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LEGISLATIVE ASSEMBLY
OF ONTARIO

Thursday 4 November 2021

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Jeudi 4 novembre 2021

Report continued from volume A.

1430

PROVIDING MORE CARE,
PROTECTING SENIORS,
AND BUILDING MORE BEDS ACT, 2021

LOI DE 2021 VISANT
À OFFRIR D'AVANTAGE DE SOINS,
À PROTÉGER LES PERSONNES ÂGÉES
ET À OUVRIR PLUS DE LITS

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

Bill 37, An Act to enact the Fixing Long-Term Care Act, 2021 and amend or repeal various Acts / Projet de loi 37, Loi visant à édicter la Loi de 2021 sur le redressement des soins de longue durée et à modifier ou à abroger diverses lois.

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

Ms. Effie J. Triantafilopoulos: I'd like to thank the member opposite for her remarks. Like many of us, I know that she is also concerned about care for seniors in long-term care. She referred to our government's commitment, where we are enshrining four hours of direct care, as a stretch goal.

I'd like to quote to you from Lisa Levin, the CEO at AdvantAge Ontario, where she says it's "a watershed moment for long-term care in Ontario.... It is putting dollars exactly where they need to be—increasing frontline staff to improve care for residents....

"More staff means more care, and that is what truly matters."

As well, quoting from Smokey Thomas, president of OPSEU: "We are glad to finally see a government that is following up on its words and doing something."

Would the member opposite care to respond to those two individuals?

Mrs. Lisa Gretzky: My response to that is, how many residents or family members did you talk to about the fact that it will be years—years—before your average—

The Acting Speaker (Ms. Jennifer K. French): Through the Chair.

Mrs. Lisa Gretzky: My apologies; through the Speaker—before the average—average, not standard—must-do four hours of hands-on care comes into place? Because I can tell you, I've talked to a lot of people. You talk to Maureen, whose mom recently died in long-term care, and she will tell you that that would have done

nothing for her mother, or the other resident who just died in that home.

You talk to Esther and Emily, whose poppa just passed away in a home, who wasn't getting the care that he needed, the hands-on care, and it's not the fault of the workers; it's the fault of this government and the government before them, who refused to immediately legislate four hours of hands-on care.

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

Mr. Ian Arthur: I look forward to be able to contribute to the debate shortly, but to the member: She spoke and handed across copies of what our plan for long-term care was, and she highlighted a lot of the gaps in the government's piece of legislation, the one that we're currently debating. I wonder if she would highlight some of the things that we're fighting for that this government could actually adopt right now that would make life better for people in long-term care.

Mrs. Lisa Gretzky: I think immediately they could pass my colleague's bill the Time to Care Act. They could pass my More Than a Visitor Act. They've got opportunities to do that. We've even asked for unanimous consent to have it pass immediately, and every time they've shut it down.

They could immediately start phasing the profit out of long-term care. Instead of making transfers to for-profit agencies that are making millions of dollars that they're giving to their shareholders, as I pointed out earlier, they could have taken that money that they gave to them and put it back into actual hands-on care for residents.

Or here's an idea: How about compensating families—although there is no financial number you could put on losing a life—but how about you try to financially compensate the families whose loved ones died in long-term care because this government didn't make sure that there was proper PPE or infection prevention and control, or that they weren't jammed into rooms, that they were getting fed, that they were getting water? Those are immediate investments this government could make, and they're not doing it in this bill.

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

Ms. Donna Skelly: Thank you for the presentation from the member from Windsor West. The member was critical about our government's handling of long-term-care access for visitors, extended family members, when the pandemic first broke out.

It's very easy, I think, to sit in this Legislature today, almost 18 months after the pandemic first broke out

globally, and forget that there was no playbook. We didn't have vaccines. We didn't even have access to Ontario-made PPE. We inherited a mess, as you indicated, from the previous government. They neglected it for 18 years.

Why would you subject a person in long-term care, who is extremely vulnerable—and allow members of the general public to access a facility without being vaccinated, without proper PPE, and not expect those people to suffer?

Mrs. Lisa Gretzky: I appreciate the member for Flamborough–Glanbrook bringing that up. What I will tell you is, family members are not members of the general public. That is something this government doesn't seem to understand. They're not just visitors; they're more than visitors. They're essential caregivers. They provide care that no front-line staff could ever provide, no matter how many of them are in there. They make sure that the residents are getting the medications they're supposed to get and when they're supposed to get them. And there have been numerous medical experts and science experts who came forward early on in the pandemic and told this government—and advised me on my bill, as it was being developed—how to make sure that those visits were safe.

Had this government stepped up in the beginning instead of dragging their feet, we wouldn't have had to worry about residents having PPE or workers having PPE or their essential caregivers having PPE, because the government would have made sure that already happened. This is their failure.

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

Ms. Doly Begum: Speaker, in this House, I've talked about Reed—which is an example similar to the example of my colleague—who spoke so beautifully and passionately about the work she has been doing for so many years now for long-term care. Reed's grandmother died in a long-term-care home. He had to write a note in English to say, "Please give my grandmother hot water," because she was not getting water. When she died—it was so heart-breaking to even accept the fact that a loved one is dying from dehydration, from malnutrition. None of this is addressed in this bill.

There are so many questions I could ask. Maybe I will give the opportunity to the member to talk a little bit about what could have been done in this bill to provide the support that Reed's grandmother and many other people needed in long-term care.

Mrs. Lisa Gretzky: I appreciate the question from my colleague from Scarborough Southwest. I apologize; that's a very emotional question for me. I am going to get emotional, because I've talked to many families who have experienced the same thing.

What could have been done and can still be done, and it could be put in this bill—or they could pass my bill tomorrow—is, this government could ensure that the rights of residents are enshrined in law, that they never again will be denied access to their families; to ensure that they're getting water when they need it; to ensure that they are getting their incontinence product changed when it

needs to be, rather than sitting in their own urine and feces for hours; making sure that their basic care—those things that we take for granted—making sure that those residents are having their needs met. Because no family should ever have to feel like they didn't do enough and that it is their fault that their family member died.

The Acting Speaker (Ms. Jennifer K. French): I recognize the member from Flamborough–Glanbrook.

Ms. Donna Skelly: I want to continue. I'm actually quite surprised at the response to my query earlier, when the member from Windsor West suggested that she had no problem with members of extended families going into these facilities at the onset of this pandemic.

You speak about the number of people who died in these long-term-care facilities, and yet, you're standing here today, saying you would have subjected these vulnerable people to more visitors bringing in, potentially, the COVID-19 virus and perhaps killing more people.

You're suggesting that that is the route you would have taken. We had to prevent that from getting into these facilities. Think back 18 months—

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

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Ms. Donna Skelly: My question again is, would you really have subjected these vulnerable people to allowing unvaccinated extended members to come into these facilities, heightening the risk of fatalities?

Interjections.

The Acting Speaker (Ms. Jennifer K. French): The House will come to order.

Response.

Mrs. Lisa Gretzky: Again, I will say that these family members are not just the general public. They are essential caregivers. Would this government rather have seen what has played out? Is that what you're telling me, that what happened is acceptable?

The Acting Speaker (Ms. Jennifer K. French): Through the Chair.

Mrs. Lisa Gretzky: Are you telling me that what was in the military's report is acceptable, that people dying because they couldn't get water is acceptable?

I'm telling you, Speaker—and I'm backed by medical experts and scientists that will tell you the same thing—those essential family caregivers could have entered safely, just as safely as the staff were entering, had this government stepped up and made sure there was PPE for everybody.

The Acting Speaker (Ms. Jennifer K. French): Before we resume debate, a reminder to all members to address the Chair, direct all remarks through the Chair, and the heckling from both sides will stop or members will be asked to leave.

Further debate?

Mr. Sherif Sabawy: I have the privilege to rise this afternoon in this chamber to speak about Bill 37, Providing Care, Protecting Seniors, and Building More Beds Act. On behalf of the people of Mississauga–Erin Mills and Ontario, I really feel that this specific subject is

very dear and very important to all of us, and I'm honoured, actually, to speak about that bill specifically.

I know that lots of the discussions going back and forth on both sides are on long-term care during COVID, but that's not the issue. The long-term-care problems or issues have been there far before COVID. COVID just put focus on it, shed some light on the problem, how deep the problem is, but the problems have been there. I will tell you, in a few minutes, my own experience with this was long before COVID.

I think this bill is a good step towards fixing the long-term-care issue. Speaking and voicing this government's approach to fixing long-term care is something that will continue to be a passion for my fellow MPPs. I'm sitting on this side of the House, and for many years we have been talking about the issues with long-term care. Neglect by the now independent Liberals, supported by the NDP as well, left the system shattered. I know that this bill and the work we have been doing to fix long-term care is truly the path required to ensure the system is fixed for generations to come.

Over the last several months, I have witnessed the great work the Minister of Long-Term Care has been doing to bring real and positive change to Ontario's long-term-care sector. I have also spoken to the minister about his focus to ensure seniors currently living in homes across our great province experience the best quality of life.

I know, in my own riding, long-term-care facilities have thanked me and thanked this government for working so hard to ensure they have the resources they need to continue delivering the best quality of care necessary to the residents living in our homes. They have been thankful to finally see a government that is putting this much work and real resources into a sector that was neglected for so long.

Madam Speaker, we have to understand that even building long-term care will take years. It's not going to be fixed tomorrow. It can't be fixed in a year. It will take years.

Families have been in touch with me and my office, thanking this government for the work we have been doing to ensure that those living in long-term care receive more care and have a better quality of life. I want to reassure families in Mississauga and across this province that this government is listening. This bill is truly a reflection of our desire to work with you to fix our system for many generations to come.

Let me speak to those living in long-term care and to the families with loved ones in long-term care: We are with you. We understand your concerns. We are working night and day to ensure that you and those you love are supported. Thank you for trusting this government to fix long-term care. I hope that my fellow opposition MPPs stand up for the families and long-term-care residents, and support this bill to ensure we fix the system for the coming years.

Madam Speaker, before I get into the specifics of this bill and our three pillars around staffing and care; accountability and transparency; and building safe, comfortable,

modern homes for our seniors and what it will all mean for the people living in our long-term-care homes, allow me to speak a bit personally.

I am originally from the Middle East. I was born and raised in Egypt, and as a member of the Coptic community, I was taught from a very young age that seniors are taken care of by the family. They are an integral part of the family and the community, the society and every circle. Be it a church, a mosque, a cultural group, we are all in the circle. I was taught that we must treat our aging seniors with the support they truly deserve. I was also taught by those around me that with love, support and family, we can help those aging parents and grandparents live life with the dignity and respect they deserve.

Personally, I was privileged to support my late dad through his final years of life. My family and I were indeed present in his life to the very end. And I am now the primary caregiver to my mom, who has been and continues to be of extreme importance to me and my family. My father's experience, and the support he received from my family and I, continues to be a guiding path for me when dealing with issues around aging and seniors.

My experience taking care of my aging parents is not a unique experience. People across our province do it every day. I understand the struggle that these families face every day as they witness the health challenges of aging parents and grandparents. I understand those concerns and challenges, with everyone busy with life, busy with work, busy with day-to-day activities, and I am working to ensure that we can help in a small way on this side.

When aging, people go back to their original grid, their original language, their original culture. They go back to their loved types of food, loved types of music. If I can imagine myself, Madam Speaker, as an aging senior: I wake up in the morning, and all of a sudden, I cannot recognize any of the people around me. I cannot understand any of the people talking to me. Not only this, but even—what I feel will be my feeling in this moment—not talking as well about the needs I'll need as a senior: for someone like a PSW to give me a hand in the critical primary activities of my day-to-day life.

That's why in my own community we're looking to establish the first Arabic-speaking, culturally appropriate Coptic long-term-care facility in Ontario. I believe that our seniors deserve to live and thrive in the language, culture and food that they have known their entire lives. Even just the people who are taking care, people from the same culture can understand them, can comfort them, can make them feel better. However, our previous government never delivered on their platitudes. Their walk was never as big as their talk when it comes to culturally appropriate long-term care.

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Today, we as a government have been working with the ethnic and the religious communities across the province to help build homes that cater to a specific language, culture or religion. Those homes, I believe, will help seniors live

a better quality of life, help with the cultural and community bonds and ensure we are taking care of our seniors in the best conditions possible.

Madam Speaker, the waiting lists for long-term care homes are enormous, which causes also, many times, in losing some hospital beds as there are no long-term-care beds to discharge patients to. Talking about my personal experience, my father-in-law had broken his leg. After they stabilized his case, we were looking for a long-term-care bed to go through rehabilitation. It was close to impossible to get that, and we ended up having to accept a bed in another city, basically. We had to have a 45-minute to an hour drive to get there. Thank God it didn't take too much time, like a couple of months, and he managed to go home. But I can't imagine if that continued to be the case for many years. This is very difficult.

This government, Speaker, is indeed addressing this very important issue in our approach to fixing long-term care. Allow me today to focus on the building modern homes pillar in our plan to fix long-term care. Let me start with the basic numbers. For those that know Mississauga, our population has grown tremendously since 2003. We have had a population change that reflects the growth that this province experienced in the years since. Mississauga had a population of 600,000 people in 2003; today, we are around one million. This growth was ignored by the previous Liberal government and their NDP friends. For example, in my riding in Mississauga–Erin Mills, in the last 10 years of the previous government, zero net new beds were built in my riding.

Today, we have been working hard to ensure that new facilities are constructed to help our aging population. The Ivan Franko Homes village development in Mississauga is being allocated 43 new spaces and 85 upgraded spaces. The project will result in a 128-bed home through the construction of the new building in Mississauga as part of a campus of care in my riding. They are offering services for generally the community but specifically for the Ukrainian community.

We're allocating 220 long-term-care beds for Trillium Health Partners; allocating 320 new long-term-care beds to a seniors' care partnership project between Indus Community Services, Trillium Health Partners and Yee Hong Centre for Geriatric Care; allocating 137 new beds to Schlegel Villages Mississauga project and upgrading 55 long-term-care beds. A new health centre will be built in Mississauga with 220 long-term-care beds and a hospice centre that includes 10 residential beds and space for community-based hospice programs.

I am proud to say that, since 2018, we have been working extremely hard to build more beds, more homes in our community. We currently have 1,377 new beds in the development pipeline in Mississauga alone. That's 1,377 seniors—and families—who will have a long-term-care home, surrounded by friends and family. This is truly extraordinary. For those listening at home, this speaks to our government's commitment to build more beds and ensure that long-term-care beds are available to seniors

when and where they need them, and at the same time cater to their needs as our population ages in Ontario.

Mississauga is just a small example of how we are working as a government to help ensure that the system is fixed for our seniors. We as a government made a promise to build 30,000 net new long-term-care beds by 2028, and with the support of community organizations, long-term-care operators and people who care for our seniors, we are getting the job done. I know we are getting the job done when I speak to local operators and I see how they are delivering the best care possible for our long-term-care-home residents.

Allow me to share an example from the heart of Mississauga–Erin Mills. I am proud of the diverse population we have in Mississauga and Ontario. In my riding, the Ukrainian community have supported their aging seniors and have built the Ivan Franko seniors' residence, which under this government was granted a licence to build 43 new beds and redevelop 85 beds to help ensure that a new state-of-the-art long-term-care facility is built to help seniors in Mississauga. The individuals who manage the facility have had a tough job during the pandemic. Those PSWs, nurses, doctors and other front-line heroes who braved the virus to ensure that the seniors living at Ivan Franko were protected during the various waves of the pandemic are rolling up their sleeves and saying, "Let's do more for our seniors. Let's work with this government to ensure that those living in the facility have a way to live with dignity in a long-term-care facility that is modern and indeed safe for them and their families."

I want to thank George Horhota and Olya Vovnysh from Ivan Franko for their work to ensure that these beds will be built on time and will help alleviate the long-term-care wait-list in our community.

I would like to speak about Ivan Franko and share a story about the first time I visited the facility in the spring of 2018. I recall speaking with seniors and the passionate individuals managing the facility, like Olya. At the time, they expressed that their mission and goal is to ensure that every senior receives the basic quality of care possible. I toured the grounds of the facility and saw the apple orchard and beautiful gardens that surround the home. The facility felt like a warm and loving environment. That's exactly why I have been a supporter of this home in my riding. I know that with the support they provide to our seniors, they help families ensure that their loved ones are protected and that their needs, both personal and medical, are being met while living in this facility.

I know that Ivan Franko is not the only facility to provide this level of great care in our riding. The Village of Erin Meadows and Silverthorn Care Community are another two great homes that have been able to provide high-quality care for our seniors in Mississauga. I am proud to say that they, through my office, work with this government to fix the long-term-care sector in this province. All together, those three homes in my riding currently operate 425 beds and, recently, I was proud to share that, together, the homes were getting an extra \$1.5 million for staffing

this year alone. By 2024-25, they will be getting \$9.2 million more every year.

1500

This bill is certainly a step in the direction that will help fix long-term care. The bill is part of a larger plan to fix the neglected sector. I know that over the next several months, the Premier, the Minister of Long-Term Care and our entire caucus will continue to focus on this sector. Although I don't have the time to speak about the other pillars in this bill, I am proud to say that we are fully focused to build more homes, to ensure we provide the best quality of care to our seniors and to, most importantly, ensure that they are aging with dignity, respect and the support they truly deserve in their aged years.

Allow me to invite members of the opposition to support this great piece of legislation.

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

Mrs. Jennifer (Jennie) Stevens: Some might ask, where are the shortfalls of this bill? Where does one start, may I say? Long-term care has seen cuts, they've been underfunded, and residents in Ontario have seen privatization of long-term care continuing to grow at a fast pace. I've heard, during this debate, this government continue to highlight the vast underfunding and neglect by the previous Liberal government, contributing to the cost of this pandemic: lives that were needlessly lost. However, inaction from this government has made long-term care worse.

They're reducing comprehensive investigations. Not one single fine from the Ministry of Long-Term Care for breaking rules during COVID-19 was even seen. Will this government commit to issuing fines retroactively to the bad players and the operators so families that lost their loved ones can have some peace and healing?

Mr. Sheref Sabawy: Thank you very much to the member opposite for the question. I am not sure about the retroactive part. I am saying that this bill, and the majority of its aspects—I can't dig into every detail of it—is definitely making more insights for the government and the governing bodies to be able to investigate in those long-term-care homes. Again, I would like to say that long-term care has been a problem. Everybody in this Legislature knew about it. It's not new. It's just that COVID made it come to the top lines and made it the focus of interest. But definitely, yes, I agree that we have to have oversight to make sure that people do their jobs.

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

Ms. Andrea Khanjin: The member talked about the hardship that he went through, being a caregiver for both his dad and his mom. I know that wasn't very easy to talk about. But can you say, from your first-hand experience—not only talking to constituents, but you living the role—how important it is to have options for health care for seniors and what this bill is going to mean for that next generation of people that are going to have to go through similar experiences as yourself?

Mr. Sheref Sabawy: Thank you very much for your question, my colleague. It actually touches a very sensitive point about long-term care. The long-term-care waiting lists reached a point where some of the long-term-care homes actually put conditions to accept the patient. I have been negotiated with, saying, "We'll give you the bed if you sign consent that you will take him home after two months." Like, it's two months. "You sign that, we'll accept him. If you don't sign for the two months, we don't have a bed." The negotiation arrived to a point where you can accept unacceptable conditions just to get going.

I think any step that will be done to solve this problem is a step in the right direction.

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

Mrs. Lisa Gretzky: The member for Mississauga–Erin Mills talked about giving money to Schlegel Villages to redevelop and build beds, and I would like to talk about the history of Schlegel Villages. In my riding, the Village at St. Clair during the pandemic, in December 2020—it's important to note, Schlegel Village and the Village at St. Clair, that's a for-profit home and a for-profit company. They had an outbreak of 177 residents and 143 staff members, starting in December 2020, and 63 residents died. The home was severely short-staffed. They were short-staffed going into the pandemic. They had to get volunteers to come in and help.

We called on the government to step in and take over management. Instead, I had to work with the hospital to go in and take over the management. I want to thank the management at Hôtel-Dieu Grace Healthcare for their leadership in doing that and the team that stepped in to do that. Meanwhile, families and essential caregivers were not allowed into the home, and they could have helped care for their loved ones.

This goes back also to the question from the member for Flamborough–Glanbrook. As they're letting volunteers, actual general public, in to help in this home, essential caregivers were locked out. So why are you—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Response?

Mr. Sheref Sabawy: Again, of course, it's unfortunate that there was this outbreak, and it's not the only one. Outbreaks happened in many of the long-term-care homes and even hospitals. I had somebody from my constituency yesterday for an hour on the phone saying that her dad had a very successful operation. The operation was successful, but he went home with COVID and he died after a week after the operation—but the operation was good. She's saying that this is because of some neglect from the hospital or not controlling the pandemic or whatever. We know that we are in a pandemic. We know that we had a problem. Even, in some cases, some provinces asked for the army to step in to help because it was out of control. So I can't speak about that incident specifically, but of course, it's unfortunate. I agree with the member on the other side.

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

Ms. Doly Begum: My question to the member—and I listened to the member speak about his personal experience as well. My question is simple, Speaker: Does the member believe that care should be about profit or should it be about care itself? Because if it is about care, then why are he and his government giving money to these long-term-care homes that were so cruel—

Mrs. Lisa Gretzky: Negligent.

Ms. Doly Begum:—negligent to loved ones of so many family members in Ontario?

Mr. Sheref Sabawy: Thank you very much for your question. As you can see in my speech in the past 20 minutes, I'm actually for non-profit organizations, for cultural-based supports, because it's not only just a job; it's community taking care of their elders. I understand that model, and I am for it.

But, again, alienating operators who have been in the industry or have been fulfilling some sector, I don't think is the right thing. We have to give the choices to the parents, to the families of those aging people, where they want them. We understand that the government might not be able to fulfill 100% of the cost of building new homes, building new beds and managing them—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Question?

Ms. Effie J. Triantafilopoulos: I would like to thank the member for Mississauga—Erin Mills for his very moving remarks. I also can very much relate to the cultural responsibility that one feels to our seniors, our elders, our parents and grandparents.

As you know, we inherited the system that the Liberal government had built, and that was very much decades in the making, the system that currently has us having close to 40,000 people on a wait-list. Investing in beds did not keep up with the aging population in our province. I wonder if the member could just describe to us what our government is doing through this legislation to fix long-term care.

1510

Mr. Sheref Sabawy: Thank you to the member from Oakville. She has been very instrumental in helping us respond to the constituents from our ridings when questions came about long-term care.

I would just say a very simple thing: We are allocating 30,000 new beds. We have been three years, per se, in government—three years; 30,000. The whole allocation for Ontario in seven years of the past government was 640 beds. I got 1,084 beds to Mississauga—Erin Mills by itself, not 640 beds for the whole of Ontario in seven years. I think that reflects exactly what this bill will do.

The Acting Speaker (Ms. Jennifer K. French): We don't have time for another round of questions and comments.

I beg 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 Mr. Ke assumes ballot item number 18 and Mr. Pettapiece assumes ballot item number 34.

Further debate?

Mr. Ian Arthur: It's an honour to stand in the Legislature today and talk about this bill and the long overdue goal of trying to improve long-term care in Ontario, a goal that I'm skeptical whether this bill is actually going to achieve. I don't actually believe that it's going to make life better for someone living in long-term care today, tomorrow or even a year from now, two years from now or a decade from now.

Since the beginning of the pandemic, nearly 4,000 seniors have died alone in the midst of a humanitarian disaster. Some have died of neglect, dehydration and a lack of care. In a developed country, in Canada, in Ontario, this happened.

People living in for-profit care homes paid the biggest price in this province. According to the government's own science table, for-profit long-term-care homes had twice as many COVID infections and 78% more deaths than not-for-profit homes, and they're still being given money by this government to continue operating and continuing to conduct themselves in the way that they had before and that led to this crisis.

I do want to be clear that these problems didn't start or end with COVID-19, and I think it's important to talk about how we got to where we are if we're going to debate the effectiveness of Bill 37, Providing More Care, Protecting Seniors, and Building More Beds Act in addressing whether it will actually do what it purports that it's going to do.

Conservative and Liberal governments have cut, underfunded, understaffed and privatized long-term care for years, handing over care to corporations that work to keep staffing levels low and profits high. This has been going on for nearly 30 years, Speaker.

It began in the 1990s with the Common Sense Revolution that laid the groundwork for the senseless losses that we saw over the last 18 months. During that time, 9,000 hospital beds were closed; 5,000 of them were chronic care beds. Care was shifted for the chronically ill away from hospitals and into long-term-care homes—an increasing segment of those LTCs being for-profit. This is the first time that for-profit homes really rose in Ontario.

In the midst of this, the government cut the regulations, allowing the facilities to cut their staffing levels. And let's make note of this, because this is going to be really important when we talk about the effects of the pandemic down the road. There were consequences, Speaker, and they didn't take that long to actually appear. I would like to draw the Legislature's attention to the May 2008 Sharkey report, a review that was carried out for a seven-month period between October 2007 and April 2008. That was a long time ago. That report sounds remarkably similar to the reports that came out after the pandemic—remarkably, over a decade ago.

During that time, the review team held extensive consultations and conducted in-depth literature review to inform their decision-making process. The mandate of the

review was to provide advice on the development of a comprehensive framework for determining the human resource implications related to the quality of care and the quality of life experienced by residents in long-term-care homes in Ontario. The framework addressed, at a minimum, issues related to capacity of human resources, needs-based requirements of residents, quality of the work environment and quality of the management of LTC homes.

Shirlee Sharkey, the author, wrote, "It is crucial that we get the whole package correct. Otherwise we might have a lot of staff and a lot of hours, but very bad quality of care and quality of life." Unfortunately, we didn't actually get a lot of staff, and we didn't get a lot of hours, and we definitely didn't get quality of life or quality of care, despite that report. Her recommendations in 2008 recommended four hours of hands-on care, training and recruitment of PSWs and the owners' accountability for the outcomes of what happened in those homes.

That's a shocking idea, Speaker, that the owners of for-profit long-term-care homes actually have to take accountability for what happens in their homes under their watch. They really haven't ever had to do this, and this government has actually made it easier for them to avoid that accountability, as we have seen post-pandemic.

In 2008, unfortunately, Premier McGuinty's health minister buried that report. They ridiculed it. They ridiculed its very premise.

I just want to remind the House of the consistency of the NDP's call to action on long-term care. I point to the MPP from Nickel Belt, who at that time spoke of the need for four hours of personal care per resident. That was a long time ago. We've been calling for the same thing again and again and again. We called for it when this government was first elected, and they failed to do it. They only did it when things became so bad, and it is certainly a stretch goal.

Then we fast-forward to 2014, when the last Liberal government, including Kathleen Wynne and Steven Del Duca, leaned into the expansion of privatization of long-term care, further eroding the quality of care and the quality of life for our loved ones, all while lining the pockets of massive corporations. They cut inspections. The NDP shamed them into reinstating them, but they were cut again. They blocked a full inquiry into LTC so they could keep the problems that the sector was facing under wraps.

Then, in 2018, a new government came in with a chance to change the trajectory of long-term care in Canada and Ontario. But we didn't see that actually happen. We tragically saw that inspections were cut, that the cuts continued, that underfunding of the long-term-care sector continued. A pitiful nine out of 626 long-term-care homes were inspected in 2019. Prior to the pandemic, this government cut millions of dollars from LTC.

When COVID hit and ever since, including today in the Legislature, I've heard so many times that this was such a wake-up call, that there was shock at the state of long-term care in Ontario. Calls to fix the system abounded. We knew, though, that things were wrong. The Liberals knew.

The Conservatives knew. They went back and forth. They knew what was wrong with it, and all of them failed to take action until it was too late—too late for the nearly 4,000 people who lost their lives in long-term care.

And now we know again. We know through the report by the Canadian Armed Forces which detailed the horrendous conditions in long-term-care homes in Ontario. We know through the report from the Auditor General that stated it was obvious that "aggressive infection prevention, detection and patient care actions were needed—and needed quickly—to prevent staggering death rates" in the LTC community and were not achieved in time under this government's watch. They were not achieved in time under this government's watch.

And we know, through a report by the Parliamentary Budget Officer, that Canada would need a minimum of \$13.7 billion in immediate spending, and then a 4% increase per year, to be able to keep up to the demand and the aging population. Speaker, Ontario's portion for that would be a little less than \$5 billion in spending.

Now, these are just a few of the reports that we will see, all pointing to a similar conclusion: that we need extensive investment in long-term care, and that the quality of care in public long-term-care homes outpaces the quality of care in for-profit long-term-care homes. There has been remarkable consistency as to what needs to be done for almost 30 years, and yet we don't do it. We keep seeing governments, continuous Liberal and Conservative consecutive governments, investing in the very sort of care that we know does not deliver the outcomes we actually want to have in this province. I am extremely skeptical that Bill 37 is going to actually do what it says it's going to do.

1520

The government moved like mud in 2020, if we are being completely honest, Speaker. They moved like mud when they saw COVID spreading, and they failed to get the steps done in time to prevent the horrible loss of life that we experienced in this province. COVID was spreading, and the years of underfunding were brought into sharp focus. Staffing was so short that staff were moving in and out of different homes, bringing COVID with them from one to another, and that's not those staff people's fault; that is the fault of this government, who refused to immediately take action to prevent staff from working in multiple homes. They could have done that. They could have prevented long-term-care homes from refusing to give employees enough hours to actually live on the wages they were earning, pushing them to go into multiple homes just to make their own bills, their own financial obligations at home. That's shameful. That was a really simple thing this government could have done immediately. We asked them to do it extremely early in the pandemic, and they refused. They absolutely refused to do it when it was the critical point in time that it needed to be done.

Facilities grappled with PPE shortages. There was a member opposite who stood up and proclaimed how Premier Ford showed up at her door with PPE so that she could go and help in one of these. While I applaud her for

going in and helping with the pandemic, it shouldn't take the Premier delivering you PPE to know you have access to it at a place of work. Doesn't that actually point to the shortcomings of the approach and the response to COVID, that in order to know you have PPE going into a job, you have to have the Premier deliver it to your house; that it wasn't just an expectation that if you're going and being on the front lines during COVID, you would be adequately protected at your place of work? It's absolutely shameful, Speaker, and I'm not sure it's something that the member opposite should particularly be bragging about in this Legislature.

This happened all over the place. Locally in my riding, people were scrambling for PPE. The reason we didn't have the PPE was the stockpiles we had after the last scare, the MERS and the SARS scare, had actually expired and not been replaced by this government. Again, under this government's watch, they could have easily bought more PPE. They knew the stockpiles were expiring. They knew what steps it would have to take to actually source replacement PPE. If they had been on the ball, they would have done that before the start of the pandemic.

People did step up—community members stepped up, volunteers stepped up—to help in long-term-care homes. In my riding, volunteers sewed reusable gowns and masks for Kingston community midwives so as not to divert PPE away from hospitals and long-term care homes. Registered nurses donated gowns made of Tyvek when they heard that supplies were running in short supply. Our restaurants and dentists donated the gloves and masks they had for food preparation to make sure, again, that there were adequate supplies of PPE, and local breweries transitioned to making sanitizer. These are heroic stories, Speaker. They are heroic stories, but they should have never had to do that. It was the government's responsibility, the government of the day, to make sure that there were adequate supplies in these places, to actually do that.

The outcomes of our generational failure on LTC were laid bare during the pandemic. The Canadian Armed Forces report is worth noting on the record, Speaker, because that is the state that Bill 37 is claiming to address, and I believe that it's incredibly important to recognize that.

I'm only going to read a brief portion of this, and I'm going to talk about Orchard Villa, which, remarkably, has just applied for a 30-year extension to their licence. It's actually the family members of those who lost loved ones in that particular long-term-care home who have had to retain legal counsel to try and prevent this 30-year extension from going ahead under this government.

From that report, under "Infection control":

"(a) Lack of cleanliness noted:

"(1) Cockroaches and flies present; and

"(2) Rotten food smell noted from the hallway outside a patient's room. CAF member found multiple old food trays stacked inside a bedside table.

"(b) Inappropriate PPE use noted throughout all staffing levels (doctors included); and

"(c) Poor IPAC/PPE practices (double/triple gowning and masking, surgical mask under N95, scarves under masks etc.)

"Standards of practice/quality of care concerns:

"(a) Patients being left in beds soiled in diapers, rather than being ambulated to toilets;

"(b) Mouth care and hydration schedule not being adhered to;

"(c) Lack of proper positioning (head of the bed raised) for meals/fluids;

"(d) PSW and nurses aren't always sitting up residents before feeding/hydrating/giving meds; choking/aspiration risk is therefore high; includes observation of incident that appeared to have contributed in patient death (code blue due [to] choking during feeding while supine—staff unable to dislodge food or revive resident)....

"Respecting dignity of patients not always a priority. Caregiver burnout noted among staff....

"(f) Unsafe nursing medication administration errors;

"(g) Staff putting food and important belongings outside of residents reach....

"(h) Nurses appear to document assessments without actually having assessed the residents;

"(i) Incident of likely fractured hip not addressed by staff...."

It goes on and on, Speaker. It is absolutely horrifying. I cried the first time I read that, and it's hard not to cry reading that again—to think we treated people in our province with such disrespect.

I actually googled this morning, in preparation for this, "Is Orchard Villa still open?" I googled it because I couldn't imagine in what world you could find people treating other people like that and still get to operate. That's actually when I found out that they're in the midst of applying for a 30-year extension to their operating licence.

I'm going to read from an article in the Toronto Sun:

"Families Fight Licence Renewal for Orchard Villa LTC Home

"Families of Orchard Villa were justifiably horrified to learn that the Ford government is considering giving Orchard Villa a new 30-year licence and expansion.

"With the help of the Ontario Health Coalition, the families sought a legal opinion on the matter.

"Steven Shrybman of Goldblatt Partners LLP last week made his view clear that renewing the licence for Orchard Villa is a non-starter.

"Citing the rules laid out in the Long-Term Care Homes Act (LTCH) act, Shrybman stated it is 'impossible to reconcile the history of past conduct (at Orchard Villa) with the standards clearly delineated in the act.'"

I stood in June 2020 and asked the then Minister of Long-Term Care if she would commit to a judicial inquiry to get to the bottom of how we actually arrived in those places in long-term-care homes in Ontario. Unfortunately, she responded vaguely and said that an opportunity for public input would be there in a report from an independent commission. Nonsense. The families of those loved ones never got to inform that inquiry.

The government took steps to avoid transparency and accountability. They took steps to shield their for-profit partners in the long-term-care sector from accountability. We saw this in Bill 218, which shields them from liability for the deaths, the neglect and all the horrendous conditions that happened during the pandemic. QP Briefing reported that the chief investment officer for Chartwell stated that Bill 218 mitigates the risk of lawsuits against this company. So before they moved on with Bill 37 to improve long-term care in Ontario, it was a higher priority to actually protect for-profit long-term care in Ontario. That bill was tabled a significant time ago, and the one that actually puts some new investment into the long-term-care sector was tabled so much later. That is absolutely shameful.

I want to talk a little bit about why we are planning to fully replace the Long-Term Care Homes Act when almost all the changes that this government is putting forward could have been done through amendments to the existing act. It's really quite well packaged, and one smells "election" written all over this. They know they have a shameful record on long-term care in Ontario, but they're trying to make a few small tweaks that don't dramatically change the landscape for long-term care in Ontario and repackage it as a big, new, better bill. And I'm not the only one who thinks this, Speaker.

I want to read a quote from Natalie Mehra of the Ontario Health Coalition: "The Ford government has gone to extreme lengths to brand this as a new LTC Act. It is not a new act. It is almost clause by clause the existing act. What improvements that could have and should have happened are far more than the changes that they have made. Basically, there are a few amendments to the existing act. Many of them fluff. A few of them (particularly those favouring expansion of for-profit ownership) are terrible. The most-teased promise of new enforcement is possible. Most of it currently exists and the current government has been sitting on those powers already for years without holding a single operator accountable...."

1530

This government has made a great show of including a target of four hours of hands-on care in the bill. However, targets are not the same as mandated standards, as is recommended by advocates and experts and the Attorney General. The FAO report on LTC indicates the current pace of hiring and retention of long-term-care staff would not be able to actually meet these targets. They are stretch goals. It's impossible to call them anything else, Speaker.

In the last little bit of time here, I want to talk a little about the problems we have with enforcement. It is worth noting that up to date, no LTC has ever been tried under the quasi-criminal Provincial Offences Act. Instead, the punishment they get is compliance orders, and these compliance orders basically amount to suggesting that LTCs clean up their act, or else. But there's absolutely no mechanism to make the "or else" happen, and this bill fails to meaningfully change that.

Dr. Vivian Stamatopoulos, an LTC advocate, has stated, "The problem has never been that there are not enough rules. The problem has always been that they do not

prevail and that we consistently allow bad actors to repeatedly break the law with impunity." That is the basic question, whether we're going to continue to allow bad actors to break the law. This bill completely fails to provide the foundation to stopping those bad actors. It will not do what it purports to do.

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

Ms. Effie J. Triantafilopoulos: I'd like to thank the member opposite for his remarks. Once again, I was really quite curious about one of the comments that you made about stretch goals around our four hours of care. Just to clarify the record, I'd like to just read you what the legislation actually says in section 8 on the direct hours of care. It says: "This section establishes a target for the average number of hours of direct care to residents." It specifically says, under section 8(3), "The target set in subsection (2) must be achieved no later than March 31, 2025." It goes on to set out each of the periodic targets, increased year by year, until 2025. And then lastly, section 8(6) says, "The regulation may not remove or amend the requirement to comply with the targets and achievement dates established under subsections (2), (3) and (4)." So how is it only a stretch target?

Mr. Ian Arthur: Thank you for the question. I think it's really important. I'm not quite sure how to answer it, though, because I'm pretty sure the member answered her own question for herself. It's a target. It's a target; it's not a mandated rule. There's no framework to punish those or bring in line those who fail to actually meet the targets. I have lots of targets. I had a target of losing 10 pounds over the last little while. I missed it tremendously. It's not going to get the job done. A target is not the same thing as a mandated framework with actual punishments attached to it.

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

Mrs. Jennifer (Jennie) Stevens: To the member from Kingston and the Islands: This Conservative government has cut, underfunded, understaffed and privatized long-term care. With these previous actions, we have seen some pretty serious consequences across Ontario. With no fault to the front-line workers, seniors had malnutrition, seniors lost their dignity, seniors succumbed to the cuts by this government and past governments. What would be the number one thing that would actually give this bill teeth and meaning, and fill in the gaps that are missing?

Mr. Ian Arthur: Thank you for that excellent question. It would be enforcement mechanisms. So for people who fail to actually meet those targets, those 2025 targets, that there are fines, that there are retractions of operating licences, that there are legislated penalties—inescapable legislated penalties—for the worst actors and those who fail to actually live up to those targets. That would give this bill teeth.

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

Ms. Donna Skelly: Speaker, the NDP's solution for long-term care—and I would call it an ill-conceived solution for long-term care—is a taxpayer-funded buyout

of homes right across the province. This will dig our long-term-care sector into an even deeper hole than was left by the previous government, spending billions of dollars of taxpayer money, expropriating buildings and land; money that should be spent on the residents, these seniors, in our long-term-care facilities.

Can the member from Kingston and the Islands tell this House if you and your party have costed this buyout, and which services you intend to cut to pay for it?

Mr. Ian Arthur: If we're on the topic of taxpayer-funded anything, I think we should actually be addressing the millions of dollars in profit. We took taxpayer dollars, passed them on to for-profit LTCs and allowed them to pay out profits to their shareholders; millions and millions and millions of dollars.

There's a really simple solution: Why don't we allow some for-profits to operate, but why don't we fully stop providing them with any provincial dollars at all? We'll take all of the provincial dollars that for-profit homes are getting right now and we'll put them into not-for-profit homes, because they have better outcomes. We know that not-for-profit is the way forward. They have higher life expectancy. During the pandemic, they had fewer deaths and lower infection rates. The numbers are so stark that I don't know how the member opposite can keep standing up and claiming that not-for-profit long-term care is not the solution for Ontario.

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

Mr. Sol Mamakwa: Meegwetch, Madam Speaker.

Remarks in Oji-Cree.

In Kiiwetinoong, we have 21 long-term-care beds for 35,000 people. I hear people talking about—I don't know what the number was—30,000 beds that are coming out. We've been talking about getting an additional 76,000 beds. You have to understand that when people have to leave for long-term care, they have to leave the community; actually go on a plane and leave their families. They come back in a casket.

I'm just wondering, to the member from Kingston and the Islands: Is there any talk about Indigenous, First Nation homes, or any beds coming to the riding of Kiiwetinoong?

Mr. Ian Arthur: Thank you for that question. The member is an extraordinary advocate for his community and for Indigenous people across northern Ontario. We've heard the government talk about culturally appropriate long-term-care homes and the for-profit ones that they are pursuing. The thing that you have to wrap your head around is that looking after our elderly is an incredibly expensive thing to do. I personally do not believe that there is room for profit in that. There should be options for the elders in your community to stay in their communities and not have to leave and come home. That should be a priority of this government, and it's never going to be profitable to provide that. It just isn't. It's about care. It's not about that it's going to cost a lot to do it well. We need to commit to that and see it through.

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

Mr. Randy Pettapiece: I'd like to get back to a question that my seatmate, the member from Flamborough—Glanbrook, posed to the member over here about the cost of his program. I actually looked up your plan on the Internet, on my phone. The question was asked about the costs that were going to be incurred by getting rid of the for-profit sector, which you want to do. Again, has your party costed this out, and if they have, could you please tell the people of Ontario what it's going to cost them to get rid of the for-profit sector in long-term care?

Mr. Ian Arthur: Again, I would refer back to my previous answer about whether the government has considered that if they had not supplied the millions and millions and millions of dollars to for-profit LTCs in Ontario, if they had not provided all of that money to the for-profit LTCs in Ontario, the corresponding profits of those LTCs would then have not flown back to their shareholders. It's a pretty simple question. If we'd given them less money, they would have had less profit. There would have been less money handed out to shareholders while people were dying in Ontario on this government's watch. On this government's watch, they died: nearly 4,000 people. You didn't do your job.

1540

The Acting Speaker (Ms. Jennifer K. French): We have time for a very quick back-and-forth.

Ms. Bhutla Karpoche: I want to thank the member for his excellent presentation on how successive governments, both Liberal and Conservative, expanded privatization of long-term care, eroded quality of care and quality of life for long-term-care residents.

I just want to quickly ask if the member could share with the House some of the concrete actions that we are proposing on long-term care.

Mr. Ian Arthur: I'm glad that the members opposite are looking online, because it is outlined there exactly what we would do: We would take the profit out of long-term care. We wouldn't set a target of four hours of care per resident; we would actually mandate four hours of care per resident. That is a fundamental difference, and it will have fundamentally different outcomes.

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

Ms. Effie J. Triantafilopoulos: I'm pleased to join the debate on our government's bill to fix long-term care in Ontario. This is a landmark piece of legislation, which I believe will make a real difference in the lives of seniors who call long-term-care home.

For three years, I've worked as the parliamentary assistant for long-term care. In that time, I've met with residents, families, staff, union representatives and others across the province, listening to what they've had to say about how we can make long-term care better, making it work for every resident.

I believe this legislation has the potential to be historic, setting an example for long-term care for our country and others in the world. As the Minister of Long-Term Care said yesterday, the mission of long-term-care homes across Ontario is to give seniors high-quality care so they

can experience their best quality of life. This legislation supports that mission.

The old long-term-care act dates back to 2007, and we recognize that today's long-term-care homes have residents with more complex medical needs. We are acting to make long-term care better for residents. I will speak more later on how we are increasing beds and care, and about the specifics about how this legislation will help, but I want to start by speaking now about why we are doing what we are doing and who we are doing it for.

Too often, we think about long-term care as a system or as a sector or we think of the homes as facilities. Some have suggested that long-term-care homes should be under the Canada Health Act, which covers health and hospitals, but we must remember that long-term-care homes, while they do provide care, are not medical facilities; they are homes that provide care. This is a crucial difference. When we say "long-term-care home," the most important word in that phrase is the word "home." Our ideal vision of long-term care should always be centred on homes being homes, just as each of us considers where we live to be our home.

I know that members across this House have had some experience with long-term care, whether it's a grandparent or a parent who needed care or a friend or other family member. I was the caregiver for my late aunt, who spent her final years in the Hellenic Home in Toronto. It was an environment of compassion and dignity for her, one in which she could continue to live and enjoy the Greek culture and language while receiving quality care. Her experience should be the experience that all residents have, and it illustrates that what is important is the care that each individual receives.

If we could design the perfect long-term-care home, this is what we would need to do: Design it so it works for everyone, for each individual in a home. So let's look at it that way. Let's look at one person: I'm going to call her Anne. Anne is an active woman in her eighties, widowed and with a family that loves her dearly. She has always been independent, but she has problems getting around and home care is no longer enough to meet her needs. Working with her family and her doctor, she has determined that long-term care is the best option for her.

The first thing Anne needs is a space in a home that she can move into, and not languish on a waiting list for 165 days or more. She needs the home to have enough staff to provide the care she requires. She needs a modern, safe and comfortable home. She also needs to have a home that respects her rights and is accountable to her and to her family.

To do this, our government is building long-term care around three pillars. The first I will speak about is new beds and new homes, the second is more care and the third is accountability.

To ensure that there is a new home available for people like Anne, we are building new long-term-care homes and renovating and expanding homes all over Ontario. Our government is spending an unprecedented \$2.68 billion to build 30,000 net new beds by 2028. There are already over

20,000 new and 15,000 upgraded beds in the pipeline today, and though we can call them beds, what we really are referring to are new homes for seniors.

Harjit, who lives in a long-term-care home in Burlington, wrote to me and said:

"Far too many long-term-care homes in Ontario are outdated, at capacity and ill-equipped to provide the care my fellow residents need.... The government should be doing whatever it takes to make sure that every older home is updated as quickly as possible.

"Every senior deserves to live in a long-term-care home that is safe, provides privacy, feels like home and is as close to family as possible."

For far too long, governments were indifferent to the needs of people like Anne. We've watched decades of neglect and inaction by governments in Ontario. It's a system that our government inherited. We all know the sorry and shameful record of the previous government. They built only 611 net new beds from 2011 to 2018, across all of the province of Ontario, when 38,000 people are on waiting lists to get into a long-term-care home. People should remember this sorry Liberal record when the Liberals make any future claims about what they are going to do for long-term care. We must never forget this shameful track record. Our 30,000 beds are almost 50 times as many as the Liberals built in those seven years.

New beds are needed everywhere, but they are particularly needed in communities like mine with both fast-growing and aging populations. This means that in my two communities of Burlington and Oakville, they have 18,000 residents over 80 and 63,000 total residents over 65. We know that many of them will need long-term care now and in the near future, so I am glad we are building homes for them.

It was only a few weeks ago that the Minister of Long-Term Care joined me to announce two new long-term-care homes to be built beside the Oakville Trafalgar Memorial Hospital: 640 beds in two new long-term-care homes; 640 new homes for seniors in a campus of care in a village-like setting with shops, restaurants, a pharmacy and a health centre. They also plan to add retirement and independent-living homes on this campus-of-care site.

These new homes mean that people like Anne can stay in their own community if they need long-term care. She won't have to wait for months and months and then move into a long-term-care home an hour away from family; she will just be a few minutes away. She will be able to move in quickly and not languish in a hospital bed or live in her old home without the care she needs.

Staffing is the second pillar of our long-term-care plan. So Anne has found a modern, safe, comfortable new home to live in; now we need to ensure that she has the support she needs, the direct care that she needs to help her to live her life. We are doing this by mandating direct personal care to increase from an average of 2.75 hours per person per day to four hours over a four-year period.

1550

Let's remind ourselves of what direct care means. Direct care is hands-on care that includes personal care such as

feeding, bathing and dressing, as well as other important tasks such as helping residents with mobility issues, medical or therapeutic treatments and providing medication. This type of support is provided by nurses and personal support workers in long-term care.

For years, experts have recommended four hours of direct care for each resident as an average in long-term care. I took part in a staffing study that reported last year, and the expert panel again recommended four hours. These experts on long-term care came from homes, personal support workers, the academic world and others. For years, despite the advice of experts like these—from homes, personal support workers, the academic world and others—reports recommending four hours of care stacked up on the desks of Liberal ministers. Our government is getting it done.

It's not just experts who supported the four-hour commitment. Kirit in Oakville wrote to me that she has long been concerned about the lack of staffing: "I was very interested to read the long-term-care staffing study by the Ontario LTC Staffing Study Advisory Group published on July 30, 2020. It identified a lack of staffing in LTC and recommended a minimum daily average of four hours of direct care per resident.... It also recommended PSW/staff wage increases, improved workload for full- and part-time staff, less documentation, more quality time spent with residents, and making LTC homes a better place to live and work."

Kirit went on to say, "We know that staffing has been a problem for the last 20 years in LTC and it has never been addressed. The four hours of nursing care per resident needs to be mandated. It has taken a pandemic to open up our eyes and see that we must act now to protect the most vulnerable seniors in our society."

Increasing the level of care for people like Anne is so important to us that our government is writing that guarantee directly into our new legislation. I want to point out exactly where it is in the proposed law.

Section 8(2) states, "The target is for an average of four hours of direct care to be provided per resident per day." Section 8(3): "The target set in subsection (2) must be achieved by no later than March 31, 2025." Section 8(4) sets out the targets, year by year, for each of the next three years.

The four-hour guarantee is one that families, staff, unions and others have been calling on for a long time. It's a commitment that our government is delivering on; the first government in the history of Ontario, or Canada, to do so, and we know it will happen because we are putting it right into the law. So how are we going to meet this commitment?

For years, there's been a high rate of personal support workers and other staff leaving long-term care. Retention of workers is a big concern in long-term care. To meet our commitment, we need 27,000 more nurses and personal support workers over these four years. We need to train more staff and we need to convince staff to stay in the profession.

We have already acted to make these changes long before we introduced this legislation, because they were too important for us to wait. Our government is training thousands of personal support workers who will soon be providing their compassionate care in homes across Ontario. We've committed to investing \$4.9 billion over four years to help hire the more than 27,000 staff required to provide care for our four-hour guarantee. Our investment is helping train 16,000 students to become PSWs and created 2,000 new places for nursing students.

We are also funding homes directly to hire more staff. In October, I joined the minister to announce an extra \$270 million to long-term-care homes so they can hire more than 4,000 personal support workers, registered practical nurses and registered nurses. This includes \$3,384,000 extra for the six long-term-care homes in my community. We've also put in place, and extended, the \$3-per-hour wage increase for PSWs.

Both Nicole and Frank in Burlington wrote to me, asking that we "require proper staffing and health and safety protections for workers" and raise "wages and benefits for long-term-care workers to match the value of their work." Let me reassure both Nicole and Frank that we value the contribution of staff. We know the compassionate care staff provide, and we are making their jobs better. We are building new beds and homes, training the extra staff we need and making sure the funding is in place to do so. Each of the actions is designed to improve the care and lives of people like Anne.

But what if Anne didn't have English as her first language, or if she came from a specific cultural or faith background? Our government will ensure resident-centred care that respects residents' history and identity. This should be true in every home, and we are building homes with culture and language supports in all parts of Ontario. In Oakville, the two new homes will have floors dedicated to the South Asian community. I've attended openings and met with staff of homes of different religions and cultures, whether it is the Yee Hong Centre in York, Baycrest, or the Hellenic Homes in Toronto and Scarborough. We are ensuring that residents can continue to enjoy their lives in their culture and language.

Our third pillar is accountability, enforcement and transparency. We must ensure every resident in long-term care is protected and that every home and every staff member are accountable. Residents of long-term care are more vulnerable to abuse or neglect, and they are, by the nature of long-term care, more dependent on their caregivers. This is why we must ensure they are protected. The Fixing Long-Term Care Act takes this into account and strengthens accountability at all levels. This will keep Anne safe and comfortable, and ensure the care she needs and deserves.

Our government has renewed the residents' bill of rights in the legislation, to put the rights of residents front and centre. We are committed to transparency. These changes will make it easier for residents and families to understand and use the bill of rights to support their rights, to ensure proper care, safety and respect.

The legislation adds caregivers and palliative care to the bill of rights for the first time. Adding palliative care to this legislation will provide a full continuum of care for residents and their families. That's why the law would add the right to be supported by a caregiver and the right to be supported by a palliative care philosophy. This means holistic care that is centred on the individual, providing the medical, social and spiritual needs.

A new section about ensuring quality of care and quality of life for residents has also been added, one that is enforceable and sets out rules to collect information from residents and families on their experiences. It requires the minister to make information about homes available to the public to ensure accountability.

We are also increasing enforcement and compliance. These are measures that no one wants to have to use, but ones that are necessary. We will make it easier for inspectors to do their jobs and create a system of penalties for more minor matters. And we will increase fines and penalties for the major provincial offences for individuals, \$200,000 for a first offence, \$400,000 for a second offence; and corporations, \$500,000 for a first offence and \$1 million for a second offence. These fines will be equal to or greater than those in other provinces. Any staff or volunteers convicted of provincial offences will not be allowed to work in long-term care ever again.

The COVID-19 pandemic has shone a light on the need to make long-term care better. Our commitment to more long-term-care beds and homes did not start with the pandemic, but the lessons Ontario has learned have added to the urgency of our actions. This is why our government is acting. We are building more homes, providing more care and ensuring accountability.

We are doing this for Anne, for Kirit, for Manjit, and for everyone else who will need long-term care today and in the future. Together, we are fixing long-term care. We are solving problems that our society failed to remedy for far too long, and it's our government that is getting it done. We will restore the trust of seniors, staff and the public in long-term care, because we will give seniors the care, the homes and the support they deserve. Seniors built this province. They are our elders, our loved ones and our families. They deserve no less.

1600

The Acting Speaker (Mr. Jim McDonell): We move to 10 minutes of questions and answers.

Ms. Bhutla Karpoche: I'd like to thank the member opposite for her presentation. Towards the end, the member talked about the doubling of fines for bad operators up to \$500,000, so increasing to \$200,000 and then going up to \$500,000. I would like to ask the member, during the pandemic, for the corporations that cut corners, for the corporations that were negligent in their care for the residents and the thousands of deaths that we saw in long-term-care homes, how many of those corporations were fined, and what kinds of actions did you take or did your government take to hold them accountable?

Ms. Effie J. Triantafilopoulos: I'd like to thank the member opposite for that question. I know that she's just

as concerned as we all are in this House about what happened over the last 18-plus months in long-term care. It was a tragedy, and we all know that, regrettably, there was loss of life in long-term care in particular.

What we have to reflect upon, though, is that in the three short years that our government has been in office, we've moved quickly to be able to address the neglected sector of long-term care. We're spending \$20 million to hire 193 more inspectors by fall 2022, more than doubling the number of inspectors. A year ago, Ontario had 156 inspectors. Our increase means we will have about 350. This means more inspectors on the ground, spending time in more homes, helping keep our loved ones in long-term care safe.

We'll also increase compliance and enforcement in this bill, along with increasing those fines and penalties that I mentioned in my—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Further questions?

Mr. Lorne Coe: I just wanted to congratulate the member for Oakville North–Burlington for all the hard work she has done on this particular legislation before us.

Speaker, we know that between 2011 and 2018, only 611 net beds were built across the province. What that means for the region of Durham during that period was—how many beds did we get? We got absolutely zero over that period—absolutely zero. By comparison, we now have 1,100 new and 700 in the pipeline. But this lack of building new beds has had a real impact on the lives of constituents not only in the region of Durham but across the province.

Can the member from Oakville North–Burlington talk about the effects of this legislation in providing the type of long-term care that residents in this province have long awaited?

Ms. Effie J. Triantafilopoulos: Thank you so much for that question. I think it's at the heart of what our legislation is trying to address. I know that we've got a bit of a shameful record of the past government in only building 611 new net beds over seven years.

Our record since September 24, 2021: We expect to see 7,000 new and redeveloped beds under construction being opened over the course of this coming year. The accelerated build program will see 1,272 long-term-care beds in Ajax, Toronto and Mississauga built in less than half the time the Liberals took, 14 months. Eight long-term-care projects were completed and opened, representing 526 long-term-care beds: 55 new beds and 471 older beds being upgraded to modern standards.

The Ontario Long-Term Care Association said the commitments—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Further questions?

Ms. Doly Begum: I listened to the member attentively. In her speech, she talked about decisive action that the government is taking. One of the things that we, dreadfully, witnessed throughout this pandemic is the cruel,

negligent behaviour in so many for-profit long-term-care homes.

So just like my colleague from Parkdale–High Park asked, my question is, were there any long-term-care homes that lost their licence or received any form of punishment?

Ms. Effie J. Triantafilopoulos: Thank you very much for that question from the member opposite. I know that she also shares the concerns we all do about improving long-term care. This plan we put forward is, in fact, to address that.

We've indicated that we are going to be fixing long-term care based on three pillars: staffing and care; accountability, enforcement and transparency; and building modern, safe, comfortable homes for seniors. That's why, as part of our plan, we have introduced legislation that will be improving the well-being of residents in long-term-care homes and retirement homes. It's also going to be addressing the compliance issues, the inspection issues, that we discussed earlier. I believe our commitment will address many of the concerns that you have expressed to us today.

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

Ms. Donna Skelly: Thank you to the member from Oakville North–Burlington for the work you, your minister and your ministry have done on this file. I'm really proud of this document, and I think you should be as well. We inherited the mess—we've talked about it in this House—that the Liberals left long-term care in. We had to do something to correct it, and this goes an awfully long way.

We've heard from the members opposite—what I heard, actually, when I first ran for government—about people wanting to see increased time for hands-on care, and this document addresses that. We will have up to four hours of hands-on care per resident, if not more—I think it's by 2025. Members opposite have challenged us on our commitment to improving and increasing personal care hours. Can you speak to that and share more insight as to how we will make this happen?

Ms. Effie J. Triantafilopoulos: Thank you so much for that very important question.

Our loved ones in long-term care deserve no less than the commitment that we've made in this legislation. It's really putting residents at the centre of care. Our commitment will actually be met by ensuring we hire 27,000 more nurses and personal support workers over the coming four years. That means an investment over the next four years of \$4.9 billion to get this done. We're training 16,000 new personal support workers in Ontario's colleges, private career colleges and many school boards.

I joined the minister in October to announce \$270 million to help long-term-care homes hire more than 4,000 new staff just this year. It includes, for many people in communities, including my own—a \$3.4-million increase for six long-term-care homes in my riding this year alone.

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

Mr. Ian Arthur: I want to lead from the question from the member from Flamborough–Glanbrook and ask: Can

you please outline what specific legislative measures are in this bill, what consequences there will be for those homes that fail to meet your 2025 target? I understand that you've put the target out there. I understand what you're doing to try to help them meet that target. What are the actual legislated consequences for failure to meet that target?

Ms. Effie J. Triantafilopoulos: In response to the member opposite: We received representations from many stakeholders in this area—from union representatives, from families, from family councils, from residents, from staff, from operators—about the importance of ensuring that we increase the direct care that residents get to four hours of direct care. We heard those representations.

As you know, many, many reports in the past, piled up by the Liberal government, including the Sharkey report that this member mentioned in his remarks—nothing was done. We enshrined it in legislation. We are committed to doing it. We will get it done.

The Acting Speaker (Ms. Jennifer K. French): We don't have time for another back-and-forth.

Further debate?

1610

Mrs. Jennifer (Jennie) Stevens: It's always an honour to rise here in the House on behalf of the good people of St. Catharines, as I represent a city within a region that bears a disproportionate need to ensure seniors are safe; to ensure the experience and loss in our long-term-care sectors are never duplicated; to ensure we learn from the mistakes of the past governments on the file of long-term care; and finally, to ensure that as a government we listen to what advocates, front-line workers and health care experts have been saying for decades: Fix long-term care and enrich the infrastructure we provide in this province for older adults as they age.

I would like to thank both the Minister of Long-Term Care and the Minister for Seniors and Accessibility for their comments on this bill yesterday. It is clear that we can agree on the state of long-term care here in the province of Ontario. We can agree on the heartbreaking nature of stories we saw over and over again within the past two years. We can agree that the sector had been under-supported for far too long by past Liberal governments. However, it is also clear—clear to most people, I think—that our approaches are very different in terms of how we would confront the problem of fixing long-term care and guaranteeing dignity to our older adults in Ontario.

I would like to reflect on something that is close to my own heart before I get into the legislation too much. I have spent many years, even when I was a city councillor, working in health care. As a past member of the public sector union and staff member of the Hotel Dieu Shaver, I think it is important to reflect and thank all our hard-working front-line health care heroes, like PSWs, nurses and allied health care professionals, thank our housekeepers, our dietary aides and our maintenance crews behind the scenes for all they have to do to help take care of our

elders and those who are the most vulnerable here in the province of Ontario.

I still hear from my many former colleagues about what the lived experiences had been when they were in the middle of this pandemic—not only in long-term care but across health care. These are the people that I will continue to thank, and alongside all of the advocates, researchers, doctors, families, caregivers and residents, it is their advocacy that helps frame and reform our long-term-care system.

I want to iterate the history that all front-line workers have faced in this sector and why residents and advocates are looking for deep, meaningful change. In this chamber, we all understand what is at risk. In this chamber, we all understand the gaps in long-term care are decades in the making. So, again, before I continue with discussing the bill, I would like to frame the debate—discuss some of the history of the sector. I would like to share some important context for folks that might be watching the Legislature for the first time and missed when my colleague from Brampton Centre yesterday had discussed some of these matters last evening.

As pointed out last night, in Ontario long-term-care homes are licensed and publicly funded. We have approximately 626 long-term-care homes, and that amounts to over 78,000 residents calling them home. Ontario leads the country in for-profit homes. It is often one of the reasons, report after report has concluded, that led Ontario to suffer as much as we had throughout the pandemic. This is almost six in every 10 long-term-care nursing homes in the province that are for-profit—58%, to be exact, of them are for-profit; 24% are not-for-profit; and 16% of them are municipally operated. All of these homes in Ontario are subject to the Long-Term Care Homes Act from 2007.

The new bill does not go far enough to drive the dramatic change people in Ontario were looking for and, unfortunately, this bill will fall very short of the goal that the government would like to achieve.

What advocates and front-line workers and residents in Ontario need is legislation that will truly transform our long-term-care sector and put care before profits. Instead, despite COVID-19 pandemic findings, we have legislation that refuses to make a change.

While we know that one of the last times there was a PC government, it was led by Mike Harris, who reduced the public role in long-term care, really opening the doors—may I say, floodgates—for for-profit homes to flourish, and while we know that the Liberal government created this crisis in long-term care with those former Conservative governments that opened up the floodgates to privatization of our long-term-care homes, during the pandemic, the Conservative government today really made the crisis worse. Speaker, it was worse before the pandemic, with the changes to long-term-care investigations, and without addressing the deep, systemic problems in long-term care with meaningful action, this government will make it worse going forward.

Again, back to the comments made by my colleague from Brampton Centre: She pointed out that from 2011 to

2018, under the Liberal government's watch, only 611 net new beds in long-term care were built across Ontario. During that time, the wait-list grew by 78%, which is shocking. So they weren't building beds, and we had an increase in demand, a situation brewing here that could have been addressed by previous administrations, but they chose not to.

But the long-term-care commission revealed what my friends who work in the sector could have told you before the report, which is that the vast underfunding and neglect by the previous Liberal government contributed to the costs of the pandemic, but it was also made worse by the government of the day's inaction.

What does inaction look like? It looks like a record of reducing comprehensive investigations in long-term-care and nursing homes. It means that the Ministry of Long-Term Care did not issue a single fine to an operator who broke rules during the COVID-19 pandemic, which has so far killed more than 4,000 people, over 400 of those from Niagara, and infected over 15,000 residents in nursing homes. The bulk of the deaths in Niagara and across Ontario, by the way, were from residents in nursing homes.

What does inaction look like? It looks like inspection reports, even before the pandemic, and eyewitness accounts from homes describing horrific conditions.

What does inaction look like? As a quote from a former provincial inspector, as covered on Global News earlier this year: "It's been absolutely devastating. You knew that these problems were inherent and the homes were not prepared." He continues, "Inspectors knew this would be a problem someday and it happened." This same inspector says, "It's incredibly disappointing to see these repeated flagrant violations were not taken care of."

And we know this is what inaction looks like, because this week this government said they would not be issuing fines retroactively to operators. Speaker, families had their loved ones needlessly die, and the list of infractions continues—a record of inaction. Good policy—any policy—is only as good as the intentions of the actors that govern it. If we cannot trust the government to act on even current rules around inspections, rules they even admit need to be reformed, what does changing it look like? It is a worthwhile question as report after report from journalists and the community point to homes with repeated violations continuing to break the law.

The observations from the new legislation have been much of the same. The new legislation doubles fines, but if you have no intention of laying fines, then what's the point? Leadership here means being aggressive and thorough, and when the source of the leadership, regardless of the change in policy, is led by a government with this record of the past failures and refusal to investigate and fine and act, then we know what inaction looks like.

1620

I am passionate about this issue because I've raised the problem of inspections in this House many times, sparred with the former minister many times. Again, the fact that the penalties are not retroactive and we have examples of

flagrant issues—it's something that would have created justice and transparency.

I will not be shy about pointing out the hypocrisy of making legislative changes that will come into effect after an election, while seeing no action before the election is just an election promise, not the type of policy we need. Speaker, it is not the dignified manner, the not-being-taken-advantage-of manner that we would like to come to expect from our health care system and support older adults and each other as we age. There was an opportunity to enshrine that in the legislation. Unfortunately, that opportunity was missed here.

As I mentioned before, I come from a community of seniors in Niagara. More than one out of five residents is over 65 years, and I believe we are demographically one of the oldest, if not the oldest, community in Ontario. I know that seniors deserve so much better, and as Ontario faces a projected increase of older Ontarians as we age, we will have continued pressure on our long-term-care and health care services here in Ontario.

It's not just elders who call long-term-care home. It's also people with disabilities and people with Alzheimer's and dementia and other impairments under the age of 65 who reside in long-term care. I have spoken to stakeholders in my region about these gaps because there is not an appropriate housing solution for them in our community. It is a gap where they are often housed in nursing homes but, of course, that is not the right fit. Nowhere in this bill are those variables addressed.

This is another example of the bill really missing an opportunity to hit it right out of the park, make the change that we need to see happen in our communities. I believe that the government is missing a critical opportunity to invest in not-for-profit care and to help us transition our long-term-care system to one that will actually put care before profits.

As we watch our parents get older, I want to stress that improvements in long-term care are absolutely needed. No one wants to see the environments and the isolation and desolation that our seniors experienced through the pandemic play out again. Investments in beds are absolutely needed in the not-for-profit and municipal homes. But I want to stress that it is critical at this point in time, in order to address the increasing demand we are going to see in our aging population for supports in services—that this is the type of direction that is required to recruit and retain our front-line health care workers to combat burnout from this COVID-19 pandemic. This is how we're truly going to meet the growing demands for service and ensure that people can age at home.

We need to hire more today and act to support our current staff and residents with more hours of care, not commit to something that ends up being back-loaded far into the future after an election. This is not fair to the residents. It does not build trust that this government will follow through.

I know the government has relied heavily on this legislation here, the Fixing Long-Term Care Act, in Bill 37, the Providing More Care, Protecting Seniors, and Building

More Beds Act, as a way to say to people in this province they are acting to fix long-term care. However, what the experts made clear is that this bill will not fix the problems in long-term care.

Everyone recalls the inspection reports from the military, the Canadian Armed Forces, outlined conditions they reported on in long-term care, despite the bill of rights being in place to protect residents. As I said, one of them being a right to clean spaces. We have examples in Niagara from congregate care settings where residents would sit in their own wet bedding. Shame.

What the military found in those homes—shared similarities across this province, including some examples I know from Niagara—was that there was little to no infection control, little to no disinfection that had been conducted at the facilities prior to the Canadian Armed Forces operation. Significant gross fecal contamination was observed, not in a one-off example, but in several rooms for patients—and I've got to add, Speaker, cockroaches, ants, bedbugs. These were the same delays we saw in Niagara in changing soiled residents, leading to skin breakdown. We should be ashamed. This government should be ashamed. They could have fixed it.

Everyone in this chamber remarked at those horrible written words, those hard-to-look-at pictures. But as difficult for us as it was to read some of those reports, how much more difficult was it for the families of those residents, and the staff, who honestly try their best, coming in every day, and are left with these heartbreaking situations with the most vulnerable people in our society, who are subject to these kind of living conditions—and that the government is aware of it and did nothing to improve these conditions. And this week, we learned they intend to do nothing to fine the operators that contributed to these conditions—the vast, vast majority of them for-profit homes. The government did nothing. This government continues to do nothing to hold the nursing homes accountable for what the military found.

Enshrining a bill of rights in legislation is nice, but when inspections tell us that those rights are not being protected and we are not acting ourselves to pursue a real cost and consequence for what we found in those homes—following words, press conferences and photo ops with actions is important, or the result is just politicking and hot air, may I say—

The Acting Speaker (Ms. Jennifer K. French): I'm sorry to interrupt the member.

Pursuant to standing order 50(c), I am now required to interrupt the proceedings and announce that there have been six and a half hours of debate on the motion for second reading of this bill. This debate will therefore be deemed adjourned unless the government House leader directs the debate to continue.

I recognize the deputy government House leader.

Ms. Andrea Khanjin: Please continue.

The Acting Speaker (Ms. Jennifer K. French): I return to the member from St. Catharines to continue her remarks.

Mrs. Jennifer (Jennie) Stevens: Speaking of air, I stood in this House and shook my table when I found out,

in the middle of the pandemic, that we have homes in Niagara that do not provide air conditioning and cooling spaces in long-term care, while seniors were supposed to be in isolation, in the middle of the heat wave—40 degrees, not including the humidity—in Niagara. We got big words and acts of being surprised and outraged, but once the media questions stopped, so did the actions. It would have been easy to enshrine in this bill of rights—that ensures that residents will have access to air conditioning in their rooms.

I sat in my car and I did a video that year without the air on to make a point. In the three minutes it took me to record it, I was almost too hot to continue. I was sweating. It was terrible. Speaker, can you imagine, do you recall—we had record-breaking, sweltering heat this summer, in the past.

I am proud to say that the last home in St. Catharines is finally moving to fix this problem after we had pushed them—but without any real intention from the government, we had to find the levers locally to get it done. Many of those residents were in their rooms without access to air conditioning, or they had to be taken out of their rooms and carted into common places—while we know that this is in contravention to infection control practices that needed to be in place during COVID-19. So why are we not ensuring those homes, mandating that those homes be required to provide air conditioning to residents, seniors in their rooms—not a common spot; in their rooms. That's human dignity, Speaker. What we need to do is mandate these fundamental principles through legislation and through regulation to ensure that those homes are able and willing to provide things as basic as air conditioning to residents and seniors—again, in their rooms.

1630

We had an opportunity to invest in home and community-based care supports which actually would save the province money. We have an opportunity still to apply the investigations—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Mrs. Jennifer (Jennie) Stevens: I still had six pages to go.

The Acting Speaker (Ms. Jennifer K. French): We do have time limits for members, though we all have much to say.

We will continue with questions and responses.

Ms. Donna Skelly: Throughout the afternoon, the NDP, as members of the opposition, have been stating that they object to this particular piece of legislation, that it hasn't gone far enough. They want—and I think it's ill-conceived—to buy out all of the homes across the province. They want to expropriate buildings and land—money we believe should actually be spent on the residents within long-term care.

I'm on the NDP website now looking at the plan for long-term care, and there is zero information regarding costing. My question to the member from St. Catharines

is, have you costed this buyout, and which services will your party cut to pay for it?

Mrs. Jennifer (Jennie) Stevens: To the member from Flamborough–Glanbrook, when you put a cost on the rights of a senior's dignity within long-term care—

The Acting Speaker (Ms. Jennifer K. French): Through the Chair.

Mrs. Jennifer (Jennie) Stevens: Through the Chair, Madam Speaker, when we put a cost on seniors throughout the province of Ontario and we put a dollar figure on what their care should be—shame on this government. They had a chance. When previous Conservative governments were the government, you could have taken the profits out of long-term care, and that's what we're here saying. We're not lining our buddies' and our friends' pockets with money—

The Acting Speaker (Ms. Jennifer K. French): Through the Chair.

Mrs. Jennifer (Jennie) Stevens: We are going to make sure, Madam Speaker, that the seniors in long-term care get every dollar that's needed for them to be able to live in dignity.

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

Ms. Jill Andrew: This government bill claims to increase direct care to residents. We know the statistics prove that the only way you could actually increase direct care to long-term-care residents and help save them, save their lives, is to remove profit from long-term care, a thing that this bill does not do and has no intention, no political will of doing. We also know that to increase care of residents, we need to take care of the workers.

I'm wondering if our member can explain why this bill is not charting any supports for workers. It's not addressing working conditions. It's not addressing the fact that PSWs and nurses are overworked and understaffed. It's certainly not addressing the need for a permanent wage increase. Why is it that workers don't matter to this government in this bill to protect residents?

Mrs. Jennifer (Jennie) Stevens: Thank you to my colleague for that great question. You're right; this bill does not address how important our front-line heroes are.

As I said in my speaking notes, I worked in long-term care. I worked in that sector. I have lots of colleagues who still are faced with what COVID-19 and this pandemic have done to them. The government of the day has cut, underfunded and understaffed, and sees privatization as the answer. It's not. We need to start getting the dollars back to the residents that live in these long-term-care homes so they have the dignity of even having air conditioning in their rooms. It's that common sense—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Further questions?

Mr. Randy Pettapiece: Again, I want to get back to this business about buying out for-profit places, which my seatmate asked about, because I'm just a little concerned. I too went to the NDP's website to look over their platform, and it says nothing about what it's going to cost people of

Ontario to buy these places all out and stop the for-profit sector.

I just wonder if the member would give us some dollar figures on this as to what it's going to cost the people of Ontario for her plan.

Mrs. Jennifer (Jennie) Stevens: The member across said he was concerned. Well, I think everyone in Ontario is concerned about our long-term care. We saw reports come back from the armed forces that were horrifying. They were horrifying. And if we have to stand here in this House and we have to say this is what it's going to cost us for our aging seniors to live in disgusting, ant-infested, bedbug-infested—our member yesterday from this side said that there was an army veteran that was living in a private home who actually died of bedbug anemia. Is that right?

This government has a back track of paving over farmlands, precious farmlands, grapes, our farmlands in Niagara. We're looking at—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Question?

Mr. Faisal Hassan: I want to also add my comments, and my colleague from St. Catharines has actually painted clearly the crisis in long-term care and home care.

We know we cannot make money on the backs of our seniors. We have seen what the military has revealed. This is an opportunity to fix it, and this bill doesn't do that.

Now, I would like to ask my colleague: I have heard from many constituents of mine their stories of elders not being adequately fed and dehydrated, and this is unacceptable. I would like to ask, how can we fix it? What do our seniors need to put this once and for all—and fix it?

Mrs. Jennifer (Jennie) Stevens: Thank you to my colleague for that excellent question. It's called comprehensive inspections. It's called what we need is stronger protections for our seniors and our residents that live in long-term-care homes.

As I said in my speaking notes, we are seeing in the private homes that the monies that the residents are paying are actually going to the higher-ups that are running these homes, these private homes. This is shameful.

We should be making sure that inspections are done. I think, in 2019, the Conservative government only did a measly nine inspections in our long-term care. That's shameful. That's why we ended up where we were during the COVID-19 pandemic, right at the get-go. You dragged your feet and you didn't do any inspections.

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

Ms. Effie J. Triantafilopoulos: I would like to thank the member from St. Catharines and also to express how very moving her comments were today on Remembrance Day.

My question relates back to the four hours of direct care that we were discussing earlier and how I indicated that, in fact, this is going to be enshrined in our legislation with performance targets, holding the minister to account if those performance targets aren't achieved.

I want to just share with you some of the comments we had about that. Smokey Thomas, president of OPSEU, said: "It is crucial that the government acts fast to ensure the safety of our most vulnerable citizens and the front-line heroes who take care of them.

"We are glad to finally see a government that is following up on its words and doing something."

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Candace Rennick, CUPE Ontario, said, "We are encouraged to learn that this government is finally taking the necessary step of enshrining the four hours of hands-on care commitment into legislation. This is an important and long-awaited step."

Jerry Dias, president of Unifor—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

A very quick response.

Mrs. Jennifer (Jennie) Stevens: As I stated, I've worked in a long-term-care facility at the Hotel Dieu Shaver for 20 years. I've seen what's happened when residents in there didn't get four hours, a minimum of four hours. This side of the House has been calling for that for years.

What I have to say, Madam Speaker, is I think that in the private homes, they're suffering for having the care that they need. They are not getting the food, the nourishment that they need. They are not getting any of the staffing levels that they need—

The Acting Speaker (Ms. Jennifer K. French): Thank you.

Further debate?

Mr. Aris Babikian: Thank you for the opportunity to debate Bill 37, Providing More Care, Protecting Seniors, and Building More Beds Act, 2021. Today I rise thinking of our seniors in long-term care, our seniors who have faced the most devastating outcomes of this pandemic, our seniors who are among the most vulnerable Ontarians, our seniors who have given so much and asked for so little in return, our seniors whose cries for help were ignored repeatedly by the previous Liberal government, with support from their NDP friends.

I would like to start by offering my sincerest condolences to the families and friends who have lost loved ones in long-term care. We recognize that we cannot bring their lives back, but we can and will ensure that this never happens again.

Before speaking to the contents of this very important legislation, I would also like to wholeheartedly thank our front-line heroes, and especially those who supported seniors, in my riding of Scarborough—Agincourt, for working tirelessly throughout the pandemic, putting the needs of our friends and families in long-term care ahead of their own. In this regard, the Scarborough Health Network's doctors, nurses, technicians and staff stand out and deserve our gratitude.

I would also like to thank those families that have been working with homes and staff to ensure their parents and grandparents receive the quality of care they deserve in long-term care.

Speaker, today I rise in this House as a proud member of this Progressive Conservative government, the government that has committed to fix long-term care, the government that is already well on its way to fixing a long-forgotten system, a system that ignored the conditions where our seniors and loved ones lived. After years of Liberal-NDP neglect and inaction, our government is delivering on its promise to give our seniors in long-term care the care that they need and deserve.

If passed, the proposed legislation would be based on three pillars of our government's plan to fix long-term care. These three pillars are: improving staffing and care; protecting residents through better accountability, enforcement and transparency; and building modern, safe and comfortable homes for our seniors. These pillars are the road map this government is using to ensure that today's and future generations will be able to benefit from a system of long-term care that ensures the resident is the central focus of that care.

Speaker, I would like to focus on the first pillar: staffing and care. When I hosted a town hall meeting alongside the Minister of Long-Term Care a month ago, long-term-care administrators and workers who worked tirelessly for the system on a daily basis in my riding attended. Participants were very clear: The importance of this first pillar cannot be overemphasized.

I want to especially thank Stephanie Wong from Mon Sheong, Wendy Beckles from Shepherd Lodge and Kosta Kostouros from the Hellenic Home for their invaluable contribution to the discussion. They were able to shed light on the importance—that the hours staff spend with residents is not only about quality of care, but it is also about the personal interactions, personal attention and, most importantly, the ability to hear and feel what the residents are feeling on a day-to-day basis.

When our government was elected, we knew that there was work to be done, but we also knew that we weren't going to be able to do it on our own. So we listened to the people who live and work in long-term-care homes, as well as the experts who study and support them.

For this reason, in Bill 37, we are legislating the four hours of direct care per day, per resident, something which stakeholders have been calling upon governments to legislate for years—calls which had gone unanswered by previous governments. In fact, Candace Rennick, who represents long-term-care workers in Ontario for CUPE, said that she was “thrilled, four hours of care finally legislated.” This reaction to our plan to legislate four hours of care is not isolated. I have heard from individuals involved in the sector and families with loved ones who reside in long-term-care facilities, and I have had the opportunity to speak with sector leaders who manage facilities in my riding. They all mentioned this commitment and thanked me and this government for also committing real funding to ensure this does happen on time.

Speaker, allow me to tell a story. As a proud resident of Scarborough–Agincourt for the past 32 years, and after being elected in 2018, I paid a visit to Shepherd Lodge,

which is an institution of great importance to my constituents and especially to the seniors who call this long-term-care facility home. When I toured their facility, I saw firsthand the meaningful interactions that front-line PSWs and nurses have with the residents and the compassionate care they provide to them. I understood at that time that more hours of care would translate to even better, more meaningful interactions between residents and those who work tirelessly to provide them with high-quality care. As a result, I advocated time and again with the Minister of Long-Term Care that we enshrine this commitment in legislation. I know deep down in my heart that this will be the answer that many family members and residents in Scarborough–Agincourt are looking for, and it would be a path for more help for those living in long-term care.

Speaker, we are getting the job done. Our government is not only legislating the four hours of daily care per resident, but we are giving long-term-care homes the financial support that they need to realize this ambitious goal. To this end, we are investing \$270 million to hire 4,050 new long-term-care staff before the end of this year alone. By 2025, our total commitment will reach \$4.9 billion, to hire more than 27,000 staff necessary to give our long-term-care residents the care that they need and deserve.

As part of our commitment, in the coming weeks Mon Sheong in my riding will be receiving \$569,943 to hire more staff to immediately increase the hours of daily direct care for their residents. By 2025, they will be receiving \$3,490,824 annually more than their current funding. When discussing this funding with Mon Sheong and particularly with Tim Kwan, who is the chair of Mon Sheong, I heard nothing but praise for this government and this long-term-care minister.

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Tim, who has been a dedicated leader in the sector, recognized that we are working to ensure that this system is being fixed with a brave and bold vision that previous governments lacked. I am proud to say, Speaker, that this is truly the vision we have been looking for to fix the sector.

Other homes in my riding are also receiving increased funding to increase staffing. Before the end of the year, Tendercare nursing home in my riding will receive more money to meet their staffing needs—\$726,681 to be exact—and by 2025, they will be receiving \$4,450,800 annually more than their current funding. This will allow them to provide their residents with four hours, on average, of direct care per day.

Finally, Shepherd Lodge in my riding will very soon be receiving \$897,661 to increase staffing levels and \$5,498,092 annually more than their current funding by 2025.

These are the funding amounts for just three long-term-care homes. There are more than 600 others that will also be receiving this funding. Just imagine the impact that we will have across the sector. We are serious about our commitment to the four hours of daily direct care. Speaker, we are getting the job done.

These dollars are even more necessary as we continue to look for ways to drive the shift towards emotion-based, patient-centred long-term care. Speaker, it is simple: People need people, which is why, beyond providing homes with the money to hire more staff, our government is also investing in training and retention to fill these positions.

In March, our government launched the long-term-care staffing plan, one of the largest personal support worker recruitment and training initiatives in Ontario's history. Our investment of \$115 million is training up to 8,200 new PSWs for jobs in long-term care, and I am happy to report that the first batch of graduates will soon be ready to work in support of our seniors. Allow me to thank them personally for making the commitment and for having the drive to work with our seniors in long-term care.

We are also investing up to \$100 million to add an additional 2,000 nurses to the long-term-care sector to achieve four hours of direct care per resident per day by 2025. This investment includes up to \$6,000 per year for PSWs taking RPN programs and up to \$10,000 per year for RPNs bridging to RN programs. It also provides up to \$6,000 a year in financial support to internationally trained nurses to gain the credentials required to work in Ontario.

As an immigrant to Canada and as someone who has helped many internationally trained professionals resettle in Ontario, I can speak from personal experience. The programs and opportunities we are providing to internationally trained professionals will help alleviate staffing pressures in long-term care, and will also provide residents who speak more than one language an opportunity to speak with someone who speaks their cradle language. That is of extreme importance.

Speaker, I am proud to rise in support of Bill 37 today as the first MPP of Armenian descent in Ontario's history and the grandson of Armenian genocide survivors. Armenians recognize their seniors as community builders and knowledge keepers, and thus, care and respect for seniors are inherent in our values.

There is also a very sizable Chinese community in my riding of Scarborough–Agincourt, another culture which holds respect for elders as a central value. I spent many years working with diverse communities in Scarborough, so I know that ethically, culturally and linguistically appropriate long-term care is of utmost importance to the people of this province. Mon Sheong in my riding, for example, which specifically caters to seniors in the Chinese community, is a prime example of how homes can provide excellent care while keeping cultural, linguistic and food traditions as the central focus for care in long-term care.

Other ethnic groups in and around Scarborough–Agincourt, such as Tamil, Greek, Armenian, Filipino, Italian, Hindu, Spanish, Arabic, Coptic and Urdu, are yearning for the day when they will be able to take care of their seniors in culturally considerate environments. As such, our government is not only working to build new beds but also to ensure that seniors receive care that is culturally appropriate. We have been working with ethnic, cultural and

linguistic communities to build homes and develop beds that cater to the needs of the diverse aging population of Ontario. Our government is well on its way to fulfilling its commitment to build 30,000 net new long-term-care beds by 2028.

I'm proud to announce that many communities are heeding the call. We have heard of homes for the Hindu community. We have heard the good news that Mon Sheong will be building more beds for the Chinese community, and others have been working to ensure we build beds that represent the diverse population of Ontario.

I look forward to working with the Minister of Long-Term Care, our caucus members, sector leaders, families, residents and others who are involved in the system to ensure that the road map to fixing long-term care is one we continue to take to ensure that the system is fixed today and well into the future.

I also look forward to voting for this bill in this Legislature to ensure it becomes law.

The Acting Speaker (Ms. Jennifer K. French): Questions and responses? Seeing none, further debate?

Second reading debate deemed adjourned.

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

Mr. Michael Parsa: Speaker, if you seek it, you will see that there is unanimous consent to see the clock at 6.

The Acting Speaker (Ms. Jennifer K. French): The deputy government House leader is seeking unanimous consent to see the clock at 6. Do we have consent? Agreed.

PRIVATE MEMBERS' PUBLIC BUSINESS

POLISH HERITAGE MONTH, 2021

LOI DE 2021 SUR LE MOIS DU PATRIMOINE POLONAIS

Ms. Hogarth moved second reading of the following bill:

Bill 18, An Act to proclaim the month of May as Polish Heritage Month / Projet de loi 18, Loi proclamant le mois de mai Mois du patrimoine polonais.

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

Ms. Christine Hogarth: I just want to note that I'll be sharing my time with the member for Renfrew–Nipissing–Pembroke.

Thank you very much for being here tonight to share in this debate. First of all, I'd like to acknowledge the presence in this Legislature of Magdalena Pszczolkowska, who is the consul general of Poland. Welcome to Canada, welcome to Ontario and welcome to Etobicoke–Lakeshore. I wish you a ton of success for your term here in Ontario, and I look forward to continuing our working relationship.

Speaker, I'm honoured to rise in this House to debate my private member's bill to proclaim the month of May as Polish Heritage Month. Now, some may wonder why someone who is not Polish would bring forward such a bill. Well, this bill is truly for the people, for the more than 524,000 Polish Canadians who call Ontario home, which includes over 12,000 Polish Canadians who I am proud to represent and who call Etobicoke–Lakeshore their home.

1700 Etobicoke–Lakeshore is also the home of the Consulate General of the Republic of Poland, which is located right on the beautiful shores of Lake Ontario. It is a wonderful place to gather, and I know many of us from both sides of this House have been invited to attend celebrations at the consulate throughout the years.

Speaker, Polish Canadians have lived in Ontario since the first settlers arrived in 1858, and they have made significant contributions to our province that are worthy of proper recognition. These contributions are rooted in the values shared by the Polish and Canadian people, including a strong commitment to freedom and democracy. Many people don't know that Poland introduced the first democratic constitution in Europe in 1791.

Although the struggle for freedom would consume most of the 20th century for Poland, it presents a positive impact on Ontario in the form of a steady stream of immigration of its people. Speaker, there were six mass waves of Polish immigration, largely driven by three primary factors: war, religion and political persecution. Among the early immigrants was Casimir Gzowski, who arrived in Ontario in the 1840s after a failed uprising in Poland against the Russian Empire, where he had served as a combat engineer.

An engineer and a lawyer, Gzowski helped build railroads, including the Grand Trunk railroad. Gzowski worked on the Welland Canal and helped complete Yonge Street. He helped establish the Queen's Plate and the Canadian Society of Civil Engineers. He became the first commissioner of the Niagara Parks Commission. He was knighted by Queen Victoria and served as Ontario's Acting Lieutenant Governor in 1896 to 1897.

This is just one example of immigration to Ontario, and each wave brought Poles of varying experiences and skills that they applied here in Ontario, desiring to establish new lives that offered opportunity and freedom. Polish immigrants contributed significantly to agriculture, manufacturing, engineering, education, publishing, religion, mining, sports, research, business, government, politics and the military.

A few notable Polish Canadians who we may know today: Penny Oleksiak, who is an Olympic swimmer; John Tavares, who is the captain of the Montreal maple leafs—oh, sorry, the Toronto Maple Leafs, I should say. Sorry about that—uh-oh. We have Jan Lisiecki, who is a classical pianist.

I don't think I'm going to live down the Tavares piece, so sorry about that.

Speaker, I'd also like to talk a little about the Polish congress. It was founded as an umbrella organization to

coordinate the activities of Polish organizations in promoting the Canadian war effort during World War II. The congress also played an important role during post-Second World War immigration to Canada. Their help and presence must have been a sight for sore eyes for immigrants who were looking for the stability Canada offered. Here's what the Polish congress had to say about this proposed legislation: "The Canadian Polish Congress welcomes the introduction of Bill 18 in the Legislative Assembly of Ontario to establish Polish Heritage Month in the province of Ontario. As the organization representing over 1.2 million Polish Canadians across Canada—as many as half of whom live in Ontario—we are happy that the many historic and ongoing contributions of Ontarians of Polish descent will be officially recognized and celebrated each May. Thank you to MPP Christine Hogarth and MPP John Yakabuski for leading this important initiative."

As devout Catholics, Poles played a vital role during historic visits to Canada by His Holiness John Paul II, including in the 2002 World Youth Days held primarily in Toronto and in parts of Ontario.

And finally, Speaker, Ontarians of Polish heritage have served this House, where several serve presently, such as my colleague beside me here from Renfrew–Nipissing–Pembroke, my colleague from Elgin–Middlesex–London, my colleague from Mississauga Centre and my neighbor to the north, the MPP from Etobicoke Centre.

Two other notable former politicians, one a constituent of mine and former Toronto councillor, Chris Korwin-Kuczynski—"KK," as he's affectionately known—has had a major impact in Toronto for the Polish community and the business community. If you see him on the Lakeshore, everyone knows his name. And Ted Opitz, the former MP from Etobicoke Centre and retired lieutenant-colonel, has provided me, and continues to provide me, with guidance at the many Polish events in my community. I also want to thank him for his service to our country. Both of these gentlemen played an integral role in the drafting of this private member's bill, and I want to thank them for their friendship, guidance and counsel.

They also introduced me to former Consul General Grzelczyk, who also had something to say about this legislation: "Since the mid-19th century, the Polish community has contributed significantly to the growth, culture and development of Ontario, and all of Canada."

Speaker, I am proud to bring forward this bill on behalf of the Polish Ontario community in my riding and indeed across Ontario. It is long past time to celebrate their resilience and love of freedom, together with their huge contribution to Ontario's vibrant diversity and economy. I encourage everyone to support this bill, and I look forward to an exciting and informative debate.

The Acting Speaker (Ms. Jennifer K. French): I recognize the member from Renfrew–Nipissing–Pembroke.

Mr. John Yakabuski: It is a pleasure and an honour to join this debate.

It was also certainly an honour for me, earlier today, to meet the consul general, who was just appointed on

October 1. We're looking forward to great things from Magdalena as well.

Speaker, I'm going to touch on a few things, and most of it will sound local.

In 1858, the first significant migration to Canada of Poles came to my area in Renfrew county, settling in Wilno, which is widely renowned and known as the first Polish settlement in Canada. What they brought with them was their faith, their music, and an absolutely unbelievable work ethic, and they sure needed it because—I know the member from Mississauga Centre has been to my riding, and many people in the GTA may have been, because of the Polish Scout camps that were established in the area. They know what kind of geography and topography we have there and how challenging it was. If you go through my area, you'll see the stone fences, literally 20 feet deep—stones that had to be picked to clear the land. When you came here and you got your 100 acres, you had to have a dwelling and a crop in that first year. It was basically subsistence farming. It was really tough. If you've been to my area, you'll know exactly what I'm talking about—a harsh land. The reason they settled there—the first immigrants came from a region of Poland known as Kashubia—was because when they got there, it reminded them of home. Many of them had settled in Renfrew, which was already an established town, but they wanted a place of their own, so Wilno became that place here in Canada. The other thing that they did very much was, they multiplied.

I was at the coolest family reunion several years ago. One couple who came here from Poland in the 1860s—their descendants numbered well in excess of 800. From one couple—800 descendants who are now members of society here in Canada, contributing to all of the great things that we do and can have in this great country.

My great-grandfather Paul Yakabuski came here with his wife, Anna Kunda, in 1868. It wasn't the most welcoming place for them, because the Anglo-Saxons, the British subjects, had already established here. It was tough for them, but slowly but surely they became more and more integrated and integral. In fact, the first reeve of Barry's Bay was the brother of my grandmother, Henry Chapeskie.

Following an interlude of one other reeve in Barry's Bay, my father, Paul Yakabuski, became the reeve of Barry's Bay, and then he became the very first person of Polish descent to sit in this Legislature. That didn't happen until 1963.

So the history that we've had here is a long one.

There was a second large migration after the Second World War. One of those people was Janusz Zurakowski, a Polish air pilot, and when Germany invaded and occupied, he fought for the British in the RAF, in the Battle of Britain. He was renowned for his skill—many, many downed enemy planes. He became a mentor and a trainer for many of the RAF fighters.

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He then came to Canada and took a job in what was then Malton with the A.V. Roe company, building the Avro Arrow, and became their chief test pilot. He

achieved—in 1958, I believe it was—a speed of Mach 1.86 at 50,000 feet in elevation. He retired from A.V. Roe and moved to the Barry's Bay area, where he and his wife, Anna, had Kartuzy Lodge.

I will tell you, because I'm running out of time: For all his accomplishments, Janusz Zurakowski—who was known as Jan Zurakowski at our end, and many people just called him Zura. In spite of all his accomplishments—I knew him and knew him well—he was one of the most humble people you would ever meet in your life. That is a trait that goes through the entire blood of the Polish people who came here and have made this country so much better.

I know I'm running out of time. I know we've got many other speakers. But I am proud to support this bill and proud to stand here as a descendant of those folks.

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

Mr. Ian Arthur: I'm honoured today to speak in support of Polish Heritage Month for the month of May. It's a celebration that's long overdue in Ontario.

Polish heritage in Ontario and in Canada has been so long buried. The first Polish immigrant to Canada on record actually arrived in 1752 and settled in Montreal, and Wilno, Ontario, is known as the oldest Polish settlement in Canada and has been called Canada's Kashub heartland.

The first wave of Polish migrants landed in Renfrew county in the mid-19th century from northern Poland, following the annexation by Prussia. Subsequent waves of Polish immigrants settled in the prairies in search of workable farmland, especially in Manitoba—St. Clements, Brookfield, Whitemouth, Bifrost, Rosedale, McCreary, Dauphin—as well as throughout Saskatchewan and Ontario. They built our railways, they worked the land, they worked in the coal mines and they've left an incredible mark on the Canadian landscape.

This first wave brought farm workers to Canada just as the Canadian government was opening up the west to settlement. In their homeland, they were labour; in Canada, they were farmers, landowners and independent. That's extremely important. That wave was interrupted by the First World War, but immigration resumed afterwards.

As we are about to return to our communities to talk about Remembrance Day ceremonies, I thought it was actually important to recognize another link between Canadians and the Poles that came out of the Second World War. It's worth mentioning the role of the Polish army in the west during that Second World War and how they fought shoulder to shoulder with Canadians. They landed together at Dieppe. They fought fascism in Italy from 1943 to 1945 as part of the British Eighth Army.

When the Allies' advance towards Rome was stymied by fire from German positions in Cassino, it was the Polish army that took the mountain, at great cost, but ultimately baring the way to the Italian capital for Allied forces. Cassino remains a pilgrimage for Canadian and Polish veterans alike, marking their shared commitment to freedom. Today, the Battle of Monte Cassino and the contributions from Polish forces in the west, as well as Canadians, are

actually commemorated in my hometown at CFB Kingston with Cassino Court.

With the Second World War, the nature of Polish immigration changed. Rather than rural workers looking for land during and after the war, Polish newcomers arrived in Canada as veterans of war, as refugees bringing professional experience and technical qualifications. Since then, the contributions of Polish Canadians have continued to enrich our country, and one only has to wander Roncesvalles, with its incredible restaurants and shops, to see the rich heritage on display.

I have a vivid early memory of one of the first trips I remember my mom taking me on to Roncesvalles. We were visiting her friend Elaine. I remember touring High Park, I remember being taken down to the shops and I remember going in and out of them and trying the incredible food and seeing the beautiful displays that you can see down there. I think I was about five, although my mom would probably correct me and tell me it was definitely a different age than that, but that's what my memory has.

This is a great bill. I'm incredibly pleased to stand in support of it, Speaker, and I want to finish or conclude with this: There's a Polish proverb that says that everyone is the smith of their own fortune. I think that's true, Speaker. The valour, persistence and hard work of the Polish Canadian community is a living testimony to these words, with 270 years of enriching our country with Polish culture, work ethic, faith and resilience. It has been tremendous, and this week is long overdue.

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

Mrs. Robin Martin: It's my pleasure to rise to speak to Bill 18, An Act to proclaim the month of May as Polish Heritage Month here in Ontario. I want to thank the speakers before me for their very great speeches; I really enjoyed listening to them.

If one walks through our great city of Toronto, the influence of Polish Canadians is felt very strongly in many neighbourhoods. My riding of Eglinton–Lawrence is no stranger to the contributions of Polish Canadians. With a community 13,500 strong, Canadians of Polish heritage account for nearly one-tenth of my constituents.

The story of the Polish people—a people who I greatly admire, who greatly prized and fought long and hard for freedom, democracy and independence—is an important one. This spirit of independence was not extinguished when the Polish people moved from their native Poland to come to Canada.

Speaker, the history of Poland, of course, is not a peaceful one. The Polish people sought out freedom and democracy for centuries, but they were denied for centuries. The month of May was selected for Polish Heritage Month, as May 3 is widely celebrated around the world in commemoration of the 1791 constitution. The 1791 Polish constitution was one of the first of its kind in the Western world, as it sought to bring about a responsible constitutional monarchy. They did that several decades before British North America—present-day Ontario—would take similar action.

Unfortunately, this move towards freedom was short-lived in Poland, as Prussia and Russia moved to snuff out the flame of liberty. However, liberty's flame is not so easily extinguished, nor is the soul of Poland, as 150 years of the great powers of Europe trying but failing to quench the spirit of the Polish nation shows. Churchill once called the soul of Poland indestructible, and Mr. Speaker, I really feel that it is: Even under the chains of oppression, the people of Poland gave so much to the world, marching in solidarity with one of their favourite sons, Pope John Paul II, as he spread his message of peace.

Here within Ontario, the Polish people are much the same: strong, resolute, dedicated and upholding the shared values all of us hold so dear. Recognizing these enduring and vital contributions to Ontario's multicultural society, Madam Speaker, I am very happy to lend my voice to support my friends and colleagues the MPPs for Etobicoke–Lakeshore and Renfrew–Nipissing–Pembroke's bill to proclaim May as Polish Heritage Month.

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

Ms. Bhutla Karpoche: I am proud to rise in this House on behalf of the people of Parkdale–High Park, in particular today to stand up for the wonderful Polish community in my riding. But first, I wanted to thank the member from Etobicoke–Lakeshore and the member for Renfrew–Nipissing–Pembroke for bringing forward this bill. By proclaiming the month of May in each year as Polish Heritage Month, the Ontario government recognizes the contribution of Polish Canadians to our province's cultural fabric, history, economy and society.

Speaker, I feel uniquely connected to the Polish community, as Parkdale–High Park is home to a sizeable Polish population. In fact, according to the census, the Polish language is one of the most common mother tongues in my riding. For languages spoken at home, Polish is a close third after English and Tibetan.

I'm also proud to say that Parkdale–High Park is home to the highly anticipated and enormously acclaimed Roncesvalles Polish Festival of Toronto. It is North America's largest celebration of Polish culture, in Toronto's own Roncesvalles Village, a well-known, vibrant and diverse community in my riding. In fact, on the northwest corner of Roncesvalles and Fern, outside the Polish credit union, we have a statue of Pope John Paul II. It is often referred to as the spot where Poland and Canada meet.

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I've been attending the Roncesvalles Polish Festival for years. I've spent hours walking through the crowds, listening to cultural music, enjoying the booths and the traditional clothing that's worn by attendees. I will admit that I've also enjoyed my fair share of perogies.

My favourite part of the Roncesvalles Polish Festival is meeting the people who are so glad to be there to honour their culture and history. It is a wonderful opportunity to see the joyous celebration of Polish heritage, Polish language, music, food, dance, art and many wonderful attractions.

There is a saying that I hear time and again during the Polish festival and it goes something like this: There are

two types of people at the Polish festival: (1) people who are Polish and (2), people who want to be Polish. And after attending the culturally rich festivals, meeting fantastic people who are so proud of their heritage and understanding more about Polish culture, I can see why the saying still stands.

However, in recognizing Polish heritage, we must also acknowledge the challenges and tragedies the community has faced. At the corner of King Street West and Queen West in my riding, standing tall in Beaty Boulevard park, is the Katyn monument, which commemorates the more than 22,000 prisoners of war who were, in April and May of 1940, victims of genocide at the hands of the NKVD, the Soviet secret police, by order of Stalin.

And on April 10, 2010, an aircraft of the Polish air force travelling from Warsaw to carry passengers to a ceremony to mark the 70th anniversary of the Katyn massacre crashed in Smolensk, Russia, killing all 96 people on board. This is known as the Smolensk tragedy. These two devastating events are now linked forever in Polish history.

Every year in Parkdale–High Park, the Canadian Polish Congress holds a memorial mass to mark these deeply horrifying events at St. Casimir’s Church on Roncesvalles Avenue, followed by a wreath-laying ceremony at the Katyn monument. We honour the lives lost and honour the Polish community who still feel the wounds left by these events.

I stand with the Polish communities across the province, and I am so fortunate in my riding to have a wonderful, diverse community in which Polish culture is so prevalent. It allows me to educate myself on their culture through many local opportunities, events and meetings.

Finally, Speaker, I want to say I wholeheartedly support this bill. Having the month of May in each year to reflect and to be educated on the many contributions made by Polish people as well as the struggles that they have faced is incredibly important to strengthen Ontario’s unity and diversity.

I want to thank the member from Etobicoke–Lakeshore and the member from Renfrew–Nipissing–Pembroke once again for bringing forward this bill. With this bill in place, we are creating a more inclusive and diverse province that people from all cultures and backgrounds can be proud to call home.

Thank you to the Polish Ontarians for your wide range of contributions to our province and thank you to the Polish community of Parkdale–High Park that has contributed so much, including to my learning of Polish heritage throughout the years. I am both proud and honoured to represent you.

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

Ms. Natalia Kusendova: My wonderful staff wrote a very nice speech for me today, full of historical facts and figures, but I thought I would take a different angle, as a proud Polish Canadian sitting in this Legislature, to share with my colleagues what it means to me, from my heart, to be a Polish Canadian.

When I came to Canada about 21 years ago and I was asked, “Where are you from?”, I actually couldn’t answer that question because, having moved through many European countries and finally moving here from the Czech Republic and settling first in Toronto and then Mississauga, I really didn’t know what to say to where I am from. I lived in Belgium, Czech Republic, Italy—and I never actually lived in Poland. Also, I was not born in Poland. I was born in Bratislava, which was at that time Czechoslovakia before the partitions.

As I grew up—my mom is Polish and my father is Slovakian—I had the opportunity to really embrace the Polish culture and heritage, which is so vibrant here in Toronto but also in Mississauga and the region of Peel and across Ontario. As we know, we have close to 600,000 Canadians of Polish heritage and close to 1.1 million people living in Canada who identify themselves as Polish. I was able to go to the Polish Scouts of Canada to find a home away from home, because moving to a new country, moving to a new continent, not speaking English at the time, was very, very scary. I did speak Polish; I was fortunate to speak Polish as it was one of the primary languages in my house. So being able to participate in Polish school on Saturdays and go to Polish Scouts of Canada to meet friends that I formed lifelong friendships with, including some of the bridesmaids who were at my wedding this year from the Polish Scouts of Canada, was fundamental to developing my strong sense of identity today.

Today, when somebody asks me, “Where are you from?”—because that’s a very common question we get here in Canada, at least in the region of Peel; we’re proud Canadians, but we also have a rich cultural heritage that we bring forward—I am proud to say that I’m from Poland. Even though I never lived in Poland and I wasn’t born in Poland, I’m so embedded in the rich cultural mosaic because of the ability that Ontario and our beautiful country give us to actually celebrate the country we’re from, the heritage and even the religion.

For Poles, Catholicism is a very important part of our heritage. During the 123 years of partitions that we experienced as a country, when Poland was completely erased from the map of Europe, it was in the church basements that the culture, the language and the patriotism survived. Poland didn’t exist on the map of Europe for 123 years, but this November 11, we will be celebrating the 103rd anniversary of Poland’s independence.

I’m so proud that my colleague the MPP for Etobicoke–Lakeshore, as well as the MPP for the region that I know as Kaszuby, brought this bill forward. I think it’s so significant that it was these members, one who has Polish heritage but another one who doesn’t, who brought this bill forward, because it goes to show that it doesn’t really matter where we’re from; we are able to celebrate each other’s heritage.

In conclusion, I wanted to say one more thing. I recently got married to a Coptic Canadian, and we passed Egyptian Heritage Month this year as well. So for my future children, I think it’s absolutely wonderful that we will be

able to celebrate together Egyptian Heritage Month and Polish Heritage Month. This is what Ontario and Canada are all about.

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

Hon. Kaleed Rasheed: Dzien dobry, Speaker.
Remarks in Polish.

I am pleased and honoured to rise in support of Bill 18, An Act to proclaim the month of May as Polish Heritage Month, brought forward by my good friend the member from Etobicoke–Lakeshore.

Ontario is home to more than 523,000 people of Polish heritage, and many of them call my riding of Mississauga East–Cooksville home. In fact, the John Paul II Polish Cultural Centre in my riding is the largest of its kind in the country. It was built to help preserve and foster the heritage of Polish Canadians and also to serve the needs of the greater community.

May 3 is a day that is widely celebrated by Polish people around the world to commemorate the 1791 constitution, which is a symbol of Poland's aspiration for freedom, democracy and independence. It is considered one of the most important Polish holidays, with many parades and festivities taking place throughout the month of May. Having a Polish Heritage Month will help contribute to the education of Ontarians regarding the hardship Canadians of Polish descent have endured to achieve their freedoms, underscoring the significance of the Polish Canadian community in Ontario's history.

Speaking about history, November 11 is Polish Independence Day, which commemorates the anniversary of the restoration of Poland's sovereignty as the Second Polish Republic in 1980. I know I don't have much time, Speaker, but proclaiming May as Polish Heritage Month would show that the province of Ontario recognizes the impact Polish Canadians have had on Ontario's history, culture and democratic institutions. These core values have contributed to the strength and diversity of Ontario.

1730

Last, but not least, thank you to the Polish community for feeding me with a lot of pierogis and my favourite pączki, the custard one. I love it. Thank you so much for giving me the honorary citizenship, because my last name in the Polish community in my riding is Rasheedski. I appreciate it.

Gratulacje.

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

Mr. Rudy Cuzzetto: It's an honour to rise here today for Bill 18, the Polish Heritage Month act, and I want to thank my friends the members from Etobicoke–Lakeshore and Renfrew–Nipissing–Pembroke for their leadership in co-sponsoring this bill. I also want to join in welcoming the new Polish consul general to Canada.

Over a million Canadians claim Polish ancestry, and about half live here in Ontario, including over 43,000 in the city of Mississauga and over 10,000 in my riding of Mississauga–Lakeshore. Every day, we're blessed by their incredible contributions, which have enriched our lives

and helped to shape our culture, our economy, our politics and our identity.

Speaker, 230 years ago, on May 3, 1791, Poland adopted the first modern, written and democratic constitution in Europe. It's a national symbol of Poland and an object of great pride. But as we know, the history of Poland is often a tragic one. Constitution Day was banned, and Poles suffered under many years of partition and fought against the horrors, atrocities and oppression of both Nazi and communist occupation. But they had the help of generations of Polish Canadians who always supported the cause of a free and independent Poland.

When the Iron Curtain fell, Poland was finally liberated, in 1989. It was, in large part, thanks to the leadership of St. John Paul II, both the greatest Pole and the greatest pope of the modern era. He was also the only pope to visit us here in Ontario, where he conducted mass at Downsview Park, not far away from here, for over 800,000 people.

Next Thursday, on Remembrance Day in Canada, we also celebrate Polish Independence Day, and I encourage all Ontarians to learn more about Polish history and heritage.

Speaker, I'll share just one story. As the Duke of Wellington was leading the British to victory against Napoleon, the hussars, or the "winged horsemen" of his Polish allies, were among the most effective army units in Europe. The duke was so impressed, he made the colours of the hussar banner the colours of the British army. In turn, red and white became the colours of the Royal Military College of Canada and its flag. But not only that, George Stanley later used them to design our Canadian flag—

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

I return to the member for Etobicoke–Lakeshore for her two minutes to reply.

Ms. Christine Hogarth: I want to thank the members from Kingston and the Islands, Parkdale–High Park, Mississauga Centre, Mississauga East–Cooksville and Mississauga–Lakeshore, and of course, my co-sponsor, the member from Renfrew–Nipissing–Pembroke, for sharing their stories today.

One thing I love about this Legislature is, well, we often disagree, but sometimes we do agree, and I love hearing the stories of people's lives, what they've gone through. That's what makes Ontario such an amazing place.

I was born and raised in a small town, Thunder Bay, Ontario. My grandparents were born in Thunder Bay, Ontario. So hearing about your cultures and what we have now become as a Parliament is just so amazing. It's great to know all of you and your stories. So I thank you for sharing some of those today.

One of the reasons I got involved in public life was to safeguard Ontario's democratic spirit, and there's no better way to do that than to celebrate the ways in which immigrant communities have enriched our province. This is especially important in why I'm bringing this Polish heritage bill forward today—whose ancestors fought for freedoms and to achieve liberty against centuries of invasion

and aggression, including Nazi and Soviet occupation. I just want to thank everybody once again for their time.

I want to also wish the Consul General a wonderful stay in Ontario, and I want to end with a quote from her: “The Polish community has contributed significantly to Ontario, its development and culture ever since the first major wave of Kashubians immigrated in 1858. The recognition of the Polish community’s contributions by the province of Ontario through Bill 18, Polish Heritage Month in May, honours this historic bond.”

Thank you very much.

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

Ms. Hogarth has moved second reading of Bill 18, An Act to proclaim the month of May as Polish Heritage Month.

Is it the pleasure of the House that the motion carry? I declare the motion carried.

Second reading agreed to.

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

Ms. Christine Hogarth: Regulations and private bills.

The Acting Speaker (Ms. Jennifer K. French): Is the majority in favour of this bill being referred to the Standing Committee on Regulations and Private Bills?

Interjection: Agreed.

The Acting Speaker (Ms. Jennifer K. French): Oh, good.

All matters relating to private members’ public business having been completed, this House stands adjourned until 10:15 on Monday, November 15, 2021.

The House adjourned at 1736.

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Gélinas, France (NDP)	Nickel Belt	
Ghamari, Goldie (PC)	Carleton	
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Harden, Joel (NDP)	Ottawa Centre / Ottawa-Centre	
Harris, Mike (PC)	Kitchener—Conestoga	
Hassan, Faisal (NDP)	York South—Weston / York-Sud— Weston	
Hatfield, Percy (NDP)	Windsor—Tecumseh	Second Deputy Chair of the Committee of the Whole House / Deuxième vice-président du comité plénier de l'Assemblée législative
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Hogarth, Christine (PC)	Etobicoke—Lakeshore	
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Hunter, Mitzie (LIB)	Scarborough—Guildwood	
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Karahalios, Belinda C. (NBP)	Cambridge	
Karpoche, Bhutilla (NDP)	Parkdale—High Park	
Ke, Vincent (PC)	Don Valley North / Don Valley-Nord	
Kernaghan, Terence (NDP)	London North Centre / London- Centre-Nord	
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Kusendova, Natalia (PC)	Mississauga Centre / Mississauga- Centre	
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Lindo, Laura Mae (NDP)	Kitchener Centre / Kitchener-Centre	
MacLeod, Hon. / L'hon. Lisa (PC)	Nepean	Minister of Heritage, Sport, Tourism and Culture Industries / ministre des Industries du patrimoine, du sport, du tourisme et de la culture
Mamakwa, Sol (NDP)	Kiiwetinoong	
Mantha, Michael (NDP)	Algoma—Manitoulin	
Martin, Robin (PC)	Eglinton—Lawrence	
Martow, Gila (PC)	Thornhill	
McDonell, Jim (PC)	Stormont—Dundas—South Glengarry	
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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	

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Nicholls, Rick (IND)	Chatham-Kent—Leamington	Chair of the Committee of the Whole House / Président du comité plénier de l'Assemblée
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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	
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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
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Romano, Hon. / L'hon. Ross (PC)	Sault Ste. Marie	Minister of Government and Consumer Services / Ministre des Services gouvernementaux et des Services aux consommateurs
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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
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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	
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Wilson, Jim (IND)	Simcoe—Grey	
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