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CONTENTS / TABLE DES MATIÈRES

Wednesday 20 May 2020 / Mercredi 20 mai 2020

MEMBERS' STATEMENTS / DÉCLARATIONS DES DÉPUTÉES ET DÉPUTÉS

Services en français

Mme France Gélinas 7873

COVID-19 response

Mrs. Robin Martin 7873

Riding of Spadina–Fort York

Mr. Chris Glover 7873

Hospitality industry

Mrs. Gila Martow 7874

Commercial tenant protection

Mr. Peter Tabuns 7874

Flemingdon Park Ministry

Mr. Michael Coteau 7874

COVID-19 response

Mr. Rudy Cuzzetto 7874

Assistance to farmers

Mr. John Vanthof 7875

Events in Markham–Unionville

Mr. Billy Pang 7875

Northumberland.io Producer Alliance

Mr. David Piccini 7875

Independent members

The Speaker (Hon. Ted Arnott) 7875

Order of business

Hon. Paul Calandra 7876

Motion agreed to 7876

QUESTION PERIOD / PÉRIODE DE QUESTIONS

Long-term care

Ms. Andrea Horwath 7876

Hon. Doug Ford 7876

Hon. Merrilee Fullerton 7877

Long-term care

Ms. Andrea Horwath 7877

Hon. Merrilee Fullerton 7877

Long-term care

Ms. Andrea Horwath 7878

Hon. Merrilee Fullerton 7878

Children and youth

Mr. David Piccini 7878

Hon. Doug Ford 7879

Long-term care

Ms. Peggy Sattler 7879

Hon. Merrilee Fullerton 7879

Mme France Gélinas 7879

International medical graduates

Mr. Michael Coteau 7880

Hon. Christine Elliott 7880

COVID-19

Mr. John Fraser 7880

Hon. Christine Elliott 7880

Protection for health care workers

Mr. Wayne Gates 7881

Hon. Christine Elliott 7881

Hon. Monte McNaughton 7881

Environmental protection

Mr. Mike Schreiner 7882

Hon. Jeff Yurek 7882

COVID-19

Ms. Suze Morrison 7882

Hon. Christine Elliott 7882

Race-based data

Ms. Laura Mae Lindo 7883

Hon. Christine Elliott 7883

COVID-19

Ms. Mitzie Hunter 7884

Hon. Christine Elliott 7884

Long-term care

Ms. Sandy Shaw 7884

Hon. Christine Elliott 7885

Mr. Joel Harden 7885

Hon. Merrilee Fullerton 7885

Religious communities

Mr. Billy Pang 7885

Hon. Doug Ford 7885

LEGISLATIVE ASSEMBLY OF ONTARIO

Wednesday 20 May 2020

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mercredi 20 mai 2020

The House met at 1015.

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

Prayers.

The Speaker (Hon. Ted Arnott): Before I ask the members to do their statements, I want to remind everyone that we need to observe the public health advice that we've received with respect to physical distancing while we are in the chamber for the protection of the staff, the attendants, as well as the other members. Thank you very much.

MEMBERS' STATEMENTS

SERVICES EN FRANÇAIS

M^{me} France Gélinas: Depuis que la province a déclaré l'état d'urgence, les conférences de presse se multiplient par les différents membres du cabinet afin de bien informer la population de tout ce qui a trait à la COVID-19 : le nombre de cas, le nombre de décès, comment se protéger, quels commerces seront ouverts ou fermés, les garderies, les écoles. Mais tout ça est en anglais.

Étant donné la gravité de la situation, c'est, franchement, embarrassant que le gouvernement croit avoir comblé ses responsabilités envers les services en français. Les points de presse sur TFO à 20 h 30 ne peuvent pas être considérés comme la solution raisonnable et équitable. Nous n'avons pas besoin d'une autre étude. Ça a déjà été fait par l'ancien commissaire, M. François du Boileau, après la crise H1N1.

Je sais que les conférences de presse ont maintenant l'interprétation simultanée. Elle est bien faite, mais elle n'est pas disponible pour les personnes âgées qui ne sont pas familières avec la technologie. Et je peux vous confirmer que beaucoup de gens dans le Nickel Belt, dans les régions du Nord, dans les régions rurales—nous n'avons pas accès à l'Internet haute vitesse, donc nous sommes laissés dans le noir. Demandez aux enseignants de l'école Notre-Dame à Foley comment va l'Internet, et ils vont vous dire que c'est un exercice de frustration. Les communications gouvernementales doivent être offertes de façon proactive, équivalente, en français et en anglais.

1020

COVID-19 RESPONSE

Mrs. Robin Martin: The last few months have been truly unprecedented. With the emergence of COVID-19 as a serious public health threat, the way we live our lives has changed significantly in such a short period of time.

I'm thinking about parents, who are spending their days multitasking, working from home and educating their children. I'm thinking about seniors, some of whom have gone months without having their loved ones able to visit them in person. I'm thinking about our local business owners, who have significantly adjusted or closed their operations.

In these challenging times, I'm also thinking about those who have gone above and beyond to meet the needs of our community. To our local supermarkets like Lady York Foods and everyone working at them to keep the shelves stocked, to establish dedicated hours for seniors, to facilitate curbside pickup for those who need it most: Thank you.

To community organizations like B'nai Brith Canada organizing emergency food drives for the most vulnerable: Thank you.

To local businesses like Canada Goose, which reconfigured their production lines to produce gowns, or Paula Eriya at Beauty Lounge salon, who donated masks and gloves to our front-line workers: Thank you.

To all of the nurses, personal support workers and other staff on the front lines at Baycrest, Villa Colombo, Terrace Gardens, Forest Hill, Amica On the Avenue, and all of our retirement homes and long-term-care homes: Thank you. You embody the Ontario spirit. You are the reason we will defeat this virus.

RIDING OF SPADINA-FORT YORK

Mr. Chris Glover: When I was told I had a few minutes to speak in here this morning, I reached out to the Chinatown community and I asked them what they wanted me to talk about. The first thing they came up with was seniors. They're desperately concerned about the seniors in their community and seniors across this province.

Last week, two organizations, the Toronto Community and Culture Centre and the Support Toronto Canadian Chinese Alliance, donated 5,000 disposable masks that we are now distributing to seniors across the riding. I want to give them a shout-out for their generosity. It's that kind of support for seniors that we as a government need to echo and reflect in our communities.

The other thing that they were concerned about was our businesses. Before, Chinatown was one of the marquee tourist destinations in this city and in this province, and it dates back to 1870. Before the pandemic even started, property tax assessments were hitting main street businesses in Chinatown and across the city really hard. Now, with the pandemic upon us, the commercial rent relief that

has been offered by the provincial and the federal government is just not cutting it. It's not providing enough support. Not enough landlords are picking it up. If we don't step up—the government side there—we really need to work together to support the Main Street businesses in Chinatown, because they need commercial rent relief if Chinatown is going to survive the pandemic.

HOSPITALITY INDUSTRY

Mrs. Gila Martow: I just want to talk a little bit about the fact that I got a letter from Mayor Scarpitti. Frank Scarpitti is the mayor of Markham. He reminded me that patio season is starting. I think we're all excited to see that.

We all know that the Alcohol and Gaming Commission of Ontario has already modified some of the rules about alcohol. They've reduced by 33% the minimum price, and they're allowing alcohol in takeout services.

Our restaurants and hospitality sector are part of the hardest hit by this pandemic of COVID-19. What I would like all of the members of this Legislature to think about and to work together on—and let me know what they think—is expanding patio service. Part of it is municipal bylaws; we all understand that. But perhaps we can work with the Auditor General, who has been very supportive, to expand the services that patios can offer—perhaps the hours they can offer it, perhaps the locations. Perhaps they could take up a bit more space if there's maybe even park space or parking lots—that we can amend the rules.

I know, and I think everybody here would agree, that people feel a lot more comfortable social distancing outside and that, hopefully, this global pandemic has toughened us up a little bit so that even if it's a bit chilly on the patio, we'll walk over and we'll dress appropriately.

Whether it's for restaurants in Thornhill, York region or all across Ontario, I'm appealing to everybody to try to support their local restaurants and hospitality sector. Encourage them to provide the services that you feel comfortable using.

COMMERCIAL TENANT PROTECTION

Mr. Peter Tabuns: Speaker, small businesses in my riding, from the Danforth to Queen Street, Pape to Gerrard, are in crisis. You and everyone are well aware that sales across Ontario have dropped dramatically, and although many landlords are working with business tenants, many are not.

Small businesses give life to our main streets and provide thousands of jobs. Their survival is critical. And yet, as many have said to me, they are being treated as if they are expendable. They have repeatedly asked for a moratorium on commercial evictions and they have been turned down. They have asked for direct rent relief that does not add to their debt burden and they have been turned down. They have even asked that they be allowed to apply directly for the federal-provincial rent support program, and have not been heard.

The Premier talks about how angry he is at greedy landlords, but won't provide the things that small businesses are asking for. He needs to step up now to provide a commercial eviction moratorium like New Brunswick and like Nova Scotia. He needs to provide direct financial support. He needs to get a program going now, because if he doesn't, we are at risk of a wave of business closures on main streets in this province that will be unprecedented, and we will all pay the price.

FLEMINGDON PARK MINISTRY

Mr. Michael Coteau: I want to bring attention to an organization in my community called the Flemingdon Park Ministry. As you know, Flemingdon Park is a very diverse community—it's the community where I grew up—and food security is an issue to some people. Speaker, every single week, the organization delivers 114 food hampers to shut-in seniors, and 80 prepared meals. They work with the local community health centre. The ministry is also preparing 75 bins of fresh produce for local families, with plans to accommodate another 200 families if necessary.

Their goal is to help families better understand where their food comes from and provide the best possible produce locally. They help local gardeners with virtual workshops to ensure that they get safe, great food and utilize 72 community garden plots, which helps alleviate food insecurity.

In their most recent project, the Common Table urban farm—which I had the pleasure of seeing for myself last year—over 5,000 kilograms of locally grown produce went to over 1,200 families, and their plan is to extend that reach in many, many ways.

We need organizations, especially because of COVID-19, locally, to help people learn more about food and to provide good-quality produce. Thank you so much to all the volunteers and to the organization.

The Speaker (Hon. Ted Arnott): The member for Etobicoke–Lakeshore.

Mr. Rudy Cuzzetto: Mississauga.

The Speaker (Hon. Ted Arnott): Mississauga–Lakeshore. I apologize.

COVID-19 RESPONSE

Mr. Rudy Cuzzetto: Thank you, Mr. Speaker. It's an honour to be back in the House today.

Like many of you, I've spent most of my last two months working with local businesses to fight COVID-19 and to help those who need it most. David Forgan of Sure Good Foods donated over 77,000 pounds of chicken to food banks across the province. Vince Molinaro gave us 1,500 pizzas. Meaty Meats, Fair Grounds, Solstice and many local businesses are helping.

Nutrafarms and Rouge River Farms have given produce, and Pina and Laura, my good friends from Sobey's, Canada, gave us a skid of canned food plus \$10,000 worth of gift cards.

Our local convention halls are cooking it up for families in need. At the Oasis Convention Centre, Danesh has produced thousands of meals for front-line workers at Mount Sinai. My friend Vishal from the Sai Dham Food Bank donated and helped us deliver it all, with Stephanie from Mexican Flower Trading, Magdalena from Re/Max, Suzy from UPS and Ameera from CMFG—and so many more.

I set up a website asking for help for socially connecting our seniors. VIG Computers delivered tablets for our long-term-care homes. Lakeview Community Partners gave us \$100,000 for Trillium Health Partners. Brightwater gave \$15,000 to Compass food bank. Bert's Sports has raised \$22,000 more.

Speaker, I could not be more honoured to represent a community so richly blessed, with so many people helping their neighbours when we are in need. Thank you to everyone in Mississauga–Lakeshore.

The Speaker (Hon. Ted Arnott): I say thank you again to the member for Mississauga–Lakeshore.

1030

ASSISTANCE TO FARMERS

Mr. John Vanthof: COVID-19 has turned the world upside down for Ontario farmers. Some of their markets have disappeared; in others, prices have plunged. This is going to impact them, and possibly our food security.

The federal government has introduced some programming. I think we can all agree that it's not enough. But Ontario has a program called the Ontario Risk Management Program, which was created to buffer farmers against market crises. When that program was created, the Ontario government agreed to pay 40% of the cost. Subsequently, the Liberal government of the day capped that fund, so it no longer pays 40%.

In the last election, although it seems eons ago, both the Conservatives and the NDP agreed that that cap should be lifted. Once again, we're asking for that cap to be lifted, and we're not alone. Ontario pork producers are asking for that, and the Beef Farmers of Ontario, Ontario Sheep Farmers, Ontario veal and the Grain Farmers of Ontario.

I think farmers across the province have a universal question. This is the government that they thought was going to defend agriculture, and yet agriculture has never—as the rest of the economy—been in more trouble in Ontario than right now. You have a program that works. Risk management works. What are you waiting for?

EVENTS IN MARKHAM–UNIONVILLE

Mr. Billy Pang: In this unprecedented time, families and businesses are uncertain about what our future may bring. I hosted an economic recovery consultation. I heard directly from local businesses in Markham–Unionville on how the pandemic has impacted their business. Through it all, I heard their positivity and optimism that we, as a province, will overcome this pandemic together and come out stronger.

In the riding of Markham–Unionville, I am hearing from families, businesses and organizations who are coming up with innovative ways to support our community and front-line health care heroes. Take, for example, Amigu di Macau Club, a local non-profit organization, who held a fundraising campaign and donated their proceeds to two long-term-care homes in Markham–Unionville. Earlier last month, local business Chapel Ridge Funeral Home donated and personally delivered much-needed PPE to four long-term-care centres, three senior homes and Participation House.

I was also pleased to be invited by the Markham Arts Council to their virtual Arts and Cultural Heritage Celebration 2020. The event celebrated the diversity and wealth of artistic talent in the city of Markham. I was also happy to be part of the celebration, where art plays as a form of healing and support for all of us during this time.

I have only mentioned some of many examples of how our community is demonstrating true Ontario spirit. I'm proud to represent my riding of Markham–Unionville.

NORTHUMBERLAND.IO PRODUCER ALLIANCE

Mr. David Piccini: I'm honoured to rise today to recognize a self-organized group of local manufacturers, makers, engineers, producers and volunteers who have come together to rapidly innovate in response to the COVID-19 pandemic. I'm talking about the Northumberland producers' alliance. This community-driven, donation-based initiative was mobilized in March, during the unprecedented times we find ourselves in, and in the face of an invisible enemy.

This group of volunteers came together to help. They worked around the clock to develop a remarkable supply chain and produce face shields for those who needed them most: for our health care professionals, our first responders, our grocery stores, our non-profits, our essential services. For those who got up every morning to head to work, the Northumberland producers' alliance was there to provide them with the PPE they needed to stay safe.

Many of the volunteers and partners were already working together through the community platforms established by the Venture13 innovation and entrepreneurship centre. They reached an astounding level of production, producing an average of 280 units per day, representing a 263% increase in volume production since April 10. Total face shield production: over 7,000. To everyone involved in this initiative, on behalf of our community, thank you.

Mr. Speaker, I'm honoured to represent the great riding of Northumberland–Peterborough South and the remarkable group of community initiatives and community members who have come together to stand by our essential workers in response to COVID-19.

INDEPENDENT MEMBERS

The Speaker (Hon. Ted Arnott): I'd like to ask the House for the attention of the members once again to

address the issue of the participation of independent members.

On October 28, 2019, as a result of vacancies in the House in the ridings of Ottawa–Vanier and Orléans, I informed the House that the time available to the remaining Liberal independent members during debate on second or third reading of government bills, or on a substantive government motion, would be reduced to 15 minutes.

As a result of Liberal independent members being elected again in those ridings, I am now able to restore the previous time allotment. During debate on second or third reading of government bills, or on a substantive government motion, I am prepared to recognize any of the Liberal independent members to speak for up to 20 minutes. Furthermore, as noted in previous statements, pursuant to standing order 26(d), this time may be split with other independent Liberal members.

I want to thank the House for its attention.

ORDER OF BUSINESS

The Speaker (Hon. Ted Arnott): I understand that the government House leader has a point of order.

Hon. Paul Calandra: Yes, Mr. Speaker. I seek unanimous consent to move a motion without notice respecting the order of business today.

The Speaker (Hon. Ted Arnott): Mr. Calandra is seeking the unanimous consent of the House to move a motion without notice respecting the order of business today. Agreed? Agreed.

Government House leader.

Hon. Paul Calandra: I move that, today, following question period, the House will adjourn until the next sitting day.

The Speaker (Hon. Ted Arnott): Mr. Calandra has moved that, today, following question period, the House will adjourn until the next sitting day. Is it the pleasure of the House that the motion carry? Carried.

Motion agreed to.

The Speaker (Hon. Ted Arnott): It is now time for question period, and I recognize the leader of Her Majesty's loyal opposition.

QUESTION PERIOD

LONG-TERM CARE

Ms. Andrea Horwath: Thank you so much, Speaker. My first question this morning is to the Premier. In a statement yesterday, front-line health care workers told the Premier what thousands of Ontarians from across the province have been saying for weeks about the Conservative government's refusal to call a public inquiry: "It is clear to us that this commission can be neither truly independent, nor effective if it is not structured as a full public inquiry...."

"Delaying a public inquiry puts lives at risk."

Families, workers and long-term care residents deserve the transparency and accountability that can only be provided by a fully independent public inquiry. Why is the Premier refusing to listen to them?

Hon. Doug Ford: Through you, Mr. Speaker: I've been in the trenches with our team for close to 70 days now, working around the clock—Saturdays, Sundays, 24/7. I'm at the hospitals, I talk to the nurses, I talk to the docs, I'm at long-term care, and what I'm hearing is, "Continue doing what you are doing. You're being honest; you're being transparent."

As soon as we found out about any of the outbreaks—first of all, my heart breaks for the people who have been affected—we took quick action, through the great leadership of our Minister of Long-Term Care and Minister of Health, again, working around the clock.

We put two packages of regulations together, we put two emergency orders together, we increased funding by \$243 million, we made sure that the PPE were in the locations, and, if someone needed it, all they had to do was call and we'd get it there in 24 hours.

We're doing everything we can to make sure we resolve the cases in the long-term-care homes.

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

Ms. Andrea Horwath: With all due respect, PSWs, nurses and front-line workers have been in the trenches of long-term care—a broken system that has been in crisis for decades—for decades. Not 70 days; decades.

The Premier says his review is going to be open and transparent, but a government commission won't have the same powers to subpoena witnesses, such as himself and ministers, and conduct a truly independent inquiry in which front-line staff and families can say what they've been seeing and what they know is happening in long-term care.

A full, independent inquiry can provide timely interim reports that can be acted on, and there is nothing at all preventing this government from starting to fix the problems that exist in long-term care right now.

1040

Why is this government hiding behind a bogus delay argument and ignoring the experts, families and front-line workers telling them to call an independent public inquiry?

Hon. Doug Ford: Through you, Mr. Speaker: The commission that we're putting together will have witnesses, will have nurses show up, will have PSWs. We want to fix the problem. We've had this problem in Ontario for decades; it didn't just all of a sudden appear over the last six months.

We're doing everything we can by making sure that everything that I know or my ministers know, the public knows immediately. There is no hiding it.

We have a health panel made up of some of the best doctors in the entire world, not to mention the countries that are part of the process. They're moving forward.

We're fixing issues on a daily basis, not waiting for an inquiry three years down the road to fix it. We're fixing it.

I'm so proud of the health team and everyone working on it. We're the first jurisdiction in North America—in North America—to call for a transparent commission to get the answers to fix the problems that have been broken for the last 20 years.

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

Ms. Andrea Horwath: Speaker, these nurses, apparently, and others that the Premier is planning to hand-pick for his commission haven't heard from him yet. He didn't talk to any health care workers that we know of about his plan for a government-controlled commission and he definitely didn't talk to everyday Ontario families, from family councils at long-term-care homes to the Royal Canadian Legion, who continue to call for a full, independent, public inquiry.

Who did the Premier consult with when deciding that a government-controlled commission would be better than an independent public inquiry?

The Speaker (Hon. Ted Arnott): The Minister of Long-Term Care.

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

We're looking across the board at the pandemic issue in Ontario, understanding that there are issues that were long-standing but added to by COVID-19.

The Public Inquiries Act includes commissions and public inquiries. The commission will have public input, it will have public hearings and there will be a public report.

As the Premier has said, as I have said, there needs to be transparency. Ontarians have questions, and those questions deserve to be answered. But we must not lose sight of the importance of the solutions that we already know exist, and finding solutions to what has happened, as impacted by COVID-19.

The work is already under way. We will add to that work. Ontarians deserve that, and questions that Ontarians have will be answered.

LONG-TERM CARE

Ms. Andrea Horwath: My next question is also for the Premier. We know who the Premier didn't consult with before deciding his commission was good enough for Ontarians, but who the Premier is consulting with is just as concerning.

Shortly after the first COVID outbreaks that happened in nursing homes in Ontario around March 24, private long-term-care operators began to register to lobby the government, including prominent Conservative campaign operatives and former staff to the Premier.

Can the Premier tell us what conversations he and/or his ministers have had with lobbyists or other interests representing for-profit long-term-care homes?

The Speaker (Hon. Ted Arnott): The Minister of Long-Term Care to reply.

Hon. Merrilee Fullerton: Thank you once again. Ontario has been tragically impacted by COVID-19. The

efforts that were under way, after decades of neglect of this system, have been looking toward finding the solutions for the issues in long-term care. Adding to that are all the measures that our government has taken over the process of this horrible, unprecedented pandemic. It's a tragedy.

The Public Inquiries Act includes commissions and public inquiries. The commission will be independent. It will be non-partisan. It will have public hearings. It will include public reporting. The public will have input. That is the desired transparent effort that we know Ontarians deserve. That is what we will do.

Its membership is to be determined. There will be a thoughtful process. The leadership will be a thoughtful process. We must be thoughtful and non-partisan in this, and I hope that the opposition understands that.

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

Ms. Andrea Horwath: Speaker, long-term care has tragically been impacted by profit-taking over caregiving. The families who have lost loved ones and the staff working the front lines deserve to know who the government is getting their advice from.

Over the last month, Revera homes, where 164 residents have died, hired the Premier's former director of marketing and the Attorney General's former chief of staff to lobby on their behalf. Extencicare, who is now relying on military support in a home they manage, hired the Premier's campaign spokesperson to lobby on their behalf.

Will the Premier table today details of any meetings that he and his team have had with these Conservative insiders now lobbying for for-profit, private long-term-care providers?

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

The issues in long-term care have been stagnating for decades. We are taking action to address the issues in long-term care. It requires many solutions. It requires the collaboration of many sectors. As the Minister of Long-Term Care, I can tell you that we have reached out to a myriad, a variety, a tremendous variation of groups to understand what the issues are. It behooves us all to understand what the problems are so that we can find the solutions.

There is no smoking gun here—if there is a smoking gun, it is COVID-19.

There are many people who want to be involved in providing input in something so tragic as what has happened with COVID-19. As Minister of Long-Term Care, I value that input. Our government values that input.

It's going to take everything we've got to address this issue, and we must be collaborative in this process. I hope you can do that.

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

Ms. Andrea Horwath: Speaker, this is nothing short of absolutely scandalous. Families with loved ones in these long-term-care homes and staff struggling to this very day to access protective equipment to protect their patients and themselves have been fighting to be heard in

this crisis. The government still denies that people are not getting the PPE they need on the front lines. They can't afford to hire lobbyists, but their voices matter. In fact, their voices matter the most.

The Premier's plan for a government-controlled commission is going to make it even harder for everyday Ontarians to get answers.

Why does the Premier think that this crisis, which has been fuelled by privatization, can be fixed by for-profit lobbyists?

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

Long-term care is a priority for our government. The safety and well-being of staff and residents in long-term care has been and will be the priority for this government.

Looking at what has transpired with COVID-19 in long-term-care homes, there are certain elements that have become clear. Our government has put up \$1.75 billion to redevelop long-term care, to reform long-term care, to build the capacity that is so badly needed. It is clear when we look at the data that ward rooms played a part in this. I said that yesterday. We are transparent about that. We have work under way to redevelop to private or two-people rooms. We know that ward rooms are a problem.

Let us advance the reform of long-term care, the work that is already under way and that is so important for our loved ones in long-term care and those who will come after them. Understand the urgency. We need to move forward with a commission.

LONG-TERM CARE

Ms. Andrea Horwath: My next question is for the Premier. It's sad that the minister didn't acknowledge and the government refuses to acknowledge the clear fact that for-profit homes have had a much higher rate of deaths than not-for-profit and municipally run homes. That's something this government needs to get its head around.

Even in the midst of this crisis, though, privately owned and operated care homes have still been turning a profit. Last week, Extencare and Sienna both unveiled reports showing hundreds of millions of dollars in revenue during the COVID-19 crisis, even as serious questions are being asked about care in the homes that they own and operate.

What assurances can the Premier offer to families and front-line workers, who can't afford to hire Conservative insiders, that he is finally prepared to put care ahead of profits? The last government wouldn't do it. Will he?

1050

Hon. Merrilee Fullerton: Thank you for the question. I said yesterday in my remarks to this chamber about the need for caring and compassion. As a society, that is the essence of how we care for our most vulnerable people, and that is how we will be judged. When we look at what has happened in long-term care, there is no particular group, whether it's not-for-profit or for-profit, that stands out if you look at all the issues. You cannot look in a tiny lens that does not take into consideration all the different factors. If we are to be thoughtful in this process, if we are

to come up with a solution for what is lacking in long-term care, then we must be thoughtful and consider all the variables, not just what is politically advantageous to the opposition.

We need solutions. It's going to take many solutions, and we need to be open-minded and thoughtful about that process.

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

Ms. Andrea Horwath: I think this minister's response clearly shows why a full, independent public inquiry is necessary in the province of Ontario. That response clearly shows it.

The COVID-19 crisis has devastated our long-term-care homes for nearly three months. Thousands of families are losing loved ones in care, and our health care heroes are giving their lives on the front lines of this fight. They see behind the scenes. Privately owned and operated care homes have still been turning massive profits. Caring for our most vulnerable should not be a business. It should not be a profiteering business.

Will the Premier tell us: Is he ready to reconsider the role of for-profit homes in Ontario's long-term-care system?

Hon. Merrilee Fullerton: Thank you for the question. Out of respect for all the front-line workers—our PSWs, our nurses, our housekeepers, our cooks, our administration in long-term care—we do a disservice to them when we denigrate the sector that they work in, whether that is for-profit or not-for-profit. We ought to be looking at finding solutions—

Interjections.

The Speaker (Hon. Ted Arnott): Official opposition, come to order.

Hon. Merrilee Fullerton: We need to be looking at the solutions—an independent commission that will allow for public input and public hearings, and making sure that there is a report that is public. We need to find solutions. That's exactly what we're doing. We've put dollars behind it. We've made commitments. We've looked at infection and prevention control. We've looked at making sure public health is involved more inherently in the testing. We've looked at making sure, across the board, that we've taken swift and decisive action, and we will continue to take swift and decisive action.

CHILDREN AND YOUTH

Mr. David Piccini: My question is to the Premier. Yesterday, the Premier and the Minister of Education announced the very difficult decision to keep our schools closed for the remainder of the school year, as well as setting the possible timeline for the reopening of child care centres and summer camps. For many parents and students alike, we know that this will be disappointing news because it means they won't be able to see their friends and their teachers in person. I know, for educators, this means they won't be able to have that person-to-person touch with their students.

I know that the Premier and the minister took this decision seriously and prioritized the health and safety of our students as number one. Can the Premier tell us more about why our government made this difficult decision and what supports that families like those in Northumberland–Peterborough South will receive while schools remain closed?

Hon. Doug Ford: I want to thank the member from Northumberland–Peterborough South for that important question. The safety of our kids will always be our top priority—to protect our kids. I'm not prepared to chance it—to send the kids back to school. Another tough decision we made yesterday for a lot of the kids out there is on overnight camps—the congregate situation. We just can't chance it to have 500 kids all living together under the same roof, per se. That's why we're doing everything we can to support students and their families. Yesterday, we announced a seven-point summer-learning plan and 34 partnerships with organizations and private businesses to support our students, our teachers and our families.

I want to give a special shout-out to all the teachers out there who have been going through this, and online learning, along with the parents. They're holding down a job and then coming home and helping the kids, so I just want to thank those two groups.

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

Mr. David Piccini: Thank you, Premier, for that answer. The health and safety of our young people must be the guiding principle for this government's decision-making. I know that the Premier and Minister of Education also announced details about child care centres and camps. For many families in Northumberland–Peterborough South and across the province, child care centres and camps play an important role supporting families and children alike.

We know that the safe and gradual reopening of the economy needs to go hand in hand with the safe and gradual reopening of child care centres. Speaker, can the Premier tell us about the government's decision on child care centres and camps?

Hon. Doug Ford: I want to thank the member for that question. Yesterday we announced that, based on the expert advice from the Chief Medical Officer of Health and COVID command table, child care centres will reopen in stage 2. We also announced that as long as the trends continue to improve, summer camps and day camps, with strict guidelines, will reopen in July and August.

Mr. Speaker, families need certainty. They want to know what they're doing throughout the summer, where they're going, making plans with the family. Now we've given them certainty, so they can move forward in a safe manner to protect their kids, to protect their families, and that's what we've been doing from day one. The number one priority in my job is to protect the 14.5 million people right here in Ontario, and I'm going to continue doing that.

LONG-TERM CARE

Ms. Peggy Sattler: My question is to the Premier. Yesterday the Premier stated that he didn't want to delay

urgent reforms desperately needed in long-term care. Speaker, he doesn't have to delay. The personal support workers who care for our loved ones deserve better wages, and not just during the pandemic. They deserve full-time jobs at one facility instead of cobbling together multiple part-time shifts, potentially spreading infection from one home to the next. This was a recommendation of the SARS commission, and it's the right thing to do.

Speaker, will the government act right now to permanently increase PSW wages and mandate permanent one-facility staffing placements in long-term care?

The Speaker (Hon. Ted Arnott): The Minister of Long-Term Care to reply.

Hon. Merrilee Fullerton: Thank you for the question. Looking at the elements of neglect over the last 15 years and a couple of decades, our government was actively working on finding the solutions. Staffing was part of that. When COVID hit, we've taken even more measures, introducing the pandemic pay to which you refer. Our intent is to address with our expert panel the staffing issues that have been long neglected and that we need to address on an urgent basis. Their work is ongoing, and I will value their informed input.

Looking at the pandemic pay, we understand the gaps that are existing in long-term care and other sectors. We need to attract people to long-term care. There are many reasons why that gap exists and why there is a lack of staff, and all of that will be addressed.

The Speaker (Hon. Ted Arnott): The supplementary question: the member for Nickel Belt.

M^{me} France Gélinas: To the Premier: There are other reforms that the government could implement today. One that is very close to my heart is a minimum standard of four hours of hands-on care. It would make such a huge difference to the quality of care for our loved ones in long-term care.

The Premier does not have to wait to enact this. We are ready, willing and able today to work with the government to expedite and pass Bill 13, the Time to Care Act, and make a minimum standard of four hours of hands-on care a reality today—this afternoon. We can let our long-term-care heroes know that we have their backs and that these needed changes will be made permanent.

Will the Premier work with the opposition and pass Bill 13, the Time to Care Act, and legislate a minimum standard of four hours of hands-on care and employment standards for our long-term-care heroes? Premier, we could do this today. Will you do this with us?

Hon. Merrilee Fullerton: Thank you for your question. Looking at the care in our long-term-care homes, as soon as we became a dedicated ministry in the summer of last year, we looked at resident-centred care.

1100

Our vision was for a 21st-century long-term-care system that was rehabilitated—modern design standards and more care around the residents. This is something that we're addressing and have been addressing to make care more resident-centred. That means looking at ways that care is provided in the home, looking at ways new models

like the butterfly model can enhance the support for our residents and make the work for staff meaningful and purposeful in a different way.

That work is already under way, looking at red-tape reduction, looking at the highly regulated sector that long-term care is and how we create the environment whereby we can have staff interacting more with residents, providing that direct care. This is ongoing, and we will continue to work on this.

INTERNATIONAL MEDICAL GRADUATES

Mr. Michael Coteau: My question is to the Minister of Health. Minister, in March, the College of Physicians and Surgeons launched a program to issue short-term licences to allow some foreign-trained doctors and domestic medical school graduates to practise under supervision, but it's my understanding that by April of this year, only 12 people applied.

In April, the government announced a program to help former international health care providers and medical students connect with institutions to offer additional support. Through you, Mr. Speaker, to the minister: Can the minister update this House as to whether the program has been successful, and how many international medical professionals have applied and been approved?

Hon. Christine Elliott: I thank the member very much for the question. I would say that, with the COVID pandemic, we have been welcoming people with health care backgrounds of all sorts. We have asked for people to join through a volunteer line. We also have a connection panel that connected organizations that were looking for help with people who were ready to volunteer.

We had many nurses who came forward out of retirement who worked with the College of Nurses to be recertified. We had many internationally-trained medical graduates who came forward as well, who have been very helpful in numerous areas, including contact tracing, working at the assessment centres and elsewhere.

While I have had a number of inquiries from them about their ability to go immediately to the College of Physicians and Surgeons to be certified, we all know that there is a process that has to be followed. I'm sure that their experience locally is going to be of assistance to them, but of course, that's going to be up to the College of Physicians and Surgeons to make that final decision.

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

Mr. Michael Coteau: Minister, 12 applications is simply not good enough. We've got 13,000 foreign-trained doctors and 6,000 foreign-trained nurses in Ontario today, and we know that 10% of the COVID cases are health care professionals.

This system is being pushed to the brink. It is completely unacceptable to leave those professionals on the sideline and waste that talent. Minister, would you consider running some type of public awareness campaign to get the

word out there so we can increase those applicants and get people working? It is a waste of those resources.

Hon. Christine Elliott: I certainly agree with you that we don't want to waste any valuable health care resources that we have, and I know there are many internationally-trained graduates who are ready to work in Ontario. There are also a number of students from Canada who have gone to do their residency in the United States, for example, who want to come back to be able to work. There are many, many people who are in that situation.

We certainly want to encourage them to apply to the College of Physicians and Surgeons, and we're continuing our conversation with the college as well. But ultimately, they need to be qualified to practise in Ontario. We need to have those standards met. But there is more work to do, absolutely, because we don't want those resources to go to waste. Thank you for bringing the question forward.

COVID-19

Mr. John Fraser: My question is for the Premier. Premier, last week I asked you about ongoing testing in long-term care. The response that we received was that we were going to test every resident and staff by this week, and I think we all agree that's a good thing.

It's just a snapshot. COVID-19 is not going away any time soon, and long-term-care, retirement and group homes are what we know are the most vulnerable. There needs to be a plan.

Through you, Speaker, I'll ask the Premier again: What is the plan for ongoing testing and surveillance in long-term-care, retirement and group homes?

The Speaker (Hon. Ted Arnott): Minister of Health.

Hon. Christine Elliott: I thank the member very much for this question. This is a really important issue because we know that testing is a snapshot. It's not to say that we've got all the residents of long-term-care homes tested and that's the end of it. That's going to need to continue on an ongoing basis, as well as the continued testing of staff members.

As we contemplate, at some stage, family members being able to come in too, that introduces another element of concern and risk, so we will need to have heightened testing in those areas.

We have completed the testing on a first-case basis through long-term-care homes, residences and staff. We are now moving forward with retirement homes, group homes, shelters and other places of congregate living. That's very important, and again, that will have to continue to be monitored and testing will need to continue there.

We know that the ongoing testing is also very important in the community as certain elements of the economy open up, so we are concentrating on testing in that area as well.

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

Mr. John Fraser: I appreciate the answer, Minister, and the commitment to ongoing testing.

I think we need a plan because as we're opening up this economy—we know the pressures that existed around testing going on in the community, and not in long-term care. We didn't use capacity when we had it, and that's just a fact. Now we know in this pandemic that we're going to need more testing and more surveillance. That's what experts tell us. That's what we're going to have to do as we open up the economy. And let's be frank: We're not there. We're not there yet. We know that.

I just want to reiterate that there needs to be a clear plan. If we tilt too heavy on one side, as we may have, understandably—I'm not criticizing that decision; we should take a look at that. But let's make sure that we tilt the right way, because if we don't, it's going to have pretty serious consequences for people living in long-term-care, retirement and group homes.

Minister, there needs to be a clear plan and there's not one yet. Thank you.

Hon. Christine Elliott: I can agree with you that there is a need for a plan. There is a need to have ongoing testing, and there is a plan. We do have a plan. We focused initially on making sure that the most vulnerable group was being protected. That's our long-term-care residents and staff. We also know that another very vulnerable group is people in retirement homes and other congregate living places. That's what we're focusing our attention on now, with ongoing testing in long-term-care homes.

We're doing the surveillance testing in the public and we've also changed the criteria for people who are symptomatic, who do have symptoms that they believe might be COVID-19. They may go to assessment centres now and they will be tested. Previously, it was more up to the judgment of the clinician at the assessment centre. What we are saying now as we're opening up the economy is if you have symptoms of COVID-19, please go to an assessment centre and be tested. That is vitally important so that we can assess the community impact on public health of the opening of the economy.

We really urge people to go to the assessment centres for a test if they believe they have symptoms of COVID-19.

PROTECTION FOR HEALTH CARE WORKERS

Mr. Wayne Gates: My question is to the Premier. There is nothing more important than a worker going to work and feeling safe. That was true before this pandemic, and it's true now more than ever. But in Ontario, this is not happening.

Mr. Speaker, 17% of Ontario's confirmed cases are health care workers, a 10% jump from cases in early April. Nurses, doctors, lab technicians, PSWs, therapists, custodians and many more are among our front-line heroes who are getting sick. In some cases, they do everything right and they still cannot prevent this deadly virus, but in some cases, they can.

We've heard it from the front lines: They need more PPE and they need the right PPE. When will these front-

line heroes get the equipment they need to stay safe themselves when they're keeping us safe?

The Speaker (Hon. Ted Arnott): Minister of Health.

Hon. Christine Elliott: Thank you very much to the member for this question. It is vitally important that we have people who are bravely going to work each and every day. They are front-line heroes, our doctors, nurses, personal support workers, cleaners, kitchen staff—everyone who's working in health care. They deserve to be protected with the right personal protective equipment.

1110

We have been working day and night. The Premier has been working on this each and every day to make sure that we bring personal protective equipment in through our regular supply sources, but also through Ontario. Together, we have been able to work with Ontario companies to produce PPE so that we never have to be in this situation again—we're dependent on imports from another country—because there has been international demand for PPE. So we are creating it. There are companies now producing disinfectant, gowns, masks and face shields. All of this equipment is vitally important to protect those heroes on the front line, for themselves and for their family's health as well.

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

Mr. Wayne Gates: Minister, I just want to say to you, in my own riding I have PSWs and custodians who are in ICUs on ventilators as we speak today, because they weren't provided proper PPE. I just want you to know that that's happening.

Mr. Speaker, again to the Premier: Keeping workers safe must be a priority of this government. One of the ways to do that is for people who feel unsafe to be able to refuse unsafe work. Early in this pandemic, the Premier said, "If you don't feel safe in your workplace, your job will be protected. You can leave the job site."

My question is simple: What has the government actually done to protect workers who are trusting their Premier and taking his advice?

The Speaker (Hon. Ted Arnott): The Minister of Labour to reply.

Hon. Monte McNaughton: I want to thank the member opposite for that question. The health and safety of workers in this province is the top priority for me as minister and for our government.

Mr. Speaker, I am proud of the very first piece of legislation that we introduced in the House when the global COVID-19 pandemic broke out. It was supported by every member in this House. That was Bill 186. That legislation told workers that if they are in self-isolation, if they're in quarantine, if you're a mom or a dad or an aunt or an uncle who has to stay home and look after a child because the education system is shut down, that those jobs will be protected.

Furthermore, I want to give a shout-out to every Ministry of Labour inspector who's on the ground every single day. I'm proud to report that nearly 7,500 workplace investigations have been done. Nearly 3,500 orders have been issued, and we've had to shut down 20 job sites. We

will spend every resource necessary to protect every single worker in the province of Ontario.

ENVIRONMENTAL PROTECTION

Mr. Mike Schreiner: My question is for the Minister of the Environment, Conservation and Parks. Late last week, the government quietly published a regulation that allows large polluters to be exempted from normal GHG reporting timeline requirements. Since the government suspended the environmental oversight rules last month, they were able to make this change without notice or public consultation.

Transparent GHG reporting rules allow us to hold government accountable and polluters accountable. It makes no sense to suspend pollution reporting during a pandemic, especially when experts now are drawing a link between air pollution and vulnerability to COVID-19.

Speaker, why does the minister think that a global pandemic during a health crisis is the right time to suspend transparent reporting requirements for climate pollution?

Hon. Jeff Yurek: Thanks very much for the question from the member opposite.

Mr. Speaker, early in the pandemic we moved to ensure that we were able to react and continue the supply chain within this government, within this province. During the pandemic and at that time, we suspended the 30-day consultation period on the EBR in order to ensure that we can keep people supplied with food and keep people safe.

In relation to the question of the member opposite about the greenhouse gas reporting, obviously it wasn't hidden. It was posted on the EBR, so it was public for everybody.

What that whole idea was, it was to line up the reporting structure for industry in Ontario with the changes the federal government did because of the pandemic by extending it by one month—one month to report that. We didn't want to overburden industry in this province, which is having a hard time bringing in the people to do the reporting because of the pandemic. Instead, we made it easier. So they do one report that fits in line with the province and Canada.

I'm not sure if the member opposite really cares about businesses during this pandemic, but we do, and we're making sure that they can survive and make it through this—

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

Mr. Mike Schreiner: I'd like the minister to know that in the regulation it does not specify one month; it says it's for an indeterminate period of time.

I would say that if anybody has been fighting for businesses in this pandemic, it has been me, calling for a ban on commercial renovations over and over again, to stand up for our small businesses.

Speaker, I'm concerned that the government doesn't understand or hasn't considered how this change could affect our obligations under the Paris agreement. I've complimented the government, and indeed all members of this House, for quarantining partisanship during this pandemic, but I'm concerned that the government could be

using the COVID-19 crisis to undermine environmental protections. Numerous consumer groups have expressed concerns about this.

Will the minister consider bringing back the Environmental Bill of Rights so we have public oversight on essential—

The Speaker (Hon. Ted Arnott): Thank you very much. The Minister of the Environment.

Hon. Jeff Yurek: The member opposite knows that my door is open if he does have certain questions. It's a month.

I kind of see that this member, as he's growing in his role in the Legislature, has become a politician in sheep's clothing. He comes across as this gentle person coming forward, but at the end of the day he's playing politics, he's playing partisanship. When I first suspended the EBR, he was on Twitter saying, "There's no ill will behind it. Good for him." Special interest groups got a hold of him, and all of a sudden it's bad.

Mr. Speaker, we have allowed through this process to make sure farmers continue the food supply with nutrient management—would have been suspended if we didn't act. We have GHG reporting, which is online for people to read. Because of COVID-19, we have an amendment to the ESA act with forestry, but we're allowing a 30-day consultation period.

We are being pragmatic to ensure that Ontarians are safe, our supply chain is ongoing.

I wish the member opposite would get on board and support this government, work with us to help us defeat this pandemic and get the economy up and running again.

COVID-19

Ms. Suze Morrison: My question is for the Premier.

Yesterday, the Minister of Health continued to claim that Ontario is a global leader in COVID-19 testing, but here are the facts. Ontario's per capita testing for COVID-19 ranks fifth in Canada, behind Quebec, Nova Scotia, Alberta and the Northwest Territories. Ontario is also behind a wide swath of countries, including even the United States. Ontario has consistently missed its own testing targets, including by 5,000 or more tests on 21 separate occasions since mid-April. And today, once again, we've just received a report that Ontario only completed 7,300 tests yesterday. That's 10,000 fewer tests than the daily target.

Why does this government continue to claim that this is a success?

The Speaker (Hon. Ted Arnott): The Minister of Health to reply.

Hon. Christine Elliott: Because it is a success. When we started out, the only testing that was being done was being done through Public Health Ontario. We've since expanded that to over 20 sites, including hospital labs, private labs that are doing some of the testing, university labs as well. We've created a connected system of labs where one did not exist before, unlike, for example, in Alberta, that got out early. We did that, and we have now been able to do up to 20,000 tests per day. Does that ebb and flow a bit? Yes, it does.

Let's look at what just happened. We just had a long weekend that went by where people were not—some went to assessment centres, but not as many as have been going to assessment centres. We also had a situation where we finished our testing in long-term-care homes, and we're transitioning now to do testing in retirement homes, other places of congregate living, and more testing in the public.

What's really important is to do that testing and to make sure—if people have symptoms of COVID-19, please go to an assessment centre and you will be—

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

Ms. Suze Morrison: Respectfully, I think I have a different definition of the word “success” than the minister.

The importance of testing cannot be overstated. Epidemiologists have said that the best testing strategy is to test, test and test some more. It helps our scientists and health care heroes contain the virus by tracking where it is.

In the last two days, Ontario has completed less than 15,000 tests. In the last week, Ontario averaged under 14,000 tests a day. That's a far cry from the 20,000 the Premier and the minister said we would be completing. We've only reached capacity for the lab system once—once, since April 15. What can Ontarians themselves, everyday Ontarians do to help this government get more tests completed, so that we can tackle this virus together?

1120

Hon. Christine Elliott: Well, one thing I can agree with the member on is that testing is very important. Especially as we're opening our economy, we need to understand what the effect is on public health. But what I don't agree with is the testing strategy and where Ontario stands vis-à-vis the rest of Canada.

We continue to remain the province that has the highest testing per 100,000 people across this entire country, despite starting off at a situation that was less than ideal compared to some of the other provinces. So we are still doing that. Do we hit the targets every single day? No, there is an ebb and flow to this, but we are increasing our capacity on a daily basis. The last couple of days have been slower than usual, but we are continuing to increase the lab testing capability. Part of it is that the same number of people did not come to the assessment centres over the weekend.

We want people to come in. Obviously, people are going to do that willingly, so what we are doing now is encouraging people to come in. If they have symptoms of COVID-19, we want them to come into assessment centres to be tested. That is vitally important for us to determine when we can enter the next stage of opening our economy. If we—

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

The next question: the member for Kitchener Centre.

RACE-BASED DATA

Ms. Laura Mae Lindo: My question is to the Premier. In 2014, researchers found that racialized and Black

Ontarians were more at risk of acquiring H1N1. Despite knowing this, the Liberal government did next to nothing tangible to address health inequities. As of last week, government data collected on COVID-19 infections among Ontario health care workers excluded personal support workers from the categories being tracked. The vast majority of PSWs are Black, brown and racialized women. That data simply did not matter to this government.

The Premier said he didn't believe in race-based data, but now, after intense public pressure, says that race-based data can be voluntarily collected during the pandemic. He has shared no plan on how this data will be used to keep Black, brown, Indigenous and other racialized people safe both during and after the pandemic.

My question is simple: What is the plan?

The Speaker (Hon. Ted Arnott): Minister of Health.

Hon. Christine Elliott: Well, I thank the member very much for the question. It is an important one. As the current situation evolves, we are committed to ensuring that we have the important health information and data that we need to ensure the health and safety of all Ontarians. This is something that has evolved since the beginning of this pandemic.

The ministry does not routinely collect data on income or race in lab data or in iPHIS or COVID-19, but we want to understand the issues of inequity that have been brought forward to us by a number of groups. We know that understanding how the corona pandemic is spread, who it's affecting, what needs to be done as a result of that, requires us to collect this data, so we are going to do it because we want to make sure we can keep all Ontarians healthy and safe.

Has this been a change since the beginning? Yes, it has. Certain things have evolved as a course of this pandemic, and this is now something we are committed to collecting and using to improve everyone's health outcomes.

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

Ms. Laura Mae Lindo: Back to the Premier: Mr. Speaker, health inequities existed before COVID-19, and they will exist after. Data collection with no plan on how to use the information responsibly is actually not what people are asking for. People are asking this government to create a plan to address the health inequities that so many of us as Black, racialized and Indigenous people experience whenever we interact with the health care system, from having to convince someone that symptoms are real to finding culturally responsive mental health services to being misdiagnosed and having our pain left unaddressed.

Through you, Mr. Speaker, I'll ask again. Will this government make an informed plan to address health inequities in our health care system, even when the pandemic is over, and will they commit today to sharing that plan publicly?

The Speaker (Hon. Ted Arnott): The Minister of Health.

Hon. Christine Elliott: Well, I certainly can agree with the member that there are inequities in other areas of health care as well. It's one of the things that we took a look at in

developing our mental health plan, recognizing that not everyone's needs were being met and the need to expand the system and consider the perspectives of everyone in Ontario. That is something that we hope to do with respect to the work that we're doing on COVID-19 as well.

The Anti-Racism Directorate is supporting the implementation of a framework to collect race-based data and to make sure that it is collected, protected and used in a standardized way across certain sectors of government. That also is going to be very important: not just to collect the data but to make sure that it is protected for privacy reasons and used appropriately. So we are working with the directorate to do that. The directorate is developing culturally appropriate training—resources—to support the regulated child welfare, justice and education sectors with the implementation of race-based data collection. There is a lot of work that's ongoing—

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

COVID-19

Ms. Mitzie Hunter: My question is to the Minister of Health. This week the government officially moved into their first stage of reopening, allowing retail stores and public spaces to reopen in some instances. But this week, the spread of COVID-19 continues to increase. The people of Ontario have taken dramatic steps and co-operated with emergency orders on an historic level. They do not want to squander their hard-won progress on a second wave of infections and closures.

Speaker, through you to the minister: To prevent a second wave, we need to be more data-driven. We currently do not have all public health units collecting the workplace data of infected persons. Without a more robust data collection system in place, our response to a second wave will look more like playing a game of whack-a-mole blindfolded.

Will the government invest more in local public health units across the province so that we can track COVID-19 and contain spread?

Hon. Christine Elliott: I thank the member very much for that question. It is something that is very important. We have already put \$75 million into public health units to help them to do more testing and the contact tracing and all of the other work that needs to be done. But you're absolutely right: As we open up the economy, we want to make sure we understand what the effect is on public health. I can tell you that that's something that's being followed very closely by our Chief Medical Officer of Health, who was the one that ultimately looked at the plan that we had developed and put certain standards in place and was fine with the opening of stage 1 yesterday.

That said, we need to follow up very carefully to see what happens in the next several weeks. That's why this has to be done in very careful, measured stages, to make sure we can follow what's happening. If there's some suggestion that public health is being affected in a negative way, then we need to pause, analyze the data and make changes to it.

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

Ms. Mitzie Hunter: Speaker, I thank the minister for her response. I do have a suggestion. We know that asymptomatic spread is an ongoing concern. Many sectors rely on public health measures involving symptomatic screening and advising folks to stay home if they feel sick. But when we're reopening, this isn't good enough to give people the confidence they need. Experts have warned that asymptomatic spread will be a blind spot if we do not broaden our testing capability. Weeks will pass and then new infections will be found.

Mr. Speaker, to get our economy back, we need that confidence to be in place to prevent a second wave of spread. Will the minister commit to investing more in broad-based, rigorous testing and contact tracing in areas of possible risk—for instance, bus drivers, limo drivers, taxi drivers, grocery store clerks and child care workers—and not just in areas already in outbreak, so we give people—

The Speaker (Hon. Ted Arnott): Thank you. The Minister of Health to reply.

Hon. Christine Elliott: Well, you're absolutely right. We do need to do more broad-based screening. That's why we're inviting people to please, if you have any symptoms of COVID-19, go and be assessed. But we need to have surveillance testing done as well.

We're looking at expanding that because we are working with businesses. The Ontario Jobs and Recovery Committee, which is being chaired by the Minister of Finance, is taking a look at it, figuring out with businesses how they are going to bring employees back for the next stage as we get to that point. How are they going to let people come back to work? People are nervous about this. Will they want to go back to work? They're concerned about it. They're concerned about their own health and the group of people that they work with. So we are working with businesses to determine how they are going to do their own testing and how that will continue with the work that we are doing as well.

1130

It is a complicated process. We are working on that now because we do want to get to stage 2 at the next point in time, but it needs to be safe for all Ontarians, so we're working with businesses and some of the broader sector organizations to allow that.

LONG-TERM CARE

Ms. Sandy Shaw: My question this morning is to the Premier. Premier, the owners of Rosslyn Retirement Inc. in Hamilton have a spotty history, to say the least. They have a licence that was revoked because of substandard care, a bankruptcy and a Hamilton Spectator investigation showing that the health ministry provided more than \$500 million to the company leading up to the bankruptcy. Yet they're now running at least eight retirement homes in Hamilton and Dundas, including the Rosslyn home that was evacuated on Friday. They had every resident evacuated to the hospital because of a horrific COVID-19

outbreak. Unbelievably, one resident was left behind in the empty home, forgotten.

This is truly a nightmare, so my question to the Premier is simple: Why doesn't he take action when private, for-profit corporations take advantage and hurt our seniors?

The Speaker (Hon. Ted Arnott): The Minister of Health.

Hon. Christine Elliott: I thank the member for the question. We have been diligently monitoring and taking decisive actions to stop the spread of COVID-19.

It is true that there were steps taken to evacuate the Rosslyn Retirement home last week due to concerns about the physical structure and to keep people safe and healthy. We are also aware that a resident was left behind in the house for 24 hours. That is not acceptable under any terms, not acceptable at all, and we are working with our partners to review the protocols and understand why this could have happened, and to make sure that this never happens again.

The Retirement Homes Regulatory Authority has been working closely with the local LHIN and with the public health units to understand what has been happening and to make sure that as people have been evacuated, they are going to be safe and healthy in their new home for the time being, but the other situation was totally unacceptable and certainly should not have happened.

The Speaker (Hon. Ted Arnott): The supplementary question: the member for Ottawa Centre.

Mr. Joel Harden: My question is for the Premier. Premier, last Sunday a constituent of mine, Christine Collins, wrote to you on behalf of her brother Peter, calling for a public inquiry into long-term care. Peter lives at the Carlingview Manor, a for-profit long-term-care home in Ottawa where, tragically, 46 people have died.

Speaker, earlier in debate, the minister responsible for this file said that when we question as an opposition some for-profit operating homes, we're insulting the workers. I beg, through you, Speaker, for the minister to understand that what's insulting is for CEOs in this industry to earn more in a day than workers do in an entire year.

Christine is terrified for her brother's safety, Premier. The staff in this place are overworked. They have been going seven days a week for six weeks. His medications, she worries, are not being properly followed. Premier, Christine wants a public inquiry so witnesses are compelled to testify and she gets the answers that her family urgently needs. Will you please abide by Christine's and so many others' wishes and call for a public independent inquiry? Yes or no?

The Speaker (Hon. Ted Arnott): The Minister of Long-Term Care to reply.

Hon. Merrilee Fullerton: Thank you for the question. Looking at the long-term-care homes across Ontario, our government has been doing everything to support them, Carlingview included. We've worked across ministries. We've worked with a number of other groups, whether it's Ontario Health, whether it's public health, whether it's the LHINs, whether it's the local hospitals, engaging support for these homes, and Carlingview is one of the homes that has received that support.

My heart goes out to all the family members who are suffering through this, all the residents who are bearing the brunt of this. It's a fact. Carlingview Manor has received help from the Queensway Carleton Hospital. It has received help from the Ontario Health response team. It is getting support, and that matters most.

Our government has made their priority long-term care, the residents, the staff, and that's exactly what we're doing. In terms of a public inquiry, I want to reiterate that it will be public. There will be public hearings. There will be a public report. There will be public input. It is under the Public Inquiries Act, both public inquiries and this commission, which will be independent and non-partisan.

We must have transparency. Our government wants transparency. As a minister, I want transparency. Ontarians have questions, and those questions deserve to be answered.

RELIGIOUS COMMUNITIES

Mr. Billy Pang: My question is for the Premier. During this time, many of my constituents have to make sacrifices as we all adjust to the new normal. This is something that all Ontarians have had to experience, with changes to our regular routines impacting each individual's spiritual and religious practices.

I want to take this opportunity to acknowledge the important role that religious organizations have played during this time. Churches, synagogues, temples, mosques and gurdwaras are all places of connection and fellowship that have been required to shut down to help fight the spread of this pandemic.

Speaker, can the Premier please share with the Legislature the new regulations that the government announced yesterday that will provide better clarification for places of worship in this province?

Hon. Doug Ford: I want to thank the member from Markham–Unionville for the question.

Our government recognizes the importance Ontarians place on participating in religious gatherings. It's absolutely critical that we move forward with this, and we did. That's why our government amended the regulations to allow Ontarians to attend religious gatherings in the following conditions:

- Individuals must remain in a car;
- individuals may only be in a vehicle with others if they are part of the same household;
- cars must be at least two metres apart;
- no materials can be passed between individuals during the service; and
- persons conducting the gatherings must ensure buildings are closed for the service. They can't open their buildings. People can't be going in there and using the restrooms.

Our government and all members greatly appreciate the sacrifices made by all religious communities regarding social distancing measures while still serving their communities with compassion during this time.

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

Mr. Billy Pang: Premier, thank you for the answer and our government's announcement on greater clarity regarding public worship. I know that my constituents as well as many people in this province greatly appreciate hearing this news and the continued support that we are providing to religious organizations with measures like this.

Premier, religious and spiritual organizations play a major role in the lives of many Ontarians. During this pandemic, we have seen all major faiths demonstrate countless examples of leadership and personal sacrifice in order to help each other.

Speaker, can the Premier share with the Legislature about the positive support that all religious communities in Ontario have demonstrated during this time?

Hon. Doug Ford: I want to thank the member for the question. I want to take an opportunity to acknowledge the

work done by all religious communities across this province. I experienced it numerous times, but just a couple of days ago I was at a mosque, handing out meals—thousands of meals—as people were driving through.

This includes examples of livestreamed services being provided during Ramadan, Passover, Vaisakhi or Easter, allowing religious members to stay connected in faith and fellowship while making sure that social distancing measures are being respected.

The actions of all religious communities truly demonstrate the Ontario spirit of charity, compassion and support to those in need, no matter who they are or what religion they come from.

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

This House stands adjourned until Tuesday, May 26, at 9 a.m. Keep well, stay safe and take care.

The House adjourned at 1139.

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