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Mercredi
20 octobre 2021

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LEGISLATIVE ASSEMBLY
OF ONTARIO

Wednesday 20 October 2021

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Mercredi 20 octobre 2021

The House met at 0900.

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

Prayers.

ORDERS OF THE DAY

THRONE SPEECH DEBATE

DÉBAT SUR LE DISCOURS DU TRÔNE

Resuming the debate adjourned on October 19, 2021, on the motion for an address in reply to the speech of Her Honour the Lieutenant Governor at the opening of the session.

The Speaker (Hon. Ted Arnott): Further debate?

Mr. John Vanthof: Speaker, I believe if you request it, you will find we have unanimous consent to revert to a full hour for the opening lead for the official opposition.

The Speaker (Hon. Ted Arnott): The member for Timiskaming–Cochrane is seeking the unanimous consent of the House to allow the official opposition a full hour to respond to the speech from the throne. Agreed? Agreed.

I recognize the member for Timiskaming–Cochrane.

Mr. John Vanthof: Thank you to the House for that unanimous consent.

It's good to be back. I've been an MPP now for a little bit over 10 years, and especially when you're gone for a while, I'm awed to be back, because I often still wonder what I'm doing here. I don't say that facetiously. When I was a kid, I wanted to be a lawyer. I quit school to take over the family farm and I can honestly say I never regretted that for one minute. I am so proud of what we've done on the farm. The kids grew up on the farm, but my kids didn't want to farm. One of my kids—I'm proud of all of them, but one of my daughters is a lawyer. And I'm here, but I'm still a farmer at heart and incredibly proud of it. It's funny how life works.

There are a few things I want to do in my response to the throne speech. One I was planning on doing later, but I see there's a gentleman in the House. I would like to thank the former Minister of Agriculture, who happens to be my Uncle Ernie. He was Minister of Agriculture twice. He has served, and continues to serve, the people of Oxford county. I wasn't that interested in politics, but I always was proud of my Uncle Ernie. I'm still proud. Having said that, people just assume that because Ernie is my uncle I would follow in his political footsteps as well. They wonder, "John, why are you NDP?" and my response

is, "Have you ever met my Uncle Ernie?" I know that the member from Oxford can take that. But I want to take this opportunity: I've always looked up to him and continue to do so. Thank you for everything you've done for the people of Ontario and done for me.

Hon. Lisa MacLeod: Is that your end to niceties?

Mr. John Vanthof: Well, yes. I've got to switch back to the real John now. Actually, no, I'm going to take this opportunity to do something that I think we have all—sometimes we have to do tough things, and I would like to take this opportunity.

Congratulations on your appointment, Speaker. Having him as Speaker, we'll have to listen to less words, because he's a very quick speaker, that Speaker.

I would like to take this moment to talk about something that happened recently in my riding.

J'aimerais saisir l'occasion afin de reconnaître Nicole Guertin, lauréate du Prix d'excellence collective individuel parrainé de Desjardins et du Conseil de la coopération de l'Ontario. Ce prix annuel vise à souligner l'engagement des coopératives et entreprises sociales ainsi qu'à tout entrepreneur contribuant à l'essor du moment coopératif de la collectivité.

Nicole était très bien connue à cause de ses nombreuses idées visionnaires et de son énergie sans bornes ciblant la promotion de projets ayant comme but l'amélioration de la communauté, tout en aidant les entrepreneurs à réussir. Parmi ses nombreuses réalisations, on retrouve, entre autres, le lancement d'une troupe de théâtre; la formation d'une organisation de soins infirmiers; la création de l'organisation Destination Nord; l'exploitation d'un magasin de vêtements; l'ouverture d'un restaurant; la création du journal francophone L'Horizon; sans oublier le rôle déterminant qu'elle a joué dans la création d'une application de langue française pour « smart phones », relative au tourisme.

Nicole et son partenaire Jocelyn Blais étaient peut-être mieux connus dû au fait qu'ils ont fondé, exploité, développé et approprié les Presidents' Suites. Ils ont acheté plusieurs maisons patrimoniales à Haileybury, les ont restaurées, et maintenant offrent de très beaux logements aux visiteurs de notre région.

Elle était véritablement une entrepreneure sociale.

0910

C'est avec grand regret que j'ai appris que Nicole est décédée lundi de cette semaine. Pourtant, elle nous a laissé un héritage. Au moment de son diagnostic, elle et Jocelyn ont ouvert un fonds en son nom à la Fondation du Temiskaming. Ce fonds est appelé NISKA Leadership and Entrepreneurship Fund. Les fonds prélevés serviront à

soutenir l'élaboration d'idées et de projets novateurs de la part d'entrepreneurs et d'entreprises sociales afin d'aider au développement et au renforcement des collectivités du Nord.

There are a few people who, when you meet them—and when I first met Nicole Guertin, her energy was boundless, and when she came to our area she saw things that we'd looked at our whole lives and never truly appreciated how beautiful they were. She saw that, she helped other people see that, and she changed our area and she changed our lives. On behalf of the people of Timiskaming–Cochrane, and I believe on behalf of everyone in this Legislature, I would like to offer my condolences to her family for someone so great taken so soon.

Now actually to the topic of the day: the throne speech and the response to the throne speech. I can remember from the first time that I was elected, the first thing you see is the throne speech. Regardless of government or party, the throne speech puts out what their intentions are, what their plans are. If you have a throne speech right after an election, what you ran on, right? And when a government prorogues, as this government just has, and you reintroduce a throne speech, basically you're—I'm not that eloquent at this, but you're shifting gears. That's what the government is doing.

So, to really look at a throne speech, you have to look back at what the government promised to do initially when they got elected, what they've done and now what they're promising to do going forward. That's basically it in a nutshell. I listened to the government House leader describe it yesterday and he was much more eloquent at it than I am, but that's basically what it is. What a throne speech is about, what every debate here is about, is people. We are all elected, we all got into public service, I believe, because we care about people, regardless of our political views.

On that, I would like to start my debate talking about one particular person I met fairly randomly. Everyone around here notices when I get a haircut too, because I get my hair cut three or four times a year, and even if I'm not here for six months, the Sergeant-at-Arms notices I had a haircut. So I would like to talk, just for a moment, about the barber, the person who gave me that haircut, because I think her story is something the House would appreciate.

Actually, it's my wife's hairdresser, and we saw on Facebook that they had an opening. I had to come back to work, or to legislative work. We all work at home; we all do that. I had to look a bit more presentable. Her name is Lindsay. We got there and the first thing that Lindsay said to me, she goes, "I know who you are. I'm an apprentice. You're on TV sometimes." I said, "You're fine. I know you don't have much to work with, but you're fine."

I thought I recognized Lindsay. I saw Lindsay the week before. She was a server at one of our local restaurants. We started talking. She had worked as a server for 11 years, and when I spoke to her it was going to be her last week. She'd worked at the same place for 11 years as a server. She wanted to become a hairstylist, and because of COVID she couldn't go to hairstyling school. She has a

child at home. Lynn, the owner of E-Clips Hair Studio, offered her an apprenticeship and so Lindsay was cutting my hair.

You could tell that she felt bad that she was leaving a server job, because she liked the job, but she was trying to better her life. I just thought she's really emblematic of the people who are Ontarians who are all working really hard to make themselves better, their families better and Ontario better. As we spoke, it turned out that Lindsay had been at my farm, because her dad used to drive a milk truck and she had gone with him. I thought that was kind of cute.

My last thing about Lindsay: The last week of the federal election, I went to the restaurant where she was working. I had nothing to do with the federal election, but I do volunteer. If the campaigns call me, I knock on doors; I volunteer. I have nothing to do with the federal party, but I do knock on doors. Lindsay was serving, and the federal Liberal candidate was there, too. I went over to talk to him. Then he told Lindsay that I was going to pay his bill. Lindsay came over to tell me, and I would like to do that as my intro to congratulate the federal candidates, all of them who ran and the successful ones, especially in my riding, obviously. I have three MPs in my riding. It takes three federal guys to do the work of one MPP.

In the south part of my riding, I share my MP, Anthony Rota, with the member for Nipissing; farther west, I share my riding with Marc Serré, another incumbent Liberal; and the north part of my riding I share with Charlie Angus, a fellow New Democrat. There's one thing that I would like to say, and I believe this of—I hope—most parts of the province, but I'm sure of northern Ontario: We don't always agree philosophically, but because our numbers are small, we work together very well. And we will continue to do that. I truly do congratulate them for their hard work, and we will continue to work together.

Having said all that, we all know that for the last 18 months the world has gone through unparalleled times, and Ontario is no different. Ontarians have gone through incredible, incredible hardship. Now, the cause of this hardship—the government can blame lots of things on us and we can blame lots of things on the government, but the government did not cause COVID-19. The government was not planning on COVID-19; no one, obviously, was planning. And some of the past governments around the world—but we'll stick to Ontario—had dropped the ball on some planning for pandemics. Because we all know we had SARS and we learned some things from SARS, but we forgot them, collectively.

0920

I think that's something I'm going to come back to a few times, Speaker, that it's one thing to make a mistake, it's one thing to encounter something you've never encountered before. You make a call based on the best information you have, and sometimes it's the wrong call or sometimes you could have made a better one. We've done that personally; governments have done that, right? People who are in positions where they have to make decisions—nobody's batting average is 100%, right? Where it gets

problematic is when you know we learned and yet we make the wrong call again. This is not a slight on this government; it's probably more a slight on the past government, on the Liberal government. We learned things from SARS and we collectively—perhaps mostly the Liberal government—ignored them. As a result, the governments in Ontario were caught flatfooted. That is not on this government.

At the start of the pandemic—I give credit where credit is due—the Premier stood up and led the province. I remember the issue of the day when the pandemic broke—I don't know if anyone will remember this—was the licence plates that you couldn't see in the dark. That was a sign of a young government really busy with things they shouldn't have bothered with. Blue licence plates to advertise the blue PCs was just—but that was the issue of the day.

Then COVID broke and, initially, the government stepped up, but by what I've seen in the throne speech and what I've heard from the government, we fear that they haven't learned. They haven't learned the lessons that we should have learned over the last 18 months. They're talking a good game. They've made some good decisions. I'm not saying everything is bad, but they're letting some big ones—some big ones—fall through the cracks, and the cracks are becoming canyons.

Health care: Over and over at the start of the pandemic, “Health care workers are heroes.” We know that. They took risks, because at the start we didn't know what we were dealing with. I maintain that in some areas we still don't know what we're dealing with. They took risks and worked themselves off their feet, and we commended them. The Premier commends them on a regular basis, but they're still worked off their feet. They're crumbling—they're crumbling. I didn't see that reflected in the throne speech: “Oh, they're great people, but they're crumbling. We need to hire many more and we need to recruit many more.” Have we learned that? I don't think so. I don't think so.

I heard the Associate Minister of Transportation say yesterday—and I'm paraphrasing; I listened very closely to the speeches yesterday—that they reacted to COVID-19 and now it's time to get back to business. He didn't say it exactly that way, but I don't think I'm mischaracterizing: “Back to what's important.” But we're still in COVID-19, and many of the effects of COVID-19 are going to be with us for years, regardless if the disease is conquered or not, and we're missing that.

One example, I think: long-term care. Now, we all know that Ontario was one of the worst jurisdictions for deaths in long-term care, directly from COVID-19 and indirectly. We've had people in this province during COVID-19 die of dehydration, die by themselves. This issue, the problems in long-term care, were there before the pandemic, to be quite forthright. They were there before the Ford government, when we had a tragic situation in, I believe, Woodstock, where there were murders in a long-term-care home. Our party asked the then-Liberal government to hold not just an inquiry into the acts

themselves but an inquiry into the whole system that let that happen, and we were constantly rebuffed and refused.

Now, we've had the first and second waves kill thousands of seniors in long-term care—thousands—some under horrific conditions. The government reacts. The Premier says things like he's going to create an iron ring around long-term care. The first thing they do legislatively, Speaker, is not put more protections in for the seniors, but they raised the bar for civil litigation against the private companies and the government. So the actual ring of protection is around the companies and the government. Again, that's their first legislative action.

Now, we hear—I heard yesterday and I'm sure we'll hear in the further debate—that the issue with long-term care, they're going to solve it by creating more beds. There is a shortage of beds in Ontario, undoubtedly, but they're not addressing one of the true issues: that the people who were running the beds that we had were doing a terrible job already, in some cases. There are some for-profit homes that are incredibly well run. I am not painting a brush over everyone. But there are some that obviously aren't, and yet this government is saying, “Our plan is to just make the system bigger: more beds, same system”—more beds, same problem. That is an example of ignoring—you've seen the warning bells. People have died because of the warning bells, and you're not changing your direction.

In your first throne speech, you mentioned long-term care. You promised 15,000 beds over five years. In this throne speech, the last one, you're promising 30,000 beds over 10 years. Basically, that's the same. And in between those two throne speeches, we have experienced a disaster of horrific size in long-term care—horrific. Thousands of people died who didn't need to and suffered who didn't need to. Basically, the only thing you're doing is more of the same.

0930

It's not just me who's saying that, Speaker. The government, in response, put forward a commission; they created a commission. Again, I'm going to be upfront. We wanted a judicial inquiry because an inquiry would be a lot more open and allow more people to participate. The government didn't go there, but they did create this commission.

To the commission's credit, they came out with a credible report. The commission identified many of these same issues. One of the issues that the commission identified was that for-profit isn't a good model for the care of people—it isn't. Your own commission identified that. The reaction? Not much. Nothing, actually, because millions of dollars to long-term-care companies to create more beds does not fix the part of the system that actually causes the problem.

Speaker, they haven't learned. If you make the wrong call because you don't know that you can be—I don't know if the right word is “forgiven”—but that's understandable. But when the proof is looking you in the face, the families who lost their loved ones are looking you in the face, and the answer is, “We're going to do the same, just more,” that tells me that the government hasn't learned and it is going to go back to business as usual.

Before I switch to another topic, what's truly tragic about this is, there is a chance—and let's not hide this fact that we are going to be in an election in a few months; people on all sides are electioneering, and that's a part of democracy, it's not something we're ashamed of—but there is a chance that what we saw happen in long-term care will be forgotten and that more people are going to suffer all over again because it will fall off the front burner which—it's kind of falling now. I'm spending quite a bit of time on it because it's important to us. I am willing to predict the government is going to be spending a lot more time on wanting to build highways than on wanting to fix long-term care. There is a reason for that.

But we know the government knew, and we know, the long-term-care commission knows, and all the families know that the basic model of for-profit care doesn't work. That's why, one of the things we put forward is a different model. Can we change the system overnight? No. Can we make sure that going forward that residents in long-term care are protected, and that going forward, new facilities are under a new model that actually puts their care first, and that current facilities have to meet the same standards as at the new facilities? That's something that could have been in a throne speech instead of, "We're just going to put more beds." That's not the answer. It's great that you can announce how many millions of dollars you've given—that's great, but you're not changing it.

Interjection.

Mr. John Vanthof: Again, the member from Hamilton Mountain mentioned—and I told her to heckle me once in awhile, to give me some fodder.

Miss Monique Taylor: It's not heckling—

Mr. John Vanthof: Advise me, once in a while. The government heckles sometimes; my side advises.

I will just—in a minute on that one.

We know that one of the ways that for-profit long-term care and home care—they hire part-time so they don't have to pay benefits, and people have to go from one or two or three jobs to make ends meet. That was a terrible thing during COVID-19, but if you think about it, Speaker, it's a terrible thing, period, for those people working. That's a symptom of putting profit first, and when you do it in care, caring for people, it doesn't work.

With our not-for-profit side, hospitals, we have some of the same issues. People are being run off their feet. I was talking to someone on the administration side of our health care system, I believe, and her biggest fear—she's my age—is that a lot of people, as soon as they can get out, they're gone. We are heading into a much bigger shortage than we've got now. The government's response, "Well, they're heroes, but we're capping them at 1%. We want more nurses, but we're not going to pay. Despite all the crap they go through, we're not going to pay them any more than this"—and then they wonder why we're going to be short of nurses.

Schools is another one: Pre-pandemic, the government seemed pretty focused on cuts in schools, and not much has changed. It's not post-pandemic—hopefully, we're nearing the end of the pandemic, but we could very well

be mid-pandemic; we don't know. Honestly, nobody knows. But now, due to changes in funding, we're still getting bigger classes and the repair backlog is still growing.

I listened very intently to the member from Flam- borough—Glanbrook's speech. She was talking about all the HEPA filters that the government is so proud of. But where is the plan to actually put long-term ventilation, adequate ventilation, so we're sure that kids are going to be safe—and not just from COVID-19, but so that they have safe and healthy places to learn? She mentioned that they were so proud of the \$600 million. We've got a \$16-billion backlog, and growing.

0940

Now, to be quite upfront, the current government wasn't responsible for that whole \$16-billion backlog, right? They're not responsible for the whole \$16-billion backlog. The previous government is responsible for a lot of it and probably the government before the previous government, but this government hasn't touched it—hasn't touched it. So, again, I'm not sure that the government is learning.

I think, judging by the calls that we get in our office and the discussions I've had with my colleagues and people across the way, the group of people who are most surprised and disappointed—quite frankly, shocked—at this government is small business. I get these calls all the time. The previous, Liberal government wasn't that business-friendly, I don't think anybody is going to deny that. But because Conservatives are really good at advertising—"We understand business. We are your friends in business"—they truly thought that they would have a government that understood their issues. In the pandemic they suffered more economically. Small business, small restaurants, tourism operators were slammed—were slammed—and this government didn't really react. Yes, I give credit where credit is due. There were a couple of programs with lots of problems and no appeal process. I've been here 10 years, and it's the first time I've ever dealt with a program that didn't have a legitimate appeal process.

But a bigger issue with small business—and this was with all Ontarians. Everyone realized we're in a pandemic, and the vast, vast majority of people knew that they had to make sacrifices and knew that everything wasn't the same, but they also wanted it to be transparent, upfront and fair. And when Walmart and Costco were fully open and the local businesses that basically sold the same thing weren't, and there was no real scientific justification for that, it started to get real tough and they started to wonder.

Again, you can come back to, "Okay, so at the start they made a mistake," right? The Premier talked to Walmart, Walmart said, "It's too much trouble to sell essential or non-essential, so just leave us open," and the Premier made a mistake and listened to the wrong people. I don't agree with that, but that could maybe explain it. There's the campaign, the Premier and his buddies; maybe he listened to the wrong buddy that day.

But now it's the same thing again: You can go to a stadium and take your mask off and eat with thousands of

people, but the small restaurant that is still—we went to a restaurant last night. I have my vaccine passport, and they did the thing and they asked the questions, but they couldn't have as many people. Again, fool them once, but twice, no.

Mr. Robert Bailey: Better ventilation.

Mr. John Vanthof: The member from Sarnia–Lambton said there's better ventilation in a stadium with thousands of people than there is in a—

Mr. Robert Bailey: There is.

Mr. John Vanthof: No, no. And, if that is the case, then lay that out clearly to the restaurant industry, because that hasn't been done. That hasn't been done. That hasn't been done, from what we understand. The restaurant industry wanted to talk and was rebuffed.

Again, this is also indicative of what the government does. Instead of actually doing what's right and taking the heat for it—because there are no popular decisions in this—they try to take the easy way and then bend when the pressure gets too hard. Small business has been beaten up by this over and over and over. It's the same as announcements. The Premier announces everything is going to—“We're going to go full bore.” Restaurants order stuff, and then, a week later, “Oh, sorry. Everything is shut down.”

They're supposed to understand business. That's the shocking part. People actually believe that they—they aren't listening to small business. They're listening to somebody, but it sure wasn't small business. That is the hardest thing. If you make a mistake, you learn from the mistake and you try not to do it again. They make a mistake with the big box stores. Whether it was a mistake or whether it was—it's what they did. It was their decision. It turned out it wasn't a great one, and yet they turn around and do the same thing again. That is a much bigger problem.

I'm going to switch a little bit to something that's more—not local—more along with my critic portfolio. I'm the critic for agriculture and rural affairs. Now, I wasn't surprised that agriculture isn't mentioned in the throne speech, but the one thing that wasn't mentioned at all in the throne speech, and that agriculture has a lot to do with and I don't think is given enough credit, is climate change.

Climate change was kind of mentioned in the first throne speech, because, in the first throne speech, the only part that was mentioned about climate change was cancelling the cap-and-trade carbon tax. They ended up trying to take the federal government to court, and losing. There was nothing regarding climate change at all in the second throne speech.

If the throne speech is what you're putting in the window eight months out—I believe we're eight months out. Nothing else has changed in this government either; they're still not really focused on climate change, and climate change is going to impact our lives. Whether you agree or don't, it is going to impact our lives, and yet this government is very opposed to things that other jurisdictions or other levels of government are doing, and it has no real response for what it plans to do.

0950

In the first throne speech, the government also promised, again, to lower gas prices. Now, how can you be talking about gas prices and climate change in basically the same breath? There are parts of this province we're never going to have an alternative to roads to, and right now, because of inflation, people are having to make big choices. The government promised to address gas prices. It hasn't. There are a lot of things in gas prices that are beyond this government's control, granted. The government, in their first throne speech, also promised to lower hydro prices—didn't see that either, and that is a lot more in the government's control.

They spent a lot of time in the last election, the Liberal government—remember—what was that called? The fair hydro—I don't know. It was a bit of a—

Mr. Mike Harris: The hydro scam.

Mr. John Vanthof: Yes, it was a bit of a shell game, that one was. But this government hasn't done anything to lower consumer hydro rates either, despite the promise, and I don't see it in the second throne speech, so that's a promise that's kind of gone.

Before I run out of time—which is amazing, because I thought an hour—Speaker, you could put a lot more words in an hour than I can, and I mean that as a compliment. I believe you have some auctioneering in your past, and it shows.

Coming from northern Ontario, a few things that are really ultra real for us—doctor shortages. I heard that the government is now telling doctors, “You know what? You're safe now to do in-person visits instead of virtual.” Well, in my part of the world, there's no one to visit in person, and many of us don't have virtual. Those ads are just insulting, because it's a huge, huge issue. I get calls all the time: “No doctor. What do we do?” That's not just northern Ontario, but it's especially in our area.

One issue that is a crisis across the country, across the province: the combination of addiction, mental health, homelessness—it's a huge issue. And I'm not trying to minimize it anywhere else, but it's not just an urban issue; it's not just a fairly densely populated southern Ontario issue. It's a sparsely populated northern Ontario issue as well, where you have towns that are spread out an hour apart, and if there are services in one town but that town is two hours away from the next one and there's no way to get back and forth—we're losing people; it's harder to see, perhaps. Everything is harder to see, because we're farther away, but we're losing people at an incredible rate. I've spoken to the government about it, and I know why it's happening: There are limited resources and you want to put your resources where there's the most people. But what about where there's not a lot of people, where the people are separated by an hour? If you need to go to treatment, RAAM centres are great, but if you're an hour away from one or even if you're a half an hour away from one and you have no vehicle and there's no public transportation, it might as well be on the other side of the world. I didn't see anything to address that.

Another issue that isn't specific to northern Ontario but that is an issue that is mentioned in my riding a lot and I

think anywhere people live along the Trans-Canada Highway is road safety; specifically, accidents and people not feeling safe anymore on the Trans-Canada Highway. I've spoken to the Ministry of Transportation about this several times. I've listened to the associate minister, hoping that he would bring something up about it. If you will recall, I have stood here for years, talking about how the way that winter road maintenance is managed for profit leads to problems on the highways. I've had many back-and-forths in question period on that issue.

But now, we're having as many accidents in the summertime as we have in the winter. Again, it's not just me saying this. Let's see if I've got it in my notes. The OPP announced that deaths in commercial vehicle accidents are up 40% on our roadways, and just anecdotally, there are a lot of transport accidents. We need to address that.

I think it's multi-faceted. In areas where we have long stretches, we need more places to park. People are too tired. We need better training. We have a shortage of transport drivers, and we have drivers on our roads who, through no fault of their own, have probably never seen the two-lane, small-shoulder highway that we call the Trans-Canada—Highway 11 in northern Ontario. They come over Thibeault Hill, and they think, "What is this?"

Yet we are responsible, the government is responsible, for making sure that people are adequately trained. If you listen to the W5 article, their exposé on driving, the government is not doing a great job of inspecting driving schools. They just don't have the manpower to do it. They know that. They've known that for a few years. We're losing people because of it. I didn't hear anything, and I'm going to keep bringing this issue up, because we get calls about it all the time.

I can give you anecdote after anecdote. We have all had our experiences on Highway 11 where you have the white-knuckle one, where you pull off to the side and you think, "By the grace of God, I survived." But there are those who don't. And again, when you know something is wrong, you have to try and fix it. If it's a problem that comes out of nowhere, okay, we'll give you the benefit of the doubt, but the government knows something is wrong. I've had the discussions with the Minister of Transportation. When they brought forward the Moving Ontarians More Safely Act, I brought it up in debate.

1000

We need to do something about training, about licensing of commercial vehicles. Don't get me wrong, there are a lot of great drivers out there, and a lot of others who want to be great drivers. No commercial driver wants to be a bad driver or wants to take risks. But they need to be trained, and by the same token, people who drive passenger vehicles also have to understand that when you're driving a vehicle that weighs 50 tons—you just can't cut in front of it, especially on a two-lane highway. There's no place to go. But you need the person driving that 50-ton vehicle also to have the training to be able to do that.

In my last couple minutes, I would like to return to something that we keep talking about in the north and the northeast, that we promised in the last campaign—the government promised in the last campaign—and that is the

return of passenger rail in northeastern Ontario. To their credit, the government put \$5 million towards a study. I give credit where credit is due—didn't see any long-term funding in the budget for it, so the jury is still out on whether that was actually a real promise or along the same lines as lowering hydro prices. The ONTC has got the skill set to do it, has got the will, the determination. It doesn't lie with the ONTC; they need the political will to do it. It will be an election issue again, and they will say that they've nearly completed it—but they funded a study.

We need that train back. Do you know why we need that train back? We have a lot of people moving to our area and some of them without drivers' licences. They want to know, "Okay, so how do we get back and forth to Toronto?" Well, we have a bus. But we need a train. We don't need the Ontario Line subway, but we need equivalent service.

With that, Speaker, I thank you very much for granting me the opportunity to stand, and I'm glad this hour is over. Thank you.

The Deputy Speaker (Mr. Bill Walker): I would like to inform the House that pursuant to standing order 101(c), changes have been made to the order of precedence on the ballot list for private members' public business, such that Ms. Kusendova assumes ballot item number 10 and Mr. Harris assumes ballot item number 24.

Further debate?

Mr. Mike Harris: Thank you very much, Mr. Speaker. I know I've had an opportunity a little bit earlier to congratulate you, but you're looking the part today, so an official congratulations again, being able to recognize me to stand here in the House.

Of course, it is an honour to rise in response to the motion, motion 1 of our second session of the 42nd Parliament. In preparing for today, I thought back to the first time I rose in this chamber back in 2018. That was to speak to the first throne speech that Her Excellency our Lieutenant Governor delivered to the members of this Legislature. But nearly everything has changed since then.

Even though the past 18 months have posed the greatest challenge Ontario has faced in generations, there is one thing that the people of the province have been able to count on, and that is their Premier and this provincial government. This side of the House will stop at nothing to protect their health, safety and livelihoods. That commitment predates the pandemic, and it's something our government has always stood by. We will not compromise the health of your family, we will not jeopardize the environment, but we will fire up Ontario's economic engines to fuel historic levels of job creation and growth.

Earlier this month, our Minister of Economic Development, Job Creation and Trade shared some incredible news: Employment levels in Ontario are now back to their pre-pandemic levels. I think that's very, very exciting, and I'm happy to share that with the people watching at home today. Since February 2020, 1.1 million jobs have been recovered. That is 1.1 million people who are once again able to work and support their households.

Let's take a step back and remember what our government was able to accomplish before March 2020. But

before we do, I want to remind the members of this House what we inherited: 300,000 manufacturing jobs gone, manufacturing sales three times slower than the national average, skyrocketing hydro rates and the most overregulated jurisdiction in the country, which cost businesses \$33,000 a year, every year, off their bottom line, just in regulation.

We wasted no time getting to work to make Ontario the premier destination in Canada to do business and invest, and we are putting that mentality into action to pull us all out of the pandemic. That way of governing created 300,000 new jobs in Ontario between June 2018 and February 2020, before the pandemic. It saved Ontario businesses, non-profits and the MUSH sector over \$370 million in regulatory compliance. There are now 6.5% fewer regulations in the province of Ontario.

Now, as I said, protecting health and safety is our number one priority. Just look at the billions of dollars we spent to create over 3,100 new hospital beds, and the 30,000 new long-term-care beds and 27,000 new front-line workers in our long-term-care homes. As the Premier has said time and time again, we will not put a price on protecting people's health, but we do understand that there needs to be money to pay for these investments.

One thing I can absolutely guarantee is that there will not be reductions to public service and tax hikes like we've seen under the previous government. There will be no painful cuts or additional money coming out of your pocket. Just like we did between June 2018 and February 2020, this government will light a fire under the economy.

With the right mentality, the right policies, the right balance, Ontario is becoming competitive once again and attracting investment from all around the world. There are now more people working in manufacturing than there were pre-pandemic, and yes, in the same sector that was absolutely gutted by the previous government—and I will add that we lost 12,000 manufacturing jobs in Waterloo region alone under the previous government.

But let's talk about skilled trades for a second, Mr. Speaker. Employers in the trades have been crying for people for years. Those are good-paying jobs that are going unfilled because there simply aren't enough workers out there. There are 209,000 unfilled skilled and unskilled positions across the province, and while I won't hone in on any one particular reason for this, I don't think the 15 years of the Liberals pushing students away from shop floors did us any favours.

Thankfully, Mr. Speaker, times have changed. There is now a Minister of Labour, Training and Skills Development who is passionate about encouraging youth to get into and explore the skilled trades. He is committed to doing what it takes to help our businesses close the skilled trades gap. Programs like the Skills Development Fund are seeing tremendous success. That funding has gotten 150 projects on the ground, training 260,000 workers.

But along with the skill gap, there are also succession-planning challenges. In 2016, five years ago, one in three journeypersons were over the age of 55. That's a third of the workforce, and those numbers are from only half a decade ago. It takes three to five years for an apprentice to

get their certifications. I don't want to go too far down the rabbit hole of the College of Trades here, but that is one of the biggest things that held people back from getting into the trades to begin with.

1010

One of the first things that we did was to commit to dismantling and making that system easier for both apprentices and the journeypeople who are taking them on. It's now called Skilled Trades Ontario, a one-stop shop for the 150,000 apprentices that we have here in the province. But we still need to get rid of the mindset the previous government spent 15 years promoting. You do not need a university degree to be successful, Mr. Speaker. Success can be found on the job site, the shop floor or in a workshop, not just in an office in a high-rise tower.

We've increased investments for pre-apprenticeships and made skilled trades a focus in our schools. Along with promoting the trades to youth, we've also made reaching out to under-represented groups a priority. Ontario is a place for everyone to find prosperity, Speaker. If you want to work, there is a job here for you. Building roads, bridges and transit is a key part to Ontario's long-term recovery, and we need the people to make that happen. We need newcomers in construction. We need female truck drivers. Over \$21 million has been invested to promote the trades to women, new immigrants, at-risk youth and Indigenous people. This funding has broken down some of the historic barriers that prevented these individuals from getting the training they need, and making it easier for them to see a viable path forward.

We can't fill the labour gap in our skilled trades if over 50% of the population doesn't see the trades as an actual option. We need to do a better job so that the impending succession bubble does not burst and wreak havoc on what really is the backbone sector of our economy. It will take time to address these challenges, Speaker, just as it is taking time to undo 15 years of damage left behind by the previous government. But maintaining the status quo like the opposition have time and time again, by propping up the Liberals, is not an option for us here on the government benches. Economic growth will move us forward. It is what is going to build a future for my kids and everyone's children across this province.

Now, I want to touch, Mr. Speaker, a little bit on the local landscape in Waterloo region. We are one of the fastest-growing communities in all of Canada, and in fact we're the second-fastest growing here in Ontario. I'm sure everyone is probably a little sick of hearing that, but here is a new statistic for you: Since 2014, Waterloo region has seen its millennial population grow by over 25%. I am one of those people who have moved into the region, almost 10 years ago now. Millennials are the largest demographic in the job market, and they make up 30% of the population in Waterloo region. That is the horsepower that is going to drive forward Waterloo region's and Ontario's economic recovery.

We have a great team over at the Greater Kitchener Waterloo Chamber of Commerce and the Waterloo Economic Development Corp. who do incredible work

supporting local businesses, attracting new ones and leveraging our current workforce. But we also have a champion in our Minister of Economic Development, Job Creation and Trade. One of the last trade missions that he did back in 2019 was to India, where he inked a deal to bring over 300 jobs to Waterloo region. I can't wait to get him down to the region again soon, and I hope that I'll have some more great news to share about the growth that we're bringing to this important corridor.

Over the past 18 months, even during the darkest days of the pandemic, the minister has been working hard to unleash economic potential in every part of the province. Unleashing Ontario, Mr. Speaker: That's what we need to do to drive forward real growth for the next generation. This also happens to be the same name of a new tool he just launched to spread the word about the benefits of doing business right here in Ontario, because unlike the province that was bogged down by failed Liberal policies and governments unwilling to change, we are now an Ontario of innovation and growth. We are bringing back industries that left our province, and opening doors to new sectors, like fintech, artificial intelligence and research.

Unleashing Ontario—

The Deputy Speaker (Mr. Bill Walker): I apologize for interrupting the member. It is now time for members' statements.

Debate deemed adjourned.

MEMBERS' STATEMENTS

MINISTRY OF THE ENVIRONMENT

Mr. Faisal Hassan: It is with pleasure I rise today on behalf of the decent, hard-working community of York South–Weston. Our community has been having to deal for far too long with a series of unresolved environmental incidents. I have written letters to the environment ministry, and residents are frequently unsuccessful in getting the Ministry of the Environment hotline to respond and to investigate thoroughly the sites of the complaints.

Despite these attempts to get the attention deserved, our community continues to suffer with an asphalt plant that has reports of bad odours through emissions, along with dust complaints. We have a meat processing plant in the Stockyards neighbourhood that has complaints of odour, spills and heavy truck traffic. I have no issue with businesses operating in our community, but there is a clear onus on them that they are responsible, good neighbours.

The folks I hear from express great frustration with what they see as a government ministry unresponsive to their concerns. The Ministry of the Environment needs to be responsive to complaints of citizens and do their part to ensure these businesses operate like good neighbours.

ANTI-RACISM ACTIVITIES

Mr. Aris Babikian: On September 28, I joined the Honourable Parm Gill, Minister of Citizenship and Multiculturalism; Minister Raymond Cho, Minister for

Seniors and Accessibility; PA Billy Pang; and PA Vijay Thanigasalam at the Chinese Cultural Centre of Greater Toronto in Scarborough to launch an investment of \$1.6 million to protect communities against racism and hate. Eligible organizations, including community-based, not-for-profit organizations, can apply for grants of up to \$40,000 over two years for independent projects, or \$100,000 over two years for partnerships between two or more organizations. This new grant will help facilitate positive change in our society.

This grant also aligns with CCCGT's two-year program, Stronger Together, whereby they work in collaboration with 15 community organizations to tackle anti-Asian hate crimes through education and awareness.

As a long-time associate of the Canadian Ethnocultural Council and secretary of the organization, for years I have advocated against racism and hate. Furthermore, I lectured on the devastating effect of racism and hate on our—

The Deputy Speaker (Mr. Bill Walker): Thank you.

ONTARIO MINE RESCUE

Mr. Jamie West: Sudbury has some of the best mine rescue workers in the world, and this September they proved it again. On September 29, a scoop bucket was being transported underground at Vale's Totten mine. During transport, it detached from the cage and blocked the mine shaft. In layman's terms, the elevator to get underground was damaged, and there were 39 workers that were trapped at least 1,800 feet underground. Speaker, 1,800 feet is the height of the CN Tower, and some workers were more than double that distance.

Today, I want to bring recognition to the heroic work done by mine rescue teams at Totten mine. Ontario Mine Rescue was founded in 1929. They've spent countless hours preparing mine rescue volunteers for any situation that may arise, and prepared they were for the blockage at Totten mine.

Over 72 intense hours, rescue teams helped the miners climb the long secondary-egress ladder system. While some miners were able to climb the ladders, workers who were older or those who were exhausted from their ordeal were pulled up using ropes. Mine rescue volunteers spent between 12 and 15 hours underground, with some rescue officers upwards of 48 hours in the mine. After three days of concentrated efforts, all 39 miners were safely brought to the surface.

Speaker, Sudburians always come together to help those facing danger and this was no different. On behalf of the Legislative Assembly, I want to thank Ontario Mine Rescue and their volunteers at Totten mine. The families and loved ones of the 39 miners owe a great deal to their courage.

HOSPITAL FUNDING

Mr. Robert Bailey: I am pleased to rise today to announce another critical investment in Sarnia–Lambton by the government of Ontario. Mr. Speaker, our government is committed to supporting hospitals so that they can provide the care that Ontarians need close to home. As part

of that commitment, I am pleased to announce an increase in funding to Sarnia–Lambton’s Bluewater Health of over \$4 million in the 2021-22 budget year.

1020

This new investment includes a 2.7% increase to annualized funding and one-time funding of nearly \$150,000. This is a very important investment in Sarnia–Lambton, Mr. Speaker. Every day, the team at Bluewater Health goes above and beyond to provide exceptional care to the people of Sarnia–Lambton. While this has been especially true during the COVID-19 pandemic, we know that their compassion and commitment to care in our region will continue once the pandemic ends.

As part of the 2021 budget, our government announced a total of \$1.8 billion in additional investments for hospitals to ensure patients can access high-quality care across the province when they need it. Mr. Speaker, investing in Ontario’s hospitals like Bluewater Health is part of our plan to end hallway health care and ensure that Ontarians receive exceptional care when they need it, and close to home.

HEART LAKE BAPTIST CHURCH

Mr. Kevin Yarde: I rise to recognize the incredible work done by the Heart Lake Baptist Church in my community of Brampton North. Heart Lake Baptist Church was formed in 1977 and has been a great service to the community since. They have some important initiatives like their Food Pantry and Heartbeat Bikes.

In response to the increased needs of our community as a result of COVID-19, Heart Lake Baptist Church started a food pantry on April 30, 2020. The first night, they served four families, and have steadily grown since. Now, on average, they serve between 26 and 39 families per week. Each week, they provide milk, eggs, butter, cheese, fresh fruits, vegetables, a variety of pantry items and toilet paper. They also provide diapers, wipes and baby food to our families with babies, and feminine hygiene products as well. The church also provides toiletries and clean laundry supplies monthly, as needed.

Heart Lake Baptist Church also partnered with Youth Unlimited to start Heartbeat Bikes, a platform to engage and employ youth to help them overcome employment barriers. Through this venture, they assist with intentional life skills development, on-the-job training and paid employment at bike repair store settings. Volunteers and mentors support and motivate youth through coaching, training, conflict resolution and advocacy.

I want to thank Pastor Wayne and the rest of the staff at Heart Lake Baptist Church for their contributions to the community. In challenging times like these, we need more positive influences like Heart Lake Baptist Church in our communities.

NATIONAL DISABILITY EMPLOYMENT AWARENESS MONTH

Mrs. Robin Martin: October is National Disability Employment Awareness Month, a month during which

employers are encouraged to highlight the accomplishments and contributions that people with disabilities make in Canadian workplaces.

Inclusion and accessibility are not just words; they are the principles that guide our government’s approach to strengthening Ontario’s workforce as we push toward a barrier-free economy. I am proud to be part of a government that believes that everyone in Ontario should have the opportunity to reach their full potential, including through finding satisfying and meaningful work. An accessible and inclusive workforce does not just enrich the economy, it enriches our communities as well.

Unfortunately, often those with disabilities or who might require some accommodation have trouble finding work. Studies that I have read report, for example, that many of those on the autism spectrum, perhaps as high as 70%, never work.

I believe that we need to do better and ensure that as many people with disabilities who want to work and are able to work can find places to work that work for them. I cannot help but think, given the need right now in Ontario for 290,000 workers to fill existing jobs, that we have an unprecedented opportunity to find work—meaningful work—for people with disabilities.

I’m happy to recognize today the contributions that Ontarians with disabilities already make in the workplace, and to pledge to work together to ensure a future where more people with disabilities find meaningful employment.

SMALL BUSINESS

Miss Monique Taylor: Today I want to talk about small businesses in my riding of Hamilton Mountain that are on the brink of permanent closure. Their owners were strung along by the government’s promise of grant supports, promises that never came.

In my riding, Paul, of Paul’s Paralegal, was told he qualified for multiple grant instalments. When he received the first grant, he poured it into his mounting operating costs. When it came time for the second grant, nothing happened—no funds, no communication.

After jumping through hoops on his own and then reaching out to my office, Paul finally received correspondence. Was it a notice of direct deposit? No. It was something that left him feeling, in his own words, devastated. They said he was ineligible for the second grant and that, upon audit of the program, he didn’t qualify for any funds at all. He has had to lay off his staff and is growing increasingly worried about the future of his business. And he’s not alone.

We also heard from Ben of Paramount Safety Consulting. He received the first grant in April and then received an email confirming that he qualified for the second grant. By June, nothing. Every 10 days he was told to call back if he hadn’t received notice. Every 10 days he was left in the dark. Then Ben too received that dreaded email saying he didn’t qualify.

Just to add insult to injury, the small business support grant department is no longer responding to the inquiries

of MPPs' offices. Since August, that department has been closed down for review and escalation. This means no communication with our offices and the ministry. This has left small businesses in the dark and is absolutely unacceptable.

LOCAL GOVERNMENT WEEK

M^{me} Lucille Collard: This week is Local Government Week. The week is meant to educate students on the importance and operation of municipal government, but one is never too old to learn. In fact, I didn't know about this campaign and I have been a school board trustee for 10 years.

The campaign is intended to highlight the key role that Ontario municipal governments play in our communities. The campaign is also intended to create more engaged citizenship and encourage people of all walks of life to run in municipal elections.

We often forget that school boards also form part of local government with their school trustees duly elected at the same time as city councillors. Their work also deserves to be recognized. School board trustees are important local representatives as they bring the voice of parents and students to the board's table. They set the vision, develop policies, allocate resources and set the goals of the board. They influence decision-making on policy matters, shaping the learning experience of our children.

I fully recognize the passion and dedication it takes to step up as a trustee. A large part of the role is done on a voluntary basis outside of professional and personal occupations.

My regards and thanks to my past and present colleagues who are part of our local government. Happy Local Government Week.

EVENTS IN DUNNVILLE

Mr. Toby Barrett: You've got to love Dunnville. Haldimand-Norfolk is home to so many great small towns across our rich rural riding, and recently, the town of Dunnville has taken centre stage with two very significant accomplishments.

On September 11, 128 flags went up on the main street of town to honour the 128,000 Canadian veterans who lost their lives serving our country. These flags and poles will stay up until November 12, under the watchful eyes of area people.

It was truly an honour for me to address the crowd at Wingfield Park at this Veterans Voices of Canada Flags of Remembrance ceremony, only one of six ceremonies to be held that day across Canada. It was a great tribute to our fallen veterans. Thanks to the great people of Dunnville, the Royal Canadian Legion 142 and those who organized the event.

There's a second significant accomplishment, Speaker. Dunnville never ceases to amaze. For the fourth year in a row, the Dunnville Tim Hortons sold 48,000 smile cookies. That's the most cookies sold in Canada—again,

four years running. Smile cookies are sold through September. Proceeds go to local charities; in our case, to the well-respected Dunnville hospital foundation.

Dunnville is an amazing small town.

COMMUNITY FUNDING

Mr. Lorne Coe: Our government is providing more than \$46 million to support 648 non-profit tourism, culture, sport and recreation organizations through the Community Building Fund's operating stream.

In Whitby, four organizations received funding: Lynde House Museum, \$46,100; the Whitby Minor Baseball Association, \$43,500; WindReach Farm, \$213,000; and Art with a Heart, \$49,000.

1030

The impact of this money: Ross Ste-Croix, the executive director of WindReach Farm, said, "The funding from the OTF building communities fund will be pivotal for us as we rebuild our therapeutic riding program back to where it was prior to COVID. WindReach Farm's therapeutic riding program is the only one of its kind in Durham region and provides much-needed therapeutic recreation and fitness opportunities for individuals of all abilities in a tranquil and nurturing environment."

"Art with a Heart is ecstatic to receive this funding. We are looking forward to continuing to support" Whitby residents "through arts-based mental health and wellness programs while building sustainability for our charity. This past year, working with so many amazing participants, we have seen and heard the need in our community for ongoing arts-based mental wellness programming for kids, teens, adults and seniors."

Taken together, this is our government lifting up people in the town of Whitby through this investment of almost \$350,000.

VISITORS

The Speaker (Hon. Ted Arnott): Joining us at Queen's Park today is Mona Dokainish, mother, and Ahmad Elbayoumi, brother, of today's page captain, Lamees Elbayoumi, from the riding of Mississauga-Malton.

In addition, we welcome Nezar Dahdal, father of page captain Yamama Dahdal, from the riding of Toronto Centre. It's great to have you here with us at Queen's Park. Welcome.

QUESTION PERIOD

HEALTH CARE WORKERS

Mr. John Vanthof: My question is to the Premier. Ontarians have praised the hard work of nurses on the front lines of our health care system. They've been some of the heroes of the pandemic, but they are overworked and burnt out all across the province, including in the north and rural areas. We are in a nursing shortage. It's simple,

Speaker: We need more nurses to help Ontarians. Why has the government failed to recruit and retain nurses in Ontario?

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

Hon. Christine Elliott: I thank the member opposite for the question. We recognize and value greatly the work that nurses have done since the beginning of this pandemic and have continued to do for the past 18 months, but we do realize that many of them are exhausted. They need a break. That is why we have invested over \$52 million already to recruit, retain and support over 3,700 more front-line health care workers through our COVID-19 fall preparedness plan.

We do have further plans to recruit and retain more workers because we know, especially with the increase in care hours in long-term care, that we will need more support. We will need more workers in our health care system, and that's in home and community care and in long-term care, as well as in our hospitals.

We're continuing to build on that and we are going to graduate more nurses because we know that we need more registered nurses, RPNs, personal support workers and everyone on the front line.

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

Mr. John Vanthof: The Ontario Nurses' Association says some nurses are so burnt out they are quitting, creating even more gaps.

The Premier's science table said yesterday, "There is already significant fatigue and burnout among hospital health care workers. They will be further strained and at risk for burnout if their unvaccinated colleagues are unable to work due to COVID-19 infection."

When will this government mandate vaccines for health care workers and ensure that the risk of disruptions drops, instead of getting worse?

The Speaker (Hon. Ted Arnott): To reply, the Premier.

Hon. Doug Ford: I find it ironic the NDP are saying one thing: "Fire 20,000 nurses," but we need more.

I will tell you what we're doing, Mr. Speaker. We're investing over \$1 billion to make sure the temporary wage enhancement takes place. We're investing \$4.9 billion over four years to create more than 27,000 new positions for nurses and PSWs. This includes the most recent announcement of \$270 million to hire 4,050 new long-term-care staff across the province, partnering with publicly funded colleges with investment—by the way, the colleges are doing an incredible job in training the nurses and the PSWs.

We're investing \$121 million to accelerate the training of 9,000 PSWs and investing \$86 million to train up to 8,600 PSWs.

We are getting some of the greatest front-line health care workers anywhere in the world right here in the province because of our investments.

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

Mr. John Vanthof: Despite the Premier's statement, the government has made it clear that they do not appreciate nurses. Bill 124 strips nurses and other front-line workers of their rights to bargain their wages. They need to rip up that bill.

We need a new plan to train and retain nurses, with a government that is willing to invest in this training, recruitment and retention. We need a government to say yes to more nurses instead of always saying no.

When will this government withdraw Bill 124 and ensure that every Ontario community has the nurses they need?

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

Hon. Christine Elliott: As I've indicated before, we greatly value the work that nurses have always done, especially during a pandemic.

We are recruiting more people. We are recruiting more nurses, registered practical nurses, personal support workers and others. We're spending hundreds of millions of dollars in order to be able to do that.

We also recognize that many nurses are feeling burnt out. That's why we have made mental health supports available to them. We need to make sure that our providers are well to be able to continue to provide care. So we are providing those supports to nurses. We will continue to do that because we want to make sure, as we finally exit this road map, that we will make sure that our front-line workers are well and safe and able to carry on their work in the future.

PREMIER'S COMMENTS

Mr. Gurattan Singh: My question is to the Premier. On Monday, when the Premier should have been talking about growing our province with new Canadian immigrants, he instead made comments that play into racist stereotypes about new Canadians. Those comments were hurtful, divisive and wrong.

Immigrants and new Canadians struggle and work day and night to survive in Canada, working to build this province and this country.

Yesterday, the Premier was given an opportunity to apologize, and he refused. So I'm going to ask the Premier again: Will he apologize for his hurtful and divisive comments towards new Canadians that are just plain wrong?

Hon. Doug Ford: To the member from Brampton: I was inundated with people from Brampton, from your community, from the Sikh community, who said, "You were bang on." They told me the story of how they came here and worked their back off, and they said, "They're just playing politics with you."

Our base, my base, our family's base is made up of great, hard-working immigrants. I've been calling on the federal government for three and a half years to have more immigrants. This province was built on hard-working immigrants. I will support them. I ask them to come here and work and contribute like everyone else does. That is

the backbone of this province—our great, hard-working immigrants.

So stop playing politics, and let's speak the truth.

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

Mr. Gurratan Singh: Back to the Premier: I don't think the Conservative government and the Premier understand how problematic the Premier's comments were, so let me break it down. Immigrants often come to Canada with nothing. Some work in gruelling jobs with low wages, struggling to get their education recognized, struggling to find housing and more. And yes, they face racism and racist stereotypes. Instead of recognizing this struggle, the Premier of Ontario made comments that feed into division and into these racist stereotypes—a dog whistle that is hurtful and wrong.

So I'm going to ask the Conservative government and the Premier of Ontario to do the right thing: Show leadership and apologize for the Premier's reckless and hurtful and just plain wrong comments.

Interjections.

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

Premier?

Hon. Doug Ford: Mr. Speaker, I asked the member to stop playing politics.

It's very simple. My phone has blown up all night, all day, the day before, from immigrants telling me their story of how they have come here with absolutely nothing and how they've started at low-level jobs, they've worked up, they've built companies, they've started restaurants. That's the type of Ontario we need.

I find it very ironic: I've been the one asking for 294,000 immigrants to come here and build the GDP. But guess what? Under the NDP and the Liberals, they never had to worry about that for 15 years. They lost 300,000 jobs. They had more people than jobs. Since we've taken government, we have more jobs than we have people.

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I welcome everyone around the world, no matter where they come from. Come here, start a family, start a business and get back to the greatest jurisdiction anywhere in the world, and that's Ontario.

Interjections.

The Speaker (Hon. Ted Arnott): Members will please take their seats. Stop the clock.

Restart the clock. Final supplementary?

Mr. Gurratan Singh: Back to the Premier: Harmandeep Buttar is a new Canadian, living in Brampton. He is an essential worker. He worked throughout the pandemic. He drives a truck. He works six days a week, 12 hours a day, and in the evenings and on weekends, he delivers food. He easily works 16 hours a day, six days a week. He lives in a basement apartment where he provides for his wife and his daughter. His is a story of so many other new Canadians who are struggling to make a life here in Canada. Do they sound like immigrants who are here only to collect the dole?

What possible excuse could the Premier of Ontario have for saying his reckless and irresponsible comments?

Why would he say that immigrants are only coming to Canada to collect benefits, and why won't he apologize?

Interjections.

The Speaker (Hon. Ted Arnott): Order.

Premier.

Hon. Doug Ford: First, Mr. Speaker, I didn't say that. Again, they're playing politics. I'm the biggest pro-immigrant Premier we've ever seen here—ever.

Our family has been the same way. Again, I go back to our base. This is how we were created. That's the reason I'm down here: Because hard-working immigrants couldn't pick up the phone and call any of their MPPs; they wouldn't return their phone calls. They can call the Premier, and I'll return their phone call. They called the mayor of the largest city in Toronto, and they returned the phone calls and went to their door.

I challenge my friend Mr. Singh. I will go to his community. I'll door-knock and I'll see the response from the Sikh community. The Sikh community that came down to visit me and said, "You're bang on, Doug. Just keep going and stay focused." That's what we're going to do.

We're going to continue to create jobs. We're going to make sure that when people come here, they have affordable housing that the NDP and the Liberals voted against. We're going to have highways for people to drive on that the NDP voted against. We're going to increase health care that the NDP voted against. It's no, no, no from these people across the aisle—

Interjections.

The Speaker (Hon. Ted Arnott): Stop the clock. Members will please take their seats.

Start the clock. The next question.

GOVERNMENT ACCOUNTABILITY

Mr. Taras Natyshak: Speaker, yesterday afternoon, the Premier revealed that he would be bumping up his House leader to this brand new, never-before-heard title as Minister of Legislative Affairs. We know this isn't just a title bump; it comes with a \$27,000-a-year pay raise.

The Premier talks a big game about looking out for workers, but he's the one who passed Bill 124 that targets front-line workers: our nurses, the angels in our community who have seen trauma and tragedy and continue to see it every day. It freezes their salaries for the very people who have continued to keep us safe during this pandemic.

Speaker, can the Premier explain why his House leader, his right-hand man, deserves this generous promotion, but our hard-working front-line workers do not?

The Speaker (Hon. Ted Arnott): To reply, the government House leader.

Hon. Paul Calandra: I do appreciate the opportunity to answer the question. As I informed the opposition House leader yesterday, in fact the new responsibilities come with a mandate to ensure that the Legislative Assembly, which is in dire need of repair, which is in need of a decanting—the function of that is returned to parliamentarians and away from the public service. I think all members would agree to that. As I said, I informed both

the Liberal House leader yesterday and the opposition House leader of that.

Having said that, Mr. Speaker, the member is quite correct on one thing. When it comes to investing in health care, a massive investment in his community with respect to a brand new hospital that, of course, was not a priority for them when they shared a coalition government with the Liberals. He never advocated for that. He never advocated for health care workers. He never advocated for long-term care. He never advocated for the twinning of his highways which we're getting done—

The Speaker (Hon. Ted Arnott): Thank you very much. The member will take his seat.

Supplementary question.

Mr. Taras Natyshak: Speaker, what's quite clear is that when it comes to taking care of his friends and his buddies, the Premier is all ready to say yes, yes, yes to a pay raise for the government House leader, but when it's time to pay front-line workers, those nurses, it's no, no, no and he has entrenched it in law in this building.

Speaker, all we know so far is that the House leader will be topped up with close to about \$30,000. That's about six months' worth of a hard-working nurse's salary, or an entire year of a minimum wage worker's salary. But it might not stop there. Can the Premier tell us what other perks or promotions come with this new title? Will the minister have access to private transportation, limousine service, according to this new title that he now holds?

Hon. Paul Calandra: Of course, Mr. Speaker, I understand what the member is doing: He's embarrassed by the fact that he has sat in this House since what—2011—and has been unable to get a brand new hospital for his region, and we were able to get it in our first term of government. The member is embarrassed—

Interjections.

The Speaker (Hon. Ted Arnott): The member for Essex, come to order. The member for Hamilton Mountain, come to order.

The government House leader has the floor.

Hon. Paul Calandra: The member is embarrassed that, although he has sat there and accomplished very little for his community, in our first term of government, we were able to twin highways in his area, so that we could get people and the economy in his area moving better and people moving around.

The member is probably embarrassed by the fact that, whilst he was in a coalition with the Liberals, the only thing he asked for was a stretch goal on auto insurance, not new long-term-care beds, not hospitals, not transit, not transportation. He sat there and approved the closing of rural schools to the tune of some 600. On every measure he has not delivered for his community, and that's why, on June 2, 2022, a new Conservative member of provincial Parliament—

Interjections.

The Speaker (Hon. Ted Arnott): Stop the clock. The government House leader and the member for Essex will come to order.

Interjections.

The Speaker (Hon. Ted Arnott): Perhaps you didn't hear. The government House leader and the member for Essex will come to order, and we'll move to warnings if need be.

Interjections.

The Speaker (Hon. Ted Arnott): The member for Hamilton Mountain will come to order. The member for Ottawa South will come to order.

Interjection.

The Speaker (Hon. Ted Arnott): It was your facial expression.

Mr. John Fraser: I probably deserve it because of past transgressions. I'll take it. I'm not complaining.

The Speaker (Hon. Ted Arnott): Start the clock. The next question.

ACCESS TO MENSTRUAL PRODUCTS

Ms. Christine Hogarth: We want to turn this back to things that are really important to Ontario, which is about the pandemic. The pandemic has caused a lot of economic distress for people in various ways, and during these unprecedented times it has meant that some women have faced the reality that many others well know, about the worry of affording the necessary period products they need each month. It's not a subject that we often talk about. Some of us never talk about it, but that's because many of us just take it for granted. But more women and girls are having increased difficulty affording the appropriate menstrual hygiene products, including while in school.

The inability to afford these necessary products is often referred to as period poverty. We see this especially with young women and girls, who may miss out on a day of school and other activities because of the challenges to access the necessary menstrual products. Can the Associate Minister of Children and Women's Issues tell us how this government is planning to address period poverty in Ontario?

Hon. Jane McKenna: Thank you to the member from Etobicoke–Lakeshore for the question. As the Associate Minister of Children and Women's Issues, I am always trying to ensure that women and girls have the support they need to succeed and reach their full potential.

I was surprised to learn, according to a survey by Plan International Canada, that 63% of women and girls have regularly or occasionally missed an activity because of their period and concerns of not having access to menstrual hygiene products, and one in seven young people aged 13 to 21 struggled to afford period products.

Mr. Speaker, because of our government's continued efforts to end period poverty, we have partnered with Shoppers Drug Mart to provide these essential menstrual products for free to students across Ontario. Our government is committed to ending period poverty, and this partnership is the first step towards progress.

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

Ms. Christine Hogarth: I want to thank the minister for that answer. Once again, this is something we don't normally talk about, but I'm really glad to see that our government is working with the private sector, hand in hand, to provide these free products to our schools.

Mr. Speaker, I know that 12 months ago, Minister Lecce embarked on the negotiations to help end period poverty. And it is clear now more than ever that young women and girls need access to these products. I think it's critical that we come together, women and men, to support all students, especially those who are facing hardship, poverty or mental health struggles.

Can the Minister of Education tell this House why this negotiation was important to him and to our government, and most importantly, how it will improve the lives of young girls, women and other students across Ontario?

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

Hon. Stephen Lecce: I want to thank the member from Etobicoke–Lakeshore for her leadership, standing up for young students and women and girls in our province.

We agreed that in 2021, in this country, it is unacceptable that so many young students are unable to attend school due to a lack of access to menstrual products. We've been guided and informed and inspired by the voices of students who called on the government to take action to help end period poverty, and that is why we worked in partnership with Shoppers Drug Mart, under the leadership of the Premier, to help ensure, from an equity perspective, from a health perspective and from an academic perspective, that every child could be in school every day.

That is why we're proud to have announced a commitment over three years for 18 million menstrual products and for 1,200 dispensers, supporting schools in this province so that we can improve the mental health of students, and more importantly, we can ensure that all kids have access to the menstrual products that they deserve.

SMALL BUSINESS

Mr. Ian Arthur: Yesterday, I was part of a devastating meeting. It was a meeting that the Minister of Heritage, Sport, Tourism and Culture Industries should have had with the restaurant industry. The industry represents 450,000 workers. It generates billions of dollars in tax revenue. And it operates on a knife's edge of profitability.

A healthy restaurant operates with 3% to 5% profit. But during the pandemic, eight out of 10 restaurants operated at a loss or barely scraped by. Some of the sales have come back, but not enough. Sales are down 30%, and seating capacity is still capped. Winters are hard in the best of years for restaurants, and this is the worst of years. The situation is untenable.

Restaurants have several asks, and I would respectfully, through you, Speaker, request that the Premier address each one: Will the Premier lobby the federal government to continue the wage subsidies throughout the winter? Will the government stop insurance companies from imposing

30% to 200% increases on premiums? Will they commit to no penalties on unpaid deferred payments?

This industry is about family and community. I know; I worked in it for years, Speaker. Will this Premier support the restaurant industry and get them through the coming winter?

The Speaker (Hon. Ted Arnott): To reply, the Minister of Heritage, Sport, Tourism and Culture Industries.

Hon. Lisa MacLeod: I appreciate the member opposite's question. Of course, I know he has worked in the restaurant sector and hospitality sector himself, and we wish him great success.

That said, I want to be perfectly clear: The Ministry of Heritage, Sport, Tourism and Culture Industries, including myself as the minister, have met on multiple occasions with our restaurant working group, which we established in our own way. We have met with them similarly—myself—over four times. My colleague the Attorney General, my colleague the Treasury Board president, my colleague the Minister of Labour all sat down in order to support the restaurant industry, and we look forward to their actual recommendations.

I will say that our government has invested over \$600 million to 18,000 restaurants to allow them to survive during this period of time, and we've been working. If the member opposite wants to talk about meetings, the restaurant working group did have representatives that were allowed to be part of a meeting that I had on Monday morning—to which Restaurants Canada did not show up, although the Culinary Tourism Alliance did, in addition to, of course, ORHMA. They also were well aware that I was meeting at the Ottawa Hospital to look at a new civic campus.

That said, I did have the opportunity yesterday to meet with Ottawa Public Health—

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

The supplementary.

Mr. Ian Arthur: For the record, restaurants in Toronto faced the longest lockdowns and the lowest amount of support across all of Canada.

People ask me if I miss the kitchen and cooking, and what I tell them is that I miss the people I worked with. They were my chosen family, and they were incredible. That's how it is in restaurants. The Premier likes to speak of his family, about all the people who show up at Ford Fest. These are those people, Premier. I don't think they're going to show up anymore.

One owner told us of crushing debt he had taken on during the pandemic. He told us that he is once again forced to lay off employees because patios are closing and capacity is still limited. He talked about how, throughout the pandemic, he has been covering the cost of rent for employees who were losing their homes, covering their medical bills and their child care costs, buying groceries for his employees.

Through you, Speaker, to the Premier—

Interjections.

Mr. Ian Arthur:—and I hope that the minister from North Bay and the minister from Nepean are listening closely—

Interjection.

The Speaker (Hon. Ted Arnott): The member will take his seat.

The member for Essex is warned.

I apologize to the member for Kingston and the Islands. Please conclude.

Mr. Ian Arthur: Thank you, Speaker. I was looking down; I didn't see you rise there. I apologize.

Again, through you to the Premier—and I do hope that the ministers from North Bay and Nepean are listening very closely. Your ridings are filled with independent, family-owned restaurants. Please find it in yourselves—have the economic wherewithal, have the compassion, whatever it takes to get there—to bring back a third round of small business funding and help these restaurants get through the winter.

Hon. Lisa MacLeod: As I did mention, over \$600 million was invested directly to 18,000 restaurants throughout the pandemic. We also provided a great deal of support through rent relief, energy relief. In addition, my ministry has just announced another \$100-million fund for tourism and economic development recovery.

We continue to work with the Ministry of Economic Development and Trade as well as Treasury Board and finance in order to support our sectors.

I will say this: In order for us to get back to full capacity, in order for us to continue to get back to normal, we need to download that QR code. I'm pleased to say that over 800,000 have been verified in the last couple of weeks. But I did receive troubling information yesterday from Ottawa Public Health—as the member opposite knows, I'm a proud member from the city of Ottawa—who indicated to me that right now 30% of our restaurants are failing to comply with the ability to verify the vaccination certification.

I will continue to work with the sector, not only to provide them with funding in order for them to stabilize, but also in order for them to adhere to public health protocols, because that is the key for us to get back to economic and social recovery and success.

The Speaker (Hon. Ted Arnott): Before I recognize the member for Ottawa South, I will apologize to him for mistakenly calling him to order earlier this morning.

Mr. John Fraser: I probably deserved it for past indiscretions.

The Speaker (Hon. Ted Arnott): We move on. Don't worry.

The member for Ottawa South.

COVID-19 IMMUNIZATION

Mr. John Fraser: My question is for the Premier, and I hope that he is listening very closely. Ontario families have been through so much in the last 19 months: lost income, lost time at school, lost time with loved ones, and so many other things.

Vaccines have arrived, and they've brought hope. So it's perfectly reasonable for families to expect that the person caring for a loved one in hospital or in their own home or at school or in a child care centre has been vaccinated against COVID-19.

We know that vaccines reduce transmission, disease, hospitalization and death. We know that seniors, those who are immunocompromised and children under 12, who can't be vaccinated, are very vulnerable to the Delta variant.

So, Speaker, through you: Why is the Premier refusing to make vaccinations mandatory for front-line health care and education workers?

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

Hon. Christine Elliott: Thank you to the member opposite for the question. This is a very important issue, and it's one that we're analyzing on a daily basis within the hospital sector.

As you know, we have one of the most successful vaccination rates in the world, with over 87% of Ontarians aged 12 and older having received their first dose and over 84% being fully vaccinated.

Since we announced our last mile strategy, we've had a big increase in vaccination rates. That largely will include health care workers. We've had approximately 365,700 first doses and approximately 525,900 second doses. We do recommend that every Ontarian be vaccinated. We do recommend that particularly health care workers be vaccinated, because they are dealing with the public and dealing with their ill patients, and the vast majority of people already have in front-line health care situations.

We are reviewing this on a daily basis, and I'll have more to say on this in my supplementary.

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

Mr. John Fraser: Very clearly, the Minister of Long-Term Care understands breakthrough infections and infections in the unvaccinated, because he made vaccines mandatory in long-term care. When he said that, he said that although staffing might be impacted by this policy, "The priority has to be protecting the safety of residents and the safety of other staff." The minister said that while they might lose some staff who are unwilling to get vaccinated, home operators are much more concerned about the implications of an outbreak and what that would mean to staffing.

The same principle applies in hospitals, in schools, in child care centres, in home care, in all other settings where that kind of care is delivered. It's really hard to understand why you're incrementally parsing this all out. It doesn't make sense. It's not logical.

Speaker, through you: Will the government be supporting Bill 12 this afternoon and make vaccinations mandatory for front-line health care and education workers, and protect the most vulnerable among us?

Hon. Christine Elliott: First, the situation with long-term-care homes and the staff in those homes is different than in other locations, because long-term-care homes

have been disproportionately impacted by COVID-19. However, that said, the Premier has sent a letter to hospitals in Ontario and other front-line health care providers to understand what the impact would be for a mandatory vaccine requirement, because it's not a simple stand-alone issue.

We understand that there will be some people who will not be vaccinated, and we already have health human resources concerns. We want to make sure that our hospitals can continue to provide excellent, quality care, so we have to weigh the benefits of mandatory vaccination versus the job losses that might happen for people who chose not to be vaccinated.

We have received those responses, pursuant to the letter that the Premier sent out. We are reviewing those answers now and will make a determination very shortly with respect to this issue of mandatory vaccination.

SENIORS AND ACCESSIBILITY

Mr. Mike Harris: My question is to the Minister for Seniors and Accessibility. Over the summer, I've had the opportunity to meet with many businesses in my community of Kitchener–Conestoga to see first-hand what they are doing to create a more accessible Ontario. Last month, I had the honour to show the minister around the beautiful town of Elmira to see what they're doing to keep their downtown core accessible, and I also had an opportunity to tour Onward Manufacturing with him in Kitchener, where they've rolled out some fantastic programs to help people with disabilities.

Can the minister please share with the House what the government is doing to ensure that all of Ontario is accessible, so that every Ontarian can live the Ontario dream?

Hon. Raymond Sung Joon Cho: I thank the member for Kitchener–Conestoga for raising this important question. I'd like to answer that question by sharing a real example. The town of Elmira is showing leadership on what small businesses in that town are doing to make their community more accessible to everyone. These small businesses are echoing the Ontario spirit that is being shown across the province during National Disability Employment Awareness Month.

I saw this first-hand at the Onward Manufacturing facility when I toured this small business with my good friend the member for Kitchener–Conestoga. They showed us first-hand the value of employing people with disabilities and how they make their workplace accessible for everyone. Onward Manufacturing is a real example of how small business—

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

The supplementary question.

Mr. Mike Harris: It's encouraging to see the work that the ministry is doing. We got to see it first-hand while we were out touring around some of these local small businesses.

In addition to the investments in accessibility, the seniors community knows this government has invested

billions of dollars to protect them during the COVID-19 pandemic.

As we continue to combat the fourth wave, seniors need to know that their government is there for them. Could the minister tell us a little bit more about the work that his ministry is doing to protect seniors as the fight against COVID-19 continues?

Hon. Raymond Sung Joon Cho: Thank you to the member for Kitchener–Conestoga. Thank you for your continued support and excellent work for Ontarians in your riding.

Our government is protecting seniors in the riding of Kitchener–Conestoga and the rest of Ontario by investing in infection prevention and control measures to help stop the spread of COVID-19 in retirement homes.

Mr. Speaker, it's my honour to share with the House that the riding of Kitchener–Conestoga received over \$215,000 in IPAC funding. That's over \$215,000 more to spend on staff, PPE, training, and other measures to stop the spread of the virus.

HEALTH CARE

Mr. Wayne Gates: My question is to the Premier, and I hope he'll answer it for the people of Niagara. Today in Niagara, only 6% of residents have received their MRI within the provincial benchmark of 28 days, compared to 46% of other Ontario residents who have their scan in that time.

The current wait time for an MRI in Niagara—listen to this—is 255 days, well above the provincial average of 141.

In Niagara, thanks to the help of Mr. Tom Rankin, we have fundraised enough money to install an MRI unit. We have requested from this government \$1.52 million to run the new MRI machine seven days a week to clear up the backlog.

Will you provide the funding in that request and ensure the residents of Niagara Falls have fair access to MRI scans? Yes or no?

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

Hon. Christine Elliott: Certainly, our goal is to make sure that everyone in Ontario, including in Niagara region, can have fair access, timely access to both surgeries and diagnostic procedures that have been delayed as a result of COVID-19. That's why, as part of our \$1.8-billion investment into the hospital sector, we're also dedicating \$300 million to reduce surgical backlogs and to increase diagnostic procedures from delayed or cancelled surgeries and procedures because of the pandemic. This is in addition to the \$200 million that we introduced last fall. We know that people have been waiting long periods of time. We want to make sure that we can get caught up, which we are doing very quickly, on both surgeries and diagnostic procedures. That applies to everyone across the entire province. We are mindful of that, and we are working very hard to make sure that we can limit the times that people have to wait to receive these procedures and surgeries.

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

Mr. Wayne Gates: Minister, you're aware of the request from Niagara Health. You're also aware of the fact that we need operating funds in Niagara.

There are 5,000 residents today waiting for an MRI—5,000. These scans could be the difference between life or death, and people are sitting at home, stressed out, waiting 255 days for the scan they need. It's disgraceful in this province.

We did our part. We fundraised enough money to buy the machine. That's our obligation. Now the Premier has to do his part and provide the funding to clear the backlog and get these people the access to medical services they need.

In 2017, the Conservatives supported my motion to end these backlogs by funding MRI scans in Niagara. The people of Niagara now need them to live up to that commitment.

Will the Premier say today to the residents of Niagara that he will be delivering the money needed to clear the backlog and ensure that no resident in Niagara has to wait 255 days for a scan that they medically need?

Hon. Christine Elliott: While I can't speak specifically to the issue that the member is mentioning, I can indicate that we are working very hard to catch up on the surgeries and diagnostic procedures that had to be cancelled or delayed because of COVID-19.

1110

But I'm also pleased to say that in 2020-21, the average Ontario hospital completed 88% of their targeted surgical and diagnostic allocation. This is something we are working very hard on. We've invested over \$500 million in order to be able to do that. We know that people have been waiting a long time. We are grateful for the fundraising efforts that have already happened, but we are doing our part to catch up and to make sure that people do not have to wait undue periods of time to have these procedures done or surgeries done. That applies across the province, including in Niagara.

COVID-19 IMMUNIZATION

Mr. Rick Nicholls: My question is to the Minister of Long-Term Care. Sunnycrest Nursing Home, located in Whitby, recently had four deaths and seven hospitalizations within the first week since the COVID boosters were administered. Sadly, these deaths were covered up and not reported to the mainstream media for reasons that are suspect.

An inquest was not called. Autopsies seeking the cause of death were not performed. Coroner findings were not released. If I were a family member, I would demand answers and I wouldn't accept, "Well, they died from other comorbidities."

Minister, to you: What is the government doing to protect our elderly from dying when the purpose of the boosters is supposed to save lives?

Hon. Rod Phillips: I do thank the member for the question. Mr. Speaker, our focus has been on protecting the

residents of our seniors homes. Of course, every death is a tragedy and we mourn them with the family.

But, Mr. Speaker, that is why the province of Ontario, with the support of the chief medical officer, moved, as the first jurisdiction in North America, to have third doses. I am pleased to report to the Legislature today that 88% of eligible residents have those boosters.

Now, Mr. Speaker, and to the member, as we know, there is no perfect protection against this disease. That is why we continue to make sure that other protections are in place, including now requiring randomized testing of both immunized and non-immunized staff. We want to take every step we can to make sure that we're protecting people in our long-term-care homes.

Mr. Speaker, as you know, on October 1, I indicated that a vaccine mandate would be in place so that by November 15 all staff will need to be vaccinated. We'll take the steps we need to take to protect our elders.

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

Mr. Rick Nicholls: Thank you for that response, Minister. Initially, these experimental drugs, aka vaccines, were coined as the "saving grace" to eliminate COVID. Now people must get up to six booster shots. Is that because the experimental drugs aren't as great as expected?

Where's the clinical data and the research proving boosters are safe and effective? I'd like to suggest that our seniors are not human guinea pigs, yet surprisingly there has been no animal testing on these drugs. It appears that corners have been cut in order to rush to get the vaccines and boosters out.

Just to be clear, Minister, I'm not pointing fingers at you regarding the determination of the safety or the efficacy. But now it has been reported that a lawyer at Sunnycrest has threatened staff with dismissals and lawsuits should they talk to anyone about the deaths following the administering of the first round of boosters. That sounds like a cover-up.

So, Minister, will you commit to investigating these allegations of threats and the hiding of any wrongdoings at Sunnycrest and to seek justice for the families affected?

The Speaker (Hon. Ted Arnott): I need to caution the member on his language.

The Minister of Long-Term Care to reply.

Hon. Rod Phillips: Again, each and every death inside or outside our long-term-care homes is a tragedy, Mr. Speaker. I appreciate the member not pointing to me as a medical expert, nor would he. But from my perspective, the perspective of our government, the perspective of the science table and the perspective of our medical professionals, the potential for serious illness and disease is reduced by 11 times for those taking the vaccine. We encourage and continue to encourage everyone to get vaccinated.

We will, under the leadership of the Minister of Health, continue to look at the science with regard to further booster shots and where those are necessary. Mr. Speaker, I think the vast majority in this Legislature and the vast

majority in our province understand that vaccines are an important part of the solution to ending COVID-19's challenges on our economy and our health, and we'll continue to follow the science.

ECONOMIC REOPENING AND RECOVERY

Mr. Toby Barrett: To the Minister of Finance: I've met with many constituents in my riding and I've heard over and over again how critical the measures we took to protect people's health and the economy were in their communities.

As the rollout of our last mile vaccine plan continues, and there is light at the end of the tunnel, the people of Ontario want to ensure that we do not lose any of the hard-fought gains we've made against this pandemic. But they're also looking to tomorrow. They would like to know how this government plans to deliver prosperity to Ontario workers, their families and for the future.

Speaker, would the Minister of Finance please share how he's planning to ensure we remain steadfast in our resolve against the pandemic while creating the right conditions for future economic growth?

The Speaker (Hon. Ted Arnott): The parliamentary assistant to the Minister of Finance, the member for Aurora–Oak Ridges–Richmond Hill.

Mr. Michael Parsa: I want to thank the great member for Haldimand–Norfolk, not just for the great leadership he provides here in the Legislature, but certainly for what he does for his constituents every single day.

Speaker, just like my colleague said, I've seen how important these supports have been to many, many Ontarians. Since the beginning of the pandemic, our government has been steadfast in our commitment to make every necessary resource available to protect the people and to protect jobs. We've invested \$19.1 billion alone in response to COVID-19.

And while we've made important progress, our job is not done. We cannot let our guard down against COVID-19, and our government will continue to make sure that we are there for our front-line heroes, Mr. Speaker.

But as we all know, we inherited a province from the previous government where real investment in infrastructure never materialized while Liberal insiders all got rich. The previous government said no. We're going to say yes: yes to investing in our health care capacity and \$703 million—

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

The supplementary question?

Mr. Toby Barrett: Thank you to the parliamentary assistant for that response. It's really great to hear that our government is laying the foundations not only for Ontario's recovery but also for long-term prosperity, as the parliamentary assistant made mention, after so many years of neglect by the previous Liberal government.

Now as we all know, it's the workers on the ground. They're the front line in this fight against COVID-19 and with respect to our economic recovery. Speaker, my question: Will the parliamentary assistant provide a bit more detail on how our government's plan will support Ontario workers?

Mr. Michael Parsa: Thanks again for the great question. Speaker, my colleague couldn't be more right. That's why our government is going to fight for all workers and their families in our 2020-21 economic outlook and fiscal review. Our focus is both on essential workers who worked tirelessly on the front lines of this pandemic and our hard-working Ontarians who have been set back in their new work and careers by COVID-19. We'll fight for those looking for new opportunities for themselves and their families here in Ontario, the economic engine of Canada. Our government will build on the range of training and employment supports we have already put in place to give workers the skills they need to fill our labour shortage and support our economic recovery.

Speaker, our priority since the beginning of the pandemic has been protecting the people and protecting the jobs, and we're going to continue to do just that. A lack of resources will never stand in our way. We will continue fighting for the people of Ontario and the jobs every single day.

ACCESS TO MENSTRUAL PRODUCTS

Mr. Sol Mamakwa: Good morning, Mr. Speaker.

Remarks in Oji-Cree.

My question is to the Minister of Education. For those of us that live in the north, we often pay double for the same products found down here. This gap is even wider when you go into fly-in First Nations. Get this, Mr. Speaker: A regular box of tampons can range from \$16 to \$45, leaving people to choose between menstrual products or food security.

Norma Kejick of Northern Nishnawbe Education Council—they run three high schools—was disappointed to see jurisdictional issues once again creating division between the provincial and First Nations schools and students. These products being offered for free to all school boards in Ontario are not available to First Nations school boards. Why is this government discriminating against First Nations schools?

1120

Hon. Stephen Lecce: We're proud to have unveiled a plan to help end period poverty in this province for all publicly funded schools in the province of Ontario. This is a very positive step forward that should be celebrated as we end a challenge that has kept many young students from going to school every day. This government was resolved to fix it, whereas the former government and the New Democrats did nothing for 15 years. We took action. That just is the case. Nothing was done, and many students were staying home as a consequence. We've negotiated an agreement with Shoppers Drug Mart to set aside 18

million pads for students over the next three years. This is a positive step forward.

When it comes to Indigenous education, I'm proud to confirm that funding for Indigenous education within our provincial schools is up to the highest levels ever recorded in Ontario history. We have strengthened the curriculum, particularly from grades 1 to 3 in the social studies curriculum, to enhance Indigenous education. We'll continue to be there to support First Nation, Inuit and Métis students in this province.

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

Mr. Sol Mamakwa: Young people attending First Nations schools have high needs for these products, but they are being excluded. The press release announcing this program says, "This supply of free menstrual products will be provided to all school boards," but that's not the case. It is unfortunate that the public-private sector agreement did not see the need to address the issue for all students in Ontario, but only for those who attend provincial schools.

I am asking, Speaker, for clarification, as First Nations schools in the riding have reached out and asked if they can participate. Is the minister telling me the program is not for First Nations schools?

Hon. Stephen Lecce: I appreciate the question from the member opposite. I believe that for many years in this province, many young students were staying home as a consequence of not having equitable access to menstrual products. There was inaction by governments to date, and it was our government who made a decision to help end period poverty in this province, on the advice of many student leaders, including the Ontario Student Trustees' Association, who counseled us to find a fix to this problem.

Over the last year, we negotiated with Shoppers Drug Mart to deliver 18 million pads over three years from 1,200 dispensaries to publicly funded schools in the province of Ontario, to support all students, including Indigenous students within those schools and other young children in the province of Ontario. We want all kids to succeed. We want them to go to school each and every day. This investment, partnering with the private sector, will help support better-quality and equitable education for Ontario's students.

COVID-19 RESPONSE

Mr. Stephen Blais: About a year ago, the government issued a news release heralding the use of rapid COVID-19 tests. In this news release, the Premier said, "These new rapid tests are game-changers in the fight against COVID-19"—game-changers, Mr. Speaker. Despite being a game-changer, the Premier ignored all the public health warnings and sent our children back to school, without making investments to keep them safe and without there being a rapid testing program put in place. In fact, at the end of September, the Premier said no to rapid testing and ordered that agencies stop supplying rapid tests to parents, so we had parents seeing the Premier

sitting on the sidelines and, in an effort to keep themselves safe, stepping up to do the work that the Premier had said no to.

Mr. Speaker, the Premier has said that rapid tests are a game-changer. When is he going to get into the game?

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

Hon. Stephen Lecce: We are proud in this province to have one of the highest vaccine rates for young people in Canada, as well as one of the lowest case rates for young people in the country. That's because we followed the best advice of the Chief Medical Officer of Health and consulted with CHEO in the member's region of Ottawa and SickKids in Toronto. The guiding light of that advice has been to bring forth a layered approach to our schools' safety.

We're proud that 99.9% of our schools are open and two million children are learning, supported by safe schools with significant improvements in ventilation in every single school. We have expanded testing options—the take-home PCR testing option for high school asymptomatic students—and yes, to the member's question, we have added in an additional tool with the deployment of rapid antigen screening, which public health units in the province can deploy wherever they see fit, based on risk—not political decisions but that of the medical officers of health. We have trust in our medical leaders, we have confidence in the front-line staff in our schools, and we are grateful for their partnership in keeping schools safe in this province.

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

Mr. Stephen Blais: The supplemental is also for the Premier. Throughout the pandemic the government has taken a reactive approach. They are routinely a day late and a dollar short—or rather, often weeks late and billions of dollars short—in keeping Ontarians safe.

At the end of September, school-aged children accounted for the highest share of COVID-19 cases of any demographic in Toronto. The Premier has said no to reducing class sizes. The Premier has been said no to ensuring vaccinated educational staff. The Premier has said no to rapid testing surveillance.

There are serious questions as to whether the government is doing all it can to keep our classrooms and schools as safe as possible. In fact, this week the Premier said it wasn't safe for him to take personalized executive tutoring in French one on one, but he is asking our kids to sit in packed classrooms without rapid testing surveillance and without knowing whether their teacher or the child beside them is vaccinated.

Does the Premier believe that the classroom environment he is asking teachers and students to endure is safe, when receiving one-on-one executive tutoring in a controlled environment is not?

Hon. Stephen Lecce: I think the fundamental question from the member opposite is, do we agree with the advice of the Children's Health Coalition, who provided a public statement just days ago. They said, "Data from Public

Health Ontario suggests that the overall efforts to limit virus transmission, such as masking, distancing and vaccinations, have been successful with less than 0.25% of Ontario's two million student population testing positive....”

The coalition also noted that among the total number of cases in children and youth between September 19 and October 2, 79.5% were not linked to school outbreaks.

We have in this province one school closed, of nearly 5,000. We have two million children learning. We have an overwhelming consensus that the ventilation improvements, the masking indoors, the enhancement of testing and screening and better cleaning are making these places safe for kids and safe for staff.

But we take nothing for granted. Working with the Deputy Premier, we've added another layer by the deployment of the rapid antigen screening program, which was deployed at the school in Toronto that has now reopened following the deployment of PCR take-home tests as well. We're doing everything we can, working with public health, to help keep schools safe.

DRIVER EXAMINATION CENTRES

Mr. Jamie West: The question is to the Premier. As of the end of July there was a backlog of more than 700,000 driving tests. Since August, the Minister of Transportation has announced additional temporary road test centres in nine locations. Those locations are Guelph, Oshawa, Burlington, Markham, East Gwillimbury, Mississauga, southwestern Ontario, the Niagara region and the Ottawa area.

You may have noticed that zero of those nine locations are located in northern Ontario. The backlog of driving tests is a huge issue in northern Ontario, Speaker. Leaving out northerners from taking their driving test means they can't go to work. That means lost wages, lost appointments, lost opportunities.

The Premier needs to take action now to allow northerners to get on the road and get on with their lives. Will the Premier commit to opening additional temporary road test centres across northern Ontario, including one in my riding of Sudbury?

The Speaker (Hon. Ted Arnott): The Associate Minister of Transportation.

Hon. Stan Cho: I appreciate the member asking that question because it's important to address the backlog of drive tests. Obviously, this pandemic has affected everyone, and that includes those trying to get those drive tests done. That is why in June our ministry introduced a plan, a committed investment of more than \$16 million to tackle that very backlog the member is referencing when it comes to in-vehicle passenger road tests. As part of this plan we are opening more temporary road test facilities, hiring an additional 251 examiners and offering road tests with extended hours on weekdays and holidays. In fact, just recently we opened three additional temporary road test—throughout the province.

I know there is more work to be done, but we're going to clear that backlog and make sure that people are getting those drive tests in a timely manner.

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

Mr. Jamie West: Back to the Premier: Let's talk about Rick. Rick is a constituent of mine. His daughter has been driving for five years, and like many Sudburians she relies on driving to get to university and to get to work. However, Rick told me she can't make an appointment for her G test—get this, Speaker—until December 31, 2022.

The Conservative government brought in nine additional temporary road test centres, and all the ones he was talking about are in southern Ontario. This disregards the needs of people in northern Ontario who lack the robust public transportation systems of their southern neighbours. The north is where we use highways to get to work, not subways, so wait times for drive tests are especially devastating in northern Ontario. People in the north don't have the choice of a train, subway or bus to take them to work.

When will the Premier open additional temporary road test centres in northern Ontario, including in my riding of Sudbury?

Hon. Stan Cho: The member highlights a very important point. He's right: The north is very unique compared to the rest of Ontario. They have unique challenges, and we need to address those challenges. That's why we have been making sure that we address unique situations like Rick's, and help open year-round DriveTest centres in northern Ontario in Dryden, Espanola, Fort Frances, Huntsville, Kapuskasing, Kenora, Kirkland Lake, New Liskeard, North Bay, Sault Ste. Marie, Thunder Bay, Timmins and Sudbury. These DriveTest centres will operate year-round and, as I said, there have been additional resources allocated to make sure we address the backlog.

There are more testers, we're going to get through that backlog and, when life returns to normal, we're going to be on that road to prosperity here and in the north as well.

PREMIER'S COMMENTS

Mrs. Belinda C. Karahalios: My question is for the Premier. The other day, the Premier gave us his glib tough-guy act, saying that he only wanted new Canadians who were willing to work hard rather than sit around all day—a comical choice of words coming from a Premier whose political career wasn't built on hard work but rather on the reputation of his father and his late brother. It's even funnier considering that, since getting elected, the Premier often goes missing from the public eye for long stretches, as he did for the most of the summer. Perhaps the Premier was projecting and referring to his own lack of hard work when making these comments.

Will the Premier admit that his crude comments about working hard were simply a diversion to distract from the fact that his government's policies have resulted in

thousands of Ontarians losing their jobs over the last year and a half?

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

Mrs. Belinda C. Karahalios: Oh, supplemental?

The government defence of the Premier's statements were equally comical. First, the Premier said he is pro-immigrant, as evidenced by the crowds of people that would attend Ford Fest and receive calls from the late mayor of Toronto. Well, I have news for you: People didn't go to Ford Fest to see the Premier; they went to see his late brother, Rob. And the Premier isn't the one who built the reputation on hard work and calling people back, that was also his late brother, Rob. Maybe the Premier hasn't realized yet what my family and all of Ontario now know: He's not Rob Ford.

Second, the Deputy Premier said the government is in favour of even more immigration, more than the 450,000 a year their friend Justin Trudeau has set, which is about double the number under the previous Harper government.

Can the Premier tell us how much higher he wants immigration to increase, considering that, at the same time he wants more immigrants, his government has been putting Ontarians out of work continuously, on a daily basis, for the last three years?

The Speaker (Hon. Ted Arnott): To reply on behalf of the government, the government House leader.

Hon. Paul Calandra: I certainly won't dignify the first part of that question with an answer in any way, shape or form. It's certainly not why the people of the province of Ontario elected us here.

When it comes to immigration, I think this government has been very clear, and the Premier has been very clear, that we need more people to come to the province of Ontario. We have a significant amount of jobs that need to be filled so that we can continue economic growth and prosperity across the province of Ontario, and we can only do that if more people were to come to the province of Ontario, as they have for generations.

I am a minister in a government. My parents came in the late 1950s, 1960s. The Minister of Education is the same way. We have a parliamentary assistant who fled the Soviet Union. We have the parliamentary assistant to the Minister of Finance, the digital government minister and the minister responsible for seniors. When you look at our side of the House, we are very diverse, and we're very proud of that.

The Speaker (Hon. Ted Arnott): That concludes our question period for this morning.

This House stands in recess until 3 p.m.

The House recessed from 1134 to 1500.

NOTICE OF DISSATISFACTION

The Speaker (Hon. Ted Arnott): Pursuant to standing order 36(a), the member for Kiiwetinoong has given notice of his dissatisfaction with the answer to his question given by the Minister of Education concerning access to

menstrual products at school. This matter will be debated today following private members' public business.

REPORTS BY COMMITTEES

STANDING COMMITTEE ON THE LEGISLATIVE ASSEMBLY

Mr. Jim McDonell: I beg leave to present a report from the Standing Committee on the Legislative Assembly, pursuant to standing order 114(b).

The Speaker (Hon. Ted Arnott): Mr. McDonell presents the committee's report. Does the member wish to make a brief statement?

Mr. Jim McDonell: No.

The Speaker (Hon. Ted Arnott): Pursuant to standing order 114(b), the report is deemed to be adopted by the House.

Report deemed adopted.

INTRODUCTION OF BILLS

HIGHWAY MEMORIALS FOR FALLEN POLICE OFFICERS AMENDMENT ACT (IN MEMORY OF OFFICERS IMPACTED BY TRAUMATIC EVENTS), 2021

LOI DE 2021 MODIFIANT LA LOI SUR LES CONSTRUCTIONS SITUÉES SUR LA VOIE PUBLIQUE ET NOMMÉES À LA MÉMOIRE DES AGENTS DE POLICE DÉCÉDÉS (À LA MÉMOIRE DES AGENTS TOUCHÉS PAR DES ÉVÉNEMENTS TRAUMATISANTS)

Madame Gélinas moved first reading of the following bill:

Bill 24, An Act to amend the Highway Memorials for Fallen Police Officers Act, 2002 in respect of police officers who have taken their own lives as a consequence of being in the line of duty / *Projet de loi 24, Loi modifiant la Loi de 2002 sur les constructions situées sur la voie publique et nommées à la mémoire des agents de police décédés en ce qui concerne les agents de police qui ont mis fin à leurs jours en raison de leur travail.*

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

First reading agreed to.

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

M^{me} France Gélinas: Last week, the Ontario Provincial Police unveiled a suicide memorial for officers whose death was related to the line of duty, at their headquarters in Orillia, for police officers who worked for the municipality.

The bill would re-enact section 1 of the Highway Memorials for Fallen Police Officers Act, 2002, to provide that the Legislative Assembly may, by resolution, name bridges and other structures on the King's Highway in memory of police officers who have taken their own lives as a consequence of being in the line of duty.

I hope we will find support. Thank you.

MOTIONS

Mr. Michael Parsa: Speaker, if you seek it, you will find unanimous consent that the order for government notice of motion number 5 be called immediately, and that the question on the motion be put without debate or amendment.

The Speaker (Hon. Ted Arnott): The member for Aurora–Oak Ridges–Richmond Hill is seeking the unanimous consent of the House for the order for government notice of motion number 5 to be called immediately and the question on the motion be put without debate or amendment. Agreed? I heard a no.

COMMITTEE MEMBERSHIP

The Speaker (Hon. Ted Arnott): Once again, I recognize the member for Aurora–Oak Ridges–Richmond Hill.

Mr. Michael Parsa: I move that the following changes be made to the membership of the following committees:

On the Standing Committee on Estimates, Ms. Park replaces Ms. Skelly and Ms. Mitas replaces Ms. McKenna; and

On the Standing Committee on Finance and Economic Affairs, Mr. Hardeman replaces Mr. Sandhu, Mr. Bouma replaces Mr. Cho, Willowdale, and Mr. Crawford replaces Mr. Piccini; and

On the Standing Committee on General Government, Mr. Kanapathi replaces Ms. Ghamari and Mr. Bouma replaces Mr. Crawford; and

On the Standing Committee on Government Agencies, Mr. Yakabuski replaces Mr. Bouma and Mr. Anand replaces Mr. Nicholls; and

On the Standing Committee on Justice Policy, Mrs. Hogarth replaces Mr. Bouma, Mr. McDonell replaces Mr. Gill, Ms. Skelly replaces Ms. Park and Mr. Pettapiece replaces Ms. Tangri; and

On the Standing Committee on Public Accounts, Mr. Sandhu replaces Mr. Kramp; and

On the Standing Committee on Regulations and Private Bills, Mr. Babikian replaces Mr. Kanapathi and Mr. Coe replaces Mr. Bouma; and

On the Standing Committee on Social Policy, Mr. Yurek replaces Ms. Hogarth, and Mr. Anand and Ms. Karahalios are removed; and

On the Standing Committee on the Legislative Assembly, Ms. Scott replaces Mr. Rasheed, Ms. Ghamari replaces Ms. Mitas, Mr. Yurek replaces Ms. Skelly and Mr. Kanapathi is removed; and

On the Select Committee on Emergency Management Oversight, Ms. Skelly replaces Ms. Park.

The Speaker (Hon. Ted Arnott): The member for Aurora–Oak Ridges–Richmond Hill has moved that the following changes be made to the membership of the following committees:

On the Standing Committee on Estimates, Ms. Park replaces—

Interjection: Dispense.

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

Motion agreed to.

PRIVATE MEMBERS' PUBLIC BUSINESS

The Speaker (Hon. Ted Arnott): Once again, I recognize the member for Aurora–Oak Ridges–Richmond Hill.

Mr. Michael Parsa: Speaker, if you seek it, I'm sure you will find unanimous consent that the order for government notice of motion number 5 be called immediately and that the question on the motion be put without debate or amendment.

The Speaker (Hon. Ted Arnott): Mr. Parsa is again seeking unanimous consent of the House that the order for government notice of motion number 5 be called immediately and that the question on the motion be put without debate or amendment. Agreed? Agreed.

Once again, the member for Aurora–Oak Ridges–Richmond Hill.

Mr. Michael Parsa: I move that a change be made to the order of precedence on the ballot list drawn on September 27, 2021, such that Mr. Walker assumes ballot item number 7 and that Mr. Wilson assumes ballot item number 68.

The Speaker (Hon. Ted Arnott): Mr. Parsa has moved that a change be made to the order of precedence on the ballot list drawn on September 27, 2021, such that Mr. Walker assumes ballot item number 7 and that Mr. Wilson assumes ballot item number 68. Is it the pleasure of the House that the motion carry? Carried.

Motion agreed to.

PETITIONS

OPTOMETRY SERVICES

M^{me} France Gélinas: I'm really proud to present petitions that come from the good people of Wellington–Halton Hills. They read as follows:

“Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

“Whereas the Ontario government has underfunded optometric eye care for 30 years; and

“Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

“Whereas optometrists” have been “forced to pay substantially out of ... pocket to provide over four million services each year to Ontarians under OHIP; and

“Whereas optometrists have never been given a formal negotiation process with the government; and

“Whereas the government’s continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;”

They petition the Legislative Assembly of Ontario as follows:

1510

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

I support these petitions, will affix my name to it and send it to the table with my good page Graden.

OPTOMETRY SERVICES

Ms. Catherine Fife: This petition reads as follows:

“Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

“Whereas the Ontario government has underfunded optometric eye care for 30 years; and

“Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

“Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

“Whereas optometrists have never been given a formal negotiation process with the government; and

“Whereas the government’s continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

It’s my pleasure to affix my signature to this petition and give it to page Emily.

OPTOMETRY SERVICES

Mr. Wayne Gates: I’ve got to put my glasses on so I can see the printing.

“To the Legislative Assembly of Ontario:

“Whereas the Ontario government has underfunded optometric eye care for 30 years; and

“Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

“Whereas optometrists” have been “forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

“Whereas optometrists have never been given a formal negotiation process with the government; and

“Whereas the government’s continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

I support the petition and will sign my name to it.

OPTOMETRY SERVICES

Mr. Sol Mamakwa: I’m here to talk about the petition to save eye care in Ontario. This petition is from the great people of Dryden and area.

“To the Legislative Assembly of Ontario:

“Whereas the Ontario government has underfunded optometric eye care for 30 years; and

“Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

“Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

“Whereas optometrists have never been given a formal negotiation process with the government; and

“Whereas the government’s continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

I will affix my signature—and then to Emily.

HIGHWAY SAFETY

M^{me} France Gélinas: I would like to thank Rick Bedard from Onaping in my riding for this petition.

“Make Highway 144 at Marina Road Safe.

“Whereas residents of Levack, Onaping and Cartier, as well as individuals who travel Highway 144, are concerned about the safety of a stretch of Highway 144 in the vicinity of Marina Road...;

“Whereas three more accidents occurred in summer 2021”—it is now four—“resulting in severe injuries, diesel fuel spilling into the waterways, the closure of Highway 144 for several hours delaying traffic and stranding residents;

“Whereas the Ministry of Transportation has completed a review of this stretch of Highway 144, has made some improvements and has committed to re-evaluate and ensure the highway is safe;”

They petition the Legislative Assembly as follows: “that the Ministry of Transportation review Highway 144 at Marina Road immediately and commit to making it safe, as soon as possible, and no later than December 2021.”

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

OPTOMETRY SERVICES

Mr. John Vanthof: I have a petition here signed by the good people in Iroquois Falls.

“To the Legislative Assembly of Ontario:

“Whereas the Ontario government has underfunded optometric eye care for 30 years; and

“Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest ... in Canada; and

“Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

“Whereas optometrists have never been given a formal negotiation process with the government; and

“Whereas the government’s continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

I fully agree with this, will sign it and will give it to page Lamees.

FITNESS FACILITIES

Mr. Rick Nicholls: I have a petition here to the Legislative Assembly of Ontario:

“Whereas healthy Ontarians reduce the burden on Ontario’s health care system at large;

“Whereas proactive, preventative measures are integral to improving and maintaining optimal health;

“Whereas reducing the risk of the following, but not limited to:

“—Heart disease;

“—Stroke;

“—Obesity;

“—Diabetes;

“—Osteoporosis;

“—High cholesterol hypertension;

“—Inflammation;

“—Cognitive decline;

“—Metabolic syndrome;

“—Chronic degenerative disease;

“These list exercise as foundational to the reduction of risk;

“Whereas gyms have never been cleaner or more hygienic by both patrons and staff, with adherence to the protocols of wiping down equipment, wearing masks and social distancing;

“Whereas exercise is foundational to the reduction of risk;

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

“(1) To revoke the Ontario vaccine passport mandate with regards to gyms; and

“(2) allow indiscriminate entry to gyms by all patrons and members to exercise for good health.”

I wholeheartedly approve of this petition, will sign it and give it to one of our pages.

OPTOMETRY SERVICES

Miss Monique Taylor: I have a “Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

“Whereas the Ontario government has underfunded optometric eye care for 30 years; and

“Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

“Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

“Whereas optometrists have never been given a formal negotiation process with the government; and

“Whereas the government’s continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

I wholeheartedly agree with this, Mr. Speaker, and I’m going to give it to page Zada to bring to the Clerk.

1520

PLACES OF RELIGIOUS WORSHIP

Mr. Rick Nicholls: “To the Legislative Assembly of Ontario:

“Whereas places of worship provide essential spiritual, emotional, and mental health services to help combat depression, anxiety, fear, and other mental health disorders;

“Whereas gatherings at places of worship is essential, spiritual nourishment for the faithful;

“Whereas places of worship are important for good health and well-being for those in search of the truth;

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

“(1) Designate places of worship as essential during any COVID-19 or variant health crisis causing lockdowns and/or stay-at-home orders provided places of worship follow Ontario guidelines to ensure the health and safety of staff and those attending worship services;

“(2) Expand places of worship capacity as soon as it is safe to do so.”

I wholeheartedly approve of this petition. I will sign it and give it to a page.

OPTOMETRY SERVICES

The Deputy Speaker (Mr. Bill Walker): Further petitions? The member from Nickel Belt.

M^{me} France Gélinas: Thank you, Speaker. It's nice to see you in the chair.

I would like to thank Ms. Anita Constantin from Val Caron in my riding for these petitions.

"Vulnerable Children and Seniors Need Eye Care...."

"Whereas the Ford government is allowing the withdrawal of eye care to Ontario's children to continue, which has impaired their ability to learn in school, function freely in their daily lives and risk lifelong vision impairments;

"Whereas the lack of action from the Ford government regarding access to eye care for Ontario seniors has impaired their ability to maintain an independent and active lifestyle; and has increased the risk of permanent complications from manageable degenerative eye conditions;"

They petition the Legislative Assembly as follows:

"To call on the Ford government to commit to a fair formal agreement with Ontario optometrists so that Ontario children and seniors get the preventative and diagnostic eye care they deserve."

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

OPTOMETRY SERVICES

Mr. Rick Nicholls: "To the Legislative Assembly of Ontario:

"Whereas the Ontario government has underfunded optometric eye care for 30 years; and

"Whereas the government only pays on average \$44.65 for an OHIP-insured visit—the lowest rate in Canada; and

"Whereas optometrists are being forced to pay substantially out of their own pocket to provide over four million services each year to Ontarians under OHIP; and

"Whereas optometrists have never been given a formal negotiation process with the government; and

"Whereas the government's continued neglect resulted in 96% of Ontario optometrists voting to withdraw OHIP services beginning September 1, 2021;

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

"To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery."

I wholeheartedly approve of this petition. I will sign it and give it to the page.

GASOLINE PRICES

M^{me} France Gélinas: I would like to thank Valerie Smith from Val Caron in my riding for these petitions.

"Gas prices...."

"Whereas northern Ontario motorists continue to be subject to wild fluctuations in the price of gasoline;

"Whereas the province could eliminate opportunistic price gouging and deliver fair, stable and predictable fuel prices; and

"Whereas five provinces and many US states already have some sort of gas price regulation; and

"Whereas jurisdictions with gas price regulation have seen an end to wild price fluctuations, a shrinking of price discrepancies between urban and rural communities and lower annualized gas prices;"

They petition the Legislative Assembly as follows:

"Mandate the Ontario Energy Board to monitor the price of gasoline across Ontario in order to reduce price volatility and unfair regional price differences while encouraging competition."

I fully support this petition. I will affix my name to it and give it to my good page Fraser to bring to the table.

ORDERS OF THE DAY

REPORT ON ONTARIO'S PROVINCIAL EMERGENCY

Ms. Andrea Khanjin: I move that the House take note of the Report on Ontario's Third Declared Provincial Emergency from April 7, 2021 to June 2, 2021.

The Deputy Speaker (Mr. Bill Walker): The deputy House leader has suggested that the House take note of the Report on Ontario's Third Declared Provincial Emergency from April 7, 2021 to June 2, 2021.

I return to the deputy House leader.

Ms. Andrea Khanjin: I wanted to thank the members of the committee, first and foremost, who are on the Select Committee on Emergency Management Oversight, and of course the Chair of that committee, who is the MPP for Hastings-Lennox and Addington and who is currently fighting nasal cancer. My thoughts are with him and his family. That's a very rare type of cancer, and I really hope the best for him.

I did not know very much about this rare form of cancer until my colleague and it happens to be that the president of my riding association, John Daly—his wife, Natalie Daly, is currently undergoing surgery at Mount Sinai, just across the street, so I just wanted to also wish them all the best and to know that they're in my thoughts and prayers. As we commemorate Breast Cancer Awareness Month, we can't forget about all the other cancers that are affected, and this very, very rare cancer indeed, and of course we just came off of celebrating Terry Fox and his struggles. I just wanted to start out with that and to thank that member for all his work, and the rest of the members who are on that committee.

But we're here today to debate the extension of this committee, and of course, this take-note debate on oversight and the importance of it. When I talk to members in my riding about the importance of transparency and the

importance of oversight, they often talk about, “Okay, well, if you’re doing this reopening Ontario act and this emergency measures committee, what are the outcomes of that? What are you hearing?” A few people are very surprised that we’re on our 13th interim report of this committee, which is really incredible, how long it’s been able to do that good work and that oversight. It gives everyone an opportunity to ask the minister, the Solicitor General, questions. I want to thank her for her availability to be there every step of the way, because that’s so important for our government.

Yes, we’re passing these important measures to keep Ontarians safe, but this government also upholds, every step of the way, that great responsibility that is democracy in this province. If you look to what this committee is doing, in their constant meeting, there’s no better example than upholding democracy, bringing in that transparency. That is so important for us, certainly.

When I talk to small businesses, some of them are, yes, frustrated that we’re still—you know, “When are we going to get out of stage 3?” The government has done a good job so far in terms of helping them when it comes to rent support, when it comes to listening to their concerns in terms of regulations. The restaurants in the area are thrilled that in the red tape bill we just introduced, they’re able to extend the policy on patios, thanks to the work of our Attorney General. He hears first-hand from local businesses in his area and in Barrie who really benefit greatly from this. The reason for that is listening to people. This committee is a very good example of not just the feedback we bring to the committee, about listening to Ontarians, listening to people, but also hearing from all members of the House in terms of their input, their criticisms and their feedback on where we can go next in terms of reopening our province.

Certainly, our goal as this government is to unleash the economy, unleash the great potential that is this province, and get that up and going again. It helps so many people, as we get through this pandemic, having things like this oversight committee. It really helps businesses get back to business again. We’ve already seen the great success that, thanks to our new Minister of Digital Government, thanks to the QR code and the vaccine certificate, now more businesses are able to open and they’re able to have customers, have that peace of mind when they go for indoor dining and they’re able to take off that mask and enjoy conversations with friends and family.

Our restaurant sector will certainly benefit from more of the reopening measures of this province. Restaurant owners in my own area that I often hear from—for example, Robert Saunders; he’s never one to not speak his mind. So thank you, Robert, from Cove Café, for always speaking your mind and letting us know what tweaks need to be made to help you run a successful business, because you’re really a staple there in Sandy Cove. Those residents really rely on you. You just hosted a few weeks back a 90th birthday party for somebody, so it’s really remarkable, what you do for those residents.

But it’s not just that. What we learned from this pandemic through working together is that so many of

these restaurant owners have stepped up to the plate and taken out of some of their bottom line just to gift free food to our health care workers. For example, Rudy Maset and Domenic Bianchi, who own the Wild Wings in the plaza where my constituency office is, don’t just help local health care workers; they actually deliver to health care workers here, just near Queen’s Park as well. They deliver them delicious wings to thank them for their efforts. We’ve all heard this over and over again, how important it is to commemorate and thank our health care workers, and they do that all the time.

But there are businesses that opened during the pandemic, as well, for example, Gilford Local Eatery in Lefroy, in Innisfil. Anthony Rossano and his wife decided to partner up with their whole family and open it in the middle of the pandemic, and they’ve been doing great. They’re definitely looking forward to some of these measures, again, reopening the province and being able to have more customers at their door.

Of course, we can’t forget our breakfast places. Across the way we have our famous breakfast club that meets downstairs in the Queen’s Park cafeteria, so I know they’ll appreciate this part. It’s one of those meals you begin the beginning of the day with, but if you’re in that industry, in the restaurant business of all-day breakfast, it’s tough, absolutely. Stephanie Stoddart and Asif Khan at Sunset Grill have been trying to do their best, and they’ve been giving back to the community as well. Just this past week, I was there with my family, and for every meal that they deliver to people’s door—whatever their regular meal was, like, three eggs, bacon and potatoes—they donated some of that money to the local food bank, which is really nice. They partnered with that program.

Then, of course, I’d be remiss if I didn’t also mention Manish Mehra, who owns Stacked in Stroud. It’s the same thing: So many people meet there and have their own breakfast clubs in order to talk about what’s happening, if families are okay, checking up on people’s health and having their meetings. But these restaurants and these people who gather there are the fabric of our community, so they deserve the transparency that we’re discussing today in terms of this committee, why it’s so important and why it needs to continue on. We do need to head to brighter pastures in terms of reopening the province, but doing it safely and, of course, every step of the way listening to the advice of our medical health officer so that those residents can have peace of mind whether they’re dining at these lovely establishments or working at these establishments.

Some of them go above and beyond when it comes to entertainment. I’ll name Jennifer McKnight. She took over Harbour House Grill in Lefroy, like, a decade ago. She started in that business when she was 12 years old, doing dishes, and her dream was to become a chef. Then, finally, she became a chef, which is great for her, and now she has been running this restaurant where they bring in lots of live music and entertainment.

There was a time when we weren’t able to have live entertainment and music on patios or at restaurants, because we weren’t quite there yet with COVID. Again,

these were measures and oversights that were discussed at committee: Where are we in terms of COVID numbers? How safe are people? What are ICU levels at? Gradually, we were able to say, “Okay, you can have more people per table. You can have music at restaurants etc.” So things are looking more hopeful and going back to what a regular dining experience used to be. But she has been able, over the summer, to really attract some really incredible talent and some bands, so that more people enjoy that dining experience and, of course, the company.

Again, this all couldn't have been done without the efforts of all Ontarians who chose to either get vaccinated or to protect their family over the course of time, so that they can wait that number of days they have to wait before they can finally get vaccinated and then they can go out safely with their families. I want to thank each and every one of them, because, of course, they stepped up, in their own sense.

Someone who is a veteran explained to me: “It's interesting, Andrea. I had to pick up a gun or a weapon in order to fight for Canada's freedoms, but,” he said, “it's odd: I look around at all these young people and all these people around Ontario, and all they have to do to preserve their freedom is literally roll up their sleeves.” That really resonated with me, and I want to thank him for his years of service as well.

On that note, Speaker, I am really pleased to let this continued committee keep meeting for the importance of what they have to continue to do: deliberate on the transparency they're supposed to go over.

I also want to thank the parliamentary assistant to the Minister of the Solicitor General, who's done yeoman's work on that ministry as well, carrying that forward and carrying the torch and all the hours spent at committee.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Ms. Catherine Fife: Mr. Speaker, as this is my first opportunity to stand in the House following the prorogation of this Parliament, I just want to say what a pleasure it is to be back.

I also want to extend best wishes to the member from Hastings–Lennox and Addington. That fight with cancer is going to take some strength, and our thoughts and prayers are definitely with him.

It is also actually a chance for me, Mr. Speaker, to thank and acknowledge the passing of my riding association president, Graham Mitchell. Graham Mitchell served in the Rachel Notley government. He was a committed activist and stalwart in our party. He was a very good person, and he did good work.

I know the member from Davenport had worked with him, has called him a friend and a colleague, as did Toronto trustee Jennifer Story. She posted this about Graham: “The outpouring for Graham Mitchell over the past 24 hours is small testament to the outsized impact he had as an activist.” She went on to say that we will honour your life “by planting seeds of change in your honour.”

It's in that spirit that I enter this debate. Also, I just want to say condolences to his wife, Deanna, and his sons,

Emmett and Milo. They're going to go through a tough time, and it has been a tough time for many people across this province.

In that spirit of good trouble, though, I want to point out to the government that the emergency measures committee has brought forward a report. I've read the report, but I can't help but feel and think about the meeting that we took yesterday with the Canadian restaurant association. I met with them with our leader, the member from Essex and the member from Kingston and the Islands, and I must tell the government that they are still reeling from the decision made late on Friday of a long weekend, as always, to allow full capacity at arenas and large sporting events while not addressing the capacity levels at restaurants.

They waited for you to show up for this planned meeting. You did not show, but at least I guess you're consistent on that front, because you have not shown up for small businesses in the province of Ontario. In fact, your handling of this pandemic has disproportionately negatively affected restaurants—and tourism, for that matter.

They had some specific asks that you can't afford to ignore if you want them to have a fighting chance to survive—and there are 450,000 jobs at stake in this sector. The restaurant association board described the perfect storm of CEBA loans coming due, labour issues, supply chain issues, insurance gouging. I talked with a popular restaurant owner in my riding yesterday who told me he doesn't know if he will get insurance at all by November 1, which will leave him no choice but to close.

Essentially, Mr. Speaker, and what is left out of this report is that restaurants do not see this government as a partner. Sales are down a minimum of 30%. The promised support of the small business grant was inconsistent. There was no rhyme or reason, and perhaps worse, no transparency or accountability, which adds insult to injury. SMEs need continued support with utilities, with debt relief, or at the very least, don't charge fees or high interest rates on the money that they owe, that they took in loans, and offer some hope with a more inclusive third small business grant, as we have requested for months now. They actually said to us that this is a turning point for the entire industry if the third business grant is not rolled out in a more inclusive manner.

Workers are exhausted. As I reflect on the emergency measures that have been taken, it's incredible that the government has never acknowledged what they did not do. You denied workers paid sick leave for months—months. You bailed out big corporations. You found time to give special attention to the big-box stores, further disadvantaging our small businesses that drive the economy. You found time to bring in legislation that caps front-line health care workers at 1%; Bill 124 needs to be repealed if you do not want nurses leaving this province. It is a crisis in this province.

1540

You found time to use the “notwithstanding” clause and overrode the charter rights of people in this province. You

found time to bail out the for-profit care homes, making them whole financially even as they collected and siphoned off hundreds of millions of dollars to their shareholders. You found time in the pandemic to ensure that politicians can receive more political donations, as if this was a priority for the people of Ontario while you trampled on their rights to free expression. This is an ongoing issue in the Minister of Municipal Affairs' riding right now.

Even when you went through the motions of doing something that could be perceived as helpful, like flowing some tax dollars to assist with personal protective equipment—although very late, because workers wearing garbage bags and reusing face masks became a public relations issue for this government—you never enveloped that money, those tax dollars, and care homes were permitted to charge their residents up to \$100 a month for their taxpayer-funded PPE. Our member from Nickel Belt caught this one very quickly, has a petition on this issue, but you must understand how enraged the people of this province were when they found out that you gave money to care homes to help with the cost of personal protective equipment, and then those homes went on and charged their residents up to \$100 a month for PPE.

Thousands of preventable deaths happened in Ontario because you didn't care enough, you didn't listen to the informed voices of your own health science team and you tried to get through the pandemic on the cheap. You have almost \$4.6 billion in a contingency fund waiting for a rainy day. Well, when you meet with the Canadian restaurant association, that rainy day is long past due.

You continue to undermine the rights of tenants, now lifting the rent freeze. We are going to see mass evictions in this province. You can't find a job without shelter. The two issues of housing and employment are intrinsically connected, so removing this protective barrier around holding the line on rent is ill-informed. It is ill-informed.

The she-cession is real, indisputable, and where are you with negotiating the one factor—the one factor—that can address the lost ground women have experienced during this pandemic? You are dragging your feet on negotiating the \$10-a-day child care deal. It is good for women, it is good for equality and it is good for the economy. You're arguing that the full-day kindergarten is child care. It is not. It is unbelievable that the Minister of Education stands in his place and wants to be compensated for a program that is well established in this province, which is educationally based and is not early learning and care. You are wasting time and preventing women in Ontario from reaching their potential. Every dollar that's invested in child care is a \$7 return to the economy.

It is astounding to us, and I think to the people of this province, when they hear you talk about how great of a job you have done. Stop reading your own press releases. That's the one bit of advice I have to give to you. Repeal Bill 124. The negative impacts of this piece of legislation, which overrides bargaining rights, which disproportionately negatively affects nurses, is playing itself out in our hospitals.

I was contacted by a young woman this week. She had a baby last week. She was told twice in her labour that they had to slow it down because they didn't have enough nurses. Now, I know that the Speaker will not fully understand the pain and how uncomfortable it is to slow down labour, but she wrote, actually, "Ms. Fife, please continue to fight for this in Parliament. Experts have been saying ... there is a shortage.... It appears that non-vaccinated patients are clogging up our medical system and those who are vaccinated are suffering."

Nurses do not feel respected in our hospital system, nurses feel that the government is holding them down, and they are not going to take it anymore, Mr. Speaker. If you don't understand this basic concept about opening up beds in long-term care, which we desperately need, you will not be able to open them up if you do not have a nurse. It's a bed that's in a room which will be empty.

Mr. Speaker, as we review the emergency measures and things that this government has not done to support this province, I just want to thank the people of Ontario for their resilience and strength. They're the ones that are getting us through this.

The Deputy Speaker (Mr. Bill Walker): Thank you very much. Before we resume debate, I would just like to remind all the people having sidebar conversations, particularly those groups, if they could go out to the side, with their masks. It's a big echo chamber in here and out of respect for each speaker, we would like to keep it as [*inaudible*] as possible. Thank you very much.

I turn to the member from Etobicoke–Lakeshore.

Ms. Christine Hogarth: Thank you, Speaker. It's very nice to see you in the chair today—first time I've seen you here.

I know earlier the Solicitor General tabled a report on Ontario's third provincial emergency, which occurred between April 7, 2021, and June 2, 2021. The Emergency Management and Civil Protection Act requires that the government table a report with respect to a declared provincial emergency in the Legislature within 120 days after the termination of the emergency.

When this House passed the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020—the ROA—which terminated the first provincial emergency when it was proclaimed into force, the government had stated it would not hesitate to declare another provincial emergency if the situation warranted. It has been our approach from the very beginning that we would implement restrictions no longer than was necessary. That was our approach with the first and second provincial declarations of emergency, it is our approach under the orders under the ROA, and it will be our approach with the proof-of-vaccination requirements.

Our government, in consultation with the Chief Medical Officer of Health and other health experts, declared a third provincial emergency on April 7, 2021. The months of April, May and June 2021 were especially tough as we saw a rapid increase in variants of concern within the province. These variants originated outside of Canada. The B1617 variant, also labelled as the Delta variant by

the World Health Organization, originated in India and spread in the region at an alarming rate, causing widespread hospitalizations and deaths.

New orders were needed. The Ontario government's first priority was to take proactive measures to curb the transmission, to ensure the safety of Ontarians and do their very best to alleviate imminent pressures on the provincial health care system.

The third declared provincial emergency enabled the government to introduce new public health and safety measures to respond to the third wave of COVID-19. The April 7 to June 2, 2021, provincial emergency was a bridge to support the early ramp-up of the largest immunization program in Ontario's history.

I'd like to begin by providing an overview of the declaration of emergency by the numbers. The third declared provincial emergency lasted 56 days. Nine emergency orders were made during the third declared provincial emergency, and two orders made during the second declared provincial emergency remained in effect under EMCPA. Eight orders made during the third declared provincial emergency were revoked because they were no longer necessary following improvements in the public health and case trends. One order made during the third declaration of the provincial emergency has been extended past the termination of its provincial emergency because it remains essential to public health and controlling the spread of the virus. There are also two orders that have been made during the second declared provincial emergency that remained in effect under the EMCPA.

The Ministry of the Solicitor General has worked closely with other partner ministries to complete this report. It is a comprehensive accounting of the orders and articulates, using the data and facts available, why each order was considered necessary. The report is organized under two categories, based on the rationale of the orders: (1) eliminating the spread of COVID-19; and (2) continuity of critical services to support vulnerable sectors.

First of all, I'll talk about limiting the spread of COVID-19. There were six orders under this category, including orders that were issued to limit the spread of COVID-19 to protect the health and well-being of Ontarians. This order included O. Reg. 265/21, the stay-at-home order, to limit the purposes for which people could leave their home and reduce the number of contacts people had with others outside their household.

1550

Other measures used to reduce the transmission included the restriction of travel into Ontario from Manitoba or Quebec, the closure of public lands for recreational camping, and the temporary suspension of the enforcement of residential evictions. This was done to ensure people were not forced to leave their home while the stay-at-home order was in effect.

We also extended orders that had been made during the second declared provincial emergency to allow the registrar of the Retirement Homes Regulatory Authority to require a retirement home to implement measures to

prevent, respond and alleviate the effects of COVID-19 where there was a risk of harm to residents.

The continuity of critical services to support our vulnerable sectors: There were five orders under this category, including orders to ensure critical services could continue while managing the third wave of COVID-19. Orders were made to allow certain employers to take reasonable measures, where necessary, related to work deployment and staffing to support the health care system. These measures were put in place to address a gap in service delivery to ease pressures on available resources.

In response to trends in COVID-19 cases and ICU occupancy in Ontario, hospital orders were made to enable the transfer of patients to alternative hospital sites, long-term-care homes or retirement homes without consent, when necessary.

An order made during the third declared provincial emergency permits health care professionals certified in other provinces or territories to work in Ontario. These measures were made to maximize capacity across the hospital system during the third wave.

Extending the orders: Speaker, three orders under the EMCPA have been extended past the termination of the third declared emergency and remain in effect. These orders remain critical to the government's pandemic response.

O. Reg. 8/21, enforcement of COVID-19 measures: Under this order, all provincial offences officers have the authority to require an individual to provide their correct name, date of birth and address if the officer has reasonable and probable grounds to believe an individual has committed an offence under section 7.0.11 of the EMCPA.

Provincial offences officers also have authority to order premises to be temporarily closed if an officer has reasonable and probable grounds to believe the number of people attending an organized public event or other gathering exceeds the number permitted under the ROA, and can order an individual or group to disperse.

Effective enforcement tools are essential to support compliance with orders under the EMCPA and the ROA. Extending O. Reg. 8/21 was necessary to provide provincial offences officers with additional tools needed to assist in the enforcement of public health and workplace safety measures.

O. Reg. 55/21, compliance orders for retirement homes: After the second provincial declaration of emergency, there was a need for additional compliance tools to help manage retirement homes. As members will know, the Retirement Homes Regulatory Authority, the RHRA, has been mandated by the government to protect and ensure the safety and well-being of residents in Ontario's retirement homes under the Retirement Homes Act, 2010. This emergency order enables the registrar of the RHRA to issue a compliance order to a retirement home to prevent, respond or alleviate the effect of COVID-19 where there is a risk of harm to the residents of a retirement home.

This order addresses a gap in the act which prevented the RHRA registrar to require a retirement home to

comply with advice, recommendations and instructions from their local medical officer of health or designate, hospital or appointed manager. The order was extended because it was essential to remain vigilant in performing infection prevention and control measures and provide recommendations to retirement homes during COVID-19.

O. Reg. 305/21, regulated health professionals: Speaker, at times during COVID-19, the pandemic strained the capacity of our hospitals to treat patients with acute care needs, especially during the third wave, where rising cases put extended pressure on hospital staff and capacity.

Ontario's hospital system had to cope with high levels of staff absenteeism caused by illness and mental distress. This order authorized regulated health professionals from other Canadian provinces and territories to work in any Ontario hospital.

It also authorized health professionals to operate outside their regular scope of practice if services are consistent with the duties and privileges already assigned by the hospital and certain other conditions are met and allowed hospitals to redeploy their staff to key areas needed to support the province's response to COVID-19.

The order has been extended as demand for hospital capacity, including ICU beds for COVID-19 cases, remains, especially among the unvaccinated.

These are the main points of the report on Ontario's provincial emergency from April 7, 2021, to June 2, 2021. In addition to the tabling of the report in the Legislature, it is available to the public online.

I want to thank everybody for doing their part. I want to continue to encourage people to be vaccinated.

The Deputy Speaker (Mr. Bill Walker): Further debate? I recognize the member from Niagara Falls.

Mr. Wayne Gates: Thank you, Mr. Speaker, and welcome to the chair. I want to thank you for allowing me to rise and speak about the Report on Ontario's Third Declared Provincial Emergency. I want to speak today on both sections of this important report: both the order issued to reduce the spread of COVID-19 and also the order issued to support our health care system.

We also saw through the pandemic the strain it had left on our health care system. We see that in the orders issued under the declared provincial emergency—not just the third one but all of them. We truly witnessed right from the beginning what the government had to deal with: a usually underfunded health care system.

I believe it's important we speak about health care today. When we look at the orders shifting around health care resources and hoping our health care system doesn't collapse, we must discuss what we need coming out of the pandemic. And this is important, because I've raised this I don't know how many times—20, 30, 40 times—over the course since I've been elected.

In the case of health care, we simply need to better invest. Those needed investments are right across the province, including in my community, in Niagara. We need an exact date for when the residents of my community can expect building to begin on the new Niagara

Falls hospital. The people who need the hospital in Niagara Falls, Fort Erie, Niagara-on-the-Lake and Stevensville have been waiting years for a new hospital. They've been promised the hospital by this Premier—not by the Liberals but by this Premier—and yet all we keep getting are announcements. When will the shovels actually go in the ground?

And equally important to that is that we have a high unemployment rate in Niagara, especially now, with what's going on with our casinos and the layoffs that they're facing. Using local workers, local businesses: That's how you invest.

In Niagara, the people of Niagara keep hearing promises. They keep seeing announcements time and time again. They continue to wait and never actually see the shovels in the ground.

In my community, your word means everything, just like in yours, Speaker. Your word is who you are. When you give your word in an election, you don't lie; that doesn't fly in Niagara. So when the PC Party promised a hospital, and if the community had been fighting for that hospital and raising our own money—and I'll give you some examples of that—well, then, we should have a hospital. You agree with that, I'm sure, Mr. Speaker.

Looking at what we have to do during this pandemic, with the emergency orders listed in this report, truly shows you how bad we need a hospital. We can't afford to face another pandemic with an underfunded health care system.

Mr. Speaker, I hope the Premier and the cabinet are hearing me loud and clear. Enough announcements; now is the time for an exact date when we can see construction begin on our hospital.

This is something that's important, and I want my colleagues to hear, including the Liberals: 14 million people come to our area—when we come out of the pandemic—to Niagara Falls, Niagara-on-the-Lake, Fort Erie, a little bit in Welland and St. Catharines. Do you know what they want when they come, Mr. Speaker? They want world-class health care. You can't do that with what we have in Niagara right now. We need a new hospital.

I'm going to give you an example of how bad the health care situation is in Niagara. I raised this in the question this morning, but I want to raise it again, because the numbers really show what's going on. Only 6% of Niagara residents, compared to 46% of Ontario residents—so Niagara to Ontario, 6% to 46%—have received MRIs, when the province's own benchmark—do you know what that is? To my colleagues: Anybody over there know? Yell it out, if you can. It's 28 days. That's the benchmark for MRIs. The current wait time for an MRI in Niagara is 255 days, over 200 more than the benchmark, compared to the provincial average of 141, which is still higher than their benchmark.

1600

I want you to listen to this; I said this this morning very clearly. There are currently 5,000 residents waiting for an MRI in Niagara Health. I'll repeat that, because I know a lot of you are playing on your computers and you're not listening, but I want to make sure you hear it: 5,000

residents are waiting for an MRI in Niagara, 5,000 who need that information in those scans to treat their issues, 5,000 people because this government hasn't done anything or given us the money.

Speaker, the stats are unacceptable for the people of Niagara. Quite frankly, I think they're unacceptable for all of Ontario. When will this government treat the residents of Niagara fairly and get them the scans in 28 days instead of 255? Is the reality we faced during the pandemic not enough for the government to address this reality? In Niagara, we were asked to raise the money for the machine, and Mr. Tom Rankin, who owns Rankin Construction—who does a great job, right? They do great work. They've got skilled trades. They're unionized—a good local company. They took it upon themselves, with the community, to raise the funds. We've done our job. The community has come together and done their job. We bought the machine. We need this government to stand up and give us the operating funds.

Quite frankly, the entire Niagara Health system needs money on operating funds. You know it. Niagara Health has sent you letters. They've had communications with the minister. My understanding, which is good—what I'm hearing is that communications are going well. But we've got to see the money. They say that conversations are a lot of fun and everything is going good. We need the money in Niagara. People are suffering. The government hasn't even had the decency to respond to Niagara Health, and I think that's really not right.

I'd also like to speak about a second section of the order issued by this government: the orders to limit the spread of COVID-19—which I think we can all agree is very, very important. Other than a few members here, I think we all agree on how important this is. We've got to limit the spread and we've got to do something about it. The actions included closing small businesses or limiting their operations. In almost every wave of this pandemic, in every community, we saw that health care experts were right: Lockdowns do work. They limit the spread. They ensure we don't overwhelm our health care system, our nurses, our PSWs or our long-term-care facilities everywhere. However, quite frankly, it's cruel to shut down businesses in this province and refuse to give them the needed support to stay in business.

If you want to shut them down with good reason, go ahead; but we should support them. And you haven't done that, quite frankly, particularly with the third wave, which was probably worse than the first two in how long it lasted. We're seeing it now with what's going on.

In Niagara, we saw the reality of this government's inaction on supporting businesses. The tourist industry in Niagara—a sad reality—received very little support. Tourism was hit first; it was hit the hardest. We lost 40,000 jobs in Niagara, just like that—overnight. The grants offered help, but the rollout of that system was so flawed that our office alone had to assist nearly 50 businesses over several months with applications.

I'm going to jump ahead, because time goes quickly when you only get 10 minutes.

Our bed and breakfasts are operating at 50%. They need a third round of business grants.

And this one is driving me nuts. I'm going to say this really clearly; I know my colleague just mentioned it: Who has made money during the pandemic? Amazon, Costco, Shoppers, the Walton family have made billions. Let's be honest: They have. They made so much money, they don't know what to do with it. As a matter of fact, the one guy has made so much money, he's flying up in space to see what's up there. Somebody's got to tell him there's stars up there. He thinks there's money up there.

Having said that, let's get back to the issue of why I'm standing here, talking. The restaurant owners are calling my office. They're begging: "Gatesy, you explain to me why the Toronto Maple Leafs, the Toronto Blue Jays, the Niagara IceDogs can have full capacity and I can't have full capacity in my restaurant?" As a matter of fact, because I was fortunate enough—

Interjection.

Mr. Wayne Gates: Don't heckle, now; I'm on a roll.

The issue here is, when I was at the Leafs game on Monday night—unfortunately, it was a great game, but they lost—do you know what wasn't open at full capacity? Yell it out: The restaurant. Somebody explain to me how that makes sense, because I can't explain that to the restaurant owners in my community, that that's what's going on.

So if you are the Leafs, the Blue Jays, somebody that is maybe friends with the government, but the restaurant guy who's struggling every day—and they're struggling, friends.

So I'm asking this government to give them a third round of help. If you're going to keep them shut down, operating at 50%, with the patios closing in the next couple of weeks—they need our help.

Small business is what drives the economy, and restaurants are a big part of that; the tourist sector is a big part of that.

I've been asking up here for months, not just today, and small businesses—not the billionaire guys—need a third round of help. I'm saying to you guys, think about it when you have your cabinet meeting; think about that restaurant. I can't believe that Gatesy is the only one getting calls from these restaurant owners and that the PCs aren't getting any. I find that—

The Deputy Speaker (Mr. Bill Walker): Thank you.

Mr. Wayne Gates: Thank you. I appreciate it.

The Deputy Speaker (Mr. Bill Walker): Further debate? I recognize the member from Scarborough—Guildwood.

Ms. Mitzie Hunter: Thank you, Speaker, and congratulations on being in the chair.

Of course, I'm pleased to rise on behalf of my constituents in Scarborough—Guildwood to speak to this take-note debate, to consider the Report on Ontario's Third Declared Provincial Emergency from April 7, 2021 to June 2, 2021.

Mr. Speaker, for these 19 months through the pandemic, it has been a challenge. I want to thank all of the front-

line health care workers, the essential workers for keeping us safe, for making sure that we continue to function throughout this time.

I especially want to give a special thanks to Dr. Moss, who is an emergency room doctor at the Scarborough Health Network, who gave me my first jab of the Pfizer vaccine at the Scarborough Health Network's mass vaccination clinic at Centennial College.

Since then, Scarborough Health Network, Taibu Community Health Centre, Scarborough Centre for Healthy Communities and the Canadian Centre for Immigration and Refugees have administered over 600,000 jabs to the people of Scarborough.

I urge everyone who is eligible to get their vaccination as soon as possible.

While we must thank and recognize everyone who stepped up, I am disappointed in this PC government because under the leadership of this Premier, we have not delivered what is most important to keep Ontario's people safe. It is heartbreaking to see this government stand by while for-profit long-term care remains unaccountable, delivering poor outcomes. And it is unacceptable to see that small businesses are hurting, that they're pleading for support.

I just ran into a small business owner who owns a restaurant in the community: Mom Kitchen. He said, "We need help. We cannot hang on through successive waves any longer."

Mr. Speaker, this government has not delivered smaller class sizes. Our classrooms remain unsafe. St. Ursula public school in my riding of Scarborough-Guildwood is currently in outbreak.

Parents do not see a plan from this government to assist in closing the learning loss that some students have experienced during the time of the shutdown.

The lack of planning from this government, the endless delays, the flip-flopping and flip-flopping has created confusion for people. It has cost all of us, and it must stop.

The government could be doing proactive pandemic planning with public health. For instance, we know that the Pfizer vaccine has been submitted to Health Canada for approval for children ages five to 12, yet this government refuses to do the proactive planning required for a speedy rollout of that vaccine once it has received that seal of approval from Health Canada. Instead, they leave it up to public health, they leave it up to parents—leave it up to others to do their job for them. Today I heard a plan, actually, from Toronto's doctor, Dr. Eileen de Villa, who has laid out what it is that will happen once that vaccine is approved. Yet this government has been silent.

1610

Speaker, at the start of COVID-19, I remember being in this Legislature and asking the Minister of Health and the Minister of Long-Term Care to protect the most vulnerable in our long-term-care homes. I believe it was on March 11, 2020. And yet what we have seen in these last months is that the elderly and the frail in long-term care have been the hardest hit by the pandemic. In my community in Scarborough, we witnessed this tragedy

first-hand as these homes have experienced some of the worst outbreaks and some of the most deaths, unfortunately.

Such outcomes could have been avoided if this government did not walk back on the progress of Strengthening Quality and Accountability for Patients Act, 2017, which was introduced by the former Minister of Health, Dr. Eric Hoskins. Under his leadership, every long-term-care home received inspection each and every year. And there was also a bill put forward which ensured that fines would be laid. We need that enacted and done now so that we can strengthen the oversight and the care for the most vulnerable in our long-term-care homes. The elderly deserve that dignity from this government.

I want to just remember, while I have a few more minutes, those who have lost loved ones in long-term care, like Mr. McVeigh, who lost both parents due to COVID-19 in a long-term-care home. I extend my condolences to him and to his family. I urge this Premier to think of the justice that is required for people like Mr. McVeigh.

Speaker, in order for the post-pandemic recovery to be realized, we must acknowledge that small businesses are the backbone of our main streets. I know that many communities, like my own in Scarborough-Guildwood, are depending on their success and their continued livelihoods—like Colleen Zuber, who is the owner of Muddy Paws pet food and grooming salon. Throughout successive waves of lockdowns, Colleen came to my office—virtually, of course—and pleaded for pet grooming to be one of the mandatory services that can be provided for the health of pets. She demonstrated this in successive arguments. This is the kind of clarity and consistency that small businesses need. They need to be treated fairly, not unevenly, where big corporations, big-box stores get one thing and small businesses are subject to another. Why is that the consistent pattern of this government?

I also want to remind the government that small businesses need assistance. Offering deferrals—I think it was \$10 billion in deferrals—is not helping them. It simply shifts the burden to small businesses, because they are owing that debt. So I've asked this government to think about a plan that will help small businesses to cope. And I agree with my colleague on the opposite side there in the NDP who says that we should have a third round of the small business grant. I too have written to the minister asking for this. In fact, in March, when the second round was announced with no time for businesses to sign up, I asked for an extension. I'm pleased that the government gave a one-week extension, but that's not enough. It's not enough for small businesses like those in my riding to respond and to access those supports that they need to survive and to keep their businesses afloat.

Finally, Speaker, one of the areas that I'm very disappointed in in this government is that they have not addressed the issue of the she-cession and the she-covery. The fact is that women have been impacted by this pandemic significantly and their return to the workforce has been slower than their male counterparts—we see that

through the Statistics Canada Labour Force Survey—so we need to have specific policies and programs that address women's economic recovery and their livelihood.

The YWCA and a number of agencies have penned a letter: “This economic crisis requires transformative intervention. Task forces and tax credits are not enough. Ontario needs a plan to end this she-cession once and for all.” Speaker, I couldn't agree more.

I would urge the government to enact one pretty low-hanging fruit at this point, which is the federal government's offer of \$10-a-day child care. Seven provinces and one territory have already signed on to this. What is the government waiting for to offer this much-needed relief to the families here in Ontario?

As we talk about what the government has done with the emergency orders, we have to remember that they have not delivered on things like lower class sizes, delivering services and supports to parents and children with autism, who are looking to this government to act with compassion and care.

ROYAL ASSENT

SANCTION ROYALE

The Deputy Speaker (Mr. Bill Walker): Before we move to further debate, 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. Peter Sibenik): The following is the title of the bill to which Her Honour did assent:

An Act respecting York Region Wastewater / Loi concernant les eaux usées dans la région de York.

REPORT ON ONTARIO'S PROVINCIAL EMERGENCY

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Mike Harris: It is a pleasure to rise here today and take part in this take-note debate. I, too, wanted to send best wishes out to the committee Chair, the member from Hastings–Lennox and Addington—it's a bit of a mouthful, Speaker, to get that one up there. It's not like Bruce–Grey–Owen Sound; that's a pretty easy one.

I did want to say that he has become a great friend and mentor to me over these last few years here at Queen's Park. All the best out to his family. I guess there has been one kind of positive note for his family in the last election: His daughter, Shelby, was elected to the federal House of Commons as the MP in Daryl's old seat, which I think is great. Congratulations, Shelby.

Thank you to all the members of the committee. I know there has been a lot of work that's been done over these last almost two years now when we look at it, Mr. Speaker. There has been a lot we've heard today, some stuff that I think is pertinent to what we're talking about here today

and maybe some stuff that strays outside the box a little bit, but we are all welcome to have our points of view shared here in the Legislature, which I think is very important.

I want to talk a little bit about some of the things that have come up with the emergency measures over this last period that lasted 56 days. I want to highlight a couple of what I think are pretty important regulations that came forward.

Compliance orders for retirement homes—obviously a big one.

The stay-at-home order did a fantastic job of curbing the spread of COVID-19. You can see it in the graphs that get shared around in the media or that you see maybe online, on social media, on Facebook, for example. When that stay-at-home order was enacted, you see a dramatic drop in case transmission. I think that's been something that a lot of us had a hard time coming to terms with, having to move to virtual meetings and maybe not have people in our offices, having those face-to-face meetings like we're all used to. I know, for myself, I really enjoy getting to learn a lot more about the people in my constituency and the people of Ontario. But that particular piece of legislation, I think, was very important. And, of course, the residential eviction ban.

Looking at redeployment of staff in independent health care facilities and within Ontario Health too: When we had a lot of people in our hospitals, our front-line health care workers, who were contracting COVID or needed to be off for testing purposes, it really, really put a strain on our hospital system. When we were looking at what was happening with the amount of people that were flooding into our ICUs and really clogging up the system, being able to move people from place to place in a very safe and concise manner was able to take some of that pressure off.

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Another big one, I know, was transferring patients. The member from Waterloo will know that we took quite a few patients into our regional hospitals in Waterloo region, whether that be Grand River Hospital, St. Mary's hospital or Cambridge Memorial. There were obviously quite a few patients who needed to come out of Peel, whether that be from Brampton, Mississauga or other parts of the GTA. We were, of course, a very willing host to do that, but we wouldn't have been able to do that without these particular emergency measures in place.

I wanted to highlight a little bit about some of the, we'll say, good things that have happened through the pandemic in Waterloo region, and specifically our vaccine rollout. We're very lucky to have a vaccine distribution task force that was headed up by Waterloo Regional Police Deputy Chief Shirley Hilton. She did a fantastic job of coordinating with the provincial government, coordinating with, of course, public health and Waterloo region public health to figure out the best way to roll out the vaccine programs within Waterloo region. I'm happy to say now that nearly 87% of the eligible population in Waterloo region has had two doses of the COVID vaccine, and if you look at all of the aggregated data, those are some of the highest rates

across the entire province. So, kudos to everybody in Waterloo region for stepping up and getting the job, so to speak, if you will, Mr. Speaker.

I'd be remiss if I didn't take some time to thank an organization that you know very well, and that's Bruce Power. They were instrumental in helping us put together a large-scale mass vaccine clinic. This model was first used in Hanover, then Owen Sound and in Kincardine as well, in conjunction with the Grey Bruce Health Unit. It's a really neat model: Instead of actually having the folks who are coming into the clinic moving from place to place, you come in, you get assigned a seat, and nurses, doctors, nurse practitioners and volunteers come to you. So it's much more efficient and you're able to move people in and out of the facility a lot quicker. This model actually, too, received praise from retired General Rick Hillier, who was leading our provincial vaccine rollout, and I will quote him.

The Bruce Power model is called the "hockey hub" because they did it typically in hockey arenas. You'll probably know the P&H Centre very well. They were putting through, I think, roughly about 4,500 people a day in Hanover, which is phenomenal, especially for such a small community to be able to rally around like that and get that much capacity.

General Hillier said, "The hockey hub is a professional and well-designed plan that's caring and considerate for all Ontarians. It's a great example for rural and small urban centres across Ontario to consider."

So we did consider that, Mr. Speaker, and it ended up working out very well. We had a week-long clinic at Bingemans Conference Centre, so thank you to Mark Bingeman for hosting that. We were able to open up an additional 20,000 spots for people to get vaccinated over that time period, and it went very, very well. As I said before, vaccines are critical to us getting through the pandemic, and especially when it comes to fighting against the Delta variant, and I know that has been talked about a little bit here already today. Bruce Power really stepped up to the plate when we needed it most.

Some of you will remember that Waterloo region was actually held back in the provincial framework when everything had reopened. We needed a few more weeks to catch up, and that we did. That, of course, wouldn't have been possible without the support of our Premier, Minister of Health and Solicitor General. We were able to unlock an additional 44,000 vaccines for the people of Waterloo region while they were coming into this clinic. So, fantastic news there.

I just want to thank everybody who took part in that. It was a fantastic initiative that many of us worked together on. A special shout-out to Jon Olinski and Cameron Anderson, who are great community leaders. They were a big driving force behind getting this clinic set up, and it all came together very quickly.

What have we got—two minutes left? I'll have a quick drink. I'd also like to thank someone who I've gotten to know very well over the last few years, as well. She's new into our community but has been in the health care sector

for a long time, and that's the president of St. Mary's hospital, Lee Fairclough. She was, I think, the president for three months before the pandemic hit, and it certainly was a lot, I think, for her to get up to speed. But she quickly became the regional hospital lead in our community as far as pandemic response has gone. I know that at the beginning of the pandemic, she and I were on the phone almost on a daily basis, if not more, texting back and forth or calling and just trying to figure out what the landscape was going to look like; how we'd be able to unlock some more beds, some more spaces for people; what we could do in regard to those patient transfers. She has been an invaluable asset, obviously, to everyone in Waterloo region, so thank you, Lee, for everything you've done through this. It has been really great to work with you and, of course, Ron Gagnon, as well, and Patrick Gaskin down in Cambridge. We don't work maybe as closely together in Cambridge, but Cambridge Memorial is still a very important piece of what we're doing in Waterloo region to fight the pandemic.

I think, with that, I'll wrap up. Thank you to everybody who has taken part in the debate today. I think we've heard some excellent points, and I'll look forward to what the rest of the afternoon has in store.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Sol Mamakwa: It's an honour to be able to speak on behalf of people in Kiiwetinoong on the take-note debate on the report on Ontario's third declared emergency. I know Kiiwetinoong—some of you, maybe most of you, maybe all of you don't know the realities of Kiiwetinoong. I do represent 24 fly-in First Nations, whereby they have these airstrips, also known as airports, run by the Ministry of Transportation of Ontario. These runways are lifelines to access health, to access food, economic development—everything. They are lifelines.

The reason why I'm sharing that is that I think that when we talk about health, public health, I know one of the things I deal with here is the jurisdictional Ping-Pong that is played with the health and the lives of First Nations people who live in these communities. When we talk about the health system, the system that's in the communities, in my own community of Kingfisher Lake—it's a community of about 600 or 700 people—we have a physician. We don't have family doctors; we have community doctors. They come in five days per month, 60 days per year. Out of those five days per month, two days are travel days, so that's three days of physician services for that community.

But one of the things, as well, is that the nurses are federal nurses, run by the federal government. There are 12 programs that the nurses run. It could be the well-man clinic, the well-woman clinic or well-child, and one of them is immunization. There are 12 programs that they run, but also public health.

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On reserve, there is no legislation on the immunizations before you go to school. The immunization rates are very low in these communities. The reason why I'm sharing

that is, as you know, there was a rollout of the vaccination earlier this year, and one of the things that happened is, I kept getting a response from communities and First Nation leadership and members about the hesitancy, because, “Why are we first? We’ve never been the first in line of anything.” They do not trust governments on why.

In order to address that, they invited me—actually, it was February 1, in Muskrat Dam. The leadership had invited me. They wanted to take the shot with me, the vaccine, when they rolled out the Operation Remote Immunity, I think it was called. They had it in writing, because their rates were low. It was as low as 10% of the population that was available 18 and over. That’s the rate.

Then the second one was in Sandy Lake. I think that happened on March 1. That’s when I got my second shot. Then I came back here later, and I was asking for a plan for urban Indigenous rollout of the vaccines. But there was no plan, not until later. I remember sitting over there somewhere and I asked the Premier about that, but instead there were accusations of jumping the line.

I share that because when we talk about public health, where I come from there’s a Sioux Lookout First Nations Health Authority that provides—they asked the government to get a medical officer of health designation, because we fall under the provincial health unit. This First Nations health authority was mandated by the Sioux Lookout area First Nations, which is 33 First Nations. They managed to develop a First Nation-governed public health system called Approaches to Community Wellbeing, which would include a public health physician.

The chiefs asked this government whereby that they wanted to pursue First Nations jurisdiction over public health by advocating for amendments to the Health Protection and Promotion Act, HPPA, because we were at a stage of an unprecedented public health emergency. They could not wait for the legislative process. It was so clear to the First Nations that they needed the authority to implement every available tool in the public health measures, the arsenal, to prevent these outbreaks in the fly-in communities. I think that there was again the issue of jurisdictional ambiguity that began to happen.

There are so many things that happened, I know, with the long-term-care issue across Ontario—the number of deaths that have happened in these long-term-care facilities. I only have 20 long-term-care beds in my riding. But also, I have 14 long-term boil-water advisories in these communities.

When we talk about public health, when we talk about access to clean drinking water—it’s such a basic human right to be able to access water. During this time, during this pandemic, during this period, I’ve seen children—nine years old, 15 years old—cry because they had to be evacuated because of no access to clean drinking water; because they wanted to go home and, too, they wanted clean drinking water.

Even to this point, one of the things that happened, as well, because of where we are located was that the provision of, for example, dental services was zero. We had two deaths during COVID-19 because of dental

complications. Today, there are over 500 children on the wait-list for pediatric dental surgery.

This is how COVID-19 exacerbates the issues, the inequities that exist in the other Ontario, the other Canada. Meegwetch.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Robert Bailey: I’d like to add my thoughts and prayers, as well, to the member for Hastings–Lennox and Addington. I got to be a good friend of his here in the last three years, and like the member for Kitchener–Conestoga said, I’m sure it was a great pleasure for him to see his daughter elected to the House of Commons.

It’s also a privilege to rise today in the House to speak during the take-note debate on government motion number 6, which was moved by the Solicitor General of Ontario to review the Report on Ontario’s Third Declared Provincial Emergency from April 7, 2021 to June 2, 2021.

Mr. Speaker, as you are aware, the Emergency Management and Civil Protection Act requires that the government table a report in the Legislature in respect of any provincial emergencies required under the act. The report tabled by my colleague the Ontario Solicitor General includes information on orders made during that third declared provincial emergency, including why each emergency order was considered necessary at the time, which, as we all know, was done to protect the health and safety of individuals, families and communities from the threat of COVID-19.

As stated in the executive summary of the report, this report focused on the 56-day period that the third declared provincial emergency was in effect. It outlined the nine emergency orders that the Lieutenant Governor in Council made during this period as well as two emergency orders made during the second declared emergency that remained in effect.

This report is organized into two sections based on the challenges that the emergency orders addressed: (1) limiting the spread of COVID-19; and (2) the continuity of critical services to support vulnerable sectors.

Tabling this report was a very important step for our government in fulfilling its promise to maintain transparency in its decision-making during the pandemic.

I’m also fortunate enough to be a member of the Select Committee on Emergency Management Oversight, which has held regular meeting with the Solicitor General to review the actions of the government in response to the pandemic. This report, the work of the committee and the regular meetings of our Legislature have all been important tools to ensure that the people of Ontario remain informed of all decisions that are being made to support our province during these extraordinary times.

As a member of the Select Committee on Emergency Management Oversight, I’ve had the opportunity many times to hear from the Solicitor General, the Minister of Health and others on how the government approached developing the different emergency orders, so I’m glad to see a section of the report dedicated to that process. I want to read from that section briefly.

That report states, “All emergency orders made under the Emergency Management and Civil Protection Act were based on public health information and evidence available at the time, with the intent to address COVID-19 challenges while limiting intrusiveness.

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“The province considered the advice of the Chief Medical Officer of Health, the public health measures table, local medical officers of health and other partners across the system.”

Mr. Speaker, this is a very important point, and I’m glad that it is included in this report. The government has been following the advice of the medical experts and taking measured action to address the pandemic while also respecting the rights of Ontario’s residents. We are committed to doing what it takes to support the front-line response to the pandemic, avoid overwhelming our hospitals, protect our most vulnerable, help businesses and workers whose livelihood has been disrupted by COVID-19, and help keep Ontarians healthy and safe.

Before I continue, I’d like to say a thank you to all of the front-line workers across this great province, whether they be in health care, seniors’ care, education, the service industry, grocery, retail, law enforcement or construction. Everyone has done a tremendous job over the last 19 months adapting to the challenges that we’ve all faced during this pandemic.

I also want to thank everyone who is able who has gone out and received their doses of Health Canada-approved vaccines. I’d like to urge anyone who hasn’t yet, who’s vaccine-hesitant, to please go out and get their shots. Let’s get those numbers up as high as 90% or more.

The vaccination efforts of the province and our local health units have been truly amazing in such a short period of time. The first COVID-19 vaccine was administered in Sarnia–Lambton on January 26, 2021. Today, less than 10 months later, Lambton Public Health is reporting that they have administered nearly 189,000 doses to local residents, with over 79.1% of eligible community members being fully vaccinated. This is truly a remarkable achievement in such a short period of time.

Also, I’d like to mention the good news just announced this morning by the minister that Ontario’s GO-VAXX mobile vaccine clinic will be also be visiting Lambton country from October 29 to November 1 to help in the effort to get the vaccination numbers even higher. Mr. Speaker, I intend to support that in any way I can, through social media, maybe with my own presence and anything else I can do—PSAs on the radio etc.

Across the province, over 22 million vaccine doses have been administered and nearly 11 million people are fully vaccinated. Every single public health unit has delivered at least one dose of a Health Canada-approved vaccine to over 83% of its population.

As a government, we have been looking at this vital challenge from all perspectives to ensure that every Ontarian who wants to get their first or second dose of the COVID vaccine is able to as quickly and as easily as possible. To reach parts of the province where vaccination

rates are lower than the provincial average, we have been working with our partners to expand access to the vaccine through such methods as direct outreach from family physicians to their patient base, as well as popup clinics at convenient locations, such as workplaces and places of worship.

I know industry in my area was telling me the other day that we have a massive construction project going. There were around 2,500 people employed around the clock. The major employer, Nova Chemicals, brought the employees in for a regular work day, but also paid them \$100 each on top of that to get vaccinated. So I think that’s really buy-in by industry. They certainly are doing their part, and I know other industries and businesses across this province are doing the same.

It goes without saying that it wasn’t always easy to envision a time when the end goal would be so close at hand. Over the last 19 months, our government has worked day and night to ensure that everything was being considered and every tool being used to fight the virus and support the people of Ontario.

As I mentioned, one of those tools being utilized to ensure we have the best pandemic response was the Select Committee on Emergency Management Oversight. As a member of that select committee, I had a special interest in making sure this committee was doing the best work it could for the people of Ontario, and Mr. Speaker, if I could say so, I believe it did.

Now, as members may know, with the prorogation of one of the longest legislative sessions in recent memory, the previous select committee was dissolved. So I’m pleased the Solicitor General previously moved government motion number 1 early in the new session so that this Legislature could move to reconvene the select committee and begin once again the important work of that committee.

As a committee member, I can personally attest that the appearances of the Solicitor General before the committee were very insightful and that participation by all members of the committee has been very high. The emergency orders that we were reviewing and discussing at those meetings and that are included in the report we’re discussing today, with presenters like the Solicitor General, are extraordinary measures for extraordinary times, but it is these carefully selected and reviewed measures that are helping the people of Ontario and the communities of Ontario navigate our way through this pandemic.

I know the vast majority of Ontarians just want to understand and have confidence in their government’s combat of COVID-19.

I’m running out of time, I see, so I think what I’ll do is skip right through to talk a little bit about locally.

For example, a few weeks ago I had the opportunity to share with this House about the \$1.1-million investment in Pathways Health Centre for Children in Sarnia. This was a 24% increase to their annual budget.

I’ve also made announcements about long-term care, which certainly could use the money in Sarnia–Lambton, to the tune of \$3.5 million, which was part of our government’s commitment to ensure long-term-care residents

receive an average of four hours of direct care per day by 2024.

I'd also like to give a shout-out to Bluewater Health, who I work very closely with in Sarnia–Lambton, and their president and chief operating officer, Mike Lapaine, and their chief communications officer, Julia Oosterman, who I deal with on an ongoing basis. I know that we received money for Bluewater Health—the Petrolia campus, CEE hospital, in my hometown: \$1,349,000 for HIRF funding, otherwise known as health infrastructure renewal funding. That's going to go a long way to help that hospital be successful, as it has been for over 100 years.

With that, Mr. Speaker, I'll wrap up my remarks. I didn't get to do it all. But I'll submit it to the table anyway. Thank you.

The Deputy Speaker (Mr. Bill Walker): Further debate? I recognize the member from Brampton East.

Mr. Gurratan Singh: Thank you, Speaker. [*Inaudible*] communities by COVID-19, and on some of the most important issues that impact Brampton and Bramptonians, the Conservative government failed our city during the COVID-19 pandemic.

One of the biggest issues I talk about—and I've talked about it before and I'll talk about it again, and I won't stop talking about it until we finally have fairness in auto insurance.

We know the facts. We know that accidents were down across the province during COVID-19. We know that before COVID-19 we were paying some of the highest auto insurance rates in the entire country, and during COVID-19, when accidents were down, when people were driving much less—they were told to work from home and park their cars in their driveway or on the road—at that period of time, rates for auto insurance kept on going up.

It's important for people to know a very important fact: Rates for auto insurance only go up when this Conservative government allows them to go up. That means that, during this pandemic, during a period when people were working from home, the Conservative government allowed billion-dollar insurance companies to increase their premiums for Ontario drivers.

In the community of Brampton, we're one of the worst-hit by what we call unfairness in auto insurance, postal code discrimination, just for the mere fact that you live in Brampton, just because of your postal code. You could have a completely clear driving record, but because of your postal code, you are charged some of the highest rates in Canada and in this province. That's unfair.

The Conservative government has the mandate, they have the power, they have the ability to stand up to these insurance companies to ensure that their rates are coming down, but they didn't. Instead, they allowed and they supported the agenda of these billion-dollar insurance companies over everyday Ontarians, and especially during a time of pandemic, when people are driving less, it's even more egregious, it's even more problematic, it's even more unjust.

Let's keep in mind the track record. I put forward a bill, prior to the pandemic, to bring down auto insurance rates.

They voted my bill down. The Conservative government put forward their own piece of legislation, and ultimately, what happened? Nothing happened to our rates. Our rates continued to go up even during a pandemic, when people were driving less and their cars were parked at home and they were working from home. Even when traffic and accidents were at all-time lows, the Conservative government continued to allow billion-dollar insurance companies to take advantage of Ontario drivers. That's wrong, that's unjust, and we in the NDP have been fighting for drivers. We've been fighting to make sure that people have fairness with auto insurance premiums. But ultimately, the Conservative government voted no, time and again, at any opportunity we had to fight for Ontario drivers.

1650

Now, when we continue to look at the failures of this Conservative government for Brampton during this COVID-19 pandemic, we can look at one of the most important issues that impact our community: that's health care. We have been hearing about it across the board. Brampton was one of the worst-hit communities by COVID-19. We know that our health care system, which was already struggling before COVID-19, was put under undue pressure, really immense pressure, during COVID-19, during the height of when we were seeing so many hospitalizations and such high case counts.

At that time, when Bramptonians needed help the most, when we needed real action to fund our health care system, our broken health care system that's broken because of 15 years of Liberal neglect in our community—despite being in such a precarious situation, the Conservative government once again chose to do nothing.

What's worse? They made a huge announcement, they made all this fanfare around potentially bringing another hospital into Brampton. But when we looked at the budget of the Conservative government, not a single dollar—not a single dollar—was in Brampton's budget for this hospital announcement. There was so much confusion in the media and the community that the Premier actually had to come to Brampton to clarify his position. What was the position that he clarified? The hospital is going to come in 2023, after the next election. He chose a time of pandemic, he chose a time when Brampton was struggling at its worst, to make a political play, to make a political announcement for a hospital that not a dollar was slated for in this current budget. Instead, it was something after the next election he was promising. That is the kind of politics that turns people off of these institutions that we try to uphold. And that's the kind of agenda and track record we see from the Conservative government.

Instead of actually acting to help Brampton when we needed the help the most, the Conservative government and the Premier made an empty election promise. They promised to build a hospital in 2023, after the next election, instead of immediately funding our hospital and our health care system in Brampton during a pandemic.

It gets worse than that, Speaker. It gets worse than that. When we look at our schools, when we look at our public institutions, our public schools, what do we see? We know

that our public institutions, our public school systems are some of the most important institutions in Ontario, across Canada. It's really what makes Canada so amazing—the fact that you can go to a public school and get some of the best education in the world. But at a time, once again, when COVID-19 comes forward and we know that the ask from teachers is really clear—we need smaller class sizes; we need to have better ventilation; we need to hire more teachers; we need to ensure that we have more cleaning staff hired to ensure that our schools are safe—what do we see from the Conservative government? I think it was \$800 million, close to a \$1-billion cut to our education system, to our public education at a time where we need to be investing in our schools.

We saw, first-hand, the impact, and we continue to see it. We're continuing to see outbreaks that are now happening amongst our unvaccinated young people. The Conservative government had an opportunity, at a time where—despite the fact that their political base may not appreciate funding public institutions at a different period of time, but at a time of COVID, the Conservative government had the full opportunity to say, “We need to fund our public schools to keep kids safe.” But they didn't do that.

Instead, they brought an \$800-million cut to our public education. They refused to hire the teachers necessary to keep our children safe. They refused to hire the additional cleaning staff. They refused to invest in ventilation. They refused to hire more teachers in general—and the impact we're seeing even today, with outbreaks happening throughout our schools.

Now, we heard about this issue recently in the news, that the government is taking steps for truckers who have been struggling during the COVID-19 pandemic. In March 2020, when the measures came down initially to respond to COVID-19 and we saw people not knowing how to navigate COVID-19, in that period, people in my community reached out to me. Truckers in my community reached out to me. They talked about the fact that they were not getting access to the washroom.

In March 2020, I started raising the alarm bells about the fact that truckers need support. They need the ability to access washrooms. They need the ability to access restrooms, especially during COVID-19, when people need to keep their hands clean. We're seeing action now from the government around access to washrooms, and that's a good step, but we know that truckers need a lot more.

Access to washrooms is important. I've been fighting for this issue since March 2020, and that's a good step, but we know truckers need a lot more. Truckers need access to supports. They need access to services. They need access to paid sick days. They need everything and anything to ensure that they can work their job to the best of their abilities, because we know that because of these front-line heroes like truckers—because of them—we were able to make sure that our grocery stores were filled, that we had the resources and the goods that we needed to ensure that we could work from home, for those of us who did.

Truckers need, more than anything, especially in my community of Brampton, to live in a city that has an affordable lifestyle, affordable housing. They need access to good health care. Truckers need affordable auto insurance, because we know the insurance issue for truckers is devastating them. Fleet insurance is something that is impacting especially the smaller truck companies, and we've been seeing a lack of action from this Conservative government on that as well.

Speaker, there's so much more I could talk about, but thank you so much for hearing my thoughts in this short 10 minutes.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Mike Schreiner: It's an honour to rise to speak in this take-note debate on the declaration of a third state of emergency. I just want to begin by offering my sincere condolences to everyone who lost a loved one during this pandemic, and to offer my sincere thank you to all the front-line workers who have worked so hard in such challenging situations throughout this pandemic.

Speaker, as we debate the declaration of a third state of emergency, I think we need to pause to reflect and learn the lessons of this pandemic, especially the lessons of the third declaration. The first one is that when you're confronting a public health crisis—I'd argue when you're confronting the climate crisis, or you're talking about the need to follow evidence and protect people and property from things like flooding—you need to actually understand the science, respect the science, follow the science and respect the scientific experts who are helping to guide public policy. That failed to happen in the days leading up to the third wave of the pandemic.

On February 11, Dr. Brown, when asked if the province would open up too early, if that would lead to a disaster, said yes. On February 12, the next day, Dr. Jüni essentially confirmed that. But what happened? The province failed to follow the science, failed to listen to the public health experts, and we walked right into a third-wave disaster. It could have been mitigated. It could have been reduced. We could have saved people. We could have reduced the economic harm if we'd actually followed the science. But instead, an emergency brake had to be implemented on April 1, followed by a state-of-emergency declaration and a stay-at-home order on April 7.

The other lesson we have to learn is that when you are planning in a pandemic, when you are facing a crisis, you have to provide people with some time to plan. When it came to small businesses, especially restaurants, that timing didn't happen. According to the restaurant council, restaurateurs in Ontario lost over \$100 million just due to the flip-flopping between saying, “Hey, we can open,” and then they bought all the inventory, brought their staff back, incurred all those costs and, boom, they were shut down again. It shows you the importance of planning properly, of giving proper notice. So, as we think about reopening and expanding capacity limits in the fourth wave, we have to learn those lessons from the third wave.

1700

While we're talking about learning the lessons for small businesses, let's talk about the fact that small businesses in this province have an average debt of \$190,000, and they have not received a third round of the Ontario business support grant funding to deal with the third wave, let alone the fourth wave.

Mr. Speaker, I will continue to fight for small businesses. I will continue to push this government to deliver a third round of funding to support the small businesses who are still struggling from the third wave of the pandemic as we now move into the fourth wave of the pandemic. We have to ensure that we expand the eligibility criteria to cover off those businesses who still haven't even qualified, and we have to make sure the process works so those who do qualify actually get the money they need in a timely manner. I can tell you as a long-time small business owner that cash flow is everything when you're trying to survive. We need to deliver the cash flow to small businesses, because that is how we're going to get out of this economic downturn faster: by ensuring that the businesses that are already there stay alive.

We also need to make sure that we have a level playing field. The red carpet has been rolled out for big box stores and big businesses throughout this pandemic at the expense of small businesses. We even saw it just a few weeks ago, with the announcement of expanding capacity limits for the big entertainers. Once again, small businesses were left wondering why there isn't a level playing field for them. Moving forward, we need a government, we need public policy, that's going to say and recognize that small businesses are the vibrancy and vitality of our downtowns and our communities and make sure we have a level playing field and supports in place for our small businesses and our entrepreneurs and the people who contribute so much to our communities.

We also have to learn the lesson that when you're sick, you shouldn't have to choose between going to work or staying home, and keeping food on the table and paying the bills. When you're sick, you should stay home. You should be paid to stay home. You should be paid to stay home, because (1) you need to get well, and (2) it's the right thing to do, because whether it's COVID or the flu or a cold or something else, you don't want to spread that sickness to your workmates and your colleagues at work. So let's learn the lesson and bring in permanent paid sick days.

And let's learn the lesson that when the federal government provides you with funding that you can spend to help prevent the spread of the virus, you actually spend the money in a timely manner, because it makes so much more sense to prevent and mitigate the spread of the virus instead of spending the money after the fact. It's much better, cheaper and more effective to do it in a way that prevents rather than reacts to the crisis—and, I would argue, let's apply that to the climate crisis, as the international negotiations are coming up in a few weeks.

And finally, Speaker, I want to close by just saying that in a pandemic—I mean, I would say all the time, but

especially in a pandemic—you need to have policies in place that support, reward and respect the front-line workers who are caring for our loved ones. That means revoking Bill 124 so nurses can receive the pay raise they deserve—capping their wages is essentially the equivalent of a pay cut when you factor in the rate of inflation; providing permanent pandemic pay for personal support workers; ensuring that we have proper working conditions by having enough staff in our long-term-care homes and our health care system. We owe it to these front-line heroes to ensure that we have a retention and a recruitment strategy to ensure that we have enough people working on the front lines of our health care system.

I want to close by saying those are the lessons we can learn. I would call on the government to learn those lessons and act accordingly as we move forward to get through this pandemic and have a green and caring recovery in Ontario.

The Deputy Speaker (Mr. Bill Walker): Further debate? Further debate? Third time: Further debate?

There being no further debate, I declare the debate concluded.

Orders of the day?

Ms. Andrea Khanjin: Speaker, if you seek it, you will find we have unanimous consent to see the clock at 6.

The Deputy Speaker (Mr. Bill Walker): Is the House in agreement that we see the clock at 6 o'clock? Agreed.

PRIVATE MEMBERS' PUBLIC BUSINESS

MANDATORY COVID-19 VACCINATIONS IN THE EDUCATION AND HEALTHCARE SECTORS ACT, 2021

LOI DE 2021 SUR LA VACCINATION OBLIGATOIRE CONTRE LA COVID-19 DANS LE SECTEUR DE L'ÉDUCATION ET CELUI DES SOINS DE SANTÉ

Mr. Fraser moved second reading of the following bill:

Bill 12, An Act to enact the Mandatory COVID-19 Vaccinations in the Education and Healthcare Sectors Act, 2021 / Projet de loi 12, Loi édictant la Loi de 2021 sur la vaccination obligatoire contre la COVID-19 dans le secteur de l'éducation et celui des soins de santé.

The Deputy Speaker (Mr. Bill Walker): Pursuant to standing order 101, the member has 12 minutes for their presentation.

Mr. John Fraser: Thank you, Speaker, for your patience.

Families have been through a lot in the last 19 months: lost wages, lost time at school, lost time with loved ones. Too many people got sick. More than 9,800 families have lost a loved one.

Vaccines arrived. They have offered us new hope. We know that vaccines reduce the risk of transmission, disease, hospitalization and death. We also know that there

are many among us who are still very vulnerable: seniors, the immunocompromised, children under 12 who can't get vaccines yet.

That's why it's perfectly reasonable for families to expect that the person caring for a loved one in hospital, in home care—in any setting—has been vaccinated. It's also perfectly reasonable for parents to expect that the person who's helping their child at school or in a child care setting—that that person has been vaccinated, too.

That's why I brought forward Bill 12. Bill 12, would, if passed, make COVID-19 vaccinations mandatory for all front-line health care and education workers.

The bill is about protecting the most vulnerable among us. Mandating COVID-19 vaccines for those who work in our hospitals, our schools and our child care centres and other health care settings will help keep kids, patients, seniors and those who care for them safe.

The bill requires all education sector employees in the province, as outlined in the Education Act and the Child Care and Early Years Act, as well as health service provider employees referenced in the Connecting Care Act and Ambulance Act, to be fully vaccinated against COVID-19. The bill adheres to the Human Rights Code. The only exemptions apply to those workers who do not come into direct contact with other employees, patients or children—for example, someone working from home. It also includes training about the benefits and the risks of COVID-19 vaccines, and that's very important.

Organizations are required to abide by this mandatory vaccination policy. In the event of non-compliance, a medical officer of health can issue an order under section 22 of the Health Protection and Promotion Act. It essentially makes COVID-19 vaccinations in these organizations a public health order. The act would come into force 28 days after it receives royal assent in order to allow time for people to get their first or both doses.

Evidence shows that the best way to protect ourselves and our loved ones is to get vaccinated. Despite Ontario's high vaccination rates, the Delta variant has led to breakthrough infections that pose a threat, particularly to our seniors and those who are immunocompromised. Children under 12 remain unvaccinated. Hopefully, their vaccines will be approved soon. Even in the best-case scenario, most children won't be fully vaccinated and immune until next year. Having a standard of vaccinating all front-line health and education workers is simply going to protect people.

1710

Universal vaccinations for front-line workers in health care and education are nothing new. Here in Ontario, we've been doing them for about half a century.

For months, Ontario's nurses, Ontario's doctors, Ontario's hospitals, Ontario's school boards, Ontario's families have been asking the government to make vaccinations mandatory for front-line health care workers and education workers. Inexplicably, the government has delayed, dragging their feet, failing to take decisive action. Organizations, including hospitals and school boards, were forced to come up with their own policies. Some

made vaccines mandatory, but many struggled to develop their own policies. Instead of having these organizations' backs, like school boards and hospitals, and even long-term-care homes before a few weeks ago, the Premier's message to them was, "You're on your own."

Surprisingly, though, three weeks ago the government relented and made vaccines mandatory for workers in long-term care. At the October 1 announcement, the Minister of Long-Term Care said, "Residents and family members deserve to know the vaccination rates of those caring for them." He went on to say that while staffing might be impacted by this policy, "the priority has to be protecting the safety of the residents and of the safety of the other staff." The minister clearly stated that while they might lose some staff who are unwilling to get vaccinated, home operators are much more concerned with the implication of an outbreak. Instead of losing five or six staff who choose not to get vaccinated, they could lose 10, 20, or 30 staff who need to quarantine from an outbreak, maybe for a couple of nights, maybe for a couple of weeks. That's a big problem. He said, "From a human resource perspective, we've looked at this closely, this is a better approach. From a safety perspective, this is a better approach." So it's hard to understand why this better approach is not applicable to hospitals or schools or child care centres or someone being cared for at home. It just doesn't make sense.

The Premier said that he's unable to implement vaccination mandates across the health sector because it would lead to disruptive staff shortages and that could possibly compromise patient care. His own Minister of Long-Term Care has said that not having a mandatory vaccination policy could lead to serious staff shortages due to outbreak and the transmission of disease.

The CEO of the Ontario Hospital Association, Anthony Dale, disagreed: "A consistent provincial approach to health care worker vaccination is urgently needed to maintain adequate staffing levels across Ontario's highly interconnected and interdependent health care system...."

"Throughout the pandemic, the OHA has repeatedly learned that a system-wide response is most effective to combatting COVID-19."

Just yesterday, the COVID-19 science table said that hospital vaccine mandates can enhance safety and reduce the risk of staffing disruptions due to COVID-19, and that requiring that hospital workers be vaccinated is an evidence-based policy that protects Ontarians.

The Premier went so far as to say that approximately 15% of health care workers aren't vaccinated and vaccine mandates would lead to thousands and thousands of workers leaving their jobs. Well, the trouble is that the real-world evidence just doesn't show that. For organizations that have already implemented vaccine mandates, their vaccine rates are higher than what the Premier is suggesting—at the Children's Hospital of Eastern Ontario in Ottawa, 99% of full-time staff, almost 98% of part-time staff; Queensway Carleton Hospital, 98%; University Health Network, Ontario's largest hospital network, 97%.

A spokesperson at Hôtel-Dieu Grace in Windsor, who also mandated vaccines, said, “There has been no impact on the delivery of programs and services.”

In Ottawa, two school boards have gone forward and mandated vaccines for all their workers. The result: 92.6% of the staff at the Ottawa-Carleton school board and 93.7% at the Ottawa Catholic School Board are fully vaccinated.

Regina Bateson, a parent at Hopewell Avenue Public School in Ottawa, says it best: “We know that a single unvaccinated staff member who gets COVID is capable of spreading it to dozens of students who are not eligible for vaccinations.”

She goes on to say, “The ripple effects of that can be huge: shutting down entire classrooms or an entire school, disrupting hundreds of people’s lives, potentially resulting in other people getting seriously ill or dying. We have vaccines that are known to be safe and effective. So it strikes me that the question isn’t, ‘Why should staff be vaccinated?’ It’s, ‘Why shouldn’t they?’”

It’s the government’s job to set a standard, a target to achieve. Although voluntary vaccinations have yielded high vaccination rates, we know that our children and seniors are still at risk.

This morning, the Minister of Health, in response to my question about mandatory vaccinations said, “We did it in long-term care because so many bad things have happened there.” You didn’t do it in long-term care because so many bad things happened there; you did it in long-term care because people are vulnerable there. They’re vulnerable to breakthrough infections, and we saw what happened when that policy wasn’t in place over the summer with outbreaks and illness and death in some Ontario long-term-care homes.

The same principle that you’re applying in long-term care applies for a senior who’s in hospital, a senior who’s in home care or a senior who’s in a clinic, and I would argue that the same principle applies to a child under 12 who’s unvaccinated in a classroom or in a child care centre somewhere in Ontario.

I’d ask you to tell me that I’m wrong, to tell me that it’s not reasonable for parents to expect the person who’s helping their child to be vaccinated. I’d argue that someone over there tell me that, for your son or daughter, you would be comfortable with somebody being unvaccinated in school, and that’s not what you want. I think it’s a reasonable thing, and it’s very frustrating that the government has taken such a slow, incremental approach in the middle of a pandemic. It defies logic. It’s not about the setting as much as it is about the vulnerable people who are in it and their vulnerabilities.

I’d like to add one more thing. For months and months and months—it feels a bit like paid sick days—people have been asking the government to mandate vaccines for front-line health care and education workers—months and months and months. We can’t afford to waste the time that got wasted with paid sick days. Here’s the thing: If the government had set that standard, if the government had mandated those things, then they could have done the

thing that’s so difficult to do right now because they’ve jammed it right up against a timeline.

They could have done the things to support people who have questions they want to ask about COVID-19 vaccines. People deserve answers. They’re hesitant; they need to know. The government has to be aggressive in helping organizations build the capacity to do that because not all of them do, and we all know that. When you delay and drag your feet, you make it harder to achieve the thing you say you’re trying to achieve. When you do that, that leaves the vulnerable amongst us potentially unprotected, and that’s not acceptable.

The Deputy Speaker (Mr. Bill Walker): Thank you. Questions and comments? My apologies. Further debate?

Mrs. Robin Martin: Thank you, Mr. Speaker. You had me fooled there.

It’s my pleasure to rise to speak on Bill 12, the Mandatory COVID-19 Vaccinations in the Education and Health Care Sectors Act. COVID-19 vaccines are an issue of great importance to all Ontarians right now as they are an important tool as we continue to fight against the fourth wave of COVID-19 and the Delta variant.

Our government’s top priority has always been protecting the health and safety of Ontarians, and from the beginning of the pandemic Ontario’s approach to vaccination has been guided by expert advice and by conclusions drawn from data.

Since the launch of the COVID-19 vaccine rollout, 87.5% of the eligible population has received a first dose and 83.2% has been fully vaccinated. Approximately 700,000 health care workers have been fully vaccinated. Ontario’s COVID-19 management plan for schools was developed by medical leaders with one aim: to maximize safety and minimize the risk to children. We have the resources in place, from nursing to testing and enhanced screening and cleaning, to help prevent the spread, coupled with a comprehensive plan to respond to any challenge immediately and decisively.

1720

Our government has been clear: Nothing will stop us from having the most successful immunization campaign in the country. We are well on our way to achieving that goal, having administered over 22 million doses, more than any other province or territory. And while our government awaits Health Canada approval and any guidance and recommendations from the National Advisory Committee on Immunization for people under 12 years of age, work is under way to prepare for the coming administration of COVID-19 vaccines for children.

Because of these policies, Ontario has among the highest percentages, as I said, of people vaccinated, but now even among jurisdictions around the world. The success of this vaccine rollout has led to our case counts, which have remained comparatively low throughout the fourth wave and the Delta-driven variant coming here. We continue to strongly encourage people to embrace the opportunity to get their COVID-19 vaccine, and we’re pleased that so many people have taken up this opportunity at this point.

Mr. Speaker, I want to reiterate that nothing is more important to our government than the health and well-being of those living in Ontario. The Ontario government has shown leadership in taking progressive action to maximize the uptake of the COVID-19 vaccination for all education, health care, residential and congregate care workers. This action is part of an overall strategy for higher-risk settings in order to better protect patients, residents, clients and staff.

Our government has implemented strong measures to encourage vaccine uptake as part of our last mile strategy, which have yielded positive results. Since the last mile strategy was announced August 24, approximately 365,000 first doses and approximately 526,000 second doses have been administered.

In August, Ontario launched the GO-VAXX buses to provide Ontarians with easier access to first and second doses of the COVID-19 vaccine. The GO-VAXX clinics have now administered more than 10,000 first and second doses through smaller community-based and easy-to-access settings across southern Ontario and beyond.

The Provincial Vaccine Contact Centre has been calling Ontarians to book or rebook a first or second dose. Nearly 600,000 calls have been made, with more than 13,000 booking their first dose on the spot, 21,783 confirming a scheduled appointment elsewhere and more than 133,000 second-dose appointments booked or rebooked.

The Hospital for Sick Children has also set up a call line to answer questions about children and the vaccine from parents and expectant parents.

Since September 22, the government has taken further steps to keep Ontarians safe. The province has introduced additional measures in public settings to help keep the province open, stop the spread of COVID-19 and protect the health and well-being of all Ontarians.

Ontarians have also been required to show proof of vaccination as a new measure to support the reopening of the economy, help increase our vaccination rates, protect individuals in higher-risk indoor settings and hopefully—I think we all hope this—prevent any more lockdowns. Proof of vaccination has also provided an incentive for many to be vaccinated. In the weeks following the announcement of the proof of vaccination policy, the number of Ontarians receiving a first dose jumped by almost 25% over the week prior.

Last week, our government introduced the enhanced vaccine certificates with a scannable QR code for patrons and a free made-in-Ontario verification app called Verify Ontario for businesses and organizations to download for free, which can be used to scan the enhanced vaccination certificates.

These new tools, along with the existing public health measures, make it more secure and more convenient for individuals to provide proof of vaccination to enter certain higher-risk businesses or organizations. And thanks to a strong and successful vaccination program, Ontario has really been able to reopen our economy. We will continue to find the safest and most effective methods to protect vulnerable Ontarians, safeguard our hospital capacity and to secure a safe reopening of our economy.

The province, since the beginning of the pandemic, has a strong record for collaborating with key sector stakeholders to increase vaccine uptake, and will continue to work on this goal. As a result of this collaboration, public health units and publicly funded school boards are running voluntary vaccination clinics in or nearby schools to make vaccines even more convenient and accessible for eligible students, their families, educators and school staff returning to school.

To further protect those who face the highest risk from COVID-19 and the Delta variant, the government, in consultation with the Chief Medical Officer of Health, is following the evidence and recommendations from the National Advisory Committee on Immunization and will begin offering third doses of COVID-19 vaccines to additional groups that demonstrate a suboptimal immune response to vaccines on the basis of their underlying health condition, or their risk if, for example, they live in a congregate situation.

Ontario's cautious and measured approach is working, and key indicators are not only improving, but they are stabilizing. High rates of vaccination against COVID-19 are critical to helping protect our communities and hospital capacity while keeping Ontario schools and businesses safely open.

Here in Ontario, many hospitals have implemented mandatory vaccination policies, as our government has maintained flexibility for health leaders to do so if appropriate. The government has already issued requirements for COVID-19 vaccination policies in these sectors. These requirements have been issued with an emphasis on informed choice and promoting vaccination through a comprehensive campaign focused on education and myth-busting.

The Chief Medical Officer of Health, on August 17, issued directive 6, which sets out clear direction to public hospitals, home care and community service providers, and paramedics to establish vaccination policies. These policies require all employees, staff, contractors, volunteers and students to provide evidence of being fully vaccinated, or to have a properly documented medical exemption, or to have attended an organizationally approved education session about the benefits of the vaccine.

Directive 6 also stipulates that all employees, staff, contractors, volunteers and students who are not fully vaccinated against COVID-19 adhere to a regular point-of-care antigen testing regime, and must demonstrate the negative results of their test to their employer every seven days, at a minimum. Organizations covered by the directive can apply more stringent measures by removing the educational session and only requiring proof of being fully vaccinated or a medical reason for not being fully vaccinated, thereby supporting the organization to be responsive to its institutional circumstances, as well as the community context.

On September 7, the office of the Chief Medical Officer of Health also issued a letter of instruction which sets out similar requirements for the education sector.

The proposed bill puts forward the reassignment of non-vaccinated employees, staff, contractors, volunteers

and students to jobs that do not involve patient, client or student contact. Of course, the proposal assumes there would be a sufficient number of such positions available. In addition, any decision to do so needs to be weighed against the real risk of staff shortages that could compromise care in these settings.

Mr. Speaker, let me be clear: Every hospital worker should be vaccinated, and we encourage all of them to get vaccinated. In fact, the vast majority have. However, at a time when our doctors and nurses and other front-line health care providers are already stretched to their limits, especially in northern and rural areas, losing qualified staff has real and perhaps significant risks. We need to ensure that any decisions on mandatory vaccination policies do not have a negative impact on the health human resources we rely on, or in any way compromise patient safety.

Recognizing the complexity of this issue, the Premier has asked our top experts in the province for their feedback, and we are receiving and reviewing their feedback now so that we can assess any health human resource concerns before making any decisions on mandatory vaccination policies.

Speaker, our government's top priority has always been protecting the health and safety of Ontarians, and we have done this by having the most successful immunization campaign in the country, administering over 22 million doses. As we continue our last mile strategy to increase vaccination rates, the introduction of a vaccine certificate is an important step to encourage every eligible Ontarian to get their vaccine as soon as possible.

We continue to follow the expert advice given by the Chief Medical Officer of Health, Dr. Moore, and support his efforts in fighting COVID-19 in schools and hospitals. Even now, as we are debating this tonight, Quebec has recently delayed implementation of their vaccine mandate for hospital workers due to concerns about shortages, while BC has softened theirs.

1730

Ontario is doing better than other jurisdictions due to our extremely cautious approach. Currently, the province's public health and health care indicators remain stable or are improving. In fact, Ontario continues to report one of the lowest rates of active cases in the entire country, well below the national average, as we have trended toward the best case scenario projected in the last modelling update. Thanks to our strong and successful vaccination program, Ontario has been able to reopen our economy.

This is an important issue that's been raised and I think it's something that we need to get right. I would caution everybody to not run headlong into something, but to continue taking a cautious approach. There is no challenge that we can't overcome if we think properly and get this right. Thank you.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Ian Arthur: Speaker, congratulations on the Chair.

It's always an honour to stand and speak on the debate for Bill 12, brought forward by the member from Ottawa

South, and it is timely. In fact, one might say it's past due. One might even argue that we shouldn't even be debating a private member's bill right now but that we should have already passed a government bill on this subject to mandate vaccines for health care and education workers.

Throughout the pandemic, we keep returning to the same things of safety and responsibility: How do we keep people safe, and who is responsible for that safekeeping? The safety of the most vulnerable, our parents, elders, seniors, children and other people with medical conditions that make them more vulnerable to COVID-19, and responsibility of the employees to do what they can to protect those around them, Speaker—that responsibility lies with all of us and certainly with the employees who come in direct contact with the sick, the young and the elderly.

Most of us in Ontario are taking that responsibility seriously, and I applaud everyone who has taken proper measures and gone and gotten their vaccine. So many Ontarians sacrificed and took decisive actions, and they did so because they knew what it meant to be part of a collective, to take on that societal responsibility together and do the right thing. They understood that being part of a community means adopting best practices without delay to protect those around them who can't take those same actions.

We have a near consensus. Organizations, unions and businesses have led the way in mandating vaccines for their employees, and I have to question why this government is dragging its feet. This is not rushing headlong into something. This is something that should have been done a long time ago. This is a snail's pace towards mandatory vaccinations right now; it's not headlong, Speaker.

This government is refusing to mandate vaccinations for those employed in the health care and education sectors, and they're not even really creating an acceptable framework which they can go by. They are downloading the responsibility onto administrators, onto the administration in hospitals, onto school boards, principals and vice-principals to develop this and decide what they're doing in their own places of work.

The Premier likes to say that the buck stops at him. He also likes to say that he is a yes man, that he's out there saying yes. I think he needs to say "yes" to this bill, Speaker. Stop sloughing it off on those people, on those administrators. Step up. Do the job of being a Premier. Tell his caucus that he can support this bill. Pass it so that everyone else can be safe. It's well past time that this action was taken in Ontario.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Mike Schreiner: Speaker, I rise to speak in support of Bill 12. I want to be very clear: I believe people have the right to decide not to be vaccinated. But it is reasonable and responsible policy to ensure that we protect the most vulnerable by mandating vaccinations for health care and education workers. The science table says it's the right thing to do, and if the government were serious about avoiding shortages of health care workers, they would

improve working conditions and pay for front-line workers.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mrs. Belinda C. Karahalios: If passed, Bill 12 will continue to see people lose their jobs, as we have seen for three years as a result of this government destroying our economy, fearmongering and pressuring public and private sector employers to fire people. For three years, this government, which once promised to grow our economy, has enacted policies and regulations and more red tape that has resulted in record job losses and business closures, and this bill will only continue that trend.

What this bill does is a one-size-fits-all model, as any exceptions have been proven to not apply, and it rams through this one-size-fits-all model, increasing the fearmongering, increasing the intolerance towards those who are not comfortable disclosing their private medical or vaccine status. It vilifies millions of people, tells them they can't be participants in society and results in animosity between Ontarians pointing the finger against a group of people for their own personal medical choices. It is no one's business why someone doesn't want to or can't get vaccinated.

COVID-19 is no joke for those who are high-risk, but neither is it a joke to coerce people into disclosing their medical status and to have them fired from their job. So, because of that, I will not be supporting this bill.

The Deputy Speaker (Mr. Bill Walker): Further debate? I apologize to the member for Niagara Falls—a rookie mistake. I turn the floor to the member from Niagara Falls.

Mr. Wayne Gates: I thought it was just because I was short, maybe. I wasn't really sure what the problem was.

Anyway, I want to rise and talk about this bill, but I also want to talk about something that was said about 10 minutes ago about how the number-one priority for the government is the health and safety of workers in the province of Ontario. If you cared about workers in the province of Ontario, you wouldn't have brought Bill 124 into the province of Ontario. You would have made sure that those workers are being compensated properly. You would have made sure their collective agreements were being followed.

Do you know that we have nurses, health care workers and education workers who got no vacation because of Bill 124? They've had to work seven days a week. They've had their shifts moved around. We have a crisis. Do you know what we have a crisis in when it comes to health care workers? We have a crisis in that they have post-traumatic stress disorder in the workplace in record numbers, my friends, and a lot of this stems from Bill 124.

And then, if you're thinking about compensation—because I heard a question today around compensation for the Conservative Party—do you know that Bill 124 caps their benefits at 1% and their salary at 1%? We all know that. I think even this side of the House knows that. Do you know what the inflation rate was last month? It was 4.8%. That means that for everyone who's affected by Bill

124, guess what happens? It's a 3.8% cut in their wages as they're fighting COVID-19, as they're risking their lives going into work every single day.

I'm going to give you an example real quick. I might not get to education. I've only got a few minutes here, and I know my whip makes sure I stay within my time limits, but I want to talk about a place and why we need to make sure that people are vaccinated when they go into facilities. I'm going to talk about a long-term-care facility real quick, where they had an unvaccinated contract employee enter the long-term-care home. It happens every day—some are trained; some are not trained. Then we saw it spread to two floors. She goes to work, has COVID, performs her job for about two or three hours, and infects the entire second and third floors. Think about that: seniors, loved ones, people's moms and dads. Guess what happened? They got COVID-19. But do you know what else happened? They died. They called my office, saying, "My mom was perfectly healthy before that contract employee came in with COVID-19, because she was unvaccinated."

I want to ask you on that side of the House, as you're going to probably vote against the bill: Do you think it's right that your mom or dad, your grandparent or your aunt is in a facility being taken care of, whether it's retirement, long-term care or in our hospitals, and they're not vaccinated, and my mom or dad dies because of it? How can you say that you think that's right? That's what happened in this place.

I'm saying to you guys, come on. We have to protect workers. We have to protect our family members, our grandparents. You decide not to. You stand up here every day—I could talk even more about Bill 124 and what you've done with not taking care of seniority rights, vacations, their benefits. They're burned out. But the one thing that they should know when they go to work—does anybody know what it is? Maybe the member who brought the bill forward: Do you know the one thing they should know? That when they go to work, they're going to be safe, they're going home to their family and they're not going to spread COVID-19 to a patient or to our moms, our dads or our grandparents.

1740

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mr. Rick Nicholls: First of all—it should come as no surprise—I will be voting not in favour of this particular bill, and I'll tell you why: because I've heard from hundreds of people in the health care profession and in education who are saying that they don't want the vaccine and if they don't get it, they will lose their jobs. I don't want to see a manufactured health crisis in this province.

What changed from yesterday to today? I have no idea. I can't get a straight answer. People are very, very frightened over the fact that they're going to lose their job because their employer will not give them the choice of vaccine or no vaccine, and I'm very, very concerned about that.

I'm also hearing from students right now who are saying, "I can't do my final semester because they won't

let me go in, because I'm not vaccinated." Well, I've got news for people here: The vaccinated people are carriers as well. I hear that only the unvaxxed are carriers and you catch it from the unvaxxed. That's hogwash. It can, in fact, be—you know, it's important.

My time is up, but I wanted to get those points across.

The Deputy Speaker (Mr. Bill Walker): Further debate?

Mme France Gélinas: I thought I would give some real-life examples of what a mandated vaccination would do.

I would like to bring the case of Janice Innocente—actually, her mother. Her mother lives in my riding—in Dowling, to be precise—and receives home care. She has been receiving home care for quite a while. She discovered that her home care worker was not vaccinated, and she became quite worried. She is elderly, has a number of significant health issues and is very immunocompromised. So she phoned the health care agency and asked, "Could you make sure that you only send to my house workers who are vaccinated?"

What happened after this is rather sad. She got a phone call from her home care provider telling her that she was no longer eligible for services through that particular company. They did not give a reason. The only problem is that this is the only company that provides home care in that part of Nickel Belt. So she finds herself with no more access to home care.

This is what her daughter said:

"I truly feel that the service provider is negligent in their behaviour and their vaccination policy. It doesn't seem right that seniors and others with compromised health issues who require assistance at home are not given an option as to who provides their care and are kept safe by having mandatory vaccination policies in place for all health care providers in that setting."

She goes on to say, "I'm wondering, as are many others that I've spoken with, what is making the government so reluctant to mandate this vaccine? It seems negligent, and it gives the impression that our elected officials are pandering to a few rather than taking a stand for our greater good." That's from Janice Innocente in my riding.

I would also like to put a few words on the record from another home care patient. Her name is Diane Sims. Diane is a palliative care patient who receives home care. Although she is palliative, she has no interest whatsoever in having the short remaining time she has cut short because she could contract COVID-19 from one of the home care workers who comes to her house.

Mrs. Sims is in contact with 12 different home care workers every week. She knows that three or maybe four of them are not vaccinated. Her doctor became quite worried and wrote the following letter:

"I wish to bring to your attention that our mutual patient Diane Sims remains at high risk for complications and death should she acquire COVID-19. These risks exist despite the fact that she has been vaccinated. This is because of her multiple chronic medical conditions which impact her immune system.

"It must be made very clear that I do not support the exposure of my patients to unvaccinated health professionals under any circumstances. Such exposure constitutes a grave danger to her health." It's signed by her family physician, Sean Blaine.

The family physician wrote to the home care providers to tell them how important it was to protect this patient, but to this day she is facing the same hurdle as my previous client, who said that she has to make the painful choice of choosing to have home care—which she needs, and she qualifies for many hours a day—or having her partner, Dennis, fill in for everything else. She needs toileting regularly. She needs transferring in and out of her chair. She needs intensive home care. Dennis has had to cancel the workers who have been coming in who are not vaccinated and pick up the work himself.

"I'm not alone," she said. "There are about 35 of us" in the same situation. "Ms. Sims is adamant. 'All home care workers must be vaccinated.'"

The Deputy Speaker (Mr. Bill Walker): Further debate?

Ms. Mitzie Hunter: It is my honour to rise today to support the Mandatory COVID-19 Vaccinations in the Education and Healthcare Sectors Act, put forward by my colleague the member from Ottawa South. Today, Speaker, I will be voting with my heart, because one of my constituents, Greta Ifill, sadly passed away as a patient in hospital, having acquired COVID from an unvaccinated health care worker. Our community is still grieving her loss.

Workplaces are safer when everyone is vaccinated. Today, Sharleen Stewart, the SEIU president, said that what the policy lacks is consistency. There's no direction from the government, so every workplace is different, and it's hard to protect people in those circumstances.

When you look at the health care and education sectors, they are the most vulnerable, they are the most at risk and they are the most infected sectors. Young people between the ages of zero and 17 represent one in four in the infection rate for COVID-19, and it is actually increasing. Between September 15 and 18 and September 19 and October 2, it has actually almost doubled. When we look at child care settings, infection rates are high. But where it's not high is in long-term care, because there, there are mandatory vaccinations, and therefore the one thing we have to protect people, to keep them safe, is vaccinations.

It is the responsibility of this government to protect the citizens of this province, in particular those who are the most vulnerable, who are in our education and our health care systems, and to keep them safe. Do your job. Support this bill—and really, you should be doing a government-sponsored bill. I will be voting with my heart today in support of the member from Ottawa South's bill.

The Deputy Speaker (Mr. Bill Walker): I return to the member from Ottawa South for a two-minute reply.

Mr. John Fraser: I'd like to thank all the members who spoke. I'm not going to mention everybody by riding; I know we normally do that, but there were a lot of members who spoke today. It's amazing how we can

disagree over here but co-operate on the five minutes of time that we have, so I'd like to thank my colleagues here in particular.

Our job here is to hear the voices that are hard to hear. Anything I can say right now is not going to surpass what the member from Niagara Falls and the member from Scarborough–Guildwood said. They brought those voices here. They talked about the real-world consequences of not having mandatory vaccinations for front-line health care workers and education workers. This is what happened to real people with families, with sons and daughters, with friends. Not having this policy in place led to people getting sick and dying. It's a real story—it's not just something we say in here—and if there's any reason that you should be voting for this bill, it's that reason.

The Deputy Speaker (Mr. Bill Walker): The time for private members' public business has expired.

1750

Mr. Fraser has moved second reading of Bill 12, An Act to enact the Mandatory COVID-19 Vaccinations in the Education and Healthcare Sectors Act, 2021. Is it the pleasure of the House that the motion carry? I heard a no.

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

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

In my opinion, the nays have it.

A recorded division being required, the vote on this item of private members' public business will be deferred until the next proceeding of deferred votes.

Second reading vote deferred.

The Deputy Speaker (Mr. Bill Walker): All matters relating to private members' public business have been completed. Pursuant to standing order 36, the question that this House do now adjourn is deemed to have been made.

ADJOURNMENT DEBATE

ACCESS TO MENSTRUAL PRODUCTS

The Deputy Speaker (Mr. Bill Walker): The member for Kiiwetinoong has given notice of dissatisfaction with the answer to a question given by the Minister of Education. The member has up to five minutes to debate the matter, and the minister or parliamentary assistant may reply for up to five minutes.

I turn to the member from Kiiwetinoong.

Mr. Sol Mamakwa: Meegwetch, Speaker. I say meegwetch for the time tonight to speak on the inequity of the Ontario program for free menstrual products in schools. As you know, this morning I asked the Minister of Education why it is that the menstrual products being offered for free to all school boards in Ontario are not available to First Nations school boards. Is it because they're First Nations? Is it because we're brown? I talk about this a lot, but why is it okay for this government to create a program that discriminates against First Nations schools, First Nations students? First Nations women have periods, too.

After this program was announced, my office had requests from school boards servicing First Nations who wanted to participate in this program. When my office asked the minister's office, "How are the school boards able to access these products?"—that was my question—their response was pretty much that each school board "has been provided with an allocation of product, which will be delivered to school boards by the province. On October 8, 2021, the ministry issued a memorandum to school boards regarding distribution and delivery instructions."

Then, my next question was, "Are these products available to school boards that service First Nations in Ontario?" The response was, "The announcement ... provides menstrual products to Ontario's provincially funded school system. As funding for K-12 education on-reserve is provided by the federal government through the Department of Indigenous Services Canada, we would look to the federal government to provide equivalent support to First Nation and federally operated schools." That was the response. As I understand it, this is a public-private partnership and why these are not provincial dollars.

Norma Kejick, executive director for the Northern Nishnawbe Education Council, had this to say about First Nations schools being excluded:

"It is with disappointment that we see jurisdictional issues once again create a division between provincial and First Nations schools and students.

"Minister Lecce's announcement regarding Ontario launching free menstrual products in schools recognizes period poverty. The same issues regarding period poverty and access to menstrual products greatly impact First Nations students."

She goes on to say, "During what is considered by First Nations to be a sacred time, no one should be feeling shame, be left without access to menstrual products or having to sacrifice other essentials to afford the products they require.

"The lack of access to menstrual products can have the same negative impacts for First Nations students as those identified for students in provincial schools.

"It is quite unfortunate that a public/private sector agreement did not see the need to address the issue for all students in Ontario, but rather only for those who attend provincial schools."

I ask you to reconsider and include us; include First Nations students in the rollout of the program. The need is real. Please reconsider and say you will look into it.

The Deputy Speaker (Mr. Bill Walker): I recognize the parliamentary assistant to the Minister of Education.

Ms. Christine Hogarth: Mr. Speaker, we're proud of our commitment to students in every publicly funded school board in Ontario to provide free menstrual products. By partnering with Shoppers Drug Mart, we're ensuring that 18 million free menstrual products, 1,200 dispensers, are provided to school boards over three years. It is the latest step this government is taking to combat period poverty.

OCSTA president Patrick Daly applauded our commitment on October 8 when he said that the government's decision to begin a program that will support the distribution of six million free menstrual products per year to school boards is a welcome step addressing an issue of equity that has resulted in students experiencing period poverty in Ontario's schools.

Keith Baybayon, president of the Ontario Student Trustees' Association, added that period poverty is a "problem that needed to be solved a long time ago. Seeing these products distributed within our schools allows our students to feel more safe and more included within their school communities."

What's more, Mr. Speaker, is that this will impact all students who need access to these hygiene products, including Indigenous women and girls within publicly funded schools in Ontario. In the 2020-21 school year, 46,106 students in Ontario's publicly funded schools self-identified as Indigenous. This government is encouraged that over 46,000 students who identify as Indigenous will have access to these essential hygiene products.

Our government's commitment to Indigenous students and learning goes beyond this announcement. This fall, our government announced an updated Indigenous curriculum that will see mandatory Indigenous-focused learning added to social studies, grades 1 to 3 curriculum. This means that the ministry is investing almost \$24 million from Priorities and Partnership Funding in targeted supports for First Nations, Métis and Inuit studies, in addition to existing funding for school boards in the 2021-22 school year.

In addition, the Ministry of Education recently approved sustainable multi-year funding agreements for an investment of \$3.19 million over three years to strengthen existing partnerships with the Chiefs of Ontario and First Nations provincial territorial organizations and provide stable funding for the length of the agreement.

The Métis Nation of Ontario is also receiving \$850,000 in 2021-22 towards collaborating with school board administrators and educators in the learning of Métis knowledge and the integration of this knowledge into Indigenous education programs and initiatives.

We are also providing multi-year funding for three years starting in 2020-21, for a total of \$406,000 for the River Program, an alternative secondary school program that provides academic and cultural supports to Métis students.

In 2021-22, the Indigenous Education Grant in the Grants for Student Needs is \$96.7 million, with the following allocations:

—Indigenous language allocation, \$14.7 million: supports elementary and secondary Indigenous language programs from junior kindergarten to grade 12;

—First Nations, Métis and Inuit studies allocation, \$59.6 million: supports secondary First Nations, Métis and Inuit studies courses;

—board action plans allocations, \$22.4 million: funds the implementation of programs and initiatives that support the academic success and well-being of Indigenous students, as well as build the knowledge of all students and educators on Indigenous histories, cultures, perspectives and contributions.

1800

Mr. Speaker, our government is committed to supporting Indigenous student achievement and well-being. First Nation partners have expressed that the need for an enrolment notice, which can only be signed by a parent or guardian, created an obstacle for students seeking to attend a school under the Reciprocal Education Approach, preventing access to school for some First Nation students.

The REA will reduce barriers for First Nation students and their parents when they make the important choice about which school system best fits their needs.

The REA framework was developed in collaboration with Ontario First Nation partners and school board associations to help meet the unique needs of the First Nation students, particularly students from northern and remote communities.

Our government has taken action with the amendment to the Education Act that will reduce red tape and improve access to education for First Nation students. Beyond these supports, we know that every student in Ontario deserves access to free menstrual products, including Indigenous students.

While our commitment ensures that access to fully funded school boards for the province, we are continuing to advocate for Indigenous students within the federally run schools because we agree with the member opposite: All children should gain access to these products so they can remain learning in schools. That is why the ministry has been advocating for weeks to the federal government, which oversees First Nations schools in this province, to match our commitment to provide free menstrual products for students in those federally regulated schools. We ask the members opposite to join us in our ask to the federal government to help—

The Deputy Speaker (Mr. Bill Walker): Thank you. There being no further matters to debate, I deem the motion to adjourn to be carried. This House stands adjourned until 9 a.m. tomorrow.

The House adjourned at 1801.

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McKenna, Hon. / L'hon. Jane (PC)	Burlington	Associate Minister of Children and Women's Issues / Ministre associée déléguée au dossier de l'Enfance et à la Condition féminine
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	

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Mulroney, Hon. / L'hon. Caroline (PC)	York—Simcoe	Minister of Francophone Affairs / Ministre des Affaires francophones Minister of Transportation / Ministre des Transports
Natyshak, Taras (NDP)	Essex	
Nicholls, Rick (IND)	Chatham-Kent—Leamington	Chair of the Committee of the Whole House / Président du comité plénier de l'Assemblée
Oosterhoff, Sam (PC)	Niagara West / Niagara-Ouest	
Pang, Billy (PC)	Markham—Unionville	
Park, Lindsey (PC)	Durham	
Parsa, Michael (PC)	Aurora—Oak Ridges—Richmond Hill	Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
Pettapiece, Randy (PC)	Perth—Wellington	
Phillips, Hon. / L'hon. Rod (PC)	Ajax	Minister of Long-Term Care / Ministre des Soins de longue durée
Piccini, Hon. / L'hon. David (PC)	Northumberland—Peterborough South / Northumberland—Peterborough-Sud	Minister of the Environment, Conservation and Parks / Ministre de l'Environnement, de la Protection de la nature et des Parcs
Rakocevic, Tom (NDP)	Humber River—Black Creek	
Rasheed, Hon. / L'hon. Kaleed (PC)	Mississauga East—Cooksville / Mississauga-Est—Cooksville	Associate Minister of Digital Government / Ministre associé délégué de l'Action pour un gouvernement numérique
Rickford, Hon. / L'hon. Greg (PC)	Kenora—Rainy River	Minister of Indigenous Affairs / Ministre des Affaires autochtones Minister of Northern Development, Mines, Natural Resources and Forestry / Ministre du Développement du Nord, des Mines, des Richesses naturelles et des Forêts
Roberts, Jeremy (PC)	Ottawa West—Nepean / Ottawa-Ouest—Nepean	
Romano, Hon. / L'hon. Ross (PC)	Sault Ste. Marie	Minister of Government and Consumer Services / Ministre des Services gouvernementaux et des Services aux consommateurs
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)	Brampton West / Brampton-Ouest	
Sarkaria, Hon. / L'hon. Prabmeet Singh (PC)	Brampton South / Brampton-Sud	President of the Treasury Board / Président du Conseil du Trésor
Sattler, Peggy (NDP)	London West / London-Ouest	Opposition House Leader / Leader parlementaire de l'opposition officielle
Schreiner, Mike (GRN)	Guelph	
Scott, Laurie (PC)	Haliburton—Kawartha Lakes—Brock	
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 Energy / Ministre de l'Énergie
Stevens, Jennifer (Jennie) (NDP)	St. Catharines	
Stiles, Marit (NDP)	Davenport	
Surma, Hon. / L'hon. Kinga (PC)	Etobicoke Centre / Etobicoke-Centre	Minister of Infrastructure / Ministre de l'Infrastructure
Tabuns, Peter (NDP)	Toronto—Danforth	
Tangri, Hon. / L'hon. Nina (PC)	Mississauga—Streetsville	Associate Minister of Small Business and Red Tape Reduction / Ministre associée déléguée aux Petites Entreprises et à la Réduction des formalités administratives
Taylor, Monique (NDP)	Hamilton Mountain	
Thanigasalam, Vijay (PC)	Scarborough—Rouge Park	
Thompson, Hon. / L'hon. Lisa M. (PC)	Huron—Bruce	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
Tibollo, Hon. / L'hon. Michael A. (PC)	Vaughan—Woodbridge	Associate Minister of Mental Health and Addictions / Ministre associé délégué au dossier de la Santé mentale et de la Lutte contre les dépendances
Triantafilopoulos, Effie J. (PC)	Oakville North—Burlington / Oakville-Nord—Burlington	
Vanthof, John (NDP)	Timiskaming—Cochrane	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Wai, Daisy (PC)	Richmond Hill	
Walker, Bill (PC)	Bruce—Grey—Owen Sound	Deputy Speaker / Vice-président

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
West, Jamie (NDP)	Sudbury	
Wilson, Jim (IND)	Simcoe—Grey	
Wynne, Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	
Yakabuski, John (PC)	Renfrew—Nipissing—Pembroke	
Yarde, Kevin (NDP)	Brampton North / Brampton-Nord	
Yurek, Jeff (PC)	Elgin—Middlesex—London	
Vacant	Don Valley East / Don Valley-Est	

**STANDING AND SELECT COMMITTEES OF THE LEGISLATIVE ASSEMBLY
COMITÉS PERMANENTS ET SPÉCIAUX DE L'ASSEMBLÉE LÉGISLATIVE**

Standing Committee on Estimates / Comité permanent des budgets des dépenses

Chair / Président: Peter Tabuns
Vice-Chair / Vice-président: Vacant
Teresa J. Armstrong, Toby Barrett
Lorne Coe, Rudy Cuzzetto
Randy Hillier, Christina Maria Mitas
Judith Monteith-Farrell, Lindsey Park
Michael Parsa, Randy Pettapiece
Peter Tabuns
Committee Clerk / Greffière: Thushitha Kobikrishna

**Standing Committee on Finance and Economic Affairs /
Comité permanent des finances et des affaires économiques**

Chair / Président: Vacant
Vice-Chair / Vice-président: Jeremy Roberts
Ian Arthur, Will Bouma
Stephen Crawford, Catherine Fife
Ernie Hardeman, Mitzie Hunter
Logan Kanapathi, Sol Mamakwa
Jeremy Roberts, Dave Smith
Vijay Thanigasalam
Committee Clerk / Greffière: Julia Douglas

**Standing Committee on General Government / Comité
permanent des affaires gouvernementales**

Chair / Président: Vacant
Vice-Chair / Vice-président: Mike Schreiner
Jill Andrew, Robert Bailey
Will Bouma, Guy Bourgouin
Chris Glover, Mike Harris
Logan Kanapathi, Sheref Sabawy
Amarjot Sandhu, Mike Schreiner
Daisy Wai
Committee Clerk / Greffier: Isaiah Thorning

**Standing Committee on Government Agencies / Comité
permanent des organismes gouvernementaux**

Chair / Président: Gilles Bisson
Vice-Chair / Vice-président: Aris Babikian
Deepak Anand, Aris Babikian
Gilles Bisson, Lorne Coe
Wayne Gates, Robin Martin
Norman Miller, Billy Pang
Amanda Simard, Marit Stiles
John Yakabuski
Committee Clerk / Greffière: Julia Douglas

**Standing Committee on Justice Policy / Comité permanent de
la justice**

Chair / Président: Daryl Kramp
Vice-Chair / Vice-présidente: Lucille Collard
Lucille Collard, Christine Hogarth
Daryl Kramp, Natalia Kusendova
Jim McDonell, Suze Morrison
Randy Pettapiece, Donna Skelly
Gurratan Singh, Effie J. Triantafilopoulos
Kevin Yarde
Committee Clerk / Greffière: Thushitha Kobikrishna

**Standing Committee on the Legislative Assembly / Comité
permanent de l'Assemblée législative**

Chair / Président: Vacant
Vice-Chair / Vice-président: Vijay Thanigasalam
Rima Berns-McGown, Goldie Ghamari
Faisal Hassan, Michael Mantha
Jim McDonell, Sam Oosterhoff
Laurie Scott, Vijay Thanigasalam
Jeff Yurek
Committee Clerk / Greffière: Valerie Quioc Lim

**Standing Committee on Public Accounts / Comité permanent
des comptes publics**

Chair / Président: Taras Natyshak
Vice-Chair / Vice-présidente: France Gélinas
Deepak Anand, Toby Barrett
Jessica Bell, Stephen Blais
Stephen Crawford, Rudy Cuzzetto
France Gélinas, Christine Hogarth
Taras Natyshak, Michael Parsa
Amarjot Sandhu
Committee Clerk / Greffier: Christopher Tyrell

**Standing Committee on Regulations and Private Bills / Comité
permanent des règlements et des projets de loi d'intérêt privé**

Chair / Président: Vacant
Vice-Chair / Vice-président: John Fraser
Aris Babikian, Lorne Coe
John Fraser, Vincent Ke
Laura Mae Lindo, Paul Miller
Billy Pang, Jeremy Roberts
Dave Smith, Daisy Wai
Jamie West
Committee Clerk / Greffier: Isaiah Thorning

**Standing Committee on Social Policy / Comité permanent de
la politique sociale**

Chair / Président: Vacant
Vice-Chair / Vice-présidente: Bhutila Karpoche
Aris Babikian, Jeff Burch
Amy Fee, Michael Gravelle
Joel Harden, Mike Harris
Bhutila Karpoche, Natalia Kusendova
Jeff Yurek
Committee Clerk / Greffière: Tanzima Khan

**Select Committee on Emergency Management Oversight /
Comité spécial de la surveillance de la gestion des situations
d'urgence**

Chair / Président: Daryl Kramp
Vice-Chair / Vice-président: Tom Rakocevic
Robert Bailey, Gilles Bisson
John Fraser, Christine Hogarth
Daryl Kramp, Robin Martin
Sam Oosterhoff, Tom Rakocevic
Donna Skelly, Sara Singh
Effie J. Triantafilopoulos
Committee Clerk / Greffier: Christopher Tyrell