale pourrait-elle exposer devant cette Chambre comment les changements aux enquêtes de l'unité des enquêtes spéciales amélioreront les enjeux à la fois pour les communautés et pour les agents?

L'hon. Caroline Mulroney: Notre gouvernement sait que les femmes et les hommes sont des héros de tous les jours. Pour fournir la transparence et la clarté à la population et à la police, la législation clarifierait le mandat de l'unité des enquêtes spéciales. Si elle est adoptée, elle concentrerait les ressources d'enquête là où on en a besoin, sur les activités criminelles, au sein d'un système de surveillance policière qui est transparent, équitable et efficace.

La législation rendrait finalement clair pour chacun les cas où il y a l'obligation d'aviser, tels les cas où l'utilisation de la force, la garde ou la détention et des poursuites en véhicules motorisés ont eu pour résultat des blessures graves ou un décès, et lorsqu'une arme à feu a été déchargée en direction d'une personne, ou dans un cas rapporté d'agression sexuelle.

Le projet de loi répond également à presque toutes les recommandations du juge Tulloch contenues dans son examen indépendant des organismes de surveillance de la police.

CORRECTIONAL SERVICES

Mr. Kevin Yarde: My question is to the Minister of Community Safety and Correctional Services. Over the weekend, there was a violent incident at the Toronto South Detention Centre that resulted in eight correctional staff being injured. Two were sent to hospital. Yesterday, staff withdrew all non-essential services in reaction to the violence.

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Minister, there has been a crisis in corrections for a long time. The last Liberal government did nothing about it. What actions is this government going to take to fix the crisis in corrections?

Hon. Sylvia Jones: Thank you for the question. It was a very serious incident on the weekend. I think we really need to appreciate, as legislators, how legislation policies impact people on the front line.

We often talk in this chamber about very lofty ideas about how we want to make society better, but now we need to make sure that those changes we make don't actually impact or, frankly, hurt the individuals who are working in our institutions, the people who visit our institutions and the people who are serving in our institutions.

We are actively engaged in those discussions right now. We've already made some changes that have been a positive influence. But this is not an easy ship to move. There are a lot of moving parts when you're talking about corrections and the impact that the justice file has. That is, frankly, why the Attorney General and myself worked together to make sure that changes that happen—

The Speaker (Hon. Ted Arnott): Thank you. Supplementary question?

Mr. Kevin Yarde: Back to the minister: Howard Sapers, in his report on the state of Ontario's correctional system, called the Toronto South Detention Centre the most violent correctional facility in the province. The problems aren't mysterious; Sapers was clear. The shifts where the most violence occurred were the shifts where they were understaffed.

Instead of hiring casual, part-time, on-call staff to fill vacancies left by full-time correctional staff, will the minister commit today to hiring full-time correctional staff at the levels needed to effectively manage our troubled correctional facilities?

Interjections.

The Speaker (Hon. Ted Arnott): Members please take their seats.

The minister to reply.

Hon. Sylvia Jones: I will put the excellent training and work that our corrections officers do across Ontario up against any institution worldwide. I think that we have excellent people doing excellent work. We as legislators need to make sure that we give them the tools to ensure that they stay safe.

This is about a system that includes the Attorney General, a system that includes the Ministry of Health, a system that includes all of us as legislators to make sure the changes we make actually improve the system and give the corrections officers the tools they need to stay safe. But there is no one who is more proud of the work that our corrections officers do in the province of Ontario than our government.

GOVERNMENT ACCOUNTABILITY

M^{me} Nathalie Des Rosiers: Ma question est également pour la ministre de la Sécurité communautaire et des Services correctionnels. I am sure that she understands how crucial it is that all Ontarians have the utmost confidence in the independence of the OPP and the appointment process for the OPP commissioner.

The dismissal of Brad Blair after he revealed his concerns raises some questions. The issue that remains unresolved at this point is the process that led to the disciplinary charges being laid in front of the Public Service Commission.

Yes or no: Did the minister have any conversation with Deputy Minister Di Tommaso about the conduct of Brad Blair since the revelations last December?

Hon. Sylvia Jones: When my deputy minister sent a letter as the ethics officer on December 28, of course I was notified. I was made aware that there were concerns that an individual who did not receive the position or offer was upset and was using his office inappropriately.

To point to clarity, again I will lead you to the dismissal letter that was given to Mr. Blair and made public today: "You have acted in a manner that is incompatible with the faithful discharge of your position as a public servant." This is also "a contravention of your obligations under the conflict of interest regulation." It "is a clear attempt to use your professional status to further your private interests by

implying that the legal activities in which you are engaged are part of"—

The Speaker (Hon. Ted Arnott): Thank you. Supplementary?

M^{me} Nathalie Des Rosiers: From the answer, I gather that she supported the laying of disciplinary charges against Bill Blair. But my question goes to the integrity of the entire process. By now, there have been so many allegations that the Premier wanted a new commissioner who was a little bit more sympathetic to some of his concerns on transportation and on staffing.

Does she not agree that at this stage, any Ontarian will not have confidence in the appointment of Ron Taverner, and we need to go back to square one because it's crucial for Ontarians to have the utmost confidence that the OPP commissioner is not supporting one side of the House but will act in a completely neutral, apolitical way with integrity all the time? That's what we need in Ontario, and I ask her to go back and look at this process again.

Hon. Sylvia Jones: I think the member, as a lawyer and legislator, would also agree that no one is above the law. Whether you're a constable, whether you are a commissioner, whether you are a member of provincial Parliament, you swear an oath to uphold the laws of this province. Clearly, Mr. Blair chose not to do that when he used his personal position as a deputy with the Ontario Provincial Police to try to bolster his argument that he should have received the job.

I cannot understand how you don't get that he cannot use his uniform and his position as a deputy commissioner to further his own personal gain. This was a clear violation of his trust and the trust we place in the Ontario Provincial Police.

RURAL TRANSPORTATION

The Speaker (Hon. Ted Arnott): Next question? The member for Sarnia-Lambton.

Applause.

Mr. Robert Bailey: Thank you. That applause is well deserved.

My question is to the Minister of Transportation. Our government for the people is committed to ensuring we are supporting our small rural communities across Ontario because they tend to lack the population base or resources to support a public transit system like the urban areas. I know that the minister represents rural areas, as do I and many of my PC colleagues. We understand that rural communities need support from all levels of government to continue to thrive, but also to get their residents to and from where they need to go. We value our municipal partners, working collaboratively with them to deliver the best possible service to Ontarians across this province. Our government for the people was elected on that promise to get people moving, and we are doing just that.

Can the minister share more about how our government is working with our municipal partners and getting the people of Ontario moving again?

Hon. Jeff Yurek: I want to thank the member from Sarnia-Lambton for that great question. It's great to be a

colleague with him over these past eight years. He's such a champion for the people of Sarnia–Lambton. He's also the master of private members' business. We should all take a lesson on how Bob can work on both sides of the House and get his bills passed. It's great of him to do that.

Mr. Speaker, as the member mentioned, I do represent Elgin–Middlesex–London, which has many of the gems in this province in rural Ontario. Our government for the people is committed to continuing to work with and support municipalities and rural communities across the province. That's why I was pleased to announce just recently that our government for the people supported transit projects in smaller communities across this province through the Community Transportation Grant Program. This program is making life better for people throughout rural and northern Ontario, because they have access to fewer public transportation options.

Mr. Speaker, I will speak more on this in the supplementary.

The Speaker (Hon. Ted Arnott): Supplementary question?

Mr. Robert Bailey: Thank you to the member for that answer and for his ongoing support of smaller communities and municipalities. It's great to hear that our government for the people is yet again working with municipalities to support those programs that help Ontarians stay connected in their communities. The previous government, propped up by the NDP, had 15 years to find a solution on transit in this province and failed. The only thing the Liberals and NDP seemed to be good at was racking up a \$15-billion deficit. The people of Ontario, especially those in rural Ontario, cannot afford the delays and financial mismanagement of the previous government.

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I know my community of Sarnia–Lambton was thrilled to hear about the announcement of the Community Transportation Grant Program. Can this minister please share more about this great program?

Hon. Jeff Yurek: Thanks again for that question. Mr. Speaker, our government for the people is working with smaller community support programs that will help Ontarians stay connected with their communities, access employment and social programs, attend appointments, visit friends and families, and maintain an independent and active lifestyle. Over five years, the program will provide \$30 million to 39 municipalities. Municipalities will use this provincial funding to partner with community organizations to coordinate local transportation services.

This is yet another example of our government for the people keeping its promise to get Ontario moving. Since the inception of the program, more than 28,000 people have used new services to make more than 105,000 trips. Our government for the people is committed to getting the people of Ontario moving, and we are doing just that across the province, which is more than the previous government, supported by the NDP, did over their 15 years in office.

We're proud of our work so far on the transportation file. We're proud of working with rural and northern

Ontario, and we're going to keep on doing this over the next four years.

PUBLIC TRANSIT

Ms. Jessica Bell: My question is to the Minister of Transportation. York region and GO buses used to travel to the centre of York University, but now these buses drop people off at a TTC subway stop up to three kilometres away. Thousands of students and workers now must make an unfair and costly choice: Pay another fare to ride just one or two subway stops, or walk up to three kilometres in the cold.

This is hurting people like Bonnie Cormier from Whitby. Bonnie's commute has increased by up to 40 minutes a day and she has to pay extra for worse service. She also has to pay extra for child care because she now has to drop her 14-month-old off early and pick him up late, because of her longer commute.

Minister, when are you going to show leadership and bring back the buses to York University?

Hon. Jeff Yurek: Thank you for that question. We do take issues that you've raised, like Bonnie's, quite seriously.

But just to be crystal clear to this House, York University is the one that requested GO buses be removed from their campus. We did so after their direction. Only after Metrolinx advocated on behalf of students and commuters did York University agree to the buses coming back until the end of January, but they have now left. Unfortunately, York University was all for removing these buses, until staff and students protested the fact that they removed these buses. York University was unable to provide safe access for where these buses would resume services.

So we—Metrolinx and the university—are ongoing discussing how we can get these buses back to the campus. We only wish we had more of a willing partner with York University to find a solution that we need.

The Speaker (Hon. Ted Arnott): Supplementary question?

Ms. Jessica Bell: York University has a very different understanding of the problem, Minister. What we also know is that this is a transit problem that has been going on for six months. People like Bonnie and thousands of people like her are paying higher fares for worse service. You are the minister. You can fix this problem. Tell Metrolinx to return bus service back to York University and move forward on fair fare integration so that riders who use two different local transit systems don't have to pay a double fare.

Minister, when will you direct Metrolinx to return service to York University?

The Speaker (Hon. Ted Arnott): Before the minister replies, I'm going to remind all members to please make your comments through the Chair.

Minister?

Hon. Jeff Yurek: Thank you very much, Mr. Speaker. Back to the member: To solve this problem, we actually need to have two partners at the table willing to find a

solution. Metrolinx is sitting at the table, willing to put a solution forward that would be acceptable to the staff and students at York University. Asking buses to come back to the campus but not on the bus loop doesn't make any sense, as there are no other safe alternatives for the students and staff to get off.

We're willing to sit down and work on this. I would hope that the NDP isn't using this as an opportunity to politicize the situation, which can be solved at the table. We're looking forward to Metrolinx to continue working with York University to find a solution. We want to find a solution to this problem. We will find a solution to this. We just need York University to sit down and work with Metrolinx on that solution. It's going to happen as long as York University is willing to work with this government.

TAXATION

Mr. Stephen Lecce: My question is to the Minister of the Environment, Conservation and Parks. Last evening, the Prime Minister held a rally to promote his government's intention of placing a carbon tax on families, on workers and on seniors in this province. The Trudeau carbon tax will place a burden on the people of Ontario, costing up to \$1,000 per household and as high as \$5,000 in the future, yet the Prime Minister claims that this tax will put more money back into the pockets of Ontarians.

Speaker, I do not trust any politician that promises a tax hike will ultimately lead to tax savings. To our Prime Minister: Stop offending the intelligence of Canadians. We do not trust your government. We have lost confidence in this government. We believe that Canadians, including former members of your own cabinet, demand greater transparency from this government.

To the minister: Can you outline the true cost and economic consequence of the Trudeau carbon tax?

Hon. Rod Phillips: Mr. Speaker, through you to the member for King–Vaughan—and again, he's a great, great representative for his constituents here in this House—I do understand that the Prime Minister received a bit of a mixed reaction last night, even among a partisan crowd. Perhaps that's because even partisan Liberals know that a carbon tax is going to hurt families. They know that a carbon tax will have a direct impact on families and businesses. A carbon tax will cost the people of Ontario more to fill their cars, to feed their families, to heat their homes. It's bad for families, bad for jobs and bad for investment. Higher costs, less jobs and lower investment: If that's not a recipe for a recession, I don't know what is.

If the Trudeau Liberals are interested in a plan, then they can take a good look at ours and see how we will meet the targets they set—the Paris targets—but not do it with a job-killing, recessive carbon tax. We stand with the people of Ontario, and we'll use all of the tools at our disposal to fight the Trudeau carbon tax and to protect families.

The Speaker (Hon. Ted Arnott): Supplementary?

Mr. Stephen Lecce: Back to the minister: I appreciate that he has made clear that this government intends to fight

climate change without placing an expensive tax on the people of this province.

Our party is proud to have a strong record of advancing conservation here in Ontario: the party that created and protected the Oak Ridges moraine, the party that expanded park space in Ontario by the single largest amount by the living lands program, the party that initiated the first closure of a coal-fired gas plant in this province. We did all of this without imposing higher taxes on seniors, families and the future prosperity of this province.

While middle-class families will pay the price, the Prime Minister cut a special carbon tax side deal with Canada's largest emitters that means that they will continue to pollute for free while families and small businesses get hit with the full force of this tax.

Minister, what are the next steps you're taking to fight this tax while making sure we protect our environment for the next generation?

Hon. Rod Phillips: Again, thank you to the member for his question.

Our government is committed to reducing greenhouse gases. That's why we brought forward our made-in-Ontario environment plan, which will work with Ontarians to have a balance of a healthy economy and a healthy environment. We've already brought forward some key pieces of this plan for consultation.

We have brought forward our plans to increase renewable content in gasoline to 15% in order to reduce emissions. As I mentioned last week, we've brought forward our plans to have big polluters pay, to make sure that there are emissions standards that are tough but fair on polluters.

As I've also mentioned in this House, I will be bringing forward our plan on waste, a plan that will reduce organics going into landfills, which will reduce harmful methane, which is also a dangerous greenhouse gas.

This province deserves a plan that balances a healthy economy with a healthy environment. That's the plan we're bringing forward, and we're bringing it forward without a carbon tax.

MERCURY POISONING

Mr. Sol Mamakwa: Meegwetch. The question is to the Deputy Premier. It has been three years since the chief of Grassy Narrows First Nation called for an investigation into the mercury poisoning of the soil and the river. A retired mill worker in Dryden said that he helped dump 50 barrels of salt and mercury behind the mill in 1972, and he had identified the spot.

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The government's own environmental experts recommended the cleanup in the area over a year ago, but this week, the Toronto Star reported that this government and the Liberals before them have not taken any action to find the barrels. How long will it take this government to dig and clean up this toxic dump before more people from Grassy Narrows are poisoned?

Hon. Christine Elliott: To the Minister of the Environment, Conservation and Parks.

Hon. Rod Phillips: Mr. Speaker, through you to the member: I do thank him for the question. Our government is committed to the health and safety of all of our communities. Mercury contamination in the English and Wabigoon Rivers has a profound impact on the communities and has to be properly addressed. We're committed to continuing to address this issue with the communities involved. As the member knows, there's a tripartite group, including the WIN First Nation and the Grassy Narrows First Nation. We're working collaboratively with that group.

I visited Grassy Narrows and Chief Turtle in October of last year, in Grassy Narrows. We made it clear that once we had the science, we would meet with them further, and that science was concluded in December. The results of that have now been communicated to the working group, which includes all three First Nations. On February 7, I sent a letter to Chief Turtle in this regard.

We will continue to work with the Grassy Narrows First Nations band and also with the WIN First Nation band to ensure that this issue is addressed.

Mr. Sol Mamakwa: The children, youth and elders of Grassy Narrows First Nation live downstream from the Dryden mill and eat fish from the Wabigoon River. If poison was buried in Toronto, you can be sure that this government would act. After more than 200 days in power, it is time for this government to take action to find the buried mercury upstream from Grassy Narrows, like they would for other communities in this province.

Deputy Premier, why the double standard? When will Grassy Narrows have answers? The community is waiting.

Hon. Rod Phillips: Again, thank you to the member for his question. Let me assure you and this Legislature that we are concerned about the health and safety of every community. That's why I visited Grassy Narrows. That's why I met with Chief Turtle. That's also why I met with Chief Paishk.

We were working co-operatively, as the tripartite agreement calls for, to make sure that once the science was confirmed, we would then go forward with the study. That's what the working group will be focused on. So we are working with the local communities, we are working with the affected individuals to protect the health and safety of that community and we will make sure that that is a priority for this government.

The Speaker (Hon. Ted Arnott): The time for question period has expired.

VISITORS

The Speaker (Hon. Ted Arnott): The member for Scarborough–Guildwood on a point of order.

Ms. Mitzie Hunter: I'd just like to welcome some members from Scarborough here today: Kingsley Kwok and Anton Paul, from my riding; and Brenda Allan and Drew Finucane, who are with OPSEU health services.

CORRECTION OF RECORD

The Speaker (Hon. Ted Arnott): The member for Ottawa–Vanier on a point of order.

M^{me} Nathalie Des Rosiers: I'd like to correct my record. It's Brad Blair, and not Bill Blair.

The Speaker (Hon. Ted Arnott): Thank you. That concludes question period, as I said.

PRIVATE MEMBERS' PUBLIC BUSINESS

The Speaker (Hon. Ted Arnott): 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 Ms. Lindo assumes ballot item number 60 and Ms. Fife assumes ballot item number 73.

NOTICE OF DISSATISFACTION

The Speaker (Hon. Ted Arnott): Pursuant to standing order 38(a), the member for Ottawa–Vanier has given notice of her dissatisfaction with the answer to her question given by the Minister of Community Safety and Correctional Services concerning the dismissal of Mr. Blair and the appointment of Mr. Taverner. This matter will be debated today at 6 p.m.

DEFERRED VOTES

TIME ALLOCATION

The Speaker (Hon. Ted Arnott): We have a deferred vote on government notice of motion number 31, relating to allocation of time on Bill 68, An Act with respect to community safety and policing.

Call in the members. This will be a five-minute bell.

The division bells rang from 1144 to 1149.

The Speaker (Hon. Ted Arnott): On March 4, 2019, Ms. Thompson moved government notice of motion number 31, relating to allocation of time on Bill 68.

All those in favour of the motion will please rise one at a time and be recognized by the Clerk.

Ayes

Baber, Roman	Jones, Sylvia	Rasheed, Kaleed
Babikian, Aris	Kanapathi, Logan	Roberts, Jeremy
Bailey, Robert	Karahalios, Belinda	Romano, Ross
Barrett, Toby	Ke, Vincent	Sabawy, Sheref
Bethlenfalvy, Peter	Khanjin, Andrea	Sandhu, Amarjot
Bouma, Will	Kramp, Daryl	Sarkaria, Prabmeet Singh
Calandra, Paul	Kusendova, Natalia	Scott, Laurie
Cho, Raymond Sung Joon	Lecce, Stephen	Skelly, Donna
Cho, Stan	Martin, Robin	Smith, Dave
Clark, Steve	Martow, Gila	Surma, Kinga
Coe, Lorne	McKenna, Jane	Tangri, Nina
Cuzzetto, Rudy	McNaughton, Monte	Thanigasalam, Vijay
Downey, Doug	Mulroney, Caroline	Thompson, Lisa M.
Dunlop, Jill	Nicholls, Rick	Tibollo, Michael A.
Elliott, Christine	Oosterhoff, Sam	Triantafilopoulos, Effie J.
Fedeli, Victor	Pang, Billy	Wai, Daisy
Fee, Amy	Park, Lindsey	Walker, Bill
Fullerton, Merrilee	Parsa, Michael	Yakabuski, John
Ghamari, Goldie	Pettapiece, Randy	Yurek, Jeff
Harris, Mike	Phillips, Rod	
Hogarth, Christine	Piccini, David	

The Speaker (Hon. Ted Arnott): All those opposed to the motion will please rise one at a time and be recognized by the Clerk.

Nays

Armstrong, Teresa J.	Glover, Chris	Rakocevic, Tom
Arthur, Ian	Gretzky, Lisa	Sattler, Peggy
Bell, Jessica	Harden, Joel	Schreiner, Mike
Berns-McGown, Rima	Hassan, Faisal	Shaw, Sandy
Bisson, Gilles	Hatfield, Percy	Singh, Gurratan
Bourgouin, Guy	Hunter, Mitzie	Singh, Sara
Burch, Jeff	Karpoche, Bhutla	Stevens, Jennifer (Jennie)
Coteau, Michael	Kernaghan, Terence	Stiles, Marit
Des Rosiers, Nathalie	Lindo, Laura Mae	Tabuns, Peter
Fife, Catherine	Mamakwa, Sol	Taylor, Monique
Fraser, John	Miller, Paul	Vanthof, John
Fraser, Jennifer K.	Monteith-Farrell, Judith	West, Jamie
Gates, Wayne	Morrison, Suze	Wynne, Kathleen O.
Gélinas, France	Natyshak, Taras	Yarde, Kevin

The Clerk of the Assembly (Mr. Todd Decker): The ayes are 61; the nays are 42.

The Speaker (Hon. Ted Arnott): I declare the motion carried.

Motion agreed to.

TIME ALLOCATION

The Speaker (Hon. Ted Arnott): We now have a deferred vote on government notice of motion number 32, relating to allocation of time on Bill 66, An Act to restore Ontario's competitiveness by amending or repealing certain acts.

Mr. Gilles Bisson: Same vote.

The Speaker (Hon. Ted Arnott): Same vote? Agreed? Agreed.

The Clerk of the Assembly (Mr. Todd Decker): The ayes are 61; the nays are 42.

The Speaker (Hon. Ted Arnott): I declare the motion carried.

Motion agreed to.

The Speaker (Hon. Ted Arnott): This House stands in recess until 3 p.m.

The House recessed from 1153 to 1500.

INTRODUCTION OF VISITORS

Mr. Peter Tabuns: It's my pleasure to welcome to the Legislature my constituents Nell Toussaint, Anthony Cato, Joel Roy, Andrew Dekany and Khojasteh Kazemi. Welcome to the Ontario Legislature.

M^{me} France Gélinas: It is my pleasure to introduce Nancy Beverly, who is the sister of Mrs. Kathryn Missen, as well as my intern, Clara Pasieka. Welcome to Queen's Park.

WEARING OF SWEATER

The Speaker (Hon. Ted Arnott): I'm told the member for Sarnia-Lambton has a point of order.

Mr. Robert Bailey: I'd like to ask unanimous consent of the House to wear a sweater for my member's statement about mental health.

The Speaker (Hon. Ted Arnott): The member from Sarnia-Lambton is seeking the unanimous consent of the House to wear a sports sweater related to his upcoming member's statement. Agreed? Agreed.

MEMBERS' STATEMENTS

AUTISM TREATMENT

Mr. Gilles Bisson: I have to say that parents and families in all of our ridings—but I'll speak specifically of Timmins—are very worried and very upset with this government in regard to the decision on what they're going to do with autism.

We have a situation where, yes, the Liberals had messed it up. We can all agree, on both sides of the House, that they did a poor job of managing how we provide services—IBI and ABA—to kids who need that type of treatment in order to deal with autism. But what this government has essentially done is say, "We'll deal with the list by kicking everybody off of the list." So now we have a situation where you had some families whose children were getting IBI therapy. We all have a number of them in our ridings. Those parents and those children are beside themselves because they're about to lose that on April 1. The government's solution to fixing the waiting list problem with children who need autism services is to kick everybody off the list and have no list.

I say to the government across the way: You've got this wrong. Parents in our ridings across this province, just as in your ridings, are not going to have enough money to pay for the types of services their children need based on your new program. I say: Go back to the drawing board. Let's figure out how we fix this so that kids at the end are getting the services that they need and we don't leave those children behind.

BLAIR BUCHANAN

Mr. Lorne Coe: I stand today to pay tribute to my friend and fellow Rotarian Blair Buchanan. Blair was honoured recently by the Ontario Real Estate Association with the Ontario Realtors Care Foundation's Spirit Award. The Spirit Award recognizes individuals who have, in some significant way, contributed to the goals of the Ontario Realtors Care Foundation. Blair was chosen from among all realtors in the province as the one most deserving of recognition for his volunteer work in the community.

Over the many years of our friendship, Blair has been an exceptional Rotarian and humanitarian. He and his family give countless volunteer hours to support organizations in my riding, including the Muslim Welfare Centre, WindReach Farm and St. Vincent's Kitchen, among others.

Speaker, I'm proud to call Blair Buchanan a friend, and I'm honoured to be able to pay tribute to him today and the award bestowed on him—so richly deserved.

TENANT PROTECTION

Ms. Marit Stiles: Today I rise to talk about the serious issue of renovations plaguing my riding of Davenport and so many others here in Toronto.

Last week, the Toronto Star profiled the tenants of 394 Dovercourt Road, long-time residents who are facing the prospect of mass eviction after a new landlord bought the property and made plans to overhaul it.

Under the law, these tenants are entitled to move back into their homes when the renovations are complete. But weaknesses in that law mean that the chances are that they will be denied re-entry to their homes. That's because landlords know that the maximum fine for blocking their return is just \$75,000, an amount that can easily be recouped and then some by jacking up the rent in the newly empty units. Loopholes like vacancy decontrol create incentives for landlords to kick out long-term tenants, like those at 394 Dovercourt, some of whom have lived there for 20 years.

Speaker, if we don't act now, our downtown communities risk becoming places where only the very wealthy can afford to live. But instead of trying to fix the loopholes left in place by the Liberal government, this government is tilting the scales even further from tenants.

On behalf of my community of Davenport, I call on the government to step up, close the loopholes and strengthen the tenancy laws that are forcing people out of their homes and onto the streets.

FACE OFF FOR MENTAL HEALTH

Mr. Robert Bailey: Last spring, it was my privilege to rise in this Legislature and speak briefly about a youth mental health program in my Sarnia–Lambton riding called Face Off for Mental Health. Today it's a pleasure to tell you how this program has grown into its second full season.

St. Clair Child and Youth Services launched this exciting campaign with the aim of raising awareness of mental health through local hockey associations. The goal of the program is to make hockey arenas and dressing rooms a safe place to talk about mental health. Each of these associations has hosted a Face Off for Mental Health Awareness Weekend where teams from mite to midgets taped their sticks green in support of mental health. Information about the local mental health resources was made available, plus coaching staff participated in mental health education workshops.

During this past year, local support for the program grew tremendously, with Junior A Lambton Sting and Junior B Sarnia Legionnaires holding special nights to help raise awareness of mental health issues.

It's estimated that one in five children in Ontario experience a mental health problem. That's why local

programs like life Face Off for Mental Health are so important. Today I would like to commend St. Clair Child and Youth Services and their partners for introducing this great program in Sarnia–Lambton.

HEALTH CARE

Mr. Peter Tabuns: My constituent Ms. Nell Toussaint is with us this afternoon. Nell was an irregular migrant to Canada living in Ontario who several years ago required essential medical treatment, which she did not receive. As a consequence of that failure to provide essential health care, Ms. Toussaint is now blind, has had a leg amputation and has suffered kidney failure, a heart attack and a stroke.

Had she received timely and appropriate health care, there was a reasonable expectation that she would have been able to resume work, enjoy increased mobility and be free of severe pain. Ms. Toussaint was excluded from the Interim Federal Health Program and could not get the essential health care she needed here in Ontario. The United Nations Human Rights Committee reviewed Canada's actions and stated in its decision that Canada had violated the International Covenant on Civil and Political Rights, which it is part of.

Canada must act to prevent similar violations in the future, including reviewing its national legislation to ensure that irregular migrants have access to essential health care to prevent a reasonably foreseeable risk that can result in loss of life. Here in Ontario we need to ensure that primary care and hospital-based care are available, and that the Health Insurance Act is amended to allow for OHIP coverage for irregular migrants who need essential health care, so we can avoid such desperate outcomes for those living in Ontario who through no fault of their own face severe medical crises on our soil.

INTERNATIONAL WOMEN'S DAY

Ms. Kathleen O. Wynne: This Friday, March 8, is International Women's Day. The theme this year is #BalanceforBetter society—forging a more gender-balanced world. Women's Day has been marked in Canada since 1909 and adopted in 1975 by the United Nations to be celebrated internationally.

I will hold an event to celebrate IWD in Don Valley West, Mr. Speaker—it's always a lively event—and I'm sure many members will do the same. At all of those events, there will be many fine words said about the progress that we have made as a society. And it's true: There have been many advances since 1909 when women in this country did not even have the right to vote.

But there is so much more to do. The rates of sexual assault of women in Ontario are still unacceptable. There are too few women in boardrooms across the nation and women still earn 74 cents for every dollar that men earn. It's exactly because of those facts that our government increased the minimum wage to \$14 and would have raised it to \$15. We changed labour laws so that everyone would have sick days—paid sick days for all workers—

and we began to address precarious work. We commissioned a consultation on the gender wage strategy.

1510

On Friday, when those fine words are said in ridings across the province, I just want us all to remember that actions speak louder than words. All of those things I've talked about have been repealed by this current government, Mr. Speaker.

EDUCATION FUNDING

Mr. Sam Oosterhoff: I'm excited to be able to rise in the House today and thank the Ministry of Education for approving land funding for a new high school in my riding of Niagara West. The Ministry of Education has worked closely with the District School Board of Niagara and local municipalities to ensure the project meets the needs of families and students.

Once completed, the West Niagara high school, located in Beamsville, will create space for 1,533 pupils and will serve the communities of Grimsby, Lincoln and Smithville.

Supporting our growing communities with these essential investments is key to ensuring the future of students in West Niagara. It is encouraging to know that we have a government that recognizes the value of reliable and quality education. I'm happy to see their commitment to providing first-rate learning environments to students in Niagara and across Ontario.

I know this investment will also support the community of West Niagara, serving as more than a school, but also as a gathering place for families for generations to come. On behalf of my constituents, thank you to everyone who has played a part in making this happen.

AUTISM TREATMENT

Miss Monique Taylor: Friday is International Women's Day, a day to honour the accomplishments of women and to remind ourselves that the fight for equality is not yet over.

We should be reminded today about challenges women still face in the workplace and at home. In February, the Conservative government announced disastrous changes to the Ontario Autism Program, changes that have brought parents out into the streets in protest. But one often overlooked element is the mental anguish felt by parents who have to protest again and again just to get their children the support that they need. The mental health burden, the stress, the anxiety and the fear for their child's future often falls on mothers.

I have received many letters, emails and calls from women who are scared for their child's future and angry with this government. I have even received messages from women scared for their own future. That's because they are physically burnt out and financially strained.

Raising a child with special needs is not easy. These courageous women fight to make sure their children get the right support, but sometimes dark clouds form. I have

heard from courageous women who are battling depression and even suicidal thinking. One mother shared with me that she looked up whether her life insurance covers suicide. She wanted me to let everyone here know how autism changes affect parents too. She tells me she's not the only parent with dark thoughts lately. The mental anguish caused by the government's changes to the Ontario Autism Program disproportionately affects women.

On this International Women's Day, I want to recognize the courageous sisters, mothers, aunts, grandmothers and friends who have to bear the mental stress.

YELLOW BRICK HOUSE

Mrs. Daisy Wai: This weekend, I had the privilege of attending the 14th annual gala of the Yellow Brick House, which empowers women and children of domestic abuse to rebuild their lives. Since 1978, Yellow Brick House has been providing emergency shelter, transitional housing and a wide range of counselling services for victims.

This year's gala, Break the Silence, included a drum café, a high-energy, interactive experience where the audience played drums along with the performers, reminding us it is time to break the silence.

It was a fundraising event, but I have never seen an audience so engaged and involved. Everyone wanted to outbid the other at the live auction.

I was very encouraged by the story of the guest speaker, Ibeth Ramos Ayala, who is the CEO and president of Innovision. Ibeth bravely shared her personal story of how Yellow Brick House helped her to rebuild her life. Ibeth now gives back in a big way to support them financially and with her time and talent.

Mr. Speaker, Yellow Brick House will continue to help raise awareness, change attitudes and behaviours, and achieve real progress for women and children.

COMMUNITY SAFETY

Mr. Aris Babikian: Families in Scarborough–Agin-court will finally be able to count on a fair and transparent police oversight process that will always put public safety first. The Comprehensive Ontario Police Services Act, 2019, will finally fix the previous government's Bill 175, which treated police with suspicion. That record of failure allowed for the dramatic increase in violent crimes in my riding of Scarborough–Agin-court.

Recently in my community, a number of Chinese businesses were robbed by criminals, such as Magic Noodle, Kenny's Noodle and Potman Hotpot, forcing many of the businesses to shut down temporarily. This is truly unacceptable. Law-abiding business owners and employees should be able to operate without fear.

Mr. Speaker, we believe that ensuring the security of the people is the government's most fundamental responsibility. This act will help in bridging the division to make Ontario safer.

To support our local community, my colleague Vincent Ke and I attended a crime prevention information session

organized by the Chinese Cultural Centre of Greater Toronto and 42 Division in my riding. It became very clear that action was needed to ensure that police, community members and government are working together to ensure the safety and security of everyone. During my visits with the affected establishments, I heard that more work needs to be done to ensure that the partnership between the community and the police is enhanced.

Finally, Mr. Speaker—

The Speaker (Hon. Ted Arnott): Thank you very much.

REPORTS BY COMMITTEES

STANDING COMMITTEE ON GOVERNMENT AGENCIES

The Speaker (Hon. Ted Arnott): I beg to inform the House that today the Clerk received a report on attended appointments dated March 5, 2019, of the Standing Committee on Government Agencies. Pursuant to standing order 108(f)(9), the report is deemed to be adopted by the House.

Report deemed adopted.

STANDING COMMITTEE ON SOCIAL POLICY

Mrs. Nina Tangri: I beg leave to present a report from the Standing Committee on Social Policy and move its adoption.

The Clerk-at-the-Table (Mr. William Short): Your committee begs to report the following bill without amendment:

Bill 48, An Act to amend various Acts in relation to education and child care / *Projet de loi 48, Loi modifiant diverses lois en ce qui concerne l'éducation et la garde d'enfants.*

The Speaker (Hon. Ted Arnott): Shall the report be received and adopted? Agreed? Agreed.

Report adopted.

The Speaker (Hon. Ted Arnott): Pursuant to the order of the House dated February 21, 2019, the bill is ordered for third reading.

INTRODUCTION OF BILLS

9-1-1 EVERYWHERE IN ONTARIO ACT, 2019

LOI DE 2019 SUR LE 9-1-1 PARTOUT EN ONTARIO

Madame Gélinas moved first reading of the following bill:

Bill 75, An Act to enact the 9-1-1 Everywhere in Ontario Act, 2019 and to amend the Ombudsman Act to

create an Assistant Ombudsman responsible for the oversight of 9-1-1 operations / *Projet de loi 75, Loi édictant la Loi de 2019 sur le 9-1-1 partout en Ontario et modifiant la Loi sur l'ombudsman pour créer le poste d'ombudsman adjoint chargé de surveiller les activités du système 9-1-1.*

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

First reading agreed to.

1520

The Speaker (Hon. Ted Arnott): Would the member for Nickel Belt care to explain her bill?

M^{me} France Gélinas: The bill enacts the 9-1-1 Everywhere in Ontario Act, which requires the Minister of Community Safety and Correctional Services to fulfill various obligations related to the provision of and infrastructure for 911 services. The act also places certain obligations on persons or entities who operate a 911 call centre respecting the staffing, supervision and training of staff.

The bill also amends the Ombudsman Act to establish the position of assistant ombudsman responsible for the oversight of 911 operations and the assistant ombudsman's functions, which include assisting the Ombudsman with investigations relating to the provision of 911 services.

This bill is based on the coroner of Ontario's review of the deaths of Matthew Robert Humeniuk, Michael Isaac Kritz, Stephanie Joelle Bertrand, and Kathryn Missen—and I want to thank her sister Nancy Beverly for coming to the first reading.

PETITIONS

AUTISM TREATMENT

Ms. Jennifer K. French: I am pleased to introduce this petition.

“Support Ontario Families with Autism.

“To the Legislative Assembly of Ontario:

“Whereas every child with autism deserves access to sufficient treatment and support so that they can live to their fullest potential;

“Whereas the Ontario Autism Program was badly broken under the Liberals, and the changes introduced by the Conservatives have made it worse;

“Whereas the new funding caps are based on age and income, and not the clinical needs of the child;

“Whereas Ontario needs a true investment in evidence-based autism services that meets the needs of autistic children and their families;

“We, the undersigned, petition the Legislative Assembly of Ontario to direct the Ministry of Children, Community and Social Services to invest in equitable, needs-based autism services for all children who need them.”

I wholeheartedly support this petition, affix my name and will send it with page Anika.

INTERNATIONAL TRADE

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

“Whereas the government for the people was elected on a mandate to protect Ontarians’ jobs and improve conditions for job creators in our province; and

“Whereas we stood side by side with our federal partner and offered our full support throughout the USMCA negotiation process to make sure a deal got done; and

“Whereas, though a deal was reached, we remain concerned that the federal government’s concessions on class 7 milk, access to our dairy market and remaining steel and aluminium tariffs could negatively impact Ontario workers and businesses; and

“Whereas our government is consulting with representatives from these affected industries to determine the impact of this deal; and

“Whereas the government made a promise to vigorously defend and advance Ontario’s economic interests, and make sure that we protect our economy, jobs and the people of Ontario;

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

“Continue to protect Ontario jobs by calling on the federal government to compensate Ontario dairy farmers for the negative impacts that result from USMCA concessions.”

I am very happy to affix my signature and give it to page Josie.

AUTISM TREATMENT

Ms. Catherine Fife: These signatures are from families from Kitchener South–Hespeler and Kitchener–Conestoga, and this petition reads as follows:

“Support Ontario Families with Autism.

“To the Legislative Assembly of Ontario:

“Whereas every child with autism deserves access to sufficient treatment and support so that they can live to their fullest potential;

“Whereas the Ontario Autism Program was badly broken under the Liberals, and the changes introduced by the Conservatives have made it worse;

“Whereas the new funding caps are based on age and income, and not the clinical needs of the child;

“Whereas Ontario needs a true investment in evidence-based autism services that meets the needs of autistic children and their families;

“We, the undersigned, petition the Legislative Assembly of Ontario to direct the Ministry of Children, Community and Social Services to invest in equitable, needs-based autism services for all children who need them.”

I fully support this petition, will affix my signature and give it to page Hidayah.

SCHOOL BUS SAFETY

Ms. Kathleen O. Wynne: I’m presenting this petition on behalf of members of my constituency.

“To the Legislative Assembly of Ontario:

“Whereas approximately 830,000 students are transported in school buses every school day in Ontario; and

“Whereas the safety of Ontario’s students should be the top priority of the government of the day, to ensure that every preventative measure is taken to protect them from harm or death on our roads and highways while travelling on school buses; and

“Whereas recently revealed evidence has demonstrated that compartmentalization is ineffective in protecting children in school bus side collisions, rollovers and vertical lifts, and that the use of three-point seat belts has been scientifically proven to mitigate the risk of potential injury or death in such events; and

“Whereas the number of 6,696 injuries and 19 fatalities across Canada since 1999 as a result of school bus accidents and collisions demands immediate action to prevent any further casualties; and ...

“Whereas numerous education, transportation and parent groups have voiced their support in making sure no effort is spared in protecting Ontario’s students;

“Therefore we, the undersigned, petition the Legislative Assembly of Ontario to engage in any required consultation process with all relevant stakeholders, and to mandate the installation of three-point seat belts on school buses.”

I will affix my signature and I will send it with Adam.

FISH AND WILDLIFE MANAGEMENT

Mr. Dave Smith: “To the Legislative Assembly of Ontario:

“Whereas the ban on hunting and trapping in sections of Ontario to protect the eastern hybrid wolf was put in place without regard for the overall ecosystem;

“Whereas this ban has adversely affected the ability of the Ministry of Natural Resources and Forestry (MNR), hunters and trappers to properly manage animal populations and Ontario’s ecosystem;

“Whereas this ban is no longer needed and is in fact causing more damage to Ontario’s ecosystem and increasing unnecessary encounters between wildlife and Ontarians;

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

“That the Minister of Natural Resources and Forestry immediately lift the ban on hunting and trapping set in place to protect the eastern hybrid wolf.”

I’ll affix my name to this petition and give it to page Cameron.

CHILD ADVOCATE

Ms. Marit Stiles: It gives me great pleasure to introduce a petition on behalf of my constituent Pauline

O'Connor. It's entitled "Protect the Provincial Advocate for Children and Youth."

"To the Legislative Assembly of Ontario:

"Whereas children and youth are Ontario's most valuable resource and deserve the best start in life we can provide;

"Whereas Ontario's most vulnerable children and youth are too often underserved by our child welfare, mental health, youth justice and special-needs sectors; ...

"Whereas the Provincial Advocate for Children and Youth is charged with the responsibility of providing an independent voice for children and youth by partnering with them to bring issues forward; ...

"We, the undersigned, petition the Legislative Assembly of Ontario to direct the Doug Ford government to reverse its decision to close the Office of the Provincial Advocate for Children and Youth."

I will be affixing my signature to this petition and I'll be handing it over to page Daniel to table it with the Clerks.

ENVIRONMENTAL PROTECTION

Mr. Mike Schreiner: I have a petition to the Legislative Assembly of Ontario.

"Whereas the Paris Galt moraine performs critical ecological and hydrological functions that are vital for the well-being of our environment and communities;

"Whereas the moraine provides habitat for wildlife, maintains wetlands, streams and rivers, and filters and stores drinking water;

"Whereas the city of Guelph is the largest city in Canada to rely almost exclusively on groundwater for their drinking water and the moraine is an essential water recharge area in the Grand River watershed;

"Whereas the moraines in the area provide drinking water for close to 200,000 people and the surrounding population is expected to grow by one million people by 2041;

"Whereas protecting the moraine is the fiscally responsible option to ensure the availability of clean drinking water and finding other means of providing water would be extremely expensive;

"We, the undersigned, petition the Legislative Assembly of Ontario to protect the ecological and hydrological integrity of the Paris Galt moraine."

I fully support this petition, will sign it and ask page Collin to take it to the table.

ANIMAL PROTECTION

Mr. Will Bouma: I would like to bring this petition on behalf of my constituents and also some from Haldimand-Norfolk. This is to the Legislative Assembly of Ontario.

"Whereas all animals in Ontario deserve our protection but are largely going unprotected at this time;

"Whereas the Ontario Society for the Prevention of Cruelty to Animals (OSPCA) is the only agency in Ontario authorized to enforce animal protection laws;

1530

"Whereas the OSPCA has continually cut back services, including the recent decision to stop investigating incidents involving farm animals, including horses, as well as failing to fully investigate poorly run zoos, dogfighting operations, puppy and kitten mills and even documented cases of dogs being tortured in the city of Toronto;

"Whereas the OSPCA has made itself completely unaccountable to the public by eliminating annual general members meetings and board elections as well as eliminating a government representative from their board meetings;

"Whereas the Ministry of Community Safety and Correctional Services provides an annual grant to the OSPCA of \$5.75 million of the public's dollars, for which the OSPCA is to provide province-wide coverage and other services which the OSPCA has failed to deliver;

"We, the undersigned, hereby petition the Legislative Assembly of Ontario to exercise its authority, through the Ministry of Community Safety and Correctional Services under the current funding transfer payment agreement and the OSPCA Act, requiring that:

"—through the OSPCA Act the government annul the bylaws of the OSPCA;

"—a new bylaw be required that re-establishes annual general members meetings, open board elections and a government representative attending board meetings;

"—the government immediately suspend funding to the OSPCA and conduct a forensic audit of the organization's use of public funds;

"—the government conduct a service delivery audit of the OSPCA relating to the enforcement of the OSPCA Act;

"—recognize the important job of animal protection by creating a more accountable system that ensures the immediate and long-term protection of the millions of animals who live among us."

I fully support this petition, will affix my name and sign it and give it to page Julian.

AUTISM TREATMENT

Mr. Tom Rakocevic: My petition is entitled "Support Ontario Families with Autism."

"To the Legislative Assembly of Ontario:

"Whereas every child with autism deserves access to sufficient treatment and support so that they can live to their fullest potential;

"Whereas the Ontario Autism Program was badly broken under the Liberals, and the changes introduced by the Conservatives have made it worse;

"Whereas the new funding caps are based on age and income, and not the clinical needs of the child;

"Whereas Ontario needs a true investment in evidence-based autism services that meets the needs of autistic children and their families;

"We, the undersigned, petition the Legislative Assembly of Ontario to direct the Ministry of Children, Community and Social Services to invest in equitable,

needs-based autism services for all children who need them.”

I will support this and be affixing my signature to it.

VETERANS MEMORIAL

Mr. Toby Barrett: This petition is titled “Petition in Support of Constructing a Memorial to Honour Our Heroes.”

“To the Legislative Assembly of Ontario:

“Whereas over 40,000 Canadian Armed Forces members served in the war in Afghanistan including the 159 Canadians who made the ultimate sacrifice; and

“Whereas the Premier made a commitment to the people of Ontario to build a memorial to honour the bravery and sacrifice of our armed forces; and

“Whereas, by remembering their service and sacrifice, we recognize the values and freedoms these men and women fought to preserve; and

“Whereas the memorial will show our gratitude to our veterans, their families and to their descendants; and

“Whereas the memorial will be a place of remembrance, a form of tribute, and an important reminder to future generations of the contributions and sacrifices that have helped shape our country;

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

“That the government of Ontario immediately construct the memorial to honour the heroes of the war in Afghanistan.”

I obviously support this petition and affix my signature.

EMERGENCY SERVICES

M^{me} France Gélinas: I would like to thank Mr. Arthur Schmitt from Lively in my riding for this petition. It goes as follows:

“911 Emergency Response....

“Whereas, when we face an emergency we all know to dial 911 for help; and

“Whereas access to emergency services through 911 is not available in all regions of Ontario but most Ontarians believe that it is; and

“Whereas many Ontarians have discovered that 911 was not available while they faced an emergency; and

“Whereas all Ontarians expect and deserve access to 911 service throughout our province;

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

“To provide 911 emergency response everywhere in Ontario by land line or cellphone.”

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

HEALTH CARE FUNDING

Mr. Deepak Anand: Since we have our Minister of Health here, I would like to read the petition.

“To the Legislative Assembly of Ontario:

“Whereas the government for the people was elected on a mandate to end hallway health care and cut hospital wait times; and

“Whereas for too long Ontario patients, families, doctors and nurses have been frustrated with inefficient and overcrowded hospitals; and

“Whereas hallway health care is a multifaceted problem that requires innovative solutions and a long-term focus; and

“Whereas our government has consulted with health care professionals to develop a plan to end hallway health care, and improve health outcomes and patient satisfaction;

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

“Take the first step in fulfilling this promise by investing \$90 million to create over 640 new beds and provide additional funds to hospitals in advance of flu season, and build 6,000 new long-term beds across the province.”

I fully support this petition. I’ll put my signature and give it to page Martin.

AUTISM TREATMENT

Ms. Bhutla Karpoche: This petition is titled “Support Ontario Families with Autism.”

“To the Legislative Assembly of Ontario:

“Whereas every child with autism deserves access to sufficient treatment and support so that they can live to their fullest potential;

“Whereas the Ontario Autism Program was badly broken under the Liberals, and the changes introduced by the Conservatives have made it worse;

“Whereas the new funding caps are based on age and income, and not the clinical needs of the child;

“Whereas Ontario needs a true investment in evidence-based autism services that meets the needs of autistic children and their families;

“We, the undersigned, petition the Legislative Assembly of Ontario to direct the Ministry of Children, Community and Social Services to invest in equitable, needs-based autism services for all children who need them.”

I couldn’t agree more with this petition, and I will affix my signature to it.

The Acting Speaker (Mr. Percy Hatfield): The time for petitions has expired.

REQUEST TO THE INTEGRITY COMMISSIONER

The Acting Speaker (Mr. Percy Hatfield): I beg to inform the House that I have today laid upon the table a request by the member for Brampton North to the Honourable J. David Wake, Integrity Commissioner, for an opinion pursuant to section 30 of the Members’ Integrity Act, 1994, on whether the member for Etobicoke

North, Doug Ford, has contravened the act or Ontario parliamentary convention.

ORDERS OF THE DAY

THE PEOPLE'S HEALTH CARE ACT, 2019

LOI DE 2019 SUR LES SOINS DE SANTÉ POUR LA POPULATION

Ms. Elliott moved second reading of the following bill:

Bill 74, An Act concerning the provision of health care, continuing Ontario Health and making consequential and related amendments and repeals / Projet de loi 74, Loi concernant la prestation de soins de santé, la prorogation de Santé Ontario, l'ajout de modifications corrélatives et connexes et des abrogations.

The Acting Speaker (Mr. Percy Hatfield): I return to the minister to kick off the debate.

Hon. Christine Elliott: I am pleased to rise in the House today to lead off second reading of Bill 74, The People's Health Care Act, 2019. Before I get started, I want to take a moment to acknowledge that I will be sharing my time today with the member for Eglinton–Lawrence and the member for Oakville North–Burlington. I want to thank them for their support today and for all of the important work they have been doing as my parliamentary assistants.

When our government first made this announcement, I started with a story of a gentleman whose family I met to discuss his health concerns. This gentleman was in good health when he suffered a catastrophic injury that left him in a quadriplegic condition. His family worked incredibly hard with his community hospital to transfer him to a place where he could receive rehabilitative services. While he was otherwise stable, however, he still required the services of a mechanical ventilator. So, despite this progress, the only option he had to access a life-saving ventilator was to stay in intensive care in his community hospital. He was there for 13 months. Can you imagine? Thirteen months, day in and day out, in intensive care.

1540

Why was that? Because there was no other place available to serve his needs. There was no other place in Ontario that offered rehabilitation services to people with spinal cord injuries who require mechanical ventilation. It actually got to the point where this gentleman no longer wished to live. But for his family's interventions, he would have been taken off life support. That care was not patient-centred. That care was system-driven, and that's the problem. That's the problem that we're facing in Ontario right now.

It's because of stories like these that we are ready to challenge the status quo and years of health care inefficiencies in this province. I, along with Premier Ford and our entire government, ran on a commitment to end hallway health care. It is a commitment that we take very

seriously. This has been a defining point of our government since day one. We have to do more to ensure that our publicly funded system of health care is sustainable into the future, and that high-quality care is there for us when we or our loved ones need it most. Too much time and attention is spent on maintaining a siloed and fragmented system, and far too many people believe that it is the patient's or the family's job to navigate a complicated system during what is already one of the most traumatic and stress-filled times of their lives. Speaker. That is just wrong.

Through my time working as an MPP, six years as health critic for the official opposition, as Ontario's first Patient Ombudsman, and now in my capacity as Minister of Health and Long-Term Care, I have heard from literally thousands of Ontarians: patients, families and caregivers; people from francophone and Indigenous communities; doctors, nurses and hospital administrators; personal support workers, harm reduction workers and pharmacists; paramedics, mental health workers and advocates for vulnerable people. As an MPP, I co-chaired an all-party Select Committee on Mental Health and Addictions, which received unanimous support from all members of this Legislature. I also co-chaired another unanimously supported, all-party Select Committee on Developmental Services. That committee recognized a range of inter-connecting issues, such as housing, employment and social supports, and, of course, health care as well.

From these thousands of hours of conversations, I have heard the collective refrain from the people of Ontario: Our system is in need of transformational change. Ontarians want their elected officials to put down their polling and finally pick up the mantle of leadership on the health care file. We are past the point of policy tinkering around the edges that simply shifts capacity problems from one end of the system to the other. More than ever, I've come to deeply understand that the people of Ontario want their elected officials and their health care officials to be working together.

Over the last five years, Ontario has spent 30% more than the Canadian average on administrative expenses in the health care system. I don't know about you, Speaker, but I have not seen a 30% improvement in health care in this province, nor would the over 1,000 patients receiving care each and every day in hospital hallways and storage rooms everywhere across this province.

In addition, after increasing across-the-board spending year after year after year, average wait times to get into long-term-care homes have ballooned by 300% since 2003, from 36 days to 146 days. We know that, in Ontario, health care represents 42 cents of every dollar the government collects from the taxpayers of Ontario, yet we rank poorly on critical factors such as wait times, quality of care and system integration compared to our provincial counterparts.

Right now, care is fragmented, particularly at transition points—for example, from hospital to home care. Patients, families and caregivers experience frequent gaps in care and have to reiterate their health concerns over and over

again because of a lack of digital tools and care continuity. For health care providers, they are each paid out of different funding envelopes and are discouraged from working together in teams.

The fact is that the value of our health care system is locked into silos. This is no way to deliver health care in our province. One of the most frustrating parts of all is the fact that Ontario is home to some of the best doctors, nurses and health care workers in the world, but—

Interjections.

Hon. Christine Elliott: Yes, and I want to thank them for the excellent quality of work that they do. But the fact is that we have left them to do their best with a patchwork system that is simply not built to help them do their jobs properly and in the way that they want. We hear from health care providers that they are ready for a system that encourages collaboration and partnership and frees them from the system slowed by the bureaucracy constructed within it.

Our health care providers work very hard to provide the best care possible. They work hard to connect us to the services we need, and they do it in spite of the fact that they have few tools in order to make those connections. Our providers should be able to easily link us to that care, and once they make that connection, they should have already have a patient's health care history so the patient doesn't have to keep repeating it. Imagine if we could book appointments online. Imagine if we could have access to our own health care records, and what we could do if we connected the best of what is happening across the system and leveraged those successes for everyone's benefit.

Let's take Cancer Care Ontario, for example. Cancer Care Ontario has built some of the best disease management programs for cancer and renal indications in the world. Imagine if we could amplify that success and take the best practices we have learned from developing these programs to develop a larger, more comprehensive chronic disease management strategy. Imagine if we could replicate those achievements to correct the inequities that have led to the development of such a world-class cancer system, while leaving our mental health and addiction system with little to no infrastructure at all. Right now, we are leaving Ontarians behind because our system is so disconnected. Efforts are not coordinated toward a common goal. They are dispersed and diluted across a system that competes for, rather than realizes the value of, every health care dollar.

Our government is proposing to change this. With Bill 74, our government is proposing to modernize our health care system for the people of Ontario. The truth is, Mr. Speaker, we have thousands of dedicated Ontarians working to deliver better health care in Ontario, but the structure of our system is flawed. That needs to end now.

One thing I want to make clear is our government's commitment to the fundamental right of Ontarians to universal access to a publicly funded system of health care. To me, and I think to everyone here, it's part of being a Canadian and part of being a proud Ontarian. That is why, throughout our government's process of developing

a vision for our health care system, as I explained last week when we introduced this proposed legislation, our primary objective is and always has been to strengthen our publicly funded system of health care. And that means paying for services with your OHIP card, as people have always done. We will continue that.

But while universal access to publicly funded health care is not up for debate, the structure and effectiveness of our system is. Our proposed system starts right at home, in our communities. One of our key priorities as a government is to deliver local community-based health care, unencumbered by bureaucracy.

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Bill 74 sets out our vision for patient-centred community care through fostering the establishment of local Ontario health teams. Ontario health teams would be made up of local health care providers, and would be organized in a way that would enable them to work as a coordinated group. These teams would be built to guide patients between providers and shepherd patients and their families through transition points. They would share responsibility for care plans, service provision and outcomes, and, most importantly, they would take the guesswork out of navigating our health care system.

Through Ontario health teams, patients would finally have a say in their own health care journey. With safeguards, of course, in place to protect information, our overall plan would give patients the option to securely access digital health services such as making online appointments, talking to a specialist virtually or having access to their own electronic health records.

A great part about Ontario health teams is that they would rely on leadership that already exists in the community, rather than create another level of bureaucracy and management.

I would like to share an example of this that is already at work in my riding, in Newmarket–Aurora, at Southlake Hospital through their Southlake@Home program. Southlake Hospital approached me late last year with a proactive proposal for integrated community care, specifically around the hospital/home care relationship. Through collaboration, we enabled the hospital to partner directly with home care providers in an effort to transition patients more effectively from hospital, and tackle Southlake's escalating alternate-level-of-care rate, which is one of the key drivers of hallway health care.

This is just one example of how community providers are already seeking out opportunities to join forces without interference from a heavy-handed government that thinks they know better than local providers. It's these opportunities and relationships we are proposing to empower through the creation of Ontario health teams, which will finally put the patient at the centre of the provider network.

We envision a community-based health care delivery model that connects care and includes primary care and hospitals, home care and long-term care, mental health and addictions supports, just to name a few. In fact, it would be great if we could connect our entire system, so that it would all be connected for the benefit of Ontario's patients, but we're working on that too.

The reality is that to build a patient-centred system of care we so fiercely believe is necessary, we must enable collaboration and coordination from the top of the system to the bottom of the system, and that includes looking at how to best structure our agencies. Over time, we have continued to add, but not to integrate nor coordinate, new agencies and health care programs. This approach to system planning has led to the development of many discrete agencies, each working toward a separate vision, following a distinct work plan, and embracing at times divergent views on how to best deliver patient care. These agencies also often focus on specific populations or disease states, while the reality is that people are whole individuals who span multiple groups or areas of focus. This, Speaker, is not the fault of any one group, but is our collective failure to demonstrate the courage to take the best of what's working and make it better.

The fact is that world-class programs and services are being developed and delivered through our various agencies, but once again, we have locked away the value of our system in silos. We have a genuine opportunity—and, in fact, I would say a responsibility—to amplify the strength of what's working by bringing our resources together and comparing what ideas and successes can be translated to improve other programs, to bring a consistency of approach to our health care system, a common vision, a single point of oversight, a united effort to get from where we are to where we know we need to be.

That is why we recently announced Ontario Health: to do this important work. If passed, this legislation would expand Ontario Health's mandate in order to bring the best of our system together and form deep roots that would put health care in our province on a solid foundation for the future.

Speaker, we are proposing a single and harmonized home for the programs and operations of existing provincial agencies. If Bill 74 should pass, Ontario Health would begin to take shape this spring. I do want to stress that this would be a long-term process. Our government realizes that what we are proposing—to bring these agencies together to form a new and more effective organization—would take time. But it is the right thing to do.

If we are truly serious about building a health care system centred on the needs of patients and their families, we need to roll up our sleeves and get to the hard work we need to do in order to get there. We need to be bold, we need to be creative and we need to work together.

I know that what we are proposing is significant and that real and meaningful change is never easy. But I also know what's at stake, which is no less than the future of the health care system we rely on and the system that we have an obligation to enhance and protect. The time is now. I am confident that we have the plan and the team to get this done right and bring about the change that we so desperately need in Ontario. I know that together, we will finally build a connected system in Ontario that provides patients with the care they need at any step of their health care journey.

I thank you, Speaker. I would like to take a moment to encourage all members to support the passage of The

People's Health Care Act. I would now like to take this moment to turn things over to my parliamentary assistant, the member from Eglinton—Lawrence.

The Acting Speaker (Mr. Percy Hatfield): The minister did say she was sharing her time, so I'll turn now to the member for Eglinton—Lawrence.

Mrs. Robin Martin: It gives me great pleasure to rise today in support of this proposed legislation, The People's Health Care Act, 2019. I thank the Deputy Premier and Minister of Health and Long-Term Care for sharing her time with me and my colleague from Oakville North—Burlington.

This is an exciting time for Ontario's public health care system. We are on the cusp of significant change—change that is going to make a positive impact in the lives of Ontario patients. I say this because the proposed legislation we are considering today is an important part of our overall plan to fix and strengthen the public health care system of this province. It is a plan that is focused on the needs of Ontario's patients and their families.

Speaker, I know that many of my colleagues and I share the Deputy Premier's belief that Ontarians—all Ontarians—deserve a connected health care system that puts their needs first. They all deserve peace of mind that our health care system will be sustainable and accessible for everyone, no matter where they live, no matter how much money they make, no matter the kind of care they require.

I don't think there was a person in this chamber who wasn't moved by the Deputy Premier's story of the gentleman who found himself in a quadriplegic condition after an accident. It is just one example of the many stories that we have all heard, stories which speak to the very need to make the changes that our government is proposing with Bill 74.

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When I hear or read about patient stories, I can't help but think of the ways that the changes that we are proposing in this legislation could have helped them if our system were already reaching its potential. Consider Chelsea's story. Chelsea is a 29-year-old mother of two in Sudbury. For years, Chelsea struggled to access care for her anxiety, panic disorder and depression. The first signs of significant mental health issues started for Chelsea with a panic attack at the age of 22.

I want to describe for you, Speaker, what the experience was like for Chelsea, using her own words. She said, "I didn't want to leave the house. I didn't want to shower. It just hurt to be alive. The pain is such emotional agony that you just don't know what to do with yourself. You feel alone and scared."

Like so many people do when they have an urgent health problem and they don't know where else to go, Chelsea went to the emergency department of her local hospital. Unfortunately, she went there not just one time; she went back to that emergency department several times over the course of a week. She spent hours waiting to see a doctor. Each time, Chelsea was sent home with no resources or information about where she could find help in the community.

Eventually—not right away, but eventually—Chelsea was prescribed anti-anxiety medication and antidepressants. It was a big moment for Chelsea because she had never received a prescription for her mental health illness before despite the fact that she had been diagnosed with a generalized anxiety disorder at the age of 12, nearly a decade earlier. The doctor at the hospital also referred her for outpatient cognitive behavioural therapy. But again, there were challenges. Despite the referral, Chelsea was looking at a nine-month wait to get the services that she needed.

Chelsea tried to get her life back on track. She was able to see a psychiatrist every three months or so. Unfortunately, she never really got to know him, and he never really got to know her; therefore, he wasn't really able to provide for her the care that she needed to recover. Unfortunately, it was a few years later—it took that long for Chelsea's dad to come up with the name of a psychotherapist that she could see. She began to see the psychotherapist every week—sometimes as often as three times a week—when her symptoms were at their worst. This was good news for Chelsea because she felt that her psychotherapist really understood her and really got to know her as a person. For the first time, Chelsea felt like she had compassionate care for her illness. Whatever she needed, her psychotherapist was there for her.

Today, Chelsea is 29 years old. She knows she will have to actively work on her recovery, but the good news is that Chelsea is feeling stronger and more confident than ever in her ability to manage her illness and cope with the symptoms.

Chelsea's story is not an unusual experience for those seeking help from our mental health system. In fact, Chelsea is in many ways fortunate that she eventually found the right care for her, because Chelsea's story illustrates some of the struggles people have in accessing mental health care. Many people don't know where to go or how to access the resources that they need.

Chelsea says she would like to see our health care system become more “holistic, patient-centred and recovery-oriented.” Speaker, when I read that story, I can't help but think how Chelsea's life and experience at this point might have been different if Ontario health teams were already in place. How different this part of her life could have been if she had gone directly to her primary care doctor and told the doctor what she was experiencing, and if that doctor could have connected her to the right resources through an Ontario health team, or even if she had gone to an emergency department where the doctors there were able to connect her to the right resources because they all belonged to the same network of doctors and other health care professionals that make up a local Ontario health team.

Speaker, for patients like Chelsea, Ontario health teams are going to make the greatest difference. If passed, Bill 74 would support the implementation of these health teams. Isn't a better-connected health care system what we all want? Isn't that what we expect from our health care system?

Speaker, all the stories that we hear are reminders of how our health care system could be stronger and how there is still work to be done to achieve its full potential. Whether you have read these stories or not, most of us in this chamber at one time or another have heard of someone having a difficult time accessing care. But I think all of us likely, at one time or another, have also actually experienced the need to share our own health care history with a doctor or nurse or some other health care provider. It's not always easy to remember everything that the doctor or nurse practitioner may need to know about your health.

This certainly can get very frustrating if you need to see a different care provider or many different care providers to help you address a problem with your health, especially within a short period of time. Having to retell your story over and over again, wondering why the providers don't already have your information at their fingertips, is very frustrating and it seems all the more absurd in this day and age when you can order a meal on your phone before you even arrive at a restaurant, but you still need to explain to every health care provider you see all of the details of your health history.

I think that is why the story of Randy from Pickering really resonated with me. Randy is retired today. He's had a few health problems, and he has had to tell his health care story many, many times before. That is why Randy created a chart, which he designed himself, that he takes with him whenever he meets a new health care provider. The chart is a line across a page that is like a heartbeat, and it tells the story of his health over time. Where there's a spike in the line, that marks a serious illness or health emergency at a particular point in his life. His chart details when he experienced a concussion and a broken nose in his youth and it covers his more recent cases of deep vein thrombosis and atrial flutter.

Randy is doing well now in recovery from his surgery. But it was during his recovery, while he was thinking about his past health care events that he should follow up on, that Randy came to realize that all of his doctors have different health records that together would create a complete history of his care. Randy realized he didn't have one himself, so he came up with the idea of making one for himself based on his memory. But without the complete picture, Randy realized all we have—all any of us have—are pieces or fragments of our health story. And that, Randy pointed out, puts the onus on patients and their caregivers to have to write it all down themselves, to tell their own story.

Randy's experience with the health care system was positive overall. He feels that he had good care, but he wishes that hospitals and health care providers could give him more access to his digital health care records. Randy believes our health is a shared responsibility and that we can't adjust our own behaviours if we don't have the information we need when we need it.

Randy is proactive. He says that if he had access to his health records now, he knows what he would do. He would check on the most pressing issues, like his heart health—appropriate today—and he would review conditions that

might need attention. As Randy so astutely points out, “The system has different metrics on me, but none of them have the full story.” Wouldn’t it be great if patients had that full story? If they could easily share that information with new doctors and other health care providers?

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Speaker, an important part of the proposed legislation before us would support our government’s proposal to improve access to secure digital tools, such as online health records and virtual care options for patients. It would mean fewer long, awkward silences between you and a health care provider whom you’ve never met before as you try to remember if you’ve ever had a CAT scan or how many years it’s been since you broke your leg.

The Deputy Premier has pointed out on several occasions the need to relentlessly focus on better connected care so we can help Ontarians like Chelsea get the care that’s right for them when they need it; also, the need to focus on improving the patient experience for people like Randy so that they can take proactive action to address their health, helping them stay out of our hospitals and out of emergency rooms by ensuring that they are able to stay ahead of their health issues.

Speaker, our government is taking a comprehensive, pragmatic approach to improve our public health care system with Bill 74, an approach which would ensure that our system remains sustainable for all Ontarians to access when and where they need it. I would encourage all of my colleagues to support this important piece of legislation.

I’d now like to turn the rest of the time over to my colleague the member from Oakville North–Burlington.

The Acting Speaker (Mr. Percy Hatfield): The minister did say she was sharing her time, and it’s time to go to the second part of that, which would be the member from Oakville North–Burlington.

Ms. Effie J. Triantafilopoulos: I am pleased to have the opportunity to speak in support of Bill 74, the proposed People’s Health Care Act, 2019. I want to thank the Deputy Premier and Minister of Health and Long-Term Care for the opportunity and for her leadership and commitment to this important piece of proposed legislation.

Since taking office, our government has been working tirelessly to find efficient and pragmatic solutions to fix the serious flaws in our public health care system for the people of Ontario. We, as Ontarians, are blessed to enjoy some of the finest health care in the world, and yet for all the great stories about the successes in our health care system, we are all aware of stories which show us how it could be even better.

We have just heard some of the stories from my colleague the member from Eglinton–Lawrence, who I know has been on the ground listening to people and working on ways to address the serious mental health needs of people in Ontario. I want to applaud her on her work.

But, Speaker, we all know stories of our own, of people visiting an emergency department where they waited a long time to get the care they needed, or where the care they received had to be administered in a hallway due to the lack of available spaces. Those are the stories which

have driven our government to take another look at our health care system so we could address the needs of the people who rely on it.

Without the necessary changes to our current health care model, people could face delays and gaps that exacerbate their medical conditions. This could leave them entering long-term care before they needed to and losing their independence. People deserve to age in their own homes. To achieve this, we must ensure access to easy-to-understand health care networks that provide them with care that lets them stay at home and out of hospital and long-term-care beds.

This is why the Premier created his Council on Improving Healthcare and Ending Hallway Medicine: to look at how we could improve health outcomes for Ontarians, how we could improve patient satisfaction and how we could improve the way our health care is delivered.

In January, Speaker, the council released its first report which identified issues in Ontario’s health care system that our modernization plan is focused on fixing. These include the problems patients have in navigating the health care system and the need for more effective coordination to make the system more efficient and to achieve better value for taxpayer money.

Our government appreciates the strategic advice provided by the council and we will continue to work with our partners in health care, including the council, as we continue to fix and strengthen our health care system and provide better care for patients. Beyond the work of the council, our government has also been out in our communities talking to our doctors, talking to our nurses, and meeting with patients and their families about how we could improve the system.

In my role as the parliamentary assistant to the Minister of Health and Long-Term Care, I’ve consulted with the staff, management and residents of long-term-care homes across the province. They share many of the same frustrations as others in Ontario. They know that there are too many people on waiting lists. That’s why I am proud that our government is creating 6,000 new long-term-care beds, towards a total of 15,000 over five years. But we also need a better-connected system.

All of these factors have led our government to introduce the proposed The People’s Health Care Act, 2019. With this bill, Speaker, our government is proposing a long-term-care plan for a connected and sustainable public health care system that better meets patient and provider needs, a plan for a system that would make it easier for people to get the services they need and easier to connect to the services that are right for them.

Speaker, I have also heard from constituents in Oakville North–Burlington that this is the right step forward. Local residents in my community have talked to me about their positive experiences with family health teams, and in one case a cancer survivor stated that our plan for a patient-centred health care system will be “life-changing, as a patient.”

Right now, our health care system already accounts for 42 cents of every dollar spent by government. We need to

be smart with how we use the hard-earned tax dollars with which Ontarians have entrusted us. We need a holistic solution that looks at taking care of the needs of patients today, but also patients in the future. And we need to know we are making changes so our health care system is sustainable and accessible for years to come. We want to know our health care system will be there when we need it in our old age, and that it will be there for our children in their old age as well. Speaker, our government understands Ontario needs a sustainable health care system that will ensure patients get the care they need in the years ahead.

These are the many reasons we are proposing to make important changes to our health care system. Our plan is about modernizing and connecting the health care system from top to bottom. This means better and more connected services on the ground for patients, caregivers and families. This also means better and consistent accountability and oversight for the health care system. This will be accomplished through the integration of multiple provincial agencies and specialized provincial programs into a single agency.

The government is proposing legislation that, if passed, would enable the phased reorganization of many government agency functions. Instead of multiple agencies providing different oversight and direction in the health care system, a single agency, Ontario Health, would oversee health care delivery, improve clinical guidance, and provide support for providers to ensure better quality care for patients. Establishing a single, accountable Ontario health agency would enable the expansion of the exceptional clinical guidance and quality improvement activities that currently exist in agencies such as Cancer Care Ontario into other critical areas of the health care sector.

Speaker, Ontario currently has a large network of provincial and regional agencies, clinical oversight bodies and 1,800 health service provider organizations. This situation, frankly, causes confusion for patients and providers trying to navigate the health care system. It has also led to the development of many different agencies, each working toward different visions and each with different views on how to promote and deliver the best possible care to patients.

Our health care system is being pulled in a number of different directions. And that is another reason, if this legislation should pass, why Ontario Health would be so helpful. It would ensure the “consistency of approach” the Deputy Premier spoke of earlier. All of these agencies agree, and actually have agreed for years, that there is an opportunity to better connect services for patients so that patients are better served. There has been report after report arguing for this shift. Our government has been listening. And our government believes this is the right direction for our health care system.

Speaker, the proposed legislation before us today would also mark another significant change in how health care is delivered. If passed, this bill would help to foster conditions in which health care providers could more

easily work as one coordinated team, focusing on patients and specific local needs, so that people could more easily navigate the system and experience simple transitions from one health care provider to another.

Ontario health teams would be directly funded and directly accountable for improving patient experience and people’s health. This means that patients and families would have better access to more connected services and they would wait less for these services. Patients would no longer have to stay in beds in hospital hallways or be left to navigate their care on their own.

When Ontario health teams are established, people’s choice of providers would remain. I stress that: People’s choice of providers would remain. But they would also have more care choices available to them.

With safeguards in place, of course, to protect information, our overall plan would give patients the option to securely access digital health services, such as making online appointments, talking to a specialist virtually or having access to their own electronic health records.

Speaker, under this proposed plan, patients that are supported by providers that would become part of an Ontario health team would not need to sign up or undertake any administrative processes. They would experience greater access to care and support from a broader network of providers working together to improve their care.

Ontario health teams would represent a new way of organizing and delivering services in our communities. Local health care providers, hospitals, home care providers and others would work as one connected team, no matter where they provide the care. These teams would help seniors who want to age at home. Now, we know that living at home is the preference of most seniors, and a connected system with one agency supported by Ontario health teams would help ensure seniors can stay in their own homes as long as possible.

Ontario health teams would be responsible for understanding a patient’s health care history and needs and for directly connecting a patient to the different types of care they require. These teams would support seamless access to care and smooth transitions as patients move between one provider to another and receive care in different places or health care settings.

They would be responsible for ensuring that a patient has timely access to comprehensive health services, including primary care, hospitals, rehabilitation, home and community care, residential long-term care and mental health and addictions services.

Ontario health teams would be directly funded and held accountable for improving patient experience and people’s health. And Ontarians would still continue to be able to choose who provides their care.

Speaker, think about it. It’s like your local elementary school. Your school is responsible and accountable for ensuring your child has a grade 3 teacher in September. You don’t have to call all the grade 3 teachers in your neighbourhood and plead for them to take your child into their class. The school holds as much accountability for your child’s education as you do. That’s what accountable care means in the Ontario context.

This new model of delivering and funding health care is informed by leading examples of integrated care delivery and funding in other jurisdictions, and some of these jurisdictions include the United Kingdom, Germany, the United States, New Zealand and other Canadian provinces.

Our government believes health care providers are best positioned to work out the details of how to run these teams, and our government is not proposing to dictate the specific details at this point. We would, however, work with and learn from the early teams of health professionals and organizations who are the experts in providing high-quality health care.

Ontario health teams would focus on existing local health providers, partnering or working together to provide coordinated care, or teams of providers serving a specialized patient population, such as specialty pediatric or patients with complex health needs.

These teams would be established in phases across the province. We expect there to be an ongoing process to support interested groups to become an Ontario health team, starting in March. This phased approach would allow the government to assess how the early adopters operate and apply the lessons learned to the future rollout of Ontario health teams across the province.

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Alongside these improvements, we are also making the Minister's Patient and Family Advisory Council a permanent council to support the important work of our government. This will ensure that patients have a voice at the highest level of our health care system.

Speaker, we all have heard the refrain that Rome wasn't built in a day, and that expression is as true today as it was all those centuries ago. The changes our government is proposing are fundamental advancements that will take time to implement, but we, as a government, are committed to seeing our proposed vision for health care through to completion, and I want to encourage all members to support this important piece of proposed legislation.

We know that timid changes will not improve our health care system. The Deputy Premier has spoken of the need for a bold change. It is the only way forward. It is the only way to achieve our vision of a health care system that provides complete connected care. I am so pleased that the Deputy Premier is committed to building a holistic health care system in Ontario, smoothing out the gaps, finding pragmatic solutions to health care problems, and making services work better for the people, because it's individual patients and their families who must be at the heart of our health care system.

If this legislation passes, this work will take time. While we are doing this important work, Ontarians will continue to have access to the care they need and to the health care providers with whom they have built relationships. If Ontarians have a health concern, they should continue to contact their health care providers directly to get the care they need. That will not change. In the meantime, our government continues the important work of fixing and strengthening our health care system to ensure it better meets patient and provider needs now and in the future.

With that, I would like to encourage all of my colleagues to support the passage of Bill 74 for the benefit of patients across our great province.

Once again, I would also like to thank and commend our Minister of Health and Long-Term Care for the many years that she has spent on the health care file. She is someone who comes to this portfolio with deep experience, and has been able to provide the kind of vision and direction we need to go forward on this important piece of legislation. So thank you very much, Minister.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Mr. Ian Arthur: Thank you for the contributions that have been made to this debate on health care so far. I've listened intently, and I find it very interesting.

Mr. Speaker, I spent my whole previous career as a chef trying to find efficiencies: how I can save half a per cent of food waste over here; how I can create a system that uses 10 seconds less over here, in order to get things out the door in the same way. I have a deep appreciation for systems, ones that work well and ones that do find efficiencies.

I read with interest the article in the Toronto Star that talked about St. Joseph's hospital and the system put in place there—how it had saved hospital days, days in hospital beds per patient, and lowered costs. I found that really interesting. I admire those sorts of systems any time they are put in place; I truly do. What I hope is that it is truly that sort of thing that gets put in place, that what the members opposite are speaking about in this chamber are those kinds of technologically driven efficiencies that are there, and that they don't actually end up with less people working in our health care system, less nurses who are able to take care of people. I don't want to see that use of technology as a justification for needing less nurses or front-line workers. I truly hope that the members opposite stand behind those examples that they have found so far—of those efficiencies they've been able to find, and using technology in that manner—and that we do see a progression to better health care in Ontario under them.

We in the opposition will be watching very closely to make sure that those nurses and those front-line workers continue to have the jobs that they need, and that Ontarians continue to have the health care they need in this province.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Mr. Will Bouma: I'd like to thank our Minister of Health and Deputy Premier, as well as our PAs, for so eloquently talking about what we're hoping to do with this health care legislation—and the member from Kingston and the Islands for his kind words about this legislation. Again, we are all hopeful.

Last week, I got to experience our health care system first-hand. I actually got off a little bit early from House duty because on Tuesday my son went in, doubled over in pain, with his appendix. By midnight, he'd had it out laparoscopically. Everything went well, and the surgeon said, "It's good we got it when we did." I have nothing but good things to say about the Brant Community Healthcare

System and the care that we received there and the empathy that we saw from the nurses and all the staff. My wife kept asking, "Do you think it's because they know who we are?" I said, "No. It's probably good that they don't know who we are, because you never know."

Our health care system is, in one sense, really, really great, and we got through it. Yet, as we were going through the emergency room, I saw people lying on stretchers in the hallway. That shows you how far we have to go.

Is the problem our staff—the people at the check-in desk, the technicians who work in the hospital, our PSWs? Is the problem in the nurses, in the nursing care? Absolutely not. We got tremendous care. Is the problem in the physicians? No. The radiologist took us to his office, showed the CT scan of my son and talked about his concerns. It was so interesting to see all those things. So those problems aren't there.

So then, where is it? The problem is the philosophy behind how our health care system has been run for the last while. I can't help but think that as we change this philosophy, as we heard so eloquently today, we're going to end up with a better health care system.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Ms. Catherine Fife: I feel that this debate today is essentially about our principles and our values as a society. That is why this debate is so important.

I have to say there are some concerns out there—we have to be honest about that—because there has been a pattern of behaviour from this government which has run counter to the public interest. I'm putting that on the floor of the Legislature.

You have to look at who's crafting this piece of legislation. Ontario's deputy minister for strategic transformation was one of the architects of the restructuring of Alberta's health care system. This is not a system that we should be duplicating; this is an example and a lesson on how not to reform the health care system. The premise in that model is that public health care systems are too risk-averse and constrained by red tape and this is slowing down innovation. The explicit and specific aim of the Alberta system was to enable private sector commercialization and profit in public health care. We do not want that system in the province of Ontario.

We should look at other sectors that have gone down this exact road: Nova Scotia, British Columbia and, as I've mentioned, Alberta. There is no evidence to prove that a super-agency—that bigger is better. It compromises the very language that the Minister of Health has used around respecting local decisions.

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The reality is that we have people like a resident in my riding, Becky, who has type 1 diabetes. She struggled for years, was in emergency care, and finally she got the preventative care that she needs through the hospital. This changed recently, when her diabetes centre services were cut at Grand River Hospital and her nurse was laid off.

It is people on the front line who make the difference to patients in the province of Ontario's health care system. We are in a crisis. This is not the solution to that crisis.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Mr. Dave Smith: I'm going to take a different approach to what the member opposite did. I think, actually, this is a very positive thing.

We're designing a system right now where doctors, hospitals, home care—all of those agencies—are going to be working together, and I don't think that's a bad idea. We have too many silos right now.

Both the minister and the member from Eglinton–Lawrence spoke about stories of specific people, individuals, where our current system failed them. It didn't do what it was supposed to do for them, because it was the system. It wasn't the people who were involved; it was the system.

One quote from the member from Oakville North–Burlington: A patient looked at what we were talking about and came out and said, as a patient, that this will be "life-changing" for them.

We're giving greater access to care for people. We're giving the appropriate level of access to different agencies, to different groups, so that they're not stuck in that silo.

I'm going to talk specifically about my mother now. My mother is 74. I love her dearly. She has been with us 10 years longer than anyone thought she was going to be with us. She has significant health challenges, and she is a frequent visitor to the emergency department, not only in Picton but in Belleville. She has a lot of prescription medicines that are given to her, and every time she goes in in crisis, she's given another prescription. Thank God they go to the same pharmacist every time, because on a number of occasions, medicines that have been prescribed to deal with this current issue conflict with previous issues that she has existing prescriptions for.

It should not be the pharmacy that is saving her life; it should be our health care system. Sharing this information will make a world of difference for many.

The Acting Speaker (Mr. Percy Hatfield): Now we'll return to the minister to give her an opportunity to wrap up this portion of the debate.

Hon. Christine Elliott: I would like to thank the members for Kingston and the Islands, Brantford–Brant, Waterloo and Peterborough–Kawartha. I think there were some very valid points made by everyone.

The member from Kingston and the Islands talked about understanding systems and efficiencies. That's certainly something that we are working on right now in our health care system, to make it more efficient. As I said before, we are spending 42 cents of every dollar collected from Ontario taxpayers on health care, yet we don't do very well, by either national or international standards, so we need to work on that.

He also indicated that he wanted us to use technology for the right reasons and not to take jobs away from people. We actually want to use that technology to increase the levels of care for patients, to make sure that they can have access to their own electronic records and that they can book online and so on. That's what we want to use the technology for.

The member from Brantford–Brant talked about how we do have great parts of our health care system, but there are other parts that aren't functioning very well and that there is work that we need to do. But we do have wonderful health care professionals. It's just that our system is not structured to allow them to work well together.

The member from Waterloo talked about her concerns about encroaching privatization. I want to assure her that our goal here is and always has been to strengthen our public system of health care, to make sure that the patients receive connected care throughout their health care journey and that they continue to pay with their OHIP card. That has always been our goal and always will be our goal.

The member from Peterborough–Kawartha ended up speaking about his mother's health care and about the fact that she had a number of health care challenges and was on a number of prescriptions, and that it should have been our health care system that provided the care that she needed, not necessarily just the pharmacists. I am sitting beside one who I think does a wonderful job, but we need to make sure our system is enhanced so that patients do have that excellent-quality care from the system generally.

The Acting Speaker (Mr. Percy Hatfield): Further debate?

M^{me} France Gélinas: It was interesting to listen to members from the Progressive Conservatives talk about what they want to accomplish. What I will do is talk about what is in the bill, because between what they want to do and what the bill will do, there's an ocean between the two.

Let's start with the motivation behind the bill. The motivation is that, right now, close to half of our hospitals in Ontario are overcrowded. That means over half of our hospitals have more people than they have beds. For the hospital that's closest to me, Health Sciences North, in Sudbury, they have, on average, 40 people waiting in the emergency room for a bed. The emergency room was made for about 37 people. So, right off the bat, you have more people waiting than the emergency room was built for. The people who work there will continue to see 200 people a day in an emergency department that is full to overcapacity at all times. I think last year the only time that the hospital was not at overcapacity was 18 days out of 365.

The hospital has been very creative at finding extra beds. They have about 40 beds that are in bathrooms, in shower rooms. There are no more TV rooms. There are no more patient lounges. There are no more ends of corridors at Health Sciences North. Everything has been made into a patient's room. But it is not a room. It hasn't got a call bell. It hasn't got a place for you to go to the bathroom, to wash your hands, to sleep in peace, to have the rest that you need—and that is throughout the province.

The minister quotes in this House quite regularly that every single night, 1,000 Ontarians that are sick enough to be admitted into hospital will not be getting a bed. We agree that something needs to be done. We agree that we cannot continue to do this. But we disagree that the bill that we have in front of us will help us help the thousands

of Ontarians who will sleep in a bathroom, in a corridor, on a gurney, in a hallway, in a busy emergency room.

Last year, I brought the example of my neighbour, Léo Séguin. Léo, who got really sick last year, was admitted to Health Sciences North. Health Sciences North knew he was too sick to be sent back home, and they temporarily put him in a bathroom on the eighth floor of the South Tower. He spent his entire 10-day stay in that bathroom. There was nowhere else to move him.

I want to share this story of Danny Komarechka. Danny was a very quiet and private man. He came to the emergency department at Health Sciences North because things were bad. He was looking at the end of life. The nurses, the doctors and everybody else in that emergency department worked as hard as they could, on the morning of February 15, to try to find him a room, even an out-of-the-way spot where the 51-year-old mechanic could die in peace. But it was not to be, Speaker. For five of the seven hours, Danny was in the emergency room, on a gurney, with his family waiting in the emergency waiting area—not able to hold his hand, not able to look at him—because there was no room to let his family members be with him, the emergency department was so overcrowded. Two hours before he died, they were finally able to move him into a more secluded area of the emergency department. His mother, his sisters and his family were finally able to hold his hand as he died.

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This is not quality care. This is awful. A hospital in Ontario should be able to provide better care than this. Yet it plays out each and every single day in all 142 hospital corporations of this province, because they're overcrowded. We need to do something. We need to look at why they are overcrowded.

The two reasons that come off the top, Speaker, are always the same. The first: Our home care system is broken. Our home care system fails more people every single day than it helps. Frail, mostly elderly people who want to stay in their homes, who want to be supported respectfully in their homes, are failed by our home care system, which cannot recruit and retain a stable workforce.

Why? The reason is very clear to me: Because in 1996, Mike Harris and the Progressive Conservative government decided that privatization was better, that private home care providers were going to do things better and cheaper, and everything would be better. When the private home care providers answered requests for proposal, you could have sworn that they had cloned Mother Teresa, the care was going to be so amazing. They put every single not-for-profit home care provider—home care providers like the VON, which had been there for 100 years, went bankrupt because the for-profits were going to be so good.

Fast-forward and find me anyone in Ontario who would tell you, "We are so proud of the home care system we have in Ontario." Privatization has brought us what? It has brought us a terrible home care system that fails more people than it helps.

What do those people do? They end up in trouble, they end up in the emergency department, and then the good

people who work in the emergency department cannot send them back home because back home is not safe because the PSW hasn't shown up for the last three days and they now have a bedsore on their butt that big because they haven't been moved and they haven't been receiving the care they were supposed to receive. Why? Because the home care system in Ontario is dominated by the for-profits, whose number one priority is to make money.

They cannot recruit and retain a stable workforce. Try to find me anybody in Ontario who is able to recruit new PSWs to work in home care. Most of the long-term-care homes in my riding are not able to recruit new PSWs to look after the people in long-term care. So that's one.

The second is long-term care. The minister says quite regularly, when we ask questions, that there are 30,000 people waiting for a long-term-care bed in Ontario. One out of every seven hospital beds is used by somebody that we call ALC, alternate level of care. It's a fancy word that means that you really would like to be supported at home, you really would like to be supported someplace else, but you have no choice but to stay at the hospital. The hospital is our net of last resort that doesn't let anybody fall through. When the home care system fails you, they pick you up. When the wait for long-term care is 10 years long, they pick you up. But that means that our hospitals are overcrowded.

When you look at the bill, and I'm about to go through the bill, you will see that the changes that they are bringing forward—there is an ocean between what they say they want to do, which is to fix hospital overcrowding, and what the bill will bring us.

I will go through the bill. The bill is made up of schedules. It's a fancy word that says they're part of the bill. I will go through the different schedules of the bill.

Schedule 1 creates what I call a “super-agency,” but learn a new name, everyone: Ontario Health. Ontario Health is the name of the new super-agency. What Ontario Health will do is, it will create this one super-agency and basically do away with a whole bunch of other agencies that exist and put them all under one roof, agencies like Cancer Care Ontario. Cancer Care Ontario makes sure that no matter where you go in Ontario, you get the same quality oncology and cancer treatment. It doesn't matter if you are in northern Ontario, where I live, in Windsor, in Ottawa or in Toronto—where you live, Speaker, in Windsor—we all get the same.

We are renowned worldwide for the quality of cancer treatment that people in Ontario receive in huge part because of Cancer Care Ontario. Cancer Care Ontario has also taken the mandate for renal support, and the model works. Cancer Care Ontario works really well. They provide quality care. They ensure that everybody is treated the same. They ensure that when there's a new treatment, we make decisions based on evidence; that when there's a new drug, we make a decision to add it or not add it based on evidence. We provide good-quality care, and we have seen the results with cancer diagnostics, through treatment, often becoming a chronic disease—it's not the death sentence that it used to be when I first started to work.

Now, for many people, you will go to treatment, you will get better. Yes, you will have had cancer, but life will go on, and that's because of Cancer Care Ontario.

So, what will we do? Not we—they. They will create this super-agency and Cancer Care Ontario will be part of that. The board of directors, good people who give their time to make sure that we have strategic plans, that we really focus on what needs to be done; they're gone. The structure that helps all those people focus on a disease that's still quite scary, frankly, Speaker, cancer, all of this will be eaten up by the super-agency. Cancer Care Ontario is not broken. Cancer Care Ontario has nothing to do with the overcrowding. Cancer Care Ontario is a good agency that should continue to serve the people, but it will be gone.

Trillium Gift of Life: I can tell you that, here again, this is something where Ontario shines. We are able to identify donors, do organ retrieval and do organ transplantation like nobody else. Some surgeries that are super complicated—double lung and heart transplants in children—we do this, Speaker, in part because we have Trillium Gift of Life, which helps talk to the family which makes the tough decision to give the organs of a loved one. Because of all the work that they do—they won't be there no more. They will be gone, and so will eHealth Ontario. And eHealth Ontario is an agency that helps with digital health. I would say that digital health has a rather heavy and depressing history in Ontario.

Everybody will remember the \$1-billion eHealth scandal under the previous Liberals, where they used eHealth as a slush fund to fund well-connected Liberal insiders who never built the electronic health records that we all know we need. But eHealth was reborn after the scandal and is starting to do a pretty decent job. You look at what exists right now in Ottawa for children, you look at what we have in northern Ontario with the 22 hospitals—well, they're gone.

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Health Quality Ontario—same thing. We had finally put something in place to oversee our health care system, to see: Where do we do well? How do we define quality? Is waiting six months for an MRI too long or too short? That was Health Quality Ontario that helped us do this—gone.

Health Shared Services Ontario—this is to share procurement—they're gone.

HealthForceOntario: This is something that is very important where I live. We still have a lot of difficulty in certain parts of our province recruiting and retaining health care professionals, whether it be physicians, nurses, physiotherapists, occupational therapists, speech pathologists, social workers, you name it. In some parts of the province, they are hard to recruit. HealthForceOntario was there for us to help us.

All of those agencies that did what they were meant to do and were doing good work for the people of Ontario are going. What does that have to do, Speaker, with overcrowding in our hospitals? I must be missing something, because we are taking part of our health care system that

works really well and destroying it, and we are looking at other parts of our health care system that are not working well at all and we're not doing anything to fix that.

I will continue: Another part that the super-agency will take on are the 14 local health integration networks. People who know them know them as LHINs. Most people don't know them and don't bother to learn about them. They're gone. But what you should remember is the reason why we had the local health integration networks. We had them because, before, we used to have a system where it was the Ministry of Health that made all the decisions. The ministry had three regional offices, and the decisions that were made were often impossible for people on the ground to implement because the province of Ontario is so big and so diverse. Oftentimes, where I come from in northern Ontario, we would look at decisions that were made and say, "What were they thinking?" I mean, I have nothing against the good people who live in Toronto. They can make really good decisions for all those big hospitals you have down here, but I will bet that most of them could not pinpoint Westree or Mattagami First Nation on a map. If you don't even know where it is, how could you pretend that you are able to give advice as to what kinds of programs and health services those people need?

This is what the local health integration networks were meant to do. They were there to give local people a voice, to make sure that the existing infrastructure and the needs of the people were taken into account as you rolled out the different priorities of the ministry when it came to health care. I can give an example. The local health integration network in the northeast looked at the community of Timmins and said that the community of Timmins would really benefit from having a francophone community health centre. There is a high population of francophones. They have a hard time accessing primary care. There's a lot of chronic disease that is better addressed through a community health centre. They did all of the work and they submitted this to the ministry, and the ministry said, "We're not funding community health centres. Don't tell us that."

The goal of the local health integration network was to give local people a voice, but the government did not want to hear that voice. Now they're saying that we're not going to have them at all. We used to have a voice; most of the time, the government didn't want to hear us anyway. But now we're not even going to have a voice, so they're not going to have to pretend that they're listening to us. How is this going to help people who will sleep in a bathroom in a hospital tonight, Speaker? It's not. So this is part of schedule 1.

Another big part of schedule 1 is that they are going to create a new agency. I should add that this idea of creating a super-agency is not new. Alberta created one. It was a complete failure.

PEI created one. It didn't go too badly in PEI. But you have to look at PEI. The entire province has six hospitals. This is the entire province. Yes, it worked pretty good when you're talking about 250,000 people; Ontario has 14 million people. You see the difference?

It also was tried in Nova Scotia where the scandal that came out of this was pretty horrific. There are a CEO and a CFO of a hospital who are now in jail for embezzlement of money. And then we have Saskatchewan.

So this model that has nothing to do with fixing the overcrowding in our hospitals has been tried in four other provinces. If we exclude PEI—it's hard to compare Ontario to PEI, Speaker—it has been a failure, and I would even call it a catastrophic failure to their health care systems. Why are we going down this path again, Speaker? I'm not sure. But we are, under the premise that it will fix hallway medicine, but the two are not connected.

Second, we will create an integrated health delivery system. We have to learn a new name—in health care, you learn a lot of new names; it's good for the memory apparently—Ontario health teams. Ontario health teams will be new agencies that will be created. Depending on the rumours that you listen to, apparently we'll have between 30 and 50 of these Ontario health teams, and they will be set up to look after a specific population. It could be specializing in pediatrics, or it could be for a geographical area. They will include at least three of six health care agencies that we know now: hospitals, long-term care, home care, mental health, palliative care and primary care. Any one of them that offers three services—so you offer hospital services, long-term care, home care, mental health, palliative care or primary care. If you offer three of those, you can ask to be an Ontario health team.

The problem with the Ontario health teams is that there is no restriction that it has to be a not-for-profit entity. Actually, it could be for-profit. It doesn't have to be not-for-profit; it could be for-profit. It doesn't have to be Ontarian or Canadian. It could be international. It opens the door very, very wide to privatization.

We know, through the briefing I received this morning, that there are already agencies biting at the bit to get in line to get one of those. I'll go out on a limb and think that it's probably not "St. Mary of Something" hospital who's in line, but probably big, international, traded-on-the-stock-market, give-out-dividends-in-the-tens-of-millions-of-dollars agencies that are in line to be in charge of those Ontario health teams. You see, Speaker, health care in Ontario is a \$60-billion pie. We spend over \$60 billion each and every year. When you lay out a \$60-billion pie, it attracts people—not because they want to care for us; it attracts people who want to get rich.

Ms. Catherine Fife: And they will pay \$1,200 to go to a dinner.

M^{me} France Gélinas: And they will pay \$1,200 to go to a dinner. Yes, probably more than that.

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That \$60-billion pie: We're now saying, "Anybody who wants in, come on in. Come on in. It doesn't matter if you trade on the stock market; it doesn't matter if you're an international conglomerate; it doesn't matter where you come from; you can come to this \$60-billion pie and help yourself."

If the government was serious, they would put right in the bill, like we do in the Canada Health Act, that you have

to be not-for-profit, but they don't. I will read you the preamble to the bill, because every time I read it, I have this little weakness that comes over me. It says:

“The people of Ontario and their government....

“Are committed to a sustainable, digitally-enabled, publicly funded health care system built to last.”

This is not the Canada Health Act. The Canada Health Act says quite clearly that you have to be not-for-profit, that it has to be delivered by a not-for-profit. They have taken this out. This bill makes changes to 30 different bills that affect health care in Ontario. They're called statutes. I've never really understood why. They're bills to me. It changes 30 of those, and in all of those you take away “not-for-profit.”

If you were interested in not-for-profit, why would you be taking it out? Why would you be taking it out unless it's because you want to invite the for-profits to this \$60-billion pie that keeps going out every year called the health budget?

I'm worried about this, Speaker. I'm really worried. I have no problem with “publicly funded.” Yes, it is our tax dollars that fund the \$60 billion that goes out. But now we're opening it up to the for-profits in a way that is—don't get me wrong; when the Liberals were in power, they were quite open to for-profits in, basically, anything that was not 24-hour hospital care. If a hospital needed to balance its budget, they said, “Send it to the community. Send it to the for-profit sector. See if we care.” Well, I care, because every tax dollar that goes to profit does not go to providing care to the people of Ontario who need it.

Those are the new Ontario health teams. The Ontario health teams—as I said, you have six: hospital, long-term care, mental health, palliative care, primary care—and I'm just missing one. In three out of the six, you can be an Ontario health team, and it doesn't matter if you are for-profit; it doesn't matter if you trade on the stock market; it doesn't matter if you have taken tens of millions of dollars in profit out of care—you're allowed. You're allowed to go. I'm not comfortable with that. If they were serious, they would put restrictions on the type of entity, such as not-for-profit or Canadian not-for-profit, that could become Ontario health teams, but they did not.

The next part of schedule 1 talks about the Patient Ombudsman. The Patient Ombudsman—remember, we've been wanting the Patient Ombudsman to be with the Ombudsman, to have all of the power of the Ombudsman: the power to request people to give testimony and request people and enter—no, no, no; we're not changing the power of the Patient Ombudsman. He or she will now be under the Ontario Health agency. What an opportunity wasted. The Patient Ombudsman should be part of the Ombudsman and should have the same powers as the Ontario Ombudsman. We're not doing that.

The next part of schedule 1 is that the Minister of Health will now have extraordinary powers to, basically, require integration, whether you want to or not. The minister today talked about some success of integration. She's right: There are some places within our province where integration has led to beautiful things. She gave an

example about Southlake hospital; I will give an example about Espanola hospital.

Espanola is a little community in northeastern Ontario. The hospital, long-term care, community mental health, palliative care, home care and primary care are all under one roof, all work together. If more people are needed in emerg, they can go to emerg; if somebody is sick in long-term care, they can send a doctor right away, because primary care works. It works, Speaker. It is beautiful. All six parts of the health care system are under one roof, working together in Espanola. It is phenomenal. But it came because we had willing partners. It came because those people learned to work together, saw the good that they could do if they were to be together, and chose to be together.

This is really different than what we have now. What we have now is that the Minister of Health for Ontario will have these extraordinary powers under Bill 74 to require integration—even more power than what the LHINs used to have. Voluntary integration always led to beautiful things in health care. Forcing agencies that don't want to work together to work together, no matter what, because you will withdraw their funding—this is not always a winning combination.

I will throw in this little hiccup. We have Catholic hospitals in Ontario that have served the people of Ontario—for hundreds of years, often. There are programs that they don't want to be associated with, one being abortion. To force a Catholic hospital into an integration with an agency that would be associated with this—first of all, it's very disrespectful, but it is within the new powers of the minister to do that.

Is this really the path we want to go down, where we will force integration on unwilling partners? Well, the bill does that. How does that help the thousands of Ontarians who will be sleeping in a bathroom or in a hallway in our hospitals tonight? It doesn't.

The next part of the bill talks about—I told you that the LHINs were there to give people a voice. We've taken out the voice. Now they say that the new super-agency will have to establish a mechanism to engage with patients, families and caregivers. But that's it; that's all. They don't give much more detail than that.

From the NDP, we have written to the government House leader. I will read a part of the letter into the record:

“In light of the significant and unprecedented changes proposed by Bill 74, Ontario New Democrats believe that the House consideration of the proposed legislation must include robust public consultation if we are to attempt to ensure health care reform meets the needs of Ontarians.

“To that end, we are proposing that the committee consultations for Bill 74 should be designed to incorporate two weeks of travelling hearings, held in communities across the province, to ensure that the House gathers feedback from a broad cross-section of Ontarians—including patients, families, front-line health care workers and professionals—in order to better understand the implications of the bill. Given the report that the bill is the most significant change to health care since the introduction of

medicare, it only makes sense to take the time needed to get it right.

“New Democrats are open to discussing ways that we can work together to make this important consultation a reality while minimizing the impact on health operations.
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“As Bill 74 is now before the House, time is of the essence; we look forward to hearing from you soon.”

We’ve sent this; so far we haven’t had a response, but I wanted to put it in at this point, because consultation is important. Medicare is a program that defines us. It defines us as Canadians. It defines us as Ontarians. Care is based on need, not on ability to pay—this is something that we all believe in. We are about to change medicare. Some of the changes that are in this bill will never be able to be undone. Don’t you think it would be reasonable to give people a chance to have a voice?

If we look at what has been happening in this House so far—and I had really good notes that Kevin had given me. Kevin, I’m sorry; I lost your notes. If you’re watching, please send them again. What has been happening in this House is that most of the time a bill gets time-allocated. People in Toronto will get a couple of hours to talk to a bill, then we will do clause-by-clause, and then it will be all over. This is too important a bill. The government has said it themselves. This is one of the most important, transformational changes that will happen to our health care system. They say that it is to solve the crisis of hallway medicine and hallway nursing, but it is not. It will change our health care system, not for the better, but forever. We deserve to give people a chance to be heard. Let us know what changes are coming. Let us know how this will impact the way that our health care system will be there to help us.

Next, the bill also gives cabinet regulation power—this is a really weird one—where cabinet will be able to exempt the agency, Ontario health team, health service provider, or anyone that receives funding from following the bill. Weird, eh? We go through all of this to say we need this bill, this is transformational, this is the way the health care system of the future will be working, and then we give the government the right to not follow the bill.

Mr. Terence Kernaghan: They must not believe in it.

M^{me} France Gélinas: Yes. “They must not believe in it” is one explanation. I cannot understand why we would have something like this in a bill. If you go through the trouble of making all of those fundamental changes to our health care system and then you say, “But, really, we don’t want to; we’re not going to do that”—I would say, go back to the drawing board and stay there a little bit longer; maybe embark on a bit of a consultation to see what people have to say.

I wanted to give some examples of what has been happening. We can give the example of Bill 4, the Cap and Trade Cancellation Act. We had two days of hearings, two days of clause-by-clause and two and a half hours of debate. But the Better Local Government Act had no hearings and no clause-by-clause. When we talk about the Labour Relations Amendment Act, Bill 67—no hearings,

no clause-by-clause, no debate. The list goes on. Making Ontario Open for Business Act: one day of hearings, one day of clause-by-clause—always in Toronto. You would think that making Ontario open for business is not only the business of Toronto, it’s the business—no, only in Toronto, only one day, only clause-by-clause. We have the Comprehensive Ontario Police Services Act, where—same thing—we will have one day of hearings, two days of clause-by-clause, and in the one day of hearings, I think the deputations will be limited to six minutes on a bill that has about 300 pages.

Hmm. I see a pattern, and I don’t like it.

But it was not always like that, Speaker. I can quote from the chair of the PC caucus, the member for Hastings–Lennox and Addington, who said, “Queen’s Park is not the centre of the universe.... We wanted to hear about the real world, not just the view from a Toronto cubicle.” That was a quote from February 20. People do realize that not everybody lives in Toronto.

The current government House leader, the member for Bay of Quinte, said, “I thought we actually would end up treating committee like a branch of the House that is supposed to review instead of simply approve government legislation ... which I think is something that we’re seriously lacking here at Queen’s Park these days.

“If we have the opportunity to hear directly from the people outside of the GTA—and there is a huge province outside of GTA—we should take the opportunity to do that.”

That was the member from Bay of Quinte, the current government House leader. How come he doesn’t believe in that anymore?

The current Minister of Natural Resources and Forestry, the member from Renfrew–Nipissing–Pembroke, said, “Like for this bill here, the time allocation motion provides for all the hearings to be here at the Legislature—no travel across the province, yet this will affect every citizen” of the province.

We know that health care will affect every citizen of the province. It is worth travelling this piece of legislation and letting people have a say on something as important as medicare, on something as important as our health care system.

I’m now going to move to schedule 2.

In schedule 2, the Ministry of Health and Long-Term Care says that they will create two advisory councils that were previously under the LHINs. It creates the Indigenous health council and the French-language health services advisory council, and the minister will select the members appointed to those councils.

Je veux parler un petit peu des entités de planification des services de santé en français. On nous a dit que les entités de planification vont pouvoir continuer d’exister. Mais si les RLSS n’existent plus, à qui est-ce que les entités vont donner leurs rapports? Qui est-ce que les entités vont guider pour s’assurer que les francophones de la province sont bien représentés par les décisions qui sont prises par le ministère de la Santé?

En ce moment, les entités de planification donnent leurs recommandations directement aux RLSS pour s’assurer

que les RLISS ont toujours la voix des francophones lorsqu'ils prennent des décisions. Mais, là, on nous dit, « Non, non, non, ne vous en faites pas. Les entités de planification francophones vont continuer d'être là. » C'est juste qu'elles vont parler dans le vide. C'est juste qu'on ne sait pas à qui les entités vont se rapporter, parce que les RLISS ne seront plus là.

D'avoir les entités qui écoutent les francophones et qui ne se rapportent à rien, ça ne sert à rien. On a déjà pris plusieurs coups durs par ce gouvernement-là face aux francophones, qu'on pense à l'annulation de l'université de l'Ontario franco, qu'on pense au démantèlement du commissaire aux services en français. On penserait que le gouvernement aurait appris de ses erreurs, qu'ils ne peuvent pas continuer à bafouer les francophones sans en subir les conséquences.

Avec le projet de loi 74, bien qu'ils nous disent que « oui, oui, les entités vont continuer d'être là », si elles n'ont pas un mandat clair et si elles n'ont pas une force d'agir, bien, ce sont des mots complètement vides qu'ils nous donnent là. J'ai encore de la misère à avaler ça, monsieur le Président.

Le prochain point—parce que, là, je vois que le temps passe plus vite que je pensais.

1730

All right, I'm back in schedule 2. They will have an Indigenous health council that will advise the minister, and they will have a French-language health service advisory council, with members that will be selected by and appointed by council. That's very different than giving the population a voice.

I'm now at schedule 3, because I'm going to run out of time. In schedule 3, we see that 30 different bills are affected by this piece of legislation: the Oversight of Health Facilities and Devices Act, the Trillium Gift of Life Network Act, the Ministry of Health and Long-Term Care Act, the Anti-Racism Act, the Broader Public Sector Accountability Act, the Cancer Act, the Commitment to the Future of Medicare Act, the Employment Standards Act, the Excellent Care for All Act, the health facilities act, the Health Protection and Promotion Act, and the list goes on and on. The Lung Health Act is repealed in its entirety, which is kind of weird, because it was through the efforts of a member of the PC caucus, who is now a minister, that we got the Lung Health Act. Now the whole thing will be gone. It goes on to the Smoke-Free Ontario Act. Anyway, the list goes on and on. There are 30 of them.

One part of schedule 3, besides the amendments that they're making to those 30 acts, is that it does not include the integrated health delivery system. Remember the Ontario health teams? They are not included as designated under the broader public service organization, which is, again, very troublesome, because as you make a whole bunch of changes, the public service organization is there to ensure continuity.

The same thing was done when Mike Harris decided to privatize home care. What ended up happening was that good, not-for-profit organizations such as the VON would

lose their home care contract. The new private, for-profit home care would then rehire the same home care workers, except that they would rehire them with a lower salary, with no transportation costs, with no retirement plan, with no benefits.

What do you figure happened, Speaker? A whole bunch of people who had been working their entire lives in home care left and went into other parts of the health care system. There was no reason for them to be doing the exact same job with the exact same client at a lower rate of pay, with no benefits, no pension plan and lower mileage for travel. They didn't; they left the system. People who were good at providing home care, who had developed best practices and had done that for 30 years, just left. The brain drain in home care was very significant. I would almost call it catastrophic.

Another element of the bill that I wanted to talk about—a big part of it that I'm worried about, and I've talked about it a bit—is privatization. But another part that I am just as worried about is what I would call health equity.

You see, Speaker, I come from northern Ontario. I would like equity of access. I don't want equal. We will never do double lung transplants in Gogama; I get that. But we should have equity. There should be a basket of services that is available to all of us, no matter where we live. We can continue to have centres of excellence; we can continue to have all of this. But we have to guarantee people that things will get better. We have to guarantee to the thousands of Ontarians who don't have a primary caregiver that there is hope for them that they will. We have to be able to tell the people of Gogama, who have been without a nurse and nurse practitioner for almost a year now, that there is hope for them, that there will be a recruitment effort done so that the people of Gogama and area have access to primary care. But there is nothing in this bill that talks about equity. There is nothing in this bill—and we had the briefing—that will make sure that the different Ontario health teams have a basket of services that brings equity to all.

This is very worrisome because if you look at—remember, they're supposed to be fixing hallway medicine. When you look at hallway medicine, it is not distributed equally throughout Ontario. If you go to areas that are racialized, their hospitals will be full. If you go to areas of the province in northern Ontario and rural Ontario, their hospitals will be full.

I would like to take this opportunity, if we are going to move forward with a transformation agenda with those Ontario health teams, that they come mandated in the bill with the fact that we will look at equity, that we will make sure that everybody will be well served, because I know exactly what's going to happen. Remember I told you that there are 30 agencies knocking at the door that want to be the early adopters of those Ontario health teams? There's a good chance, Speaker, that they are in areas of the province that already have good access to our health care system. They already have a good, functioning hospital. They already have long-term care. They already have a number of home care agencies. They already have a hospice for palliative care. They already have more primary

care providers. I would say they already have community mental health, but community mental health is terrible everywhere. But they have some community mental health. This is who is going to be the early adopters. The people I represent, the people who live in northern Ontario, will continue to be the big losers.

I don't like pieces of legislation that create winners and losers. I don't like this at all, especially when I'm the loser, and I tend to be on that end more often than on the other. If you're going to move forward with a new piece of legislation as significant as Bill 74, then you have to put an equity lens on it. You have to put within the bill the capacity of the ministry to ensure equity throughout the province.

Right now, with Bill 74, I guarantee you that gaps in service will not only continue, they will get worse, because whenever you bring in a transformation like this, it disrupts everything. It disrupts care to patients. It disrupts care to families. It disrupts everything. We are embarking on a change that will be very disruptive to a lot of patients, a lot of families, and we have nothing in this bill to make sure that we will keep an eye out for gaps and make sure that they don't happen.

When I talked about the extraordinary powers, one of the extraordinary powers is that they can force health care providers to cease operations entirely. So you might have been a community health centre providing good work in primary care or a community mental health agency, and we will force you to cease operations.

I have seen this movie before. It always ends up the same way. The hospitals are what people know and what people associate with good care, because when you look at medicare, Speaker, and what medicare is, it is that when you go to the hospital, it's free, and when you go see a physician, it's free. That's it; that's all. That's medicare. That's free. Everything else is programs and services that are outside of medicare and that people don't know as well.

1740

When those extraordinary powers will be there, it will be community mental health, it will be the community health centre, the Aboriginal health access centre, the nurse-practitioner-led clinics, the family health teams, the midwives: Those are the ones that are at risk of disappearing and being eaten up by those new Ontario health teams, who could be directed by a for-profit, trading-on-the-stock-exchange foreign agency. It's all feasible within the bill that we have now.

I'm not comfortable with this, Speaker. I'm not comfortable with this at all. I'm even, I would say, very scared with all of it.

We have a bill in front of us that, when the people on the government side talk about it, they have goals that we can support. We agree with them that the overcrowding in our hospitals has to be addressed. It has to change. We have to do better. The minister and the PAs all shared stories about what it means to sick people when they are admitted into a hospital and they have no bed, they have no room for them. We agree with this: It has to be fixed. But the bill is not going to fix it.

You say that people will have a choice of providers. "You will continue to have your provider of choice," is the language that they use. Continue to have your provider of choice? There are a million Ontarians who don't have a provider. Where is the choice in that? There is no choice. There are a million people in Ontario right now who don't have a primary care provider, and they talk about, "You'll get to keep your providers of choice." When they say things like this, they're not talking for all of us. They're talking about an Ontario where some will do well and some will do without. How can you put forward a transformation bill that you know from the start will leave people behind? Not good.

A big part of the bill is to help with electronic health records—virtual care. I'm all for virtual care. I live in northern Ontario. I can tell you that Health Sciences North now runs intensive care units in small northern hospitals all through virtual care. People are able to stay in their own community, supported by their families, their friends. They get better faster because of the circle of support they have around them—all through virtual care. It works. It is there. But it has nothing to do with the bill.

We have virtual care. We could extend virtual care to many other areas of the province if we had the money to do this. There's no money in this bill. Apparently, the money is going to come from administrative savings from closing the LHINs. Nobody believes that. If we end up with, I don't know, \$1 million in savings at the end of the day, on a \$60-billion budget, it is—help me—0.00001%. Really? We're going through all of this change that will disrupt the care of thousands of Ontarians, and there's no money to implement the things that they want?

The last thing I want to say is that whenever I hear the minister say, "You will use your OHIP card to pay," I cannot accept this. Your OHIP card gives you access.

Interjection: It's not a credit card.

M^{me} France Gélinas: Your OHIP card is not a credit card. Your OHIP card is how you gain access. The payment structure has nothing to do with your OHIP card. Your OHIP card identifies who is Ontarian and who has access. That's it; that's all. How our health care system is funded has nothing to do with a card, and she should stop from using this.

Unfortunately, I've run out of time. There are still lots of other things that I don't like in this bill.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

M^{me} Gila Martow: La députée en opposition, la députée pour la circonscription de Nickel Belt, elle a travaillé dans notre système de santé, comme moi. J'ai travaillé comme optométriste, et elle a travaillé comme thérapeute. On sait qu'elle comprend qu'on a des problèmes, de grands problèmes, ici en Ontario.

À la dernière élection, notre gouvernement, notre caucus, a promis qu'on veut mettre fin aux soins de santé de couloir. C'est très nécessaire. On comprend. On manque, ici en Ontario, de soins de longue durée. On a des temps d'attente très longs et aussi de longues listes d'attente, monsieur le Président. On devrait travailler

ensemble. Ce n'est pas seulement quelque chose que nous autres voudrions voir ici en Ontario. Je comprends que tous les députés de tous les partis veulent travailler ensemble pour être certains qu'on peut l'améliorer.

On devrait faire de bons choix, faire certain que chaque dollar—chaque dollar qu'on a reçu des taxes dans nos comtés—va directement à aider tous les résidents de l'Ontario, monsieur le Président. On comprend qu'on dépense trop d'argent en administration. C'est nécessaire : on a besoin d'employés administratifs. Mais on voit que les autres provinces ont travaillé très, très fort pour être certaines qu'elles ont des médecins, des infirmiers et infirmières, et des optométristes, comme moi, et des thérapeutes, comme l'autre députée.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Mr. Gurratan Singh: I want to start by thanking the member for Nickel Belt for her amazing comments.

What the Conservatives are actually proposing is to open up the doors to unprecedented levels of privatization of our health care system—health care services that people depend on when they're unwell and when they're sick. What we need right now is to put people before profits.

Our health care system is already in an incredibly precarious situation. We have overcrowded hospitals with long wait times. We need only to look at Brampton, a city of 600,000 people with one hospital and one of the busiest ERs in this country. The people of Brampton are suffering with thousands of people being treated in hallways and in overcrowded conditions.

Opening up the door to privatization is not the answer to our health care system needs. Opening up the door to privatization, partitioning off our health care services to for-profit corporations, is not the solution to fixing our health care needs. Profit should never be a motive in delivering health care. Privatization of health care is not the way. Our tax dollars should go to strengthen our public health care system, not lining the pockets of rich corporations. Canada is founded on the value of publicly funded and universally available health care, a system in which profit is not a motive, but instead a service founded on compassion where we work to help and heal people.

We believe in a society where health care is a right, not a privilege that only the few can afford. We believe in investing in health care, keeping it public and strong. More so, we should be expanding our health care system and, by doing so, strengthening the system so that health care should be a system based on sympathy, empathy and for the benefit of all.

1750

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Mr. Mike Harris: It's an honour to be able to rise today and take part in the vigorous debate that's happening regarding Bill 74 here in the Legislature. I'd like to thank the member for Nickel Belt for her comments.

I think one thing I'm really excited about seeing move forward with this bill is the modernization plan that we have surrounding technology. Again, I always harken

back to doing things with my kids, because it's a big part of my life. There have been many times where we've had a specialist appointment out of town, whether it be in Guelph or Woodstock or outlying areas. You go and you wait in the waiting room for sometimes upwards of an hour. You see the specialist for 10 minutes, all is well, and you drive back home. I'm really looking forward to being able to book an appointment with my family doctor or a nurse-practitioner-led clinic in the great riding of Kitchener–Conestoga and being able to have them do a general assessment, jump on a video chat with a specialist, whether that be in Toronto or in Guelph or in London, and being able to then save a lot of time and save a lot of money. Travelling with kids, as you know, Mr. Speaker, can often be quite a hassle. Love them to death, but sometimes—

Mrs. Robin Martin: Just leave it there.

Mr. Mike Harris: Yes, exactly.

The wraparound services and moving towards this one-node model of being able to have one point person to contact, Mr. Speaker, to be able to then spread you out into a myriad of health care services, making sure that the continuity of care that you don't have now—our system is very fragmented. There's no really good way to get in touch with all of these different services. I'm really looking forward to what Bill 74 represents in modernizing our health care system here in Ontario.

The Acting Speaker (Mr. Percy Hatfield): Questions and comments?

Ms. Jessica Bell: It's concerning hearing all the stories about our interactions with the health care system. We all have them, from hearing about Chelsea, from hearing about the young man who had his appendix removed, to hearing about Danny, who died in a hallway, with his family only able to be around him in the final few hours. What I think is very important to remember is that when we tell stories in the House, it doesn't necessarily mean they're going to be solved. We're going to find out if they're going to be solved or not based on what is actually in the legislation and what is going to happen over the coming months and years and how our health care system changes.

What scares me about this legislation is the speed at which it is being rolled out and the lack of proper consultation. What I fear is the opening up of the door to privatization, especially the privatization of delivery.

I lived in the United States for many years. I lived in Australia; I grew up there. I've seen what happens when you introduce privatization and a two-tier system into health care. I saw it in Australia, where you had people who were lower-income being pushed back on the wait-list and having to wait longer for very important services. I saw it in the United States, where we spent billions and billions of dollars for companies to deliver health care privately, and the quality of health care that United States citizens receive is just not as good as it is in other countries that prioritize a non-profit and public health care system of delivery.

I'm very scared about the impact of this legislation on the everyday reality that people have when they go into the

hospital and when they access services. I do encourage this government to look at solutions that emphasize public and non-profit delivery of health care, from universal pharmacare to proper funding of hospitals that are already struggling to make ends meet and do the services that they need to do.

The Acting Speaker (Mr. Percy Hatfield): We'll now return to the member for Nickel Belt to wrap up this portion of the debate.

M^{me} France Gélinas: Thank you so much, Mr. Speaker.

It was an interesting afternoon to go through the first two hours of debate on Bill 74. The aim of the bill is something that New Democrats support. We've all heard horror stories, really, of what it means to have half of our hospitals overcrowded, what it means to have 1,000 people who are sick enough to be admitted into hospital but will have to sleep in a hallway, a bathroom—anywhere but a hospital bed. We agree with this.

We agree with everything that has to do with e-technology. At Women's College, right now you're able to book your appointment online and see your report online. I would love for every hospital to be able to do this. It's the same thing with the enhancement of virtual care. We do quite a bit of virtual care in northern Ontario because of the long distances; we could do a whole lot more.

All of this we support, but it has nothing to do with the bill.

The bill creates this super-agency, gets rid of Cancer Care Ontario, Trillium Gift of Life—parts of our health care system that work really good will now be gone—and creates those Ontario health teams, which, the way the legislation is written, opens the door to private, for-profit, trading-on-the-stock-market international corporations to take them over.

We support the end goal, but the bill doesn't talk to this. It talks to privatization. It talks to moving away from the Canada Health Act, which says that not only is care paid for publicly, but it is provided publicly.

The Acting Speaker (Mr. Percy Hatfield): Thank you to all members who took part in the debate this afternoon. All members were well behaved, and all spoke eloquently.

Second reading debate deemed adjourned.

The Acting Speaker (Mr. Percy Hatfield): Pursuant to standing order 38, the question that this House do now adjourn is deemed to have been made.

ADJOURNMENT DEBATE

GOVERNMENT ACCOUNTABILITY

The Acting Speaker (Mr. Percy Hatfield): The member for Ottawa–Vanier has given notice of dissatisfaction with the answer to a question given by the Minister of Community Safety and Correctional Services. The member will have up to five minutes to make her case, and

then the ministerial parliamentary assistant, the member for Brampton South, will have five minutes to rebut.

I will turn now to the member for Ottawa–Vanier.

M^{me} Nathalie Des Rosiers: I won't take much of your time.

My question this morning to the minister was not whether we should trust the decision of the Public Service Commission with respect to Brad Blair—which we should—but, rather, whether she could explain the process that led to the disciplinary charges being laid, and whether, in light of the ongoing controversies, she would agree to start afresh a process of appointment of the OPP commissioner.

Let me start by expressing again how important it is in our system that the public perceive that the police are independent. People who are arrested by police officers should always have absolute confidence that the decision to arrest them is based on evidence the police officer has gathered and not on whether the police officer likes or dislikes her or him or knows of their political affiliation. This is important in a democracy. It's crucial that people not only have absolute confidence that the police are independent from politicians, but they know this to be true and have absolute confidence that the whole process has been absolutely irreproachable.

That's the way in which I'm approaching this. I'm trying to actually help the government secure a constant and a renewed—

Interjections.

M^{me} Nathalie Des Rosiers: I am, all the time. I am happy to help the government ensure that we have renewed and continued public confidence in our policing. It is important to myself as a citizen of Ontario. It's important for my lifelong commitment to the rule of law. I also know it's important to the people in the riding of Ottawa–Vanier, which I represent, that they feel that the government is paying attention to the worries they have about the way in which this process—even though it may have been perfectly fine—does not look fine from the outside and raises some suspicions that things have gone askew.

1800

Let me just say a couple of more things before I let the other side express.

My question this morning was simply this: How come the minister would not agree to shine a light on the process that led to the disciplinary charge? Who decided to lay the disciplinary charge? Initially, it appeared that it was only going to be a warning. Who decided that the dismissal was required, in light of 33 years of service? You could certainly protect the email by having a non-publication order.

Did the deputy minister, who was Mr. Taverner's boss and a member of the hiring committee, participate in the decision to lay the disciplinary charge? Was there any discussion of the potential conflict in which the deputy minister found himself by having been the subject of the criticism and then laying disciplinary charge?

Finally, my last point in the question was whether, in light of all this, we would not be better off by starting this

appointment process of the important commissioner of the OPP afresh, and, in light of the controversies that have surrounded this appointment, with an investigation by the ethics commissioner.

The person who raised his concerns, therefore, after 33 years, is dismissed and fired, once he wants to have the Ombudsman looking at this appointment.

The rules have been changed to accommodate the appointment of Mr. Taverner.

All of this raises the concern in the public that maybe this is not as it should be. It's a service to the public to start afresh, and ensure that, above all, at the end of the day, everybody is satisfied that it's the best person who is in the job, and the person who has the trust of the public.

I think it's going to be difficult for Mr. Taverner to do his job to his full capacity in light of this controversy that surrounds him.

I ask again whether the minister would consider, number one, inviting the deputy minister to speak at the justice committee about the process of this disciplinary charge—if there's nothing untoward, there's no problem with him disclosing it—and secondly, whether or not she would consider starting afresh on this process, so that we all have confidence that the best person has been appointed.

The Acting Speaker (Mr. Percy Hatfield): We turn now to the minister's parliamentary assistant to respond to the previous five minutes.

Mr. Prabmeet Singh Sarkaria: I just want to make something very clear here: When it comes to the police, I don't think we want to take any lessons or advice from the members opposite, because they were responsible for introducing one of the most anti-police pieces of legislation this House has ever seen. That's a shame, because those men and women have our backs every single day. They are a phone call away, and they're willing to put themselves in harm's way for us and our safety.

I salute our police officers, our front-line officers, who are keeping us safe every single day, every single hour, every single minute. We want them to know that we have their backs. A government is finally in power that has their backs.

On the issue of Mr. Blair, the employment was terminated by a decision of a large panel of deputy ministers that make up the Public Service Commission. The action was taken in full consultation with OPP Commissioner Couture.

Let it be clear that no one is above the law, whether you are a constable or a deputy commissioner. You swear an oath to uphold the laws of this province.

Mr. Blair breached his duties as both a police officer and a public servant. He used his uniform and position as deputy commissioner to further his own personal gain, and violated the trust of his office. For these reasons, Mr. Blair was notified of his dismissal.

In the interest of clarity, I will read from the dismissal letter given to Mr. Blair:

"You have no authority to unilaterally disclose confidential government emails in furtherance of your personal interests.

"The disclosure is both a contravention of your obligations under the conflict of interest regulation made under the" ...PSOA... "and a violation of the oath of office you took as a public servant..."

"[I]t is a clear attempt to use your professional status to further your private interests by implying that the legal activities in which you are engaged are part of your official duties and/or sanctioned by the OPP. This is also a contravention of your obligations....

"You have acted in a manner that is incompatible with the faithful discharge of your position as a public servant."

Mr. Speaker, it's pretty clear that the individual who did not ultimately get the offer of employment to serve as the OPP commissioner is a little angry. But that in no way excuses him and allows him to be above the law. No one is above the law.

You swear an oath to uphold the laws of this province. Mr. Blair's employment was terminated as a result of the Public Service Commission's nine-member committee. This action was taken in consultation with OPP Commissioner Couture. I think that is perfectly appropriate—that someone who used their uniform and position as a deputy commissioner to further his own personal gain, violated the use of his office and, frankly, sullied the reputation of every excellent OPP officer serving the province of Ontario and the people of Ontario.

We need to make sure that the people who choose to serve in our Ontario public service and with the OPP respect that oath of office. That is what the commission has done by terminating his employment.

Mr. Speaker, once again, it is important to know that when it comes to police, they know they have a government that always has their back.

With that, I would like to conclude. Thank you very much.

The Acting Speaker (Mr. Percy Hatfield): There being no further matter to debate, I deem the motion to adjourn to be carried.

This House stands adjourned until 9 a.m. tomorrow.

The House adjourned at 1807.

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Baber, Roman (PC)	York Centre / York-Centre	
Babikian, Aris (PC)	Scarborough—Agincourt	
Bailey, Robert (PC)	Sarnia—Lambton	
Barrett, Toby (PC)	Haldimand—Norfolk	
Begum, Doly (NDP)	Scarborough Southwest / Scarborough-Sud-Ouest	
Bell, Jessica (NDP)	University—Rosedale	
Berns-McGown, Rima (NDP)	Beaches—East York / Beaches—East York	
Bethlenfalvy, Hon. / L'hon. Peter (PC)	Pickering—Uxbridge	President of the Treasury Board / Président du Conseil du Trésor
Bisson, Gilles (NDP)	Timmins	Opposition House Leader / Leader parlementaire de l'opposition officielle
Bouma, Will (PC)	Brantford—Brant	
Bourgouin, Guy (NDP)	Mushkegowuk—James Bay / Mushkegowuk—Baie James	
Burch, Jeff (NDP)	Niagara Centre / Niagara-Centre	
Calandra, Paul (PC)	Markham—Stouffville	
Cho, Hon. / L'hon. Raymond Sung Joon (PC)	Scarborough North / Scarborough-Nord	Minister for Seniors and Accessibility / Ministre des Services aux aînés et de l'Accessibilité
Cho, Stan (PC)	Willowdale	
Clark, Hon. / L'hon. Steve (PC)	Leeds—Grenville—Thousand Islands and Rideau Lakes / Leeds—Grenville—Thousand Islands et Rideau Lakes	Minister of Municipal Affairs and Housing / Ministre des Affaires municipales et du Logement
Coe, Lorne (PC)	Whitby	
Coteau, Michael (LIB)	Don Valley East / Don Valley-Est	
Crawford, Stephen (PC)	Oakville	
Cuzzetto, Rudy (PC)	Mississauga—Lakeshore	
Des Rosiers, Nathalie (LIB)	Ottawa—Vanier	
Downey, Doug (PC)	Barrie—Springwater—Oro-Medonte	
Dunlop, Jill (PC)	Simcoe North / Simcoe-Nord	
Elliott, Hon. / L'hon. Christine (PC)	Newmarket—Aurora	Deputy Premier / Vice-première ministre Minister of Health and Long-Term Care / Ministre de la Santé et des Soins de longue durée
Fedeli, Hon. / L'hon. Victor (PC)	Nipissing	Chair of Cabinet / Président du Conseil des ministres Minister of Finance / Ministre des Finances
Fee, Amy (PC)	Kitchener South—Hespeler / Kitchener-Sud—Hespeler	
Fife, Catherine (NDP)	Waterloo	
Ford, Hon. / L'hon. Doug (PC)	Etobicoke North / Etobicoke-Nord	Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales Premier / Premier ministre
Fraser, John (LIB)	Ottawa South / Ottawa-Sud	
French, Jennifer K. (NDP)	Oshawa	Third Deputy Chair of the Committee of the Whole House / Troisième vice-présidente du comité plénier de l'Assemblée législative

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Fullerton, Hon. / L'hon. Merrilee (PC)	Kanata—Carleton	Minister of Training, Colleges and Universities / Ministre de la Formation et des Collèges et Universités
Gates, Wayne (NDP)	Niagara Falls	
Gélinas, France (NDP)	Nickel Belt	
Ghamari, Goldie (PC)	Carleton	
Gill, Parm (PC)	Milton	
Glover, Chris (NDP)	Spadina—Fort York	
Gravelle, Michael (LIB)	Thunder Bay—Superior North / Thunder Bay—Supérieur-Nord	
Gretzky, Lisa (NDP)	Windsor West / Windsor-Ouest	First Deputy Chair of the Committee of the Whole House / Première vice-présidente du comité plénier de l'Assemblée
Hardeman, Hon. / L'hon. Ernie (PC)	Oxford	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
Harden, Joel (NDP)	Ottawa Centre / Ottawa-Centre	
Harris, Mike (PC)	Kitchener—Conestoga	
Hassan, Faisal (NDP)	York South—Weston / York-Sud— Weston	
Hatfield, Percy (NDP)	Windsor—Tecumseh	Second Deputy Chair of the Committee of the Whole House / Deuxième vice-président du comité plénier de l'Assemblée législative
Hillier, Randy (IND)	Lanark—Frontenac—Kingston	
Hogarth, Christine (PC)	Etobicoke—Lakeshore	
Horwath, Andrea (NDP)	Hamilton Centre / Hamilton-Centre	Leader, Official Opposition / Chef de l'opposition officielle
Hunter, Mitzie (LIB)	Scarborough—Guildwood	
Jones, Hon. / L'hon. Sylvia (PC)	Dufferin—Caledon	Minister of Community Safety and Correctional Services / Ministre de la Sécurité communautaire et des Services correctionnels
Kanapathi, Logan (PC)	Markham—Thornhill	
Karahalios, Belinda (PC)	Cambridge	
Karpoche, Bhutla (NDP)	Parkdale—High Park	
Ke, Vincent (PC)	Don Valley North / Don Valley-Nord	
Kernaghan, Terence (NDP)	London North Centre / London- Centre-Nord	
Khanjin, Andrea (PC)	Barrie—Innisfil	
Kramp, Daryl (PC)	Hastings—Lennox and Addington	
Kusendova, Natalia (PC)	Mississauga Centre / Mississauga- Centre	
Lalonde, Marie-France (LIB)	Orléans	
Lecce, Stephen (PC)	King—Vaughan	Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
Lindo, Laura Mae (NDP)	Kitchener Centre / Kitchener-Centre	
MacLeod, Hon. / L'hon. Lisa (PC)	Nepean	Minister of Children, Community and Social Services / Ministre des Services à l'enfance et des Services sociaux et communautaires Minister Responsible for Women's Issues / Ministre déléguée à la Condition féminine
Mamakwa, Sol (NDP)	Kiiwetinoong	
Mantha, Michael (NDP)	Algoma—Manitoulin	
Martin, Robin (PC)	Eglinton—Lawrence	
Martow, Gila (PC)	Thornhill	
McDonell, Jim (PC)	Stormont—Dundas—South Glengarry	
McKenna, Jane (PC)	Burlington	
McNaughton, Hon. / L'hon. Monte (PC)	Lambton—Kent—Middlesex	Minister of Infrastructure / Ministre de l'Infrastructure
Miller, Norman (PC)	Parry Sound—Muskoka	
Miller, Paul (NDP)	Hamilton East—Stoney Creek / Hamilton-Est—Stoney Creek	
Mitas, Christina Maria (PC)	Scarborough Centre / Scarborough- Centre	
Monteith-Farrell, Judith (NDP)	Thunder Bay—Atikokan	
Morrison, Suze (NDP)	Toronto Centre / Toronto-Centre	
Mulroney, Hon. / L'hon. Caroline (PC)	York—Simcoe	Attorney General / Procureure générale Minister of Francophone Affairs / Ministre des Affaires francophones
Natyshak, Taras (NDP)	Essex	
Nicholls, Rick (PC)	Chatham-Kent—Leamington	Chair of the Committee of the Whole House / Président du comité plénier de l'Assemblée Deputy Speaker / Vice-président

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Oosterhoff, Sam (PC)	Niagara West / Niagara-Ouest	
Pang, Billy (PC)	Markham—Unionville	
Park, Lindsey (PC)	Durham	
Parsa, Michael (PC)	Aurora—Oak Ridges—Richmond Hill	
Pettapiece, Randy (PC)	Perth—Wellington	
Phillips, Hon. / L'hon. Rod (PC)	Ajax	Minister of the Environment, Conservation and Parks / Ministre de l'Environnement, de la Protection de la nature et des Parcs
Piccini, David (PC)	Northumberland—Peterborough South / Northumberland—Peterborough-Sud	
Rakocevic, Tom (NDP)	Humber River—Black Creek	
Rasheed, Kaleed (PC)	Mississauga East—Cooksville / Mississauga-Est—Cooksville	
Rickford, Hon. / L'hon. Greg (PC)	Kenora—Rainy River	Minister of Energy, Northern Development and Mines / Ministre de l'Énergie, du Développement du Nord et des Mines Minister of Indigenous Affairs / Ministre des Affaires autochtones
Roberts, Jeremy (PC)	Ottawa West—Nepean / Ottawa-Ouest—Nepean	
Romano, Ross (PC)	Sault Ste. Marie	
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)	Brampton West / Brampton-Ouest	
Sarkaria, Prabmeet Singh (PC)	Brampton South / Brampton-Sud	
Sattler, Peggy (NDP)	London West / London-Ouest	
Schreiner, Mike (GRN)	Guelph	
Scott, Hon. / L'hon. Laurie (PC)	Haliburton—Kawartha Lakes—Brock	Minister of Labour / Ministre du Travail
Shaw, Sandy (NDP)	Hamilton West—Ancaster—Dundas / Hamilton-Ouest—Ancaster—Dundas	
Simard, Amanda (IND)	Glengarry—Prescott—Russell	
Singh, Gurratan (NDP)	Brampton East / Brampton-Est	
Singh, Sara (NDP)	Brampton Centre / Brampton-Centre	Deputy Leader, Official Opposition / Chef adjointe de l'opposition officielle
Skelly, Donna (PC)	Flamborough—Glanbrook	
Smith, Dave (PC)	Peterborough—Kawartha	
Smith, Hon. / L'hon. Todd (PC)	Bay of Quinte / Baie de Quinte	Minister of Economic Development, Job Creation and Trade / Ministre du Développement économique, de la Création d'emplois et du Commerce Government House Leader / Leader parlementaire du gouvernement
Stevens, Jennifer (Jennie) (NDP)	St. Catharines	
Stiles, Marit (NDP)	Davenport	
Surma, Kinga (PC)	Etobicoke Centre / Etobicoke-Centre	
Tabuns, Peter (NDP)	Toronto—Danforth	
Tangri, Nina (PC)	Mississauga—Streetsville	
Taylor, Monique (NDP)	Hamilton Mountain	
Thanigasalam, Vijay (PC)	Scarborough—Rouge Park	
Thompson, Hon. / L'hon. Lisa M. (PC)	Huron—Bruce	Minister of Education / Ministre de l'Éducation
Tibollo, Hon. / L'hon. Michael A. (PC)	Vaughan—Woodbridge	Minister of Tourism, Culture and Sport / Ministre du Tourisme, de la Culture et du Sport
Triantafilopoulos, Effie J. (PC)	Oakville North—Burlington / Oakville-Nord—Burlington	
Vanthof, John (NDP)	Timiskaming—Cochrane	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Wai, Daisy (PC)	Richmond Hill	
Walker, Hon. / L'hon. Bill (PC)	Bruce—Grey—Owen Sound	Minister of Government and Consumer Services / Ministre des Services gouvernementaux et des Services aux consommateurs
West, Jamie (NDP)	Sudbury	
Wilson, Jim (IND)	Simcoe—Grey	
Wynne, Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	
Yakubski, Hon. / L'hon. John (PC)	Renfrew—Nipissing—Pembroke	Minister of Natural Resources and Forestry / Ministre des Richesses naturelles et des Forêts
Yarde, Kevin (NDP)	Brampton North / Brampton-Nord	
Yurek, Hon. / L'hon. Jeff (PC)	Elgin—Middlesex—London	Minister of Transportation / Ministre des Transports

**STANDING AND SELECT COMMITTEES OF THE LEGISLATIVE ASSEMBLY
COMITÉS PERMANENTS ET SPÉCIAUX DE L'ASSEMBLÉE LÉGISLATIVE**

Standing Committee on Estimates / Comité permanent des budgets des dépenses

Chair / Président: Peter Tabuns
Vice-Chair / Vice-président: Wayne Gates
Stan Cho, Jill Dunlop
John Fraser, Wayne Gates
Stephen Lecce, Gila Martow
Jane McKenna, Judith Monteith-Farrell
Lindsey Park, Randy Pettapiece
Peter Tabuns
Committee Clerk / Greffier: Timothy Bryan

Standing Committee on Finance and Economic Affairs / Comité permanent des finances et des affaires économiques

Chair / Président: Stephen Crawford
Vice-Chair / Vice-président: Jeremy Roberts
Ian Arthur, Stephen Crawford
Doug Downey, Sol Mamakwa
David Piccini, Kaleed Rasheed
Jeremy Roberts, Sandy Shaw
Donna Skelly
Committee Clerk / Greffier: Timothy Bryan

Standing Committee on General Government / Comité permanent des affaires gouvernementales

Chair / Président: Dave Smith
Vice-Chair / Vice-présidente: Natalia Kusendova
Jessica Bell, Chris Glover
Christine Hogarth, Logan Kanapathi
Daryl Kramp, Natalia Kusendova
Amarjot Sandhu, Mike Schreiner
Dave Smith, Jennifer (Jennie) Stevens
Daisy Wai
Clerk / Greffier: Vacant

Standing Committee on Government Agencies / Comité permanent des organismes gouvernementaux

Chair / Président: John Vanthof
Vice-Chair / Vice-président: Taras Natyshak
Roman Baber, Rudy Cuzzetto
Amy Fee, Vincent Ke
Andrea Khanjin, Marie-France Lalonde
Taras Natyshak, Rick Nicholls
Jeremy Roberts, Marit Stiles
John Vanthof
Committee Clerk / Greffière: Jocelyn McCauley

Standing Committee on Justice Policy / Comité permanent de la justice

Chair / Président: Parm Gill
Vice-Chair / Vice-président: Aris Babikian
Roman Baber, Aris Babikian
Nathalie Des Rosiers, Jill Dunlop
Parm Gill, Lindsey Park
Ross Romano, Prabmeet Singh Sarkaria
Sara Singh, Monique Taylor
Kevin Yarde
Committee Clerk / Greffière: Jocelyn McCauley

Standing Committee on the Legislative Assembly / Comité permanent de l'Assemblée législative

Chair / Présidente: Jane McKenna
Vice-Chair / Vice-président: Vijay Thanigasalam
Robert Bailey, Rima Berns-McGown
Lorne Coe, Michael Coteau
Mike Harris, Faisal Hassan
Jane McKenna, Christina Maria Mitas
Sam Oosterhoff, Gurratan Singh
Vijay Thanigasalam
Committee Clerk / Greffière: Valerie Quioc Lim

Standing Committee on Public Accounts / Comité permanent des comptes publics

Chair / Présidente: Catherine Fife
Vice-Chair / Vice-présidente: Peggy Sattler
Toby Barrett, Catherine Fife
Goldie Ghamari, Jim McDonell
Norman Miller, Suze Morrison
Michael Parsa, Peggy Sattler
Kinga Surma
Committee Clerk / Greffier: Christopher Tyrell

Standing Committee on Regulations and Private Bills / Comité permanent des règlements et des projets de loi d'intérêt privé

Chair / Président: Kaleed Rasheed
Vice-Chair / Vice-président: Will Bouma
Will Bouma, Paul Calandra
Lorne Coe, Stephen Crawford
Mitzie Hunter, Laura Mae Lindo
Paul Miller, Billy Pang
Kaleed Rasheed, Amarjot Sandhu
Jamie West
Committee Clerk / Greffier: Eric Rennie

Standing Committee on Social Policy / Comité permanent de la politique sociale

Chair / Présidente: Nina Tangri
Vice-Chair / Vice-président: Deepak Anand
Deepak Anand, Doly Begum
Jeff Burch, Amy Fee
Michael Gravelle, Joel Harden
Belinda Karahalios, Robin Martin
Sheref Sabawy, Nina Tangri
Effie J. Triantafilopoulos
Committee Clerk / Greffier: Eric Rennie

Select Committee on Financial Transparency / Comité spécial de la transparence financière

Chair / Président: Prabmeet Singh Sarkaria
Vice-Chair / Vice-président: Doug Downey
Roman Baber, Doug Downey
Catherine Fife, Robin Martin
Lindsey Park, Ross Romano
Prabmeet Singh Sarkaria, Sandy Shaw
John Vanthof
Committee Clerk / Greffière: Valerie Quioc Lim