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LEGISLATIVE ASSEMBLY
OF ONTARIO

ASSEMBLÉE LÉGISLATIVE
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ADVANCING OVERSIGHT
AND PLANNING IN ONTARIO'S
HEALTH SYSTEM ACT, 2021
LOI DE 2021 VISANT À FAIRE
PROGRESSER LA SURVEILLANCE
ET LA PLANIFICATION DANS
LE CADRE DU SYSTÈME
DE SANTÉ DE L'ONTARIO

Continuation of debate on the motion for second reading of the following bill:

Bill 283, An Act to amend and enact various Acts with respect to the health system / Projet de loi 283, Loi visant à modifier et à édicter diverses lois en ce qui concerne le système de santé.

The Acting Speaker (Ms. Jennifer K. French): Further debate?

Ms. Bhutla Karpoche: It's always a pleasure to rise on behalf of the people of Parkdale—High Park to speak in this House—and today, on Bill 283, Advancing Oversight and Planning in Ontario's Health System Act. This is an omnibus bill that proposes changes to various aspects of governance in our health care system.

There are four schedules. The first concerns vaccine reporting, allowing the ministry to collect information about vaccinations. The second schedule would create a regulatory body to govern personal support workers. The third schedule concerns physician assistants. This schedule proposes to regulate physician assistants as new members of the College of Physicians and Surgeons of Ontario. The fourth schedule creates a regulatory body for the professions of psychologists and behaviour analysts.

I'll start with the aspects of the bill that concern vaccination information. This would, as I understand, allow for the creation of a database of vaccinations containing health and other identifying information concerning the individual who is vaccinated. This database would also contain information on who administered the vaccine, including their professional credentials, their organization or employer, and where the vaccine was administered. Finally, the ministry would be able to collect information about which vaccine was used, including the maker, the expiry date and other related information.

At this time, Speaker, I'm not clear on whether the ministry is already collecting this data. If they are collecting this information, then I'm not sure why this is

necessary. And if they're not already collecting this information, why have they been so slow to introduce this legislation? Vaccinations in Ontario began on December 5, and five million doses of vaccines have been administered as of today.

The government knew last summer that vaccines were on their way. Why didn't they introduce this bill then, or even in the fall? Why wait until five months into the vaccine rollout? The government continues to be several steps behind.

Collecting this information is important. Right now, however, the issue that is top of mind for my constituents is vaccine appointments. We need a vaccine clinic in South Parkdale. I raised this issue with the minister earlier this week. The M6K postal code in my riding is a designated COVID-19 hot spot, but its vaccination rate is well below the provincial average. A big part of why South Parkdale is below the provincial average for vaccination rates is because 18-plus residents of M6K don't have an accessible vaccination clinic. It's really very simple: Bring the vaccines to the people. Make it easy to get.

Residents of South Parkdale previously had to travel to the nearest clinic, which was located at West Park Healthcare Centre. If you live in South Parkdale, that meant a round trip of two hours, getting on and off crowded buses. We learned just today that West Park Healthcare Centre is now no longer available for the M6K postal code 18-plus residents. So 18-plus residents in a designated COVID-19 hot spot had absolutely nowhere to go to get their vaccinations.

Regardless of where the clinic is, it's ridiculously hard to get an appointment. My constituents tell me that even when they're trying to book through multiple systems as early as they can, they are in a queue for hours, and then they are told that there are no more appointments available.

I want to share a part of a letter that I received from one of my constituents. She said, "My husband and I (who are both computer literate with university degrees) had four screens going, logged in at different times, and still couldn't get appointments. If we found it too difficult, I can't imagine how others in our riding—with less computer access and less computer experience—could ever book an appointment this way."

Hot spots like M6K simply aren't getting the vaccines they need. The government's own science table has advised prioritizing vaccine supply to hot spots, but we haven't seen enough to this point. M6K is being left behind. This is not right. The minister knows. The minister herself said in this House that 80% of the cases are coming

from 20% of the province, and to get a handle on the third wave, we need to focus on the hot spots. So why is it that M6K still does not have a pop-up clinic in the neighbourhood?

M6K in South Parkdale is, in majority, tenants living in high-rise apartment buildings. It's a very dense neighbourhood. It's home to many racialized communities, including a large Tibetan community. We have many unhoused and underhoused neighbours. We have many essential workers, who have been risking their lives throughout the pandemic so that everybody else can stay home. And yet, we have zero options for the residents of M6K.

As mentioned, this bill proposes to collect information regarding vaccinations from Ontarians. I understand the importance of knowing who received a vaccine, when they received it and what kind it is. It could be useful in a number of ways; for example, some public health experts have said that we may need to provide booster shots at some point. If booster shots are needed to strengthen immunity, it would be good to have a list of people who have received the vaccine so that they can be easily contacted for their next shot. But if Ontarians are expected to provide the government with information about vaccines, then they should be able to expect the same from their government—they should expect to be provided with reliable and timely information about where and when they can get a vaccine. We know the government has a lot of work to do on that front.

Yesterday, we learned that the city of Toronto is partnering with the Twitter account Vaccine Hunters Canada to share information about pop-up clinics in hot spot postal codes. Vaccine Hunters Canada is made up of an amazing team of volunteers who have been working hard to spread the word about where people can get vaccinated. But it speaks volumes about the province's vaccine rollout that we are depending on volunteers rather than having an effective government portal to tell Ontarians when and where they can get their vaccine. That we don't have a central portal system is a major failure of this government's vaccine rollout.

Speaking of information, why hasn't the government made it a priority to collect race-based data and socio-demographic data? The NDP has echoed the calls of experts, advocates, community leaders, who have been calling for race-based data on COVID-19 to be collected for over a year now. Without collecting race-based data, we don't have the information we need to make decisions to save more lives. Without it, we cannot have an equitable response to COVID-19.

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Speaker, we have seen what happens when we don't have that data. When the government does not apply an equity lens to health issues, racialized Ontarians pay with their lives. We know that the impact of COVID-19 has been far greater on racialized and low-wage workers and their families. We see it play out in our hospitals and ICUs. We can't have an equitable vaccine rollout without knowing who needs a vaccine the most. Racialized Ontarians living in hot spots, many of whom are essential

workers and experience precarious and low-wage work, are at increased risk of COVID-19. We can reduce infection and deaths by targeting vaccines to groups who need it most, and we can do it effectively with better data.

The NDP has been calling for race-based data collection in health care for years. We know there are racial inequities in our health care system, in health outcomes in Ontario, and collecting this data is an important first step to address that.

I have a bill on the order paper now that would bring the collection of race-based data. My colleague from York South–Weston and I introduced the Black Mental Health Day Act last year. This bill would require any organization receiving funding from the government of Ontario to provide that health care services collect race-based data. The government could pass this bill today. We brought this bill forward so that we can start to tackle the systemic discrimination that Black and other racialized Ontarians face in our health care system, so that we can eliminate the poor health outcomes that racialized Ontarians experience.

So the lack of race-based data collection is disappointing.

I'm going to talk about schedule 2 next. This schedule is perhaps the most problematic part of the bill. It would create a Health and Supportive Care Providers Oversight Authority to govern personal support workers.

Speaker, this past year has put a spotlight on the inequities in this province. The essential yet precarious and undervalued work of personal support workers has been recognized across Ontario, as PSWs help take care of our loved ones while enduring outbreaks in their workplaces, and long working hours.

I think of PSWs in Parkdale–High Park who have bravely shown up to work throughout the pandemic, despite the risks. They tell me how they are burned out from working on the front lines day in and day out for the past year. The chronic staffing crisis has meant that they have more to do, with less help. They tell me they are working so much that often they don't get to take their lunch breaks.

Support workers were heroes before the pandemic, and they will be heroes after. We call them heroes, but we don't treat them like heroes. Support workers take care of our loved ones, but they aren't paid enough to take care of their loved ones. That's the most urgent issue for PSWs. It's time for support workers to have the wages, the working conditions, the job security and the respect they deserve. It's time for PSWs to have a career—a good, well-paid, full-time job with benefits—rather than precarious, low-wage, part-time work. Without doing that, we will never address the staffing crisis in our long-term-care homes.

The government can talk about recruitment all they like, but we will not be able to fix the staffing crisis without improving worker retention by increasing wages and improving working conditions and providing job security.

Time and time again throughout this pandemic, we've heard from PSWs that the government's temporary pandemic pay program—which expires, by the way, in two months—is not enough.

In March, my colleague from Sudbury introduced a bill, the Support Workers Pay Act, which would have helped improve the conditions of PSWs in Ontario by establishing a wage floor so that no support worker in Ontario would be paid less than \$20 per hour. The bill would also have required the creation of programs to train, educate and develop support workers, with a focus on job retention and creating full-time, secure jobs. The Support Workers Pay Act was intended to improve the conditions of PSWs to ensure good, viable, full-time jobs, and yet this government voted it down.

Instead, this government, now, through schedule 2 of this bill, intends to introduce a regulatory authority over the work of PSWs, during a pandemic, without addressing any of the concerns that PSWs have been voicing for the past year. Nowhere in this schedule addresses working conditions, education or training standards, compensation or job retention for PSWs.

It speaks volumes that the unions representing front-line workers like PSWs are not pleased with this bill. They feel that the government ignored their recommendations about how to improve working conditions for PSWs.

I'm going to read a part of the joint statement from SEIU Healthcare, Unifor and CUPE about this bill: "The legislation in its current form is short on details and raises more questions than answers. It would give the government enabling powers to make future decisions behind closed doors."

They have questions about this schedule—questions like: "What are the costs imposed on PSWs? Who are the people appointed to protect PSWs in this arrangement? What recourse do PSWs have in defending themselves from complaints in workplaces where staffing is dangerously low?"

The statement continues: "PSWs need urgent support today, like full-time jobs, permanent wage increases for a living wage, and increased staffing levels to deliver safe, dignified care for seniors. Instead, what they're getting is uncertainty about the future of their profession."

Personal support workers have been asking for a new regulatory scheme. They have been asking for the temporary \$4-per-hour pandemic pay to be made permanent. They have also been asking for the provision of proper PPE.

Access to high-quality PPE for all workers was part of our opposition day motion yesterday to protect the health and safety of workers. The government voted down this motion, as well.

It is unacceptable that after more than a year into the pandemic, PSWs and other front-line and essential workers don't have the high-quality PPE they need to protect themselves on the job.

The bill concerns the health of Ontarians, so I want to put something on the record about paid sick days.

Speaker, over the past year, we've heard from doctors, advocates, workers and countless others that paid sick days save lives. Workers in Ontario's hardest-hit areas have felt that they do not have the option to stay home, because staying at home could mean not being able to keep a roof over their head or put food on their table for their families.

My colleagues and I, along with health experts and workers across this province, have been calling for two weeks of paid sick days throughout the pandemic to help curb the spread of COVID-19 in workplaces. Fourteen days of paid sick leave would allow Ontarians to put their safety and the safety of their loved ones first. But yesterday, after over a year of fighting and pushing the government to step up and do the right thing around paid sick days, Ontarians received disappointing news again. The program that this government believes is the "best in North America" provides workers with a meagre three paid sick days and ends in September. Is the government trying to say that they think the pandemic will be over in September?

Three paid sick days for a virus that takes two weeks to recover from is simply not enough. In fact, the process of getting tests and waiting for results in many parts of the province can still take several days. Even if the test comes back negative, guidelines from Public Health Ontario require individuals to continue to self-isolate until symptoms go away. For many individuals who will face more than one COVID-19 scare, this program is absolutely useless. Essential workers who are experiencing symptoms today may have to use up all their paid sick days to stay home, get a test and wait for results or stay in isolation until their symptoms go away. But next month, if those symptoms come back or a worker comes into contact with a confirmed positive COVID-19 case, there will be no more provincial supports available. The government had one year to come up with a plan, but yesterday's announcement is not enough to give people the financial support they need or to stop the spread of COVID-19 in essential workplaces. For vulnerable front-line workers working in precarious conditions and with low-wage compensation, three paid sick days simply will not cut it.

Personal support workers in Ontario have been standing with health care workers and health experts to push for paid sick days and urgent support to the sector, but the government's inadequate sick leave program and the measures laid out in the bill do little to respond to the concerns.

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This government likes to say that the health and safety of Ontarians is their top priority, but if their actions matched their words, they would have provided two weeks of paid sick days a year ago. If they cared about the safety of our seniors, they would have fixed the staffing crisis in long-term care by improving wages and working conditions for PSWs. If the government truly cared about the massive disparities in health outcomes for racialized Ontarians, they would be collecting race-based data in our health care system. Most of all, if the health and safety of

Ontarians was a top priority, then they should have taken more care to ensure that the vaccine rollout was accessible, efficient and equitable.

Ontarians deserve better.

The Acting Speaker (Ms. Jennifer K. French): Questions and comments?

Mrs. Robin Martin: Thank you to the member opposite for your comments.

As I pointed out after the speech from MPP Gélinas, we are collecting race-based information and data. Perhaps your information is dated, because we have been collecting it for some time now. I just wanted to point that out. We are also providing 50% of our vaccines to hot spots and vaccinating essential workers. So there's some more information, maybe, that you could access.

Don't you think that some of the provisions here regulating three professions that would like to be regulated, that have asked to be regulated, is a step in the right direction?

Ms. Bhutla Karpoche: To the member from Eglinton–Lawrence: I would like to say that if the member is so convinced that race-based data collection is happening—which it is not—then I would ask the member and this government to provide the data, release it and make it public so the public can decide.

When it comes to vaccine supply for hot spots, again, the science table recommended that 50% of the vaccines be supplied to hot spots. As I shared in my speech, M6K is a designated hot spot. We are getting zero options. We have no clinic in the neighbourhood, and nowhere for 18-plus residents to go get it. That is zero supply. It's not even 1%. We need to see a pop-up clinic in M6K in South Parkdale.

The Acting Speaker (Ms. Jennifer K. French): Further questions?

Mr. Wayne Gates: I always find it interesting when the Conservative government puts this forward. They talked about the Ontario Personal Support Workers Association, who support this bill. We all know they have ties to the for-profit long-term-care homes. But they didn't quote SEIU Healthcare, they didn't quote Unifor, they didn't quote CUPE, and they represent 175,000 members in the industry.

And there's nothing in this bill that talks about full-time jobs or the \$4-per-hour pandemic pay available to all health care workers being made permanent going forward. There's nothing about pensions, better benefits, staffing levels. One of the biggest crises we have in long-term care and retirement homes, we know, is that there isn't enough staffing.

My question to you would be, why would this government, knowing full well that we have three major unions in this province—SEIU, Unifor and CUPE—representing health care workers, and yet they didn't consult them?

Ms. Bhutla Karpoche: I would like to thank the member from Niagara Falls for the question. He has always been a great champion for workers in this province.

To him, I will say, just the way we saw with paid sick days and now we're seeing with personal support workers, the science, the overwhelming evidence, the workers

themselves, we in the opposition, advocates, unions that represent personal support workers—everybody agrees that if we want to take action on personal support workers, which we should, we need to address wages and working conditions. But this government continues to put private profit ahead of people's lives, and that is why we are seeing no action when it comes to supporting personal support workers.

The Acting Speaker (Ms. Jennifer K. French): Question?

Mrs. Robin Martin: The member opposite talked about a hot spot in her area and not having a pop-up clinic there. I also have hot spots; I also am in Toronto. Like the member opposite, I also have hot spots in my area that haven't had a pop-up clinic.

I was wondering if the member opposite knows that it's Toronto Public Health that directs the locations of pop-ups and where they will be determined, and that there actually is no obligation for Toronto Public Health to put a pop-up clinic at any particular time in any particular area, hence the name “pop-up.” So, like you, I have had areas that have not yet got a pop-up vaccine clinic, but it's Toronto Public Health that is delegating where they go.

Ms. Bhutla Karpoche: I've actually been in regular communication with our community health partners, and everyone, including public health, has told me they cannot direct vaccines to hot spots if there are no vaccines coming from this government to the hot spots. The science table, again, recommended 50% of the supply to go to hot spots.

For example, in the M6K postal code in Parkdale–High Park, it is Unity Health's St. Joe's hospital that is the lead, and they have told me again that this government has not provided the resources or the vaccine supply to open up a pop-up clinic.

The Acting Speaker (Ms. Jennifer K. French): Further questions?

Mr. Terence Kernaghan: I'd like to thank the member from Parkdale–High Park for her excellent presentation. I was particularly taken by her words about how this government's words don't always match their actions—in particular, with vaccine equity.

I think of a trans woman I happen to know, Stefanie. She indicated that after she received her COVID-19 vaccination at Shoppers Drug Mart, she received a sticker printed using the COVax system, on which it had her deadname, not Stefanie as it should have been. The website of ServiceOntario says that it recognizes and respects the trans community, but their own systems do not recognize and respect the trans community. She felt erased. She felt humiliated. In fact, she also thinks this is a human rights violation.

Why do we have words from this government about equity and equitable distribution and have systems that claim equity and see actions that are the exact opposite of that?

Ms. Bhutla Karpoche: I would like to thank my colleague for his questions.

I'm actually very disturbed to learn that a trans woman's deadname was used instead of her chosen name.

Speaker, we really have to do better in this province when it comes to recognizing all of the people and embracing them fully for who they are. With this government, time and time again, we see them claiming to do all the right things, but people's lived experiences, the reality on the ground is very different. How can this government claim that they are for the people when they won't even listen to the people?

We really have to do better; specifically, in our health care system. Just as we fail racialized, Indigenous, Black communities, we're failing the trans community, as well. The example that the member shared is what is happening in our health care system. We have to do better.

The Acting Speaker (Ms. Jennifer K. French): Further questions?

Mr. Amarjot Sandhu: It's very sad to see how the member opposite continues to blame the provincial government for the failure of vaccine supply. Everyone knows that it is the responsibility of the federal government to secure vaccines for Canadians.

We are providing 25% additional vaccines to the hot spots like Peel and Toronto. And when we are receiving only 400,000 doses of vaccines in one week, we are still providing 25% of additional doses to regions in Peel and Toronto. Now we're receiving more vaccines and will be providing 50% of additional doses to Toronto and Peel and hot spots so that we can continue to vaccinate our essential workers, and we'll be vaccinating 18-plus starting May 3. So I don't know why the member is blaming the provincial government for the failure of vaccine supply.

Interjections.

The Acting Speaker (Ms. Jennifer K. French): Order, please. Relax.

Response, the member for Parkdale–High Park.

Ms. Bhutla Karpoche: I'd like to tell the member opposite, the last I checked—and I hope that the member knows that—the distribution of vaccines is the responsibility of the province. They can point their fingers to the feds, to the public health units, to us—blame everybody but fail to take responsibility.

Again, the science table recommended 50% of the supply be directed to hot spots. That is not happening—we still don't have 50% of the supply going.

And M6K, a designated provincial COVID-19 hot spot, does not have a pop-up clinic in our riding. We need to have the clinic.

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Interjections.

The Acting Speaker (Ms. Jennifer K. French): The House will come to order. I'm standing. Thank you.

ROYAL ASSENT
SANCTION ROYALE

The Acting Speaker (Ms. Jennifer K. French): I beg to inform the House that in the name of Her Majesty the Queen, Her Honour the Lieutenant Governor has been pleased to assent to a certain bill in her office.

The Clerk-at-the-Table (Mr. William Short): The following is the title of the bill to which Her Honour did assent:

An Act to amend the Employment Standards Act, 2000 / Loi modifiant la Loi de 2000 sur les normes d'emploi.

ADVANCING OVERSIGHT
AND PLANNING IN ONTARIO'S
HEALTH SYSTEM ACT, 2021
LOI DE 2021 VISANT À FAIRE
PROGRESSER LA SURVEILLANCE
ET LA PLANIFICATION DANS
LE CADRE DU SYSTÈME
DE SANTÉ DE L'ONTARIO

The Acting Speaker (Ms. Jennifer K. French): Further debate?

Ms. Lindsey Park: It's a pleasure to rise and join this lively debate. I'm pleased to rise to speak to Bill 283, the Advancing Oversight and Planning in Ontario's Health System Act, 2021. This legislation, if passed, would create three new acts, the first being the Health and Supportive Care Providers Oversight Authority Act, 2021; the second being the Psychology and Applied Behaviour Analysis Act, 2021; and the third, the COVID-19 Vaccination Reporting Act, 2021. This is in addition to amendments being made to the Medicine Act, 1991, to include the regulation of physician assistants under the College of Physicians and Surgeons of Ontario.

The main objectives of the legislation would be to further recognize the important role of select health and supportive care staff in delivering high-quality care to patients all across this province.

Specifically, the legislation would do a number of different things, and I'm going to highlight the four key pillars of it—the first being to establish a new legislative framework to support greater uniformity of education and training standards for personal support workers, and that would build on their capacity to provide care services to the most vulnerable Ontarians, including children, older adults and people with disabilities.

The second major pillar is to regulate physician assistants as new members of the College of Physicians and Surgeons of Ontario, to improve their integration with Ontario's health care system and facilitate quality of care and patient safety.

The third pillar is to regulate behaviour analysts as a new profession under the College of Psychologists of Ontario. Earlier, I was speaking with the member for Eglinton–Lawrence, who is also the parliamentary assistant to the Minister of Health, on how behaviour analysts have been advocating for this change for a long time and are quite excited about it. This would sustain the quality and safety of care provided by those behaviour analysts to Ontarians.

The fourth pillar is to support timely reporting to the ministry of all relevant data from COVID-19 vaccination sites, including voluntary socio-demographic information.

Speaker, I'm going to focus most of my time talking about personal support workers. The bulk of my remarks will be on what this legislation will do to support personal support workers and the services they provide across the province every day.

The changes our government is introducing with the bill are yet another demonstration of our government's commitment to building up and strengthening Ontario's health care system and those critical health care workers who form its foundation—whether they are personal support workers, those who are meeting the supportive physical and psychosocial needs of a person in a home or in long-term care; or physician assistants, who are really extensions of the physician, communicating a diagnosis or prescribing medication; or behaviour analysts, those who provide applied essential behaviour analysis therapy to help people on the autism spectrum to develop new communication skills, for example. These professions have all been delivering essential and high-quality care throughout the COVID-19 pandemic. The regulation of these professions will further support the delivery of high-quality and safe health care and social services by standardizing education and training requirements.

The Advancing Oversight and Planning in Ontario's Health System Act, 2021, if passed, would create a new Health and Supportive Care Providers Oversight Authority Act. Under this new act, we would establish the Health and Supportive Care Providers Oversight Authority. To keep it short, I'm just going to call them "the authority" throughout the rest of my speech, Speaker. This would be a new regulatory body that would provide oversight of personal support workers, that will also be designed to allow for the addition of other health and supportive care providers in the future.

This new oversight model provides for the voluntary—I want to highlight that, voluntary—registration of personal support workers and would provide consistency in PSW education, training and standards for those who choose to register.

Specifically, the legislation would establish the authority and set out its functions and powers, as well as its board of directors and its CEO. It would require the establishment of an advisory committee that must include patients or clients and professional and educator representation. It would require the authority to have registration practices that are transparent, objective, impartial and fair. It would provide the authority with powers associated with complaints, dispute resolution and investigations pertaining to registrants. We see that in other self-regulating organizations across various professions inside and outside the health care system right now. There are lots of models for how this works. It would require the authority to have a public register of information concerning registrants. It would require the establishment of a visual mark or identifier that allows the public to know that an individual is registered with the authority, and thereby

create accountability in meeting quality standards. It would require the authority to abide by the requirements of the French Language Services Act, as though it were a government agency for the purposes of this act. I know we have a number of francophones in this Legislature who will really care about that aspect. It will also permit the Auditor General to undertake audits of the authority—I know all of us in this Legislature find the Auditor General's reports helpful—and create that additional level of accountability, without partisan influence, in reports back to this Legislature. I think that's important for anything government funded. More details of how this will all work will be set out in regulation following extensive consultations with the PSW sector.

I want to just tell a story of how I first became alerted to the need for this kind of regulation. I think, frankly, many constituents I speak to who have family members who are receiving home care or are in long-term-care homes, and their loved ones are receiving care from PSWs, have no idea that the PSW sector has not been regulated in the province of Ontario to date. I think a lot of us in this Legislature—until you asked that question—wouldn't have known that. That's kind of scary. These are people who are going in to care for our loved ones, often who are alone and isolated in their home, by themselves, in a very vulnerable position, and it has totally not been regulated.

I remember somebody giving me an example: "Did you know that you don't even have to have a criminal record check to be a PSW with home care and go into someone's home right now?" When I heard that—and that story was told to me before I was elected—I was very concerned. How could we be in this state in the province of Ontario, with that little accountability around a profession that is so critical to the daily provision of patient-centred care in this province?

So I am pleased we're finally the government that's taking leadership to provide consistency and regulation in this sector to ensure that patient-centred care that Ontarians and my constituents expect.

1550

I think most Ontarians don't realize that PSWs have been operating without the protections, the status and the recognized institutional value that other health care professions possess. Personal support workers are actually the largest group of unregulated health care providers working with some of our most vulnerable populations, including children, seniors and individuals with disabilities. Without regulation, there can be a lot of variation and inconsistency in the quality of care—we've all heard the stories—and for the worker, there is less protection and less support. But our government is rectifying that with this bill.

Our Minister of Health has heard from both patients and families who have been wanting greater accountability and quality standards for their caregivers. I'm sure in her role as the Patient Ombudsman—and I'm speculating here, Speaker—she heard many stories about this.

With a lack of regulation, there are also challenges in attracting, retaining and growing our pool of PSWs in this

province. This cannot continue, as we see the demand for PSWs only increasing. We need to make sure that we have the workforce and that there is a standard of training and care that the workforce is held accountable to. I've heard members on all sides of the House talk about the importance of quality care and standards of care throughout the pandemic.

Regulation also means that any family or patient who has concerns or complaints about their caregiver would have access to a standardized complaints system related to these services. The complaints process and other details under the regulatory body will be determined in regulation, as I mentioned, after extensive consultation with the sector.

The new regulatory body will help with ensuring high-quality care across the province as well as consistent training and education, which is going to be the subject of the ongoing stakeholder consultation.

I want to read a statement from the Ontario Personal Support Workers Association, who have applauded the changes brought about through this bill, calling them "historic." Miranda Ferrier, whom I've had the pleasure to meet, is the CEO of the Ontario Personal Support Workers Association. She said, "The OPSWA is thankful to this government for professionally recognizing and validating the valuable work of PSWs who have continued to step up throughout this pandemic. PSWs are the foundation of Ontario's health care system and we thank this government for hearing their voices and establishing this new regulatory model." In that statement, she went on to say that this has been something they have been advocating for for over 10 years.

She went on to say, "This new status is the beginning of a positive future for all PSWs and the communities we serve."

I want to thank Miranda for all of her advocacy, which was going on long before many of us were even elected.

Interjections.

Ms. Lindsey Park: Yes. Hear, hear.

It's organizations like OPSWA that have paved the way for this important milestone we've reached today. The system-wide recognition they will be receiving with this legislation is one that should have happened a long time ago, but it's finally happening today. Our government has recognized their invaluable contribution.

As COVID-19 came like a storm upon our province, we have had the backs of our PSWs, and they've had our backs.

Personal support workers provide a wide range of services in home and community care, working with children, seniors and Ontarians with disabilities.

An important fact—and I think the Minister of Health referenced this in her speech: There are already more than 100,000 personal support workers in the province of Ontario, and we've committed to creating more than 27,000 additional positions over the next four years.

The vast majority of personal support workers in Ontario are female, and a significant number of personal support workers are immigrants to Ontario. Most provide services in the long-term-care sector and the home and

community care sector, with a small number working in hospitals.

PSWs have been an essential component of our health care system, stepping up to the plate and shining, especially this past year, as the whole health care system corralled to respond to COVID-19 and to protect and serve our most vulnerable residents.

As we've seen throughout the COVID-19 pandemic, personal support workers have worked tirelessly to keep Ontarians safe and healthy, and at great personal risk and sacrifice. In Durham, I've been truly inspired and humbled by the sacrifice and dedication of our personal support workers. Our entire community—and I know the Speaker is a member of the Durham community, as well—and our entire province is grateful. Long-term-care homes across Durham region and our whole province have greatly depended on our PSWs.

I would go further to say, many members in this Legislature and many members in our community have personally relied on PSWs to provide care for their loved ones when they have not been able to provide that care during this pandemic. Especially now, in the middle of the third wave, I know so many continue to pour themselves out every single day for our most vulnerable and for those who cannot take care of themselves.

As we continue to do everything we can as a government to fight COVID-19 and to roll out vaccines to every Ontarian who wants one, we're also taking transformational steps to strengthen our health care system and the people and caregivers who undergird the whole system.

We've all been in, literally, a state of emergency for a lot of this pandemic, but with the daily interactions we all have through our constituency offices, it can feel like you're in emergency mode all through this. When you're in emergency mode, it can be easy to forget about continuing to chip away at those longer-term projects that are important for all of us on the other side of this. So I want to thank the members who have sacrificed themselves throughout this pandemic to continue to show up to this place and debate important pieces of legislation like this one that will contribute to where we are on the other side of this—a more sustainable long-term-care system, a more sustainable home care system, and, truly, a health care system across the province that people can rely on for patient-centred care.

This bill—I want to be clear—doesn't take away from the emergency efforts that are ongoing but is truly an addition to that, contributing to the long-term sustainability of our health care system.

We're committed, as a government, to a modern health care system that provides high-quality services and more connected, patient-centred care.

This continues the work that the Deputy Premier and Minister of Health as well as her parliamentary assistant began, when we formed government, to create a health care system that is modern, responsive to patient needs and truly patient-centred. I want to thank them for their tireless work to keep Ontarians healthy and safe during the

pandemic while continuing to build this modern health care system for the future that we can all rely on.

1600

Speaker, I want to end with an eloquent endorsement of our government's bill and an homage to our area's PSWs from Ruth McFarlane, the CEO of Durham Christian Homes, which operates several long-term-care homes in Durham region, including Glen Hill Strathaven in Bowmanville. She states: "Personal support workers are the heart of long-term care. In our homes here in Durham and across the province, they give their all to our residents, caring for them not only physically but also emotionally, socially, and spiritually. They have set aside their own exhaustion and emotions during the pandemic to ensure that the residents in their care feel safe and supported, even during the most difficult of times. We need more of these dedicated and kind people and deeply appreciate the government's efforts to increase staffing by helping to fund the education of more than 16,000 new PSWs, as well as formally recognizing their contribution to the health care system through new legislation."

I hope that all members will support the Advancing Oversight and Planning in Ontario's Health System Act, 2021. I enjoyed contributing to the debate.

The Acting Speaker (Ms. Jennifer K. French): Question?

Mr. Terence Kernaghan: I'd like to thank the member from Durham for her presentation.

I think back to last week when the Canadian PSW Network held their vigil for PSWs who had fallen as a result of COVID-19. There were many NDP MPPs who took the time to attend that event. Unfortunately, there was only one government member—the member from Markham–Thornhill—and only one independent member—the member from Guelph—who decided to attend that vigil.

With Bill 283, my concern is that there's a great deal of emphasis on making PSWs—but there's also a great deal of concern on breaking them. There's a consideration of fines, monetary penalties and things that—there's no consideration of the things they need within their workplace—such as their punishingly low wage, that there is no full-time work, no benefits.

What do you think will happen when PSWs graduate from these programs that the government is funding? Do you think they will stay within this sector?

Ms. Lindsey Park: I'm glad the member opposite brought up the occasion of the vigil. I had actually tried to attend, but I couldn't find the link at the last minute. I'm glad to hear that so many members of the Legislature attended.

All options are on the table when it comes to recruiting and retaining personal support workers. I think we all agree in this House that this has to be a top priority for not only our government but any future government going forward. We're committed to that work and we're committed to continuing it as long as we are given the privilege of serving.

The Acting Speaker (Ms. Jennifer K. French): Further questions?

Mr. Jeremy Roberts: I appreciated the remarks from the member for Durham.

Back in 2019, our government accepted the recommendations of the Ontario autism panel's report, one of which was to regulate the applied behavioural analysis profession. I see here that this is something that has been included in this bill.

I wonder if the member could elaborate a little bit more on this particular measure in this bill.

Ms. Lindsey Park: The member from Ottawa West–Nepean is absolutely right. In 2019, the government committed to strengthening the oversight of behavioural clinicians who provide applied behavioural analysis. I know the member from Ottawa West–Nepean has had many discussions with stakeholders in the sector about the importance of this work.

We've all heard a lot about ABA. It is a therapy that primarily supports people with autism.

Parents who are choosing a behavioural clinician deserve to have the peace of mind knowing they're choosing from qualified professionals. This bill is an important step towards that. As I said, there will be ongoing consultation on the regulations and further details with the sector.

The Acting Speaker (Ms. Jennifer K. French): Questions?

M. Guy Bourgouin: On entend beaucoup parler des préposés aux services de soutien personnel dans ce projet de loi. On peut créer des offices de surveillance. On peut créer toutes sortes de recrutements, mais il y a un gros morceau de robot que vous manquez : c'est comment vous allez retenir ce monde-là. On sait qu'ils ont besoin des conditions de travail. On sait qu'ils manquent de salaire. Allez-vous augmenter leur salaire? Allez-vous leur donner les quatre piastres? Allez-vous leur donner des conditions de travail pour les retenir? Si on ne crée pas ce milieu-là, on ne les gardera pas.

Ms. Lindsey Park: I will say, one of the most two common things I heard before I ran for office about the challenges with the long-term-care sector—was not only the huge backlog of beds needing to be built and the upgrading of existing beds, but the lack of sustainability, if I can call it that, around the staffing model in the sector. We all understand that there are many components to that; it's not one thing. That's why we're being clear with the framework we're setting out here that all options are on the table, so we can not only educate but, as the member opposite indicates, retain and value PSWs in this sector. They're critical to patient-centred care in this province, and we all need to be part of the solution.

The Acting Speaker (Ms. Jennifer K. French): Further questions?

Ms. Christine Hogarth: I just want to thank the member from Durham. She always speaks so eloquently in the House. The background of this MPP: She's a lawyer by trade, and I know all the hard work she did as the parliamentary assistant to the Attorney General when it came to the Criminal Code and all the work that was done—I

shouldn't say "Criminal Code." I take that back. It was when we changed things over to online—the judicial system.

One of the things in this legislation is, we talk about data and data collection. In your opinion, will there be a data governance framework in place? And we talk a lot about privacy. People want to ensure their privacy is protected. You are a lawyer by trade. That's your background. So could you share with us a little bit how the privacy of our citizens will be protected?

Ms. Lindsey Park: Well, first of all, I encourage all members to read the framework that's being set out in schedule 1 of the legislation. The Minister of Health has said that every safeguard will be in place to protect the privacy of the information that is collected. The Ministry of Health is working with different health sector partners so all staff involved in administering vaccines are offered appropriate training on the rationale for data disclosure. Staff are also trained on how to appropriately manage the data.

The Ministry of Health is also working to define a representative data governance framework, in partnership with key stakeholders from Black and racialized communities, aligned with anti-racism data standards and informed by models of socio-demographic data collection across different sectors, particularly with data sets related to race and ethnicity.

The Acting Speaker (Ms. Jennifer K. French): Further questions?

M^{me} France Gélinas: Thanks to the MPP for her deputation.

I have a constituent of mine who was assessed when she left the hospital, and she qualified for 14 hours of home care. When she got to her home—she's only receiving one hour of home care, because they cannot find PSWs in the area of the city of Sudbury to go to help her. I've reached out to the LHINs. I've reached out to all of the different contracts in home care. None of them have PSWs who could go to help this lady, who desperately needs two hours a day of home care—otherwise, things are falling apart.

Do you think that there's anything in your bill, in the new authority, that will help this lady, my constituent, get her 14 hours of PSW home care like she qualifies for?

Ms. Lindsey Park: While I can't speak to the details of the member's constituent's situation, it sounds like she's highlighting a broader issue that we identified in the health care system when we formed government. It's something we all have heard in our constituencies, which is that sometimes the health care system seems disconnected and fragmented. That was the very motive behind the legislation we brought forward to ensure that patient-centred and connected care health system, going forward. It's critical.

1610

I think creating standards around the PSW sector, like this bill does, is an important piece of that, so that PSWs feel valued—but there's also accountability. As you described, it feels like there's no reliability for people, on some days right now, in the health care system who need

a PSW to show up at their home. As we recruit and retain more PSWs, that will become easier.

The Acting Speaker (Ms. Jennifer K. French): I don't see that we have enough time for a back-and-forth.

Second reading debate deemed adjourned.

Hon. Paul Calandra: Point of order, Madam Speaker.

The Acting Speaker (Ms. Jennifer K. French): I recognize the government House leader on a point of order.

Hon. Paul Calandra: Thank you, Madam Speaker. I think if you seek it, you will find unanimous consent to see the clock at 6.

The Acting Speaker (Ms. Jennifer K. French): The government House leader is seeking unanimous consent to see the clock at 6. Is it agreed? Agreed.

PRIVATE MEMBERS' PUBLIC BUSINESS

OWNER-OPERATOR TRUCK DRIVERS PROPRIÉTAIRES-EXPLOITANTS DE CAMIONS

Mr. Guy Bourgoin: I move that, in the opinion of this House, the government of Ontario should commit to a truck owner-operator strategy to address the truck driver shortage and the increasing truck insurance costs affecting truck owner-operators that includes mandating trucking companies that operate fleets to provide their drivers with a letter of experience upon request, to review the current underwriting rules and risk classification that gravely affect truck owner-operators, and to re-evaluate the current truck driver training standards and costs.

The Acting Speaker (Ms. Jennifer K. French): Pursuant to standing order 101, the member has 12 minutes for his presentation.

Mr. Guy Bourgoin: It is a great honour today that I rise to debate my private member's motion, but it is a greater honour that I stand here on behalf of the small and independent truck owner-operators from northern Ontario.

Truck drivers from all over the province are the backbone of the economy in the north.

Encore, c'est un grand honneur de me lever aujourd'hui pour représenter les propriétaires-opérateurs camionneurs du nord de l'Ontario et les conducteurs et conductrices de camions dans chaque région de la province, car ils sont le pilier de l'économie du Nord.

This motion is the result of dozens and dozens of letters, calls and pleas for help that I have received from owner-operators, drivers that own between one and five trucks and work in various critical areas of our economy, whether it's roll-off, freight, commercial, forestry, storage, and more. I have also received letters and calls from truck drivers concerned about being unable to access their records of experience—either being kept hostage by fleet, by insurers, and by a system that simply is not there for them and does not support them.

Madame la Présidente, la situation du secteur du camionnage est très, très préoccupante. Nous parlons d'un secteur qui est essentiel et qui devrait être considéré essentiel par la province. Le secteur du camionnage fait bouger 850 milliards de dollars en marchandise chaque année. Selon le dernier rapport de Statistique Canada en 2019, le secteur du transport de camionnage a eu 67 milliards de dollars de revenus opérationnels. En Ontario seulement, on parle de 24,4 milliards de dollars en revenus opérationnels.

There are over 35,000 owner-operators in Canada, generating \$11 billion in operating revenues, and with about \$210,000 of revenue on average. Ontario is home to the largest number, with 39% of Canada's owner-operators, followed by Quebec with 23% and Alberta with 12%. These are mom-and-pop shops, small businesses. They are small operations that are often run from a small office or a kitchen table.

Owner-operators are the backbone and the life and soul of northern Ontario's economy.

According to the Ministry of Transportation's Northern Ontario Commercial Vehicle Travel Profile of 2013, there were over 53,000 truck trips per week—that travelled along the poorly maintained northern Ontario highway network and carried more than 500,000 tonnes of commodities, with a total value of about \$1.24 billion.

Whether it is in forestry, mining, commercial or construction, small operations and family-owned businesses play a critical role in delivering goods and raw materials to and from mills, to and from the mines. They face inclement weather, poor road conditions, gas-price gouging and stagnating pay, but above all, they face a smaller insurance market at a higher and higher cost.

Speaker, recent data from the Financial Services Regulatory Authority, the authority that establishes the rules in the insurance industry in Ontario, reported that in 2019 there were about 33 insurers in Ontario offering interurban coverage for long-haul, 18-wheeler tractor-trailers delivering between several cities and regions, and coverage for trucks operating outside of Canada. Of these 33 insurers, the top 12 of these insurers represented about 90% of the premiums written in 2019, and the top nine insurers represented about 80% of the market.

I have heard owner-operators' experiences with insurers for three years now, and I know that my colleagues from northern Ontario, like the member from Timiskaming—Cochrane, have also heard the pleas from owner-operators in Ontario. Let me tell you about some of them so that you understand the gravity of the situation.

M. Gaétan Dorval de Kapuskasing, par exemple, travaille dans le secteur du camionnage depuis 20 ans. Il travaillait pour la compagnie forestière locale quand il a eu l'opportunité d'acheter quelques camions de la compagnie pour ensuite offrir ses services de façon indépendante. Étant donné le monopole qui existe dans le secteur de l'assurance de camionnage et étant donné l'offre en assurance camionnage très restreinte dans la région du Nord et dans le secteur forestier en particulier, M. Dorval s'est trouvé il y a quelques années sans assureur

et alors forcé de prendre une assurance de dernier recours avec Facility Association. Facility, pour ceux qui ne connaissent pas le secteur, est comme le purgatoire pour les transporteurs. On peut avoir fait tout comme il faut, mais si on tombe sur Facility, ça ne sera pas le paradis. Le coût d'assurance de M. Dorval a augmenté de façon significative.

Encore pire, des propriétaires-opérateurs comme Gaétan Dorval sont désavantagés quand ils veulent embaucher des conducteurs. M. Dorval aurait voulu embaucher un conducteur avec 20 ans d'expérience, mais la compagnie d'assurance lui a dit que son conducteur n'avait pas d'expérience. Pourquoi? Parce que le nom du conducteur n'a jamais été inclus dans la police d'assurance.

Ceci est une pratique constante dans le secteur d'assurance du camionnage, madame la Présidente. Malgré le fait qu'il existe un registre provincial pour les conducteurs de camions—l'immatriculation d'utilisateurs de véhicule utilitaire, ou CVOR en anglais—les compagnies d'assurance, craignant des situations de fraude, demandent aux conducteurs et aux opérateurs de leur montrer une lettre de référence signée par une autre compagnie d'assurance—donc que le conducteur ait trois ans derrière le volant, trois ans d'expérience.

Le problème que M. Dorval a vécu, alors : la police d'assurance ne nomme pas les conducteurs et leur expérience. Alors, si M. Dorval souhaite embaucher un conducteur, il devra payer les grands prix en assurance, car le chauffeur ne sera pas considéré comme ayant les trois ans derrière le volant. En argent, cela veut dire que son assurance aurait passé de 5 000 \$ à 15 000 \$ par camion.

1620

Vous savez ce que M. Dorval a fait? Il n'a pas embauché personne. Il a décidé de parquer plusieurs camions, parce qu'il n'est pas capable de soutenir son entreprise dû aux règles imposées par les assurances et par les coûts ridicules imposés par les assureurs pour les petits entrepreneurs du secteur.

This happens to experienced drivers throughout Ontario. Drivers like Angela Price from Kawartha Lakes are unable to find employment because insurers withhold information, companies withhold information. Madam Price is an experienced roll-off truck driver. She loves her job; she truly does. But she spent years unemployed because she could not prove her experience.

She wrote to me last year: "In speaking with insurance representatives [from former employers] I was shocked to learn that I did not have a driving record with them for insurance purposes because I was not specifically listed on the policies by my employers at the time."

Basically, highly qualified drivers with no accident history are penalized because the insurance company does not have a specific record of them. Why is the Ontario government not intervening?

Speaker, the trucking industry is facing a historic driver shortage. In 2018, the Ontario Trucking Association estimated that the truck driver shortage could be as high as 22,000 vacant driver positions across Canada. Those vacancies are expected to swell to 34,000 by 2024 because

drivers are retiring and because young people do not want to go through the hustle.

Last year, the Minister of Finance told me that this situation was unacceptable, that this did not make any sense. And yet, a year has passed. I've heard of task forces. I've heard of consultations. But workers and small businesses are the ones that are suffering and that will continue to suffer this arbitrary situation.

Something similar happened to Peter Larocque, the owner-operator of a mobile storage company in Haileybury, in the riding of Timiskaming—Cochrane. He wanted to hire his son, who was 30 years of age, who had passed the provincial requirements with excellent records, who had 200 hours of experience. He wanted to go into the family business. But his insurance told him, "If you want your son to work, your insurance will triple. If your son wants to work in the sector, he'll have to go work for a fleet to get his experience"—because fleets, apparently, are better suited to train new drivers.

Claude Laflamme et M^{me} Paquin ont eu la même expérience. Ils ont un vieux camion de 1999. Ils font du charriage pour la compagnie Rayonier à Hearst. Non seulement leur prime d'assurance a augmenté de 132 % d'un jour à l'autre, leur fils voulait rentrer dans le camionnage. Leur fils a pris un cours en 2018—des coûts de 10 000 \$. Il n'y a pas de bourse provinciale pour les licences de camionnage.

Small businesses are being put on the verge of shutting down because of skyrocketing insurance premium costs and rules, while drivers are unable to find employment.

I'm asking the members on the other side of the aisle to make up their minds and answer these questions: Do you care about small businesses? Do you care about workers who deliver most of the goods in this province? And if the answer is yes, then you should vote in favour of this motion.

The Acting Speaker (Ms. Jennifer K. French): Further debate?

L'hon. Paul Calandra: Je remercie mon collègue pour cette motion aujourd'hui. J'ai eu un peu de temps hier pour parler avec le député, pour prendre deux minutes pour parler de l'importance de cette motion pour sa circonscription et, évidemment, pour le secteur en général. Je veux dire que nous sommes en accord. Nous pensons que c'est très important, et c'est pourquoi le gouvernement et les députés, on this side of the chamber, veulent supporter la motion.

C'est un secteur très important pour l'économie du Nord et pour tout l'Ontario. Comme le député a dit, il y a beaucoup d'enjeux dans le secteur que nous pouvons étudier. Je suis aussi en accord : une enquête pour chercher une nouvelle opportunité pour améliorer le secteur, pour assurer que les travailleurs dans ce secteur peuvent être un succès, a bigger success than they are right now, I think would be important.

So, not to belabour it—again, just to thank the member. I think he expressed himself quite well.

It is important to us. It's important to the government. It is a very, very important sector to the economy and to ensuring growth in the economy.

He has raised some very, very good points. I look forward to working with him to finding a path forward, so that the Legislature can complete a study together and find a path forward, not only for his community, but for all of us.

So I thank him for bringing the motion forward. We will be supporting him.

The Acting Speaker (Ms. Jennifer K. French): Further debate?

Mr. Gurratan Singh: This is one of those moments when we realize the interconnectedness of Ontario. When I heard the member, who represents a riding which is far more north and geographically different and different in many different aspects—when it comes to this issue of trucking, hearing the member describe the struggles that he's facing with the members up north who are in the proud profession of trucking—they are the exact same issues that I'm hearing in Brampton.

Brampton is a community that is full of hard-working women and men in the trucking industry. We are a trucking hub, not just for Ontario, but, in many ways, for the entire country, because of the amount of folks who are involved in the trucking industry. I have been hearing folks who work in trucking, for a long time now, talk to me about the struggles that they are facing with these issues around rising insurance premiums, withholding of letters of experience, and how it's really impacting the smallest mom-and-pop players in the trucking industry. We're not talking about the huge trucking companies that have a huge amount of trucks at their disposal, but very much the mom-and-pop trucking organizations and institutions and small businesses—people who are either owner-operators or they may have a couple of trucks that they're working with. They're being disproportionately impacted by these rising premiums because they have less resources to draw from.

So when you see the exponential increase in trucking insurance right now, it's really devastating those who are so instrumental to moving goods around our nation and our province, and also so instrumental to our economy.

We look at this age of COVID-19 right now and we see that the needs of these trucking institutions and organizations and folks who work in trucking in general have become so much more at the forefront. We know that these are the essential workers who don't have the privilege to work from home. And because they go to work, every one of us should thank a trucker. Every single time we go to a store or we order something online, any time we grab our groceries—it arrived there because of the hard work of someone in trucking.

That's why we have an obligation right now to address these issues around the withholding of letters of experience for truck drivers, the rise in premiums for insurance for truck drivers. This is something which is devastating a huge aspect of our economy and folks who work in trucking right now.

I want to commend the member for putting this issue forward and really standing up for truckers—and that's something the NDP has been really consistent with since day one.

1630

The NDP believes in standing up for truckers and standing alongside the women and men who work in trucking, and saying that truckers deserve to work with dignity and respect. That means making sure they're not paying incredibly high insurance rates. That means making sure that truckers are not faced with having to have their letter of experience withheld from them. These are the issues that folks in trucking are facing right now, and it's so important that we stand up and fight for them. We in the NDP are committed to standing up for truckers. We're going to keep on fighting to make sure truckers get the support they need. We're going to make sure that truckers can live a dignified life, with auto insurance premiums that are affordable, access to their letter of experience—and, ultimately, to ensure they continue to serve our economy and our province by moving goods around.

The Acting Speaker (Ms. Jennifer K. French): Further debate?

Mr. John Vanthof: It's always an honour to rise on behalf of the people of Timiskaming–Cochrane.

I'd like to commend the member from Mushkegowuk–James Bay for bringing forward his private member's motion on a trucker owner-operator strategy. The trucking industry is in crisis, particularly the owner-operators.

I'd like to thank the government House leader for offering support. And I take the government House leader's word—but I approached the member from Nipissing when he was the finance minister, and he offered his support; I approached the member from Ajax when he was the finance minister, and he offered his support; I approached the member from Willowdale, as well. They have all recognized there is an issue and that we need to work together to solve this issue.

I'll give you an example. Michel and Susan Milot in Earlton—MMT and Sons Trucking—operate three logging trucks. Michel runs one, and he has two employees who run the other two. Their insurance, currently, for the other two trucks is \$25,000 per year per truck, provided they don't go farther than 80 kilometres away from their home. If they go farther than 80 kilometres—it adds another \$4,000 per truck per year so they can go 160 kilometres. They have a very good insurance record, and so do their drivers, and they're being driven out of business. There's a shortage of truckers and trucks, and we all wonder why.

We need to act. I really appreciate the government recognizing this, but we need to act on this, because small businesses are being driven out of the market, and they serve the greater market. In my part of the world, the mills are screaming for trucks. A couple of the big ones have resorted to self-insuring. But that is also not a solution because that ties you to a certain mill and takes away your independence. This is an issue.

There's another business in my riding, JPL Storage, mentioned by the member from Mushkegowuk–James Bay—a container business, a father-and-son business. It's being threatened because the son is uninsurable. He needs

to go work for a big company for three or four years to build up an insurance record. That will close that business.

The things that we all claim to stand for—small business, the backbone of this province—and here are small businesses facing a problem. Year after year, they're being driven out.

I'm told, "Oh, facility"—no, facility isn't an option. These people need our help. Insurance has a government-regulation component. In this case, it's not that these people don't want to pay for insurance. They want to pay for insurance. They want to pay a reasonable price so they can stay in business.

I commend the member from Mushkegowuk–James Bay for putting forward this motion, and I commend the government for supporting it. Now let's hope this motion just doesn't get lost, because we need to fix this. We need those trucks on the road. We need those people working. I think if there's one thing we can all agree on, it's that we need those people working.

The Acting Speaker (Ms. Jennifer K. French): Further debate?

Mr. Kevin Yarde: I want to thank my colleague from Mushkegowuk–James Bay for bringing forward this motion, and I want to thank the member for Brampton East and the House leader, as well as other members speaking to this bill.

As the member for Brampton East mentioned, there are a lot of trucking industries, there are a lot of truck drivers in Brampton East as well as in my riding of Brampton North. We have many, many truck drivers.

As the critic for auto insurance, I'm glad that I'm able to speak to this bill, because it talks about some of the similarities in the concerns we have in the auto insurance industry in terms of high insurance rates. Truck drivers are facing that, if not worse, in the trucking industry.

As we all know, truck drivers are essential workers, and we have to call them heroes. But if we're going to call them heroes, we have to provide the resources for them. Unfortunately, they haven't had those resources for many years. When we look at the trucking industry—they provide access to food, medicine and other essential services—we have to celebrate them, and that's hopefully what we're going to do today with this motion.

They're constantly having to adjust to ever-changing freight conditions.

On top of that, the trucking insurance rates, as I mentioned, have been going through the roof over the last few years. One of the reasons for that fact is there are fewer and fewer companies providing truck insurance in Ontario. According to FSRA, the top nine insurers represent 80% of the market. Some companies have even reduced the amount of liability they cover, which has resulted in many truck drivers being left without third-party liability coverage. Think about that: no third-party liability coverage. You cannot operate a business like that.

Aside from sky-high truck insurance, there are some other issues in this industry that I'd like to discuss in the couple of minutes I have.

They're not able to move around in the industry and look for better jobs because some trucking companies are withholding their letter of experience. Without this letter of experience, it's next to impossible for drivers to find another job.

Many truck drivers feel they are being pushed out of the industry by the truck insurance industry and trucking companies that are essentially holding their drivers captive. These truck drivers and truck owner-operators need this government's help. They need the supports—and I'm glad to hear that the government says that they will support this.

It's not easy for new truck drivers to get into the industry, either. We heard about that just a moment ago. These new drivers have to go through mandatory entry-level training, which is a \$10,000 program, and it's not even covered by OSAP. To compound things even further, insurers in the industry ask drivers for three years of experience, or they'll be forced to pay a high-risk premium, which is very expensive.

It's issues and barriers like these that have resulted in truck driver shortages in our province. According to the trucking association, there are 22,000 vacant positions in Canada, and these vacancies can reach 34,000 by 2024 if we don't do anything about it.

As I said, these truck drivers and owner-operators are heroes in Ontario. They continue our supply chain and keep it moving. We need to treat them as heroes. We need to make sure that this motion is addressed and passed.

Thank you for my time.

The Acting Speaker (Ms. Jennifer K. French): Further debate? Further debate?

I return to the member from Mushkegowuk—James Bay, who has two minutes to reply.

M. Guy Bourgouin: Je veux remercier le government House leader, the MPPs for Brampton East, Timiskaming—Cochrane—my colleague—and also Brampton North.

Owner-operators and truck drivers all stood up during the COVID-19 pandemic that affected and continues to affect our province. Back in April 2020, the Premier called

truckers heroes, and I agree with him: They are truly heroes. Ms. Angela Price, Mr. Peter Larocque, M^{me} Paquin, M. Laflamme, M. Potvin, M. Dorval et les milliers de conducteurs et conductrices de camions sont des vrais héros. Je veux remercier le leader parlementaire pour son support à cette motion.

This motion is the right thing to do—the right thing to do to defend the thousands of owner-operators and drivers in Ontario who have been paying the price for years because of an insurance sector that looks like wildfire.

Les conducteurs de camions et les propriétaires-opérateurs ont été pressés comme des citrons. Ils travaillent d'arrache-pied, livrent tout ce dont les Ontariens ont besoin, dans chaque ville, dans chaque coin de la province. Mais la situation dans le secteur est le cocktail parfait pour que les petites entreprises du secteur disparaissent d'ici quelques années :

—des coûts de réparation, d'assurance, de gaz qui montent en flèche;

—des règles et des normes qui bénéficient les grandes compagnies; et

—une pénurie de main d'oeuvre chronique.

Merci encore à tous ceux et celles qui m'ont contacté, qui m'ont écrit afin que je puisse débattre cette motion aujourd'hui.

I really hope that the members from the government side will endorse and vote in favour of this motion and work together to fix the problem of owner-operators.

The Acting Speaker (Ms. Jennifer K. French): The time provided for private members' public business has expired.

Monsieur Bourgouin has moved private member's notice of motion number 150. Is it the pleasure of the House that the motion carry? I declare the motion carried.

Motion agreed to.

The Acting Speaker (Ms. Jennifer K. French): All matters relating to private members' public business having been completed, this House stands adjourned until 9 a.m. on Monday, May 3, 2021.

The House adjourned at 1641.

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Blais, Stephen (LIB)	Orléans	
Bouma, Will (PC)	Brantford—Brant	
Bourgouin, Guy (NDP)	Mushkegowuk—James Bay / Mushkegowuk—Baie James	
Burch, Jeff (NDP)	Niagara Centre / Niagara-Centre	
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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
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Collard, Lucille (LIB)	Ottawa—Vanier	
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Crawford, Stephen (PC)	Oakville	
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Fee, Amy (PC)	Kitchener South—Hespeler / Kitchener-Sud—Hespeler	
Fife, Catherine (NDP)	Waterloo	

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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
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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
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Hogarth, Christine (PC)	Etobicoke—Lakeshore	
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Hunter, Mitzie (LIB)	Scarborough—Guildwood	
Jones, Hon. / L'hon. Sylvia (PC)	Dufferin—Caledon	Solicitor General / Solliciteure générale
Kanapathi, Logan (PC)	Markham—Thornhill	
Karahalios, Belinda C. (NBP)	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	Deputy Government House Leader / Leader parlementaire adjointe du gouvernement
Kramp, Daryl (PC)	Hastings—Lennox and Addington	
Kusendova, Natalia (PC)	Mississauga Centre / Mississauga- Centre	
Lecce, Hon. / L'hon. Stephen (PC)	King—Vaughan	Minister of Education / Ministre de l'Éducation
Lindo, Laura Mae (NDP)	Kitchener Centre / Kitchener-Centre	
MacLeod, Hon. / L'hon. Lisa (PC)	Nepean	Minister of Heritage, Sport, Tourism and Culture Industries / ministre des Industries du patrimoine, du sport, du tourisme et de la culture
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 Labour, Training and Skills Development / Ministre du Travail, de la Formation et du Développement des compétences
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	Minister of Francophone Affairs / Ministre des Affaires francophones Minister of Transportation / Ministre des Transports

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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
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, Rod (PC)	Ajax	
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, Hon. / L'hon. Ross (PC)	Sault Ste. Marie	Minister of Colleges and Universities / Ministre des Collèges et Universités
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)	Brampton West / Brampton-Ouest	
Sarkaria, Hon. / L'hon. Prabmeet Singh (PC)	Brampton South / Brampton-Sud	Associate Minister of Small Business and Red Tape Reduction / Ministre associé délégué au dossier des Petites Entreprises et de la Réduction des formalités administratives Minister Without Portfolio / Ministre sans portefeuille
Sattler, Peggy (NDP)	London West / London-Ouest	Opposition House Leader / Leader parlementaire de l'opposition officielle
Schreiner, Mike (GRN)	Guelph	
Scott, Hon. / L'hon. Laurie (PC)	Haliburton—Kawartha Lakes—Brock	Minister of Infrastructure / Ministre de l'Infrastructure
Shaw, Sandy (NDP)	Hamilton West—Ancaster—Dundas / Hamilton-Ouest—Ancaster—Dundas	
Simard, Amanda (LIB)	Glengarry—Prescott—Russell	
Singh, Gurratan (NDP)	Brampton East / Brampton-Est	Deputy Opposition House Leader / Leader parlementaire adjoint de l'opposition officielle
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 Children, Community and Social Services / Ministre des Services à l'enfance et des Services sociaux et communautaires
Stevens, Jennifer (Jennie) (NDP)	St. Catharines	
Stiles, Marit (NDP)	Davenport	
Surma, Hon. / L'hon. Kinga (PC)	Etobicoke Centre / Etobicoke-Centre	Associate Minister of Transportation (GTA) / Ministre associée des Transports (RGT) Minister Without Portfolio / Ministre sans portefeuille
Tabuns, Peter (NDP)	Toronto—Danforth	
Tangri, Nina (PC)	Mississauga—Streetsville	
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Vanthof, John (NDP)	Timiskaming—Cochrane	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
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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	
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