

Legislative  
Assembly  
of Ontario



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de l'Ontario

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(Hansard)**

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(Hansard)**

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Lundi  
22 novembre 2021

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Clerk: Todd Decker

Président : L'honorable Ted Arnott  
Greffier : Todd Decker

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LEGISLATIVE ASSEMBLY  
OF ONTARIO

Monday 22 November 2021

ASSEMBLÉE LÉGISLATIVE  
DE L'ONTARIO

Lundi 22 novembre 2021

*The House met at 1015.*

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

*Prayers.*

MEMBERS' STATEMENTS

HOME CARE

**M<sup>me</sup> France Gélinas:** I continue to receive numerous messages from patients and their families about the lack of care from the Home and Community Care Support Services. Patients are receiving below-standard level and quality of care from overworked and underpaid home care nurses and PSWs, not to mention the multiple missed visits weekly.

A year and a half ago, this government rushed through their Bill 175. The goal was Connecting People to Home and Community Care Act. Well, what did they connect, Mr. Speaker? The same legacy, private, for-profit providers that underpay their staff and shortchange patient care. The result is that no one came for Mrs. S. for days after her surgery; a special-needs child in my riding cannot attend school because there is no provider available to help them at school; not to mention Mrs. Innocente's mom, who is very medically fragile but cannot get confirmation that the home care worker is vaccinated.

When these families approach the government to make a complaint, they say, "Oh, bring your complaint to the providers." The providers—when they bring their complaint, nothing happens. The government funds home care. It is responsible for this important part of our health care system, yet this program fails more people than it helps daily. It has to change.

1020

DR. BUDHENDRANAATH DOOBAY

**Mr. Deepak Anand:** It is a pleasure to rise today to share the story of a true inspiration, a spiritual leader, professor of medicine, cardiovascular surgeon, philanthropist, lifelong preacher and priest, Dr. Budhendranauth Doobay. His contributions include building Anand Bhavan—a home for seniors—and a Montessori school in Ontario, providing shelter to orphaned girls in India, offering free dialysis to patients in need at Doobay Medical Centre, and providing computers to youth in Guyana.

In 1993, Dr. Doobay was awarded the Order of Ontario, and the Queen's Golden and Diamond Jubilee awards in Canada in 2012. Guided by the principle of Vasudhaiva Kutumbakam, "the world is one family," Dr. Doobay has

played a vital role in promoting Hinduism's core teachings while advocating for the religious diversity and inclusiveness that make our province beautiful. He is the founder of Vishnu Mandir in Richmond Hill, a 27,000-square-foot facility that features the Canadian Museum of Indian Civilization, embodying the principle of "ahimsa," non-violence.

*Remarks in Hindi.*

Thank you for being the champion for Sanatana Dharma. Thank you for leading the path for us today and for the generations to come. I would like to express my heartfelt gratitude to Dr. Doobay for strengthening our province through his passion for community service and community well-being.

OPTOMETRY SERVICES

**Mr. Faisal Hassan:** I rise this morning on behalf of the decent and hard-working people of York South–Weston. Recently I hosted a virtual town hall on eye care with residents and eye care providers from York South–Weston. I heard from residents whose children cannot get their eyes tested and from seniors who cannot get eye tests that could literally save their vision. This unacceptable and unnecessary situation is due to this government's inability to negotiate a fair deal with optometrists. When will this government stop their dangerous games, which are only putting children's and seniors' vision at risk, and negotiate in a serious and fair manner?

Luisa, who participated in our town hall, said, "It is going to cost the health care system 10 times as much for stuff down the road that's not being diagnosed. Once you do it at a later stage it's too late."

Michael stated, "The situation is urgent, and my long-term health is being directly affected. The government needs to get back to the table and address this issue quickly, so that people like me can get on with their lives."

What does the government have to say to Luisa and Michael? And when will they take responsibility, stop pointing fingers and finally bring the fairness optometrists deserve and the fairness that seniors like Luisa and Michael need in our community of York South–Weston?

FERRERO CANADA

**Mr. Will Bouma:** I am happy to rise in this great House today to talk a little about the largest single employer in my home riding of Brantford–Brant. Ferrero is a company that is near and dear to many people in Ontario—and, indeed, all over the world, as a matter of fact—for the

beloved, high-quality products that they make every single day.

Last Thursday the Premier and I were given a tour of Ferrero's spectacular Brantford–Brant production plant, where they make Nutella, Tic Tac, Ferrero Rocher and Nutella & GO! The sweet smell of freshly roasted hazelnuts and chocolate, a combination put together by the company's founders, Pietro, Giovanni and Piera Ferrero, will always be etched in my memory. We were most impressed by the quality levels that far exceed the industry standards—so much so that in 2019, Ferrero opened its own on-site cocoa processing plant in Brantford so they could process raw cocoa beans directly from the country of origin to ensure freshness and their very exacting standards.

So the next time you dip into that jar of Nutella in your kitchen pantry, or share a Ferrero Rocher over the upcoming holidays, know that it was made by Canadian workers with the freshest ingredients by some of the finest people in Brantford–Brant. To everyone working at Ferrero, on behalf of the province of Ontario, thank you.

#### ISLAMOPHOBIA

**Mr. Gurratan Singh:** Yumna Afzaal, Madiha Salman, Talat Afzaal, Salman Afzaal: Four out of five family members were murdered in a terrorist white supremacist attack earlier this year in London, Ontario. Fayez Afzaal, a boy of nine, was the only survivor from this attack, and he was put into serious condition from this terrorist attack.

This is just one of the many acts of hatred that have recently targeted Muslims in Ontario. I remember talking to Muslims after this terrorist attack, and they described to me the impact of this violence: how Muslim women were afraid to leave their home wearing their hijab; how Muslim families had made the terrible decision not to go for evening walks wearing their traditional clothing out of fear that they, too, would be attacked.

That's why the calls from the Muslim community after this terrorist attack were so clear. Yes, we must condemn this violence, but the time for words alone is over. We need systemic change to challenge and combat Islamophobia and hate in Ontario. That's why the Ontarian NDP has partnered with the National Council of Canadian Muslims to put forward the Our London Family Act to make sure that Muslims again are never afraid to walk the streets of Ontario. That's why I am calling on the Conservative government to do the right thing and to pass this act as soon as possible.

#### GOVERNMENT'S RECORD

**Mr. Roman Baber:** Speaker, I was born and spent the first nine years of my life in the communist Soviet Union, so when I allege that the government is engaging in conduct one would expect from a communist regime, I don't do so lightly. But judge for yourselves.

**The Speaker (Hon. Ted Arnott):** You're going to withdraw.

**Mr. Roman Baber:** Withdraw.

**The Speaker (Hon. Ted Arnott):** Thank you. Please continue.

**Mr. Roman Baber:** Former chief of staff Dean French tried to appoint his son's friend and wife's cousin to lucrative positions abroad for which they weren't qualified. That's textbook communist. The government forced private businesses to hang a sticker containing political speech at their place of business. That's communism. The government tried to put itself above the law by giving itself absolute immunity from litigation with the Crown Liability and Proceedings Act. That's communism.

With Bill 218, the government rewrote negligence law applicable to long-term care homes in the middle of a trial, making it impossible for families to get closure and justice. That's communism. The government invoked the "notwithstanding" clause, the nuclear option, to overrule a court decision for the first time in Ontario's history, and over what? Over elections legislation that helps the government get re-elected. That's communism.

And now the government continues—

**The Speaker (Hon. Ted Arnott):** The next statement.

#### VIOLENCE AGAINST WOMEN

**Mr. Stephen Crawford:** November is Woman Abuse Prevention Month. This is a month for all of us to stand with women and girls against any form of abuse. Abuse comes in many forms, whether emotional, physical, sexual, and we need to be aware of the signs. The number of reported incidents is unfortunate and shocking. Half of women aged 16 have experienced some form of violence.

There are outstanding organizations concentrated on supporting young women and girls who are trying to leave their situations. In Halton, SAVIS and the Halton Women's Place are helping survivors by providing a safe and comfortable environment with dedicated resources to overcome the emotional trauma that has been experienced. These two organizations also provide proactive educational sessions to the general public, with the key goal of prevention through education. On November 25, from 7 p.m. to 8 p.m., the Halton Women's Place will be hosting a free education event virtually with the topic "Community Conversation on the Role of Males in Ending Gender-Based Violence."

As an aside, I did want to mention I made a contribution to the Halton Women's Place in memory of my great friend Andrew McMurtry's mother, Theresa, who passed away November 1. Theresa was a great woman and a loving mother who will be missed greatly. I couldn't think of a better way to honour Theresa's legacy than by supporting the Halton Women's place.

SAVIS and Halton Women's Place are truly changing the lives of women and girls, and I cannot thank you enough for the meaningful work you are doing.

#### HOSPITAL FUNDING

**Mr. Kevin Yarde:** My riding of Brampton North has a hospital which is the only hospital in Brampton which is a

full-fledged hospital, Brampton Civic Hospital, which cares for over 700,000 people in Brampton.

1030

Earlier this year, the government promised an additional hospital in Brampton. What we've learned since, Mr. Speaker, is that this government is providing only an additional wing to Peel Memorial hospital. This is not enough.

On top of that, the government has promised 250 beds for Peel Memorial. We need 850 beds in order to bring Brampton up to the Ontario average. I'm—

*Interjections.*

**Mr. Kevin Yarde:** I want this government, I want Brampton South and I want Brampton West to listen to me.

We need a full-fledged hospital. We need an additional hospital in Brampton. What's happening right now is incredible, Mr. Speaker. We are seeing many people in Brampton going to Georgetown or other places in the GTA just to get care.

Right now, the hospital which we have at Peel Memorial will not be able to service people who have heart attacks, people who have strokes or people who are cancer patients. This is why I'm calling for this government to stop what's going on in Brampton. We need a full-fledged hospital. We need better health care, and I wish this government would stand up and listen and do the right thing.

#### MENTAL HEALTH AND ADDICTION SERVICES

**Mr. Lorne Coe:** The government is investing approximately \$350,000 to increase mental health supports for post-secondary students at Durham College in my riding and Ontario Tech University. This funding, Speaker, is part of an additional \$8.7 million for Ontario post-secondary institutions announced in the 2021 Ontario Economic Outlook and Fiscal Review: Build Ontario. Importantly, this investment builds on the government's record supports to address mental health and addictions challenges from the 2021 budget, for a total of \$28.5 million in the 2021-22 mental health supports at Ontario post-secondary institutions.

Speaker, Ontario's publicly assisted colleges, universities and Indigenous institutes play an important role in supporting the mental health needs of Ontario's post-secondary students, especially during the COVID-19 pandemic. Our government is committed, absolutely committed, to protecting our progress against the COVID-19 pandemic and providing mental health supports for those in Whitby and other parts of the region of Durham who need them. It's another example of this government listening carefully to residents in the region of Durham.

**The Speaker (Hon. Ted Arnott):** That concludes our members' statements for this morning.

#### ANNUAL REPORT, AUDITOR GENERAL

**The Speaker (Hon. Ted Arnott):** I beg to inform the House that the following document has been tabled: the

2021 Annual Report of Environmental Audits from the Office of the Auditor General of Ontario.

#### VISITORS

**The Speaker (Hon. Ted Arnott):** I'm very pleased to inform the House that page Joel Kronis from the riding of University–Rosedale is today's page captain. We have with us today at Queen's Park his mother, Tamara Kronis, and his father, Martin Traub-Werner. I hope Martin won't mind me pointing out that today is his 50th birthday. Happy birthday.

Page Elinor Carter from the riding of Parkdale–High Park is also today's page captain. Joining us today is her father, Richard Weiser. Welcome to the Legislative Assembly of Ontario. We're delighted to have you here.

#### QUESTION PERIOD

##### COVID-19 IMMUNIZATION

**Ms. Doly Begum:** My question is to the Premier. On Friday, parents finally had some relief to hear that the first vaccine for their youngest children has been approved. This week, children from five to 11 can be immunized, but it's up to parents to contact their public health unit for details. That's because the province's central website still does not allow appointments for children.

Speaker, my question is, why was the provincial booking system not yet set up for children to be pre-registered for these vaccines?

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

**Hon. Christine Elliott:** I thank the member opposite for the question. This is a really wonderful time. It's great news on Friday that Health Canada approved the vaccine for use, a different vaccine than the adult vaccine, of course, for children aged five to 11. We're ready to deliver those vaccines.

Parents will be able to make appointments for their children as of tomorrow on the online booking system, but we have more than that because we know that while most parents are happy to have their children vaccinated, some still have some questions. And so we have a collaborative relationship with SickKids hospital for any parent who wants to ask questions before having their child vaccinated. They can simply call 1-833-943-3900 or make an appointment with SickKids at [sickkids.ca/vaccineconsult](https://sickkids.ca/vaccineconsult). It's really important that parents consider having their children vaccinated, but we want to make sure all their questions can be answered before they do that.

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

**Ms. Doly Begum:** I want to thank the minister for the answer, because this morning we heard from parents that SickKids was already booked up for those appointments

that the minister just mentioned, as well as that no one was picking up the calls for the 1-800 number she just gave.

Mr. Speaker, in other provinces—they could have set up these websites ahead of time—the systems were already in place for parents to pre-register their children. In British Columbia, for example, 75,000 kids are already signed up for the vaccine. Alberta launched online pre-registration last week. In Manitoba, they allowed registration this morning. That has given a lot of parents across many provinces some certainty, which helps parents know what plans to make; for example, get their child care arrangements or take time off.

Why has Ontario not been able to do what other provinces have done? Is it just incompetence from this government? We are proposing the solutions, but the government doesn't seem to act on time, so maybe they should just go on a vacation, for example, and hand over the job to us. We knew this was coming. We should have done this months ago.

**Hon. Christine Elliott:** The government is certainly well-prepared for the immunization of children aged five to 11. We have been working on a plan with 34 local public health units for months. We are ready as soon as the supply is ready.

One of the issues is, of course, that you can't make bookings until you know exactly when it's going to be approved and exactly when the vaccines are going to be ready.

As of tomorrow, people will be able to make the appointments for their children. We are expecting two large shipments today and tomorrow. Over one million vaccines will be received in Ontario. We are shipping them the same day to all of the 34 public health units, and we will be ready to have vaccines going into children's arms as of this Thursday, November 25.

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

**Ms. Doly Begum:** Speaker, I can just imagine, tomorrow morning, the number of calls that our offices will get because so many parents won't be able to book the vaccines for their kids, and that's because the website will crash or there will be no more appointments available.

The province has to do more, and their own data shows that. Last week, fewer than 70% of 12-year-olds were fully immunized. In many communities in the province, the vaccination rates are still low, which leaves young people more vulnerable as case counts have rapidly increased.

Dr. Tam, Canada's chief medical officer, says the virus is now disproportionately affecting Canada's children.

So my question is, what steps will this minister take to ensure our youngest children are quickly vaccinated?

**Hon. Christine Elliott:** Speaker, with respect, the member is imagining problems that don't even exist. Our system has not crashed yet. We have had one of the most successful vaccination programs in the entire country. We have 89% of our population aged 12 years and older having received their first dose and 86% having received the second dose. The system hasn't crashed yet, and the system is not going to crash for children aged five to 11.

We are receiving the vaccines, people can make the appointments, and children will be able to get those vaccines in a timely manner.

#### ANTI-RACISM ACTIVITIES

**Mr. Terence Kernaghan:** My question is to the Premier.

In June, our community of London faced a senseless Islamophobic attack. Three generations of the Afzaal family were killed, leaving a nine-year-old as the only survivor. No one should be at risk of such an atrocity. That's why Ontario needs to take action to stop Islamophobia, white supremacy and hate crimes.

We'll table a new bill, the Our London Family Act, developed in partnership with the National Council of Canadian Muslims, early next year. Will the government work with us to pass and implement this important legislation?

1040

**The Speaker (Hon. Ted Arnott):** Minister of Citizenship and Multiculturalism.

**Hon. Parm Gill:** Mr. Speaker, I want to thank the member opposite for the important question. Islamophobia and hate have absolutely no place in our province of Ontario. The horrific terrorist attack in London was a solemn reminder that solutions to address racism and eliminate our province of hate are needed urgently.

Our government continues to work closely with our community partners like the National Council of Canadian Muslims. We know there is more work that needs to be done. That's why we are making the necessary investments, including the \$8.1 million in our recent fall economic statement to combat racism and hate, including doubling the Anti-Racism and Anti-Hate Grant program from \$1.6 million to \$3.2 million.

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

**Mr. Terence Kernaghan:** Speaker, for far too many Canadians, feeling unsafe while simply going for a walk or going to worship is much, much too common. Police-reported hate crimes have grown rapidly over the past few years and many, many more go unreported. As the NCCM CEO Mustafa Farooq has said, hate-fuelled acts of terrorism must stop.

For the Muslim community in London and across Ontario, it's a time for action, not just words. Will the Premier commit today to work with us to stop white supremacy here in Ontario?

**Hon. Parm Gill:** On this side of the House, we condemn any act of hate and violence in the strongest terms possible. Ontario's Anti-Racism Directorate continues to lead the government's efforts when it comes to anti-racism work, including Islamophobia.

Mr. Speaker, let me share a quote with the House that the National Council of Canadian Muslims had to say about how we have taken action: "The NCCM welcomes new increases in funding to strengthen racialized communities in the province of Ontario." That's from the CEO of NCCM.



We are absolutely committed to taking strong action to combat racism and hate-motivated violence in our province. We will continue to defend the rights of everyone in our great province of Ontario to worship, practise their faith and live their lives free of fear, intimidation and violence.

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

**Mr. Terence Kernaghan:** Speaker, as a Legislature, we must not only condemn acts of hate, acts of terrorism and acts of Islamophobia, we must also distinctly and unequivocally call out white supremacy for what it is. The Our London Family Act is going to include new tools that members from all parties, I hope, will support. It will introduce new resources in Ontario schools so young people will understand Islamophobia. It will work to dismantle white supremacist groups by preventing their registration as societies as well as preventing intimidation at places of worship such as mosques, synagogues and gurdwaras, and it will re-establish a fully funded Anti-Racism Directorate.

Will the Premier commit today to work with us to implement these tools to stem a rising tide of hate in our province?

**Hon. Parm Gill:** Mr. Speaker, I think we can all agree in this House that there is definitely more work that needs to be done and it's part of the reason the Premier and our government take this absolutely very, very seriously. We, of course, thank our partners like NCCM and other organizations. Since taking over my role in this ministry, I have been out and about meeting with organizations and community leaders right across our province, hearing first-hand recommendations on what we can do to work together to address these serious concerns.

I'd like to remind the members opposite that this is not a political issue. If they are serious about helping address this issue, work with our government, work with us. As I mentioned, we are making the necessary investments. I'd like to remind the members opposite that every single investment—\$8.1 million—that we have put forward in our recent fall economic statement, the opposition voted against.

#### SOCIAL ASSISTANCE

**Ms. Bhutla Karpoche:** My question is to the Premier. The cost of living has skyrocketed, and life in Ontario is simply not affordable for the everyday person. Things are even worse for people on social assistance, like my constituent Laura, who is on ODSP. Her maximum allowance for rent is only \$497—\$497 when the average rent for a one-bedroom apartment in Toronto is nearly \$2,000.

My question is simple: With the cost of everything rising, why aren't social assistance rates?

**The Speaker (Hon. Ted Arnott):** In response, the Minister of Children, Community and Social Services.

**Hon. Merrilee Fullerton:** Thank you to the member opposite. We know that this system has been challenged. We acknowledge the issues with this system. That's why

we've been working across ministries, across government to make sure that we get the supports to our most vulnerable people, through ODSP, through Ontario Works. We've rolled out about \$1 billion in social services relief. We also put in an increase as soon as we became government. We know the pressures that are on this system.

This fiscal year, funding for social assistance saw an increase of \$341 million. We know that this is an important area of concern and that's why so much emphasis is put on this area across ministries.

We will continue to be committed to making sure the vital services go to our most vulnerable people. Thank you for your question.

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

**Ms. Bhutla Karpoche:** Back to the minister: With rates being frozen under consecutive Liberal and Conservative governments, and now with the rate of inflation and cost-of-living increases, people receiving social assistance are further behind and living in deeper poverty than 17 years ago.

But it's not only the social assistance rates that need catching up, the program policies are also incredibly outdated. When my constituent Laura considered asking her boyfriend to move in, ODSP told her it meant her allowance would be clawed back. Will the minister update these policies that punish people on social assistance for forming relationships and living with a partner?

**Hon. Merrilee Fullerton:** Once again, thank you for the question. Our government is continuing its effort to renew the social assistance area, whether it's through the—

*Interjection.*

**Hon. Merrilee Fullerton:** Well, look, what we have is the billion dollars that have gone into the social services and relief funding; working the Ministry of Labour, Training and Skills Development, the micro-credentialing strategy; the Roadmap to Wellness—\$3.8 billion over 10 years to create a coordinated mental health system that supports people and helps them reach their full potential; as I said, \$1 billion for the Ontario Social Services Relief Fund but also another \$1 billion for new child care spaces in schools over the coming years, and that's on top of the 19,563 new spaces already added last year; the \$1.2 billion last year in the Ontario Child Benefit. We're investing \$90 million to provide dental care to 100,000 low-income seniors. We've introduced the CARE tax credit, which will provide about 300,000 families up to 75% of their eligible child care expenses. And this builds on the work our government has done on the low-income individuals and families tax credit, or LIFT, which will result in Ontario personal income tax being reduced or eliminated for about 1.1—

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

#### MINING INDUSTRY

**Mr. Rudy Cuzzetto:** My question is for the Minister of Northern Development, Mines, Natural Resources and

Forestry. We have seen a lot of news recently about the potential that exists in the Ring of Fire. There are billions of dollars of untapped minerals right here in northern Ontario. These minerals can be used to build electric car batteries, which would help us transition to a greener transportation option, creating jobs and providing economic prosperity for communities in the Far North.

After years of previous governments saying no, Ontario deserves a government that will finally say yes to unlocking the potential of the Ring of Fire for communities in the north and others in Ontario. Through you, Speaker, will the minister say yes to changing the Far North Act?

**The Speaker (Hon. Ted Arnott):** Member for Peterborough–Kawartha and parliamentary assistant.

**Mr. Dave Smith:** Thank you to the member from Mississauga–Lakeshore for that question. I could sit and talk about the Ring of Fire all day long. It gives me a great deal of pleasure to rise and talk about the Ring of Fire in this case.

Speaker, we're at a critical juncture right now when it comes to the electric vehicle market. Companies are rapidly preparing for a shift to an all-electric vehicle fleet. We've got the minerals here in Ontario. We've got the manufacturing capacity to become the global leader in electric vehicles.

1050

It's unfortunate that for 15 years, the previous government, supported by the NDP, made no progress whatsoever on the Ring of Fire and the vast potential it holds for the surrounding First Nations communities. After years of saying no to economic prosperity, we're saying yes by making changes to the Far North Act. I'll be happy to elaborate in the supplementary.

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

**Mr. Rudy Cuzzetto:** Back to the minister: We all know electric vehicles will be a key part in the fight against climate change. Myself, being a worker at the Ford Motor Company, I know how important this will be. The previous government, who talked a big game on climate change, clearly missed an opportunity to position Ontario as a leader in the electric vehicle market. Speaker, they said no. It seems that Ontario is playing catch-up when it comes to this file.

While it is refreshing to see that the fall economic statement included language that will better position Ontario to be at the forefront in the mining of materials that will power the electric vehicles of tomorrow, we also can't do it without carefully considering and consulting with the partners in First Nations communities.

Speaker, through you: Will the minister tell the House if our First Nation partners were consulted in this process?

**Mr. Dave Smith:** Our government remains committed to building strong relationships with First Nations and the Far North. We need to work with them to unlock the economic potential of this region, and the changes in the FES were extensively consulted with by First Nation partners and industry. After careful consideration and input, this legislation, if passed, would target barriers that

prohibit economic development in Ontario's Far North, while keeping environmental protections and consultation with communities in place. These changes would allow us to mine the minerals needed for electric vehicles, while First Nations are able to build infrastructure that will serve their communities.

Speaker, we're making sure that these proposed changes will benefit communities for generations to come. We're saying yes to jobs, yes to economic opportunity for all of Ontario, while the Liberals and the NDP would be happy to say no and say goodbye to the jobs and the prosperity that the Ring of Fire could bring.

## CHILD CARE

**Mrs. Jennifer (Jennie) Stevens:** My question is to the Premier. Last week, I was on a panel discussing affordable child care in Niagara. It is clear that the cost of doing nothing while playing politics is way too high. The municipality is flagging that child care providers in Niagara are operating at 50% staff capacity, so when you talk about adding child care spaces and tax credits, this ignores the problem at hand. It is no wonder Ontario has the highest child care fees in this country, no wonder that I have pediatricians highlighting that good child care is fundamental to child development, and families need support urgently.

We know that child care will receive increased funding when the Premier finally gets to work and makes a deal. So why is Ontario not acting today to correct the low-wage workforce that has led to a staffing crisis in Niagara right now?

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

**Hon. Stephen Lecce:** Thank you to the member opposite for the question. We do appreciate the work of early childhood workers in the province of Ontario, who make a difference in our child care settings. It's why we, on an annual basis, invest \$2 billion to ensure quality child care is available to moms and dads in Ontario.

It is true—the member is right—that child care is inaccessible and unaffordable for too many Canadians. Under the former Liberal government, child care rose 40% above the national average. We know that is unacceptable. It's why the government, in our first budget, introduced an Ontario Child Care Tax Credit to reduce costs for working parents. We enriched that tax credit by an additional 20%, announced by the Minister of Finance in the last budget, to help more families, providing \$1,500 per child on average.

We're committed to getting a deal. We're working with the federal government this week, meeting with them with the aim to land a fair deal for the people we serve: one that's accessible, one that is sustainable and flexible to support all parents in this province.

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

**Mrs. Jennifer (Jennie) Stevens:** Back to the Premier, Speaker: Last summer, Kim Cole, the executive director of A Child's World, a large Niagara child care provider,

wrote a letter about the staffing crisis for ECEs and what the cost is in Niagara. They lost almost 300 spots due to staff shortages. I am puzzled when this government talks about making more spots when we cannot even sustain the ones we have. A Child's World could add another 200 spots today if they had the staff. This is support for families allowing parents—mostly women, may I add—to go back to work.

We are in a crisis today. It is a disgrace that we know that it takes two years to become a registered ECE, so every day we lose in stalled negotiations has a real cost for Niagara.

Premier, if you are determined to hold up the child care deal with the federal government, is it not sensible to start investing in the ECE workforce in Ontario with larger investments immediately, because we are in a crisis today and know funding will be there tomorrow?

**Hon. Stephen Lecce:** I thank the member opposite for the question. The government and the ministry does provide a wage enhancement grant to child care workers with the aim of retaining them because we know that there is more demand than the spaces available. That's the legacy of the former Liberal government: too few spots and expensive for too many families.

We know we can do better. That's why we're sitting with the federal government, both to stabilize the workforce and really to make child care more affordable in this province. It is way too expensive for families. We are on their side by taking action through the introduction of the Ontario Child Care Tax Credit, which is making a difference in reducing costs.

But we do believe, more systemically, that the solution is for the federal government to increase their investment from 2.5% today to something much higher, much more equitable—again, that they have skin in the game as well—to make affordability a priority for all families in this province.

Mr. Speaker, we're investing \$2 billion every year, \$1 billion over five years to create more spaces. Some 35,000 spaces were created last year because of our actions. We are continuing to work with the sector and the feds to get a deal that is good for all families.

#### EMPLOYMENT STANDARDS

**Mr. John Fraser:** Speaker, on Friday, Health Canada approved the Pfizer vaccine for kids aged five to 11, and the first doses arrived last night in Hamilton. They will be in kids' arms by the end of the week. It is a really important step that the province has taken to make sure we protect our kids and their families.

Children's vaccines need parental consent which means, in most cases, parents are going to have to be present. They'll need time off work. The government's temporary paid sick days are set to expire on December 31 and it's actually not clear whether workers can get the time off to get their children vaccinated.

So, Speaker, through you, will the government commit to making paid sick days permanent and ensure that all parents can use these days to get their children vaccinated?

**The Speaker (Hon. Ted Arnott):** The government House leader.

**Hon. Paul Calandra:** I thank the member for the question. The member knows, of course, that this government did bring in, in co-operation with our federal partners, a number of sick days that workers could use.

We also were the first government in the country, in fact, that protected workers and their ability to take time off either for themselves or their family should there be an issue with COVID in their home. I'm very proud of the fact that we were one of the first governments across the country to do that. Speaker, we continue to offer that. We understand how important it is for parents to get their children vaccinated, as the Minister of Health highlighted.

We are doing extraordinarily well in this province with close to 90% of our population having received a first dose, and I believe close to 87% having received that second dose. We expect that there will be every bit as—

**The Speaker (Hon. Ted Arnott):** Response?

**Hon. Paul Calandra:** —the same amount of support for children getting their vaccines, Mr. Speaker.

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

**Mr. John Fraser:** Speaker, under the government's legislation, workers can take paid sick leave to "provide care or support" for a relative. That includes if they're sick with COVID or they're self-isolating—not getting vaccinated. It doesn't specify that. I think the government needs to clarify that omission so the employers know and that workers know, and that the people paying it know.

In any event, these parents are going to need time off in January and in February to have their kids vaccinated. Your paid sick days are set to expire December 31, at the end of this year.

Speaker, through you: Will the government move to ensure that all parents are entitled to paid time off to get their children vaccinated, or will the government just pass my private member's bill or the member from London West's private member's bill, that's going to be debated tomorrow, so we can just put this issue to rest?

**Hon. Paul Calandra:** Speaker, the member knows full well that since the onset of this pandemic, this government has led the way with respect to protecting workers when it comes to accessing not only COVID vaccines but to protecting workers in advance of the vaccines.

**1100**

We were, as I said, the first government in the country to protect workers who got sick with COVID. We understood how important that would be. And, as the member said in his own question, not only did we do it for the workers, we did it if workers had family members at home, children at home, if the challenges of online learning became an issue. We protected those workers' jobs. We were the first government to do that. Those protections still remain in place for our workers, Mr. Speaker.

The real important part here is that very soon, children from five to 11 will be able to get those vaccinations, and we expect the people of the province of Ontario will

embrace that, as they have, to give us one of the highest vaccination rates in the entire world.

#### COVID-19 RESPONSE

**Mr. Will Bouma:** Keeping kids in school and learning has been a priority for this government. We know that our children need to be learning in person, in class, every day. Not only does it ensure a continuity of quality learning, it allows kids the essential socialization they need for their mental health and well-being.

Safe and open schools are essential to the social and intellectual development of the next generation. Speaker, through you to the Minister of Education: With the winter and holiday seasons coming up, our youngest students, who cannot yet be vaccinated, need our government's support. How is the minister planning to keep schools safe for Ontario students?

**Hon. Stephen Lecce:** I want to thank the member from Brantford–Brant for his question and advocacy for the safety of schools in this province. We have taken action, listening to the best, expert advice of the Chief Medical Officer of Health, pediatric institutes and the Children's Health Coalition themselves, who have called for an expansion of low-barrier testing in Ontario. We are leading in this respect in the nation.

Starting in September, we created access to rapid antigen tests for the public health units to deploy at any time, wherever they saw fit, to ensure schools remain safe. We then added in the test-to-stay protocol, which is guidance designed to minimize disruptions and keep kids within our schools to minimize learning instruction.

We then announced—the first province in Canada—to extend take-home PCR tests to all families in all regions of Ontario. Finally, just days ago, with the Minister of Health and the Chief Medical Officer of Health, we announced an additional expansion, the first province in Canada to provide five rapid antigen screening tests in a kit to every child in a publicly funded school, designed to ensure the holidays are safe and kids can get back to learning this January.

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

**Mr. Will Bouma:** I thank the minister for his answer. As I heard on Saturday, when I was knocking on doors seeing how people are doing through COVID-19, parents across the province are glad to see the steps this government has taken to keep schools safe. The delivery of over 11 million rapid antigen tests to students will mean a safer return to school for Ontario students in January.

We know that a priority for student learning has been the return of a more normal school year. Families in my riding want to know what the government has planned. Through you, Speaker: What measures will the minister and the government take this upcoming year to make for a more normal and experiential school year for our students?

**Hon. Stephen Lecce:** It is an important question, because I think many families in Ontario are looking forward to the province incrementally and cautiously

returning to a more normal experience for all of us, most especially for our kids, who have shouldered such a disproportionate burden of this pandemic.

It is why we are very grateful that roughly 81% of children 12 to 17 today are double-vaccinated, one of the highest rates of immunization in the country for young people. We're proud of that. As a consequence of that high rate, the Chief Medical Officer of Health, the Minister of Health and I announced last week that we're moving forward with a regular timetabling model of four courses a day. That is a great relief to school boards, to children, as well as to parents across Ontario. That, in itself, will be a positive intervention to support the mental health and learning of all children.

I will also say we restored extracurriculars and sports for children in this province—critical to their mental and physical health. We're taking action to make it more normal by the increasing rates of vaccinations in schools. The head of the Ontario Public School Boards' Association said that this return to normal timetabling will improve student engagement and achievement, while allowing educators to create more effective teaching and learning environments.

It was applauded, and we're going to continue to take action to keep schools safe in this province.

#### CLIMATE CHANGE

**Ms. Catherine Fife:** My question is to the Premier.

This morning, the Auditor General released another scathing report that details this government's lack of action on climate change. The report clearly states that the Premier is doing absolutely nothing meaningful to fight the negative impacts of climate change. She said, "The public, businesses and stakeholders are in the dark on the overall state of Ontario's environment and how it is changing over time...." The auditor goes on to say that little has changed in 20 years.

Speaker, why is this government dragging us back decades on climate action when we know that you can't meet an emissions target if you aren't prioritizing climate change and if you have no plan to address this very serious issue in Ontario and across this country?

**The Speaker (Hon. Ted Arnott):** To reply, the Minister of the Environment, Conservation and Parks.

**Hon. David Piccini:** I thank the member opposite for her question.

We certainly appreciate the feedback from the Auditor General.

I do think it's important to remind everybody that Ontario is, of course, taking meaningful action to achieve our 2030 targets. In fact, we have 40% of Canada's population, we generate approximately 40% of the GDP, and yet we are only responsible for 22% of the emissions in this country. That's thanks to important investments this government has made in making gasoline cleaner, launching the emissions performance standards, supporting industry—in the case of Algoma Steel, with the recent electrification of their arc furnace—investing in transportation, expanding subways, promoting active transit.

One in every four GO trips in the Durham region to get people to where they work is thanks to investments this government has made.

We're going to keep making those investments and keep leading Canada in greenhouse gas emissions reduction.

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

**Ms. Catherine Fife:** The minister forgot paving over paradise for political donations—that should be your campaign slogan in the next election.

The Auditor General—

**The Speaker (Hon. Ted Arnott):** We don't impute motive. It's against the standing orders. I'm going to ask the member to withdraw—

**Ms. Catherine Fife:** Withdraw.

**The Speaker (Hon. Ted Arnott):** —and conclude her question.

**Ms. Catherine Fife:** The Auditor General could not be clearer in her findings. The government is not doing enough. She said, "Little progress has been made on 50% of the recommended actions" and that "the ministry does not have an expected time frame for presenting an updated climate change plan to cabinet for approval." Never mind an actual plan, Speaker; they don't even have a timeline.

She goes on to detail how even the Ministry of the Environment's climate change leadership team has no authority over whether any other ministries adopt their recommendations, and they are making moves that actually increase Ontario's emissions.

It is clear that the attempts made by this government to fight climate change are just pure political theatre.

When are you going to do your job and come up with a plan that actually—

*Interjection.*

**The Speaker (Hon. Ted Arnott):** The member for Renfrew–Nipissing–Pembroke will come to order.

The Minister of the Environment to reply.

**Hon. David Piccini:** I'll continue on. The member opposite didn't mention one substantive initiative or one thing that she disagreed with that this government is doing—as I said, investing in active transportation, public transit. We've launched the province's first-ever climate change impact assessment.

When that member was propping up the previous government that did nothing on adaptation and resiliency, they could have invested in a climate change impact assessment; they did not, Speaker.

Speaking to our reporting requirements on the Environmental Bill of Rights, we issued 2,000 notices last year alone.

In fact, when that member propped up the previous government, they posted on the Environmental Bill of Rights, but they never issued notices after. In fact, most of their posting was stale and outdated. When we came into government, we cleaned that up—no thanks to the member opposite. Thankfully, we reduced that by 93%.

We're going to keep reporting to Ontarians in a transparent manner, keep taking robust action to clean our land, water, lakes and provide active—

*Interjections.*

**The Speaker (Hon. Ted Arnott):** The member for Waterloo will come to order. The Minister of Energy will come to order.

The next question.

#### COVID-19 RESPONSE

**Mr. Roman Baber:** Speaker, this is to the Minister of Health.

When I ask a difficult question about government policy, the Minister of Health is lecturing us that the government is trying to save lives. But what about the lives lost as a result of the minister's actions? What about Ontarians killed by lockdowns, increased substance abuse or lack of access to health care? Is she not responsible for their lives?

Speaker, I asked the minister a year ago, before the winter lockdown, if she was sure that she is not killing more lives than she is saving. She didn't know the answer then.

But now we learn that the increase in deaths from overdose alone under age 65 is more than double all COVID deaths under age 65—that's just overdose. A McMaster pediatric brain surgeon wrote a couple of weeks ago that very often, she saw children whose lives could have been saved if their cancer was diagnosed earlier.

**1110**

Can the minister tell us if the ministry or anyone at public health conducted an analysis of how many lives were lost as a result of the lockdowns? And does she take responsibility for those lives?

**Hon. Christine Elliott:** Thank you to the member opposite for the question. The health and welfare of all of the people of Ontario has been our government's priority since day one. There is no question that, unfortunately, we had to go through the periods of lockdown that we did to prevent this virus from multiplying far much more than it has.

We are very fortunate in Ontario right now that we have not run into the problems that many other countries have. They're shutting down entirely in Austria starting today. We're following what's happening in other countries.

We've lost lives in Ontario, yes, sadly, due to COVID and due to other causes of death, but we're working on that. We're working on reducing the number of COVID cases. We're looking at reducing the number of people waiting to have cancer surgeries and other surgeries, like hip and knee responses. We're making sure that with our mental health Roadmap to Wellness, we're investing \$3.8 billion to get people the help they need for mental health and addictions issues. We are—

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

**Mr. Roman Baber:** Speaker, it's November 22, 2021, and for the first time, I heard the Minister of Health acknowledge that lives were lost because of lockdowns. Ontarians are owed a response as to what is the estimate of Ontarians who lost lives because of lockdowns. A quarter-million surgeries postponed; a million cancer screenings missed: Has anyone done the math on how

many people died because of government policy? We should care about people dying from cancer.

Speaker, in a report of inquiry into the conduct of Councillor VanLeeuwen of Centre Wellington, released on August 24, the presiding integrity commissioner asked the province if it has any analysis with respect to the adverse impacts of the lockdown. The integrity commissioner was told that there were none.

My question to the Minister of Health: Why hasn't the ministry weighed the adverse effects of the lockdowns? And will she apologize to the families who lost a loved one because of her government's policy?

**Hon. Christine Elliott:** Well, I'm very sad for any family that lost a loved one due to COVID, or for anything else that has happened during the course of this pandemic. However, I still know that this policy that we had to bring forward was the one that saved the most lives. Yes, lives have been lost due to COVID in Ontario, but it could have been far, far worse.

I thank the people of Ontario for all of the steps that they've taken to reduce the transmission of COVID—by being vaccinated, first of all; anyone who has not yet been vaccinated, please do so. We have more than enough vaccines available. We have them readily available at any place they wish. Please continue to wear a mask when you're in public spaces. Please continue to follow physical distancing. Please make sure you look at ventilation in spaces, to make sure that they're adequate, and continue to follow those rules. That is what is going to get us through this pandemic, and that is what's going to continue to save lives.

## PROVINCIAL PARKS

**Mr. Deepak Anand:** My question is for the Minister of the Environment, Conservation and Parks, but before I ask my question, I would like to congratulate the minister's PA, PA Khanjin, for the new addition to the family, a newborn baby.

To the minister: With the days getting shorter and winter bearing down on us, many Ontarians will be looking for a way to get outside and fight the winter blues. Our Ontario provincial parks are a perfect source for all Ontarians to get out, get active and get some fresh air. For example, Wildwood Park provides a perfect place for my residents to spend time participating in some great winter activities.

Can the minister responsible for our provincial parks please share what winter opportunities Ontario's provincial parks offer?

**Hon. David Piccini:** I thank the member opposite for that question. I, too, would like to congratulate parliamentary assistant Khanjin on the birth of her beautiful new boy, who I know will be active in Ontario's provincial parks in the many years to come. Congratulations, Andrea, on behalf of all of us here at the Legislature.

Speaker, I'm glad the member asked that question, because our provincial parks offer a wonderful opportunity for Ontarians to get outdoors not just in the summer months, but throughout the winter months as well.

Whether it's skating at Arrowhead Provincial Park, enjoying the frozen winter waterfalls at Kakabeka Falls Provincial Park—and I know the members opposite have been there; it's a phenomenal park—or whether it's the winter birdwatching at Wasaga Beach Provincial Park, there is no shortage of activities for Ontarians to enjoy in our wonderful provincial parks across the beautiful province of Ontario.

I know Killarney Provincial Park is one of my favourites. In the winter months, they offer 33 kilometres of beautiful mature pine forests, open fields and frozen-over marshlands in which one can snowshoe. So I encourage everybody to get outside, get active, get outdoors, and enjoy—

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

**Mr. Deepak Anand:** Thank you, Minister, for your passion and enthusiasm when it comes to the well-being of Ontario's residents. I'm happy to hear of the winter opportunities that many provincial parks have to offer. I look forward to sharing these opportunities with my residents, and I'm sure each one of you will do the same.

While I know the minister has been working hard to expand and grow access to our parks, I know more can be done. Parks offer Ontarians a unique way to connect with their community, and they deserve to know that our government is committed to protecting the environment. Through you, Mr. Speaker, to the minister, what initiatives has this government put forward to encourage Ontarians to experience and celebrate our parks?

**Hon. David Piccini:** Thank you again for that question. It's not just about experiencing the great outdoors. Christmas will soon be upon us, and folks across Ontario can now go online and order some of their favourite Ontario parks merchandise by visiting [ontarioparks.com](http://ontarioparks.com). In fact, Speaker, since we launched that, we've seen over 4,000 orders, generating hundreds of thousands of dollars that will be invested back into Ontario's provincial parks.

So I encourage everybody, as you get set for the holiday season, go online to [ontarioparks.com](http://ontarioparks.com), visit the online store, purchase a wonderful gift for one of your loved ones, be it a friend—I know I've done my Christmas shopping. I encourage everybody to get out and do theirs. [Ontarioparks.com](http://Ontarioparks.com): Go online and order today.

## INDIGENOUS AFFAIRS

**Mr. Sol Mamakwa:** My question is to the Premier. Grassy Narrows has invited Ontario to the table to resolve land protection issues eight times since this government was elected. Ontario has yet to answer. Last Thursday, the Minister of Northern Development, Mines, Natural Resources and Forestry met with Chief Fobister. The chief was there to talk about the mining permits that Ontario issued on the treaty territory of Grassy Narrows without informing the First Nation. At the meeting, the minister refused to discuss the mining issues.

Speaker, this is so disrespectful. When will Ontario stop working against Grassy Narrows and work with them to resolve these land protection issues?

**The Speaker (Hon. Ted Arnott):** Member for Peterborough–Kawartha to reply.

**Mr. Dave Smith:** Thank you to the member opposite for the question. Our government takes the challenges at Grassy Narrows very, very seriously, and we're committed to the success of all First Nations, especially those in the ANA, the Grassy Narrows area. We will continue to work with ANA to establish a positive relationship and promote reconciliation, to ensure the community is appropriately consulted with as we move forward, but as this issue is before the courts, I am afraid I'm not able to answer any further.

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

**Mr. Sol Mamakwa:** Over hundreds of years, those are the types of answers we keep hearing. To hide behind courts and to fight First Nations with courts is very colonial. I want to say this: The position of Grassy Narrows is clear. Chief Fobister stated:

"When the government issues mining permits behind our backs, that's not reconciliation, that's destruction.

"The government isn't working with us, they are working against us. They need to stop logging and mining so the land can heal.

"Ontario continues to behave like a colonizer who believes they can force anything they want on our people and our land."

The chief is asking Ontario to join them on the path to protect the lands and to support the nation's healing journey. Will they honour this request?

1120

*Interjections.*

**The Speaker (Hon. Ted Arnott):** The members will please take their seats. The member for Peterborough–Kawartha to reply.

**Mr. Dave Smith:** It's true that the Minister of Indigenous Affairs did meet with the chief and some of the delegates from Grassy Narrows just last week. But unfortunately, because there are ongoing legal proceedings, we're not able to discuss the issues around the mining claims. When the legal proceedings are completed, we'll be able to discuss it further at that point, but as long as this is before the courts, I'm afraid that there is nothing more I can say on that.

## CHILD CARE

**Ms. Kathleen O. Wynne:** My question is for the Premier. For the first time in decades we have a federal government in Canada that has put a concrete, funded plan for child care across the country on the table, a \$30-billion plan that would reduce fees to \$10 a day. This should be good news for Premiers of all provinces and territories as they grapple with post-pandemic economies.

COVID-19 forced hundreds of thousands of Canadian women out of their jobs, and they're not coming back into the workforce as quickly as men. The pandemic has wrought havoc in the lives of millions of people in this country, and for women who have children or parents and

grandparents to care for, that havoc has often come at the cost of their careers. This is a huge issue for these families, for the Canadian economy and for the economy of all provinces and territories.

Now, the minister and the Premier have offered excuses for why Ontario does not have a child care deal. For example, "Only Ontario has full-day kindergarten." That's not true, Mr. Speaker. There's a patchwork of kindergarten programs across the country, and at least one, Nova Scotia, has a full-day program, as does ours in Ontario.

The question for the minister and the Premier is whether they actually believe in high-quality, fully funded child care, and if they do, why have they not yet signed a deal with the federal government?

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

**Hon. Stephen Lecce:** We're very much committed to getting a fair deal, a good deal for the people we serve. We are sitting with the federal government this week, in fact, in order to land a fair deal for families, one that is sustainable, that increases investment and ultimately gets us to \$10 a day, because the proposal noted, as I've mentioned in the past, currently does not get us there.

If the aspiration of the federal Liberal government is to reach \$10, for the purpose of equity, Ontarians should not be treated any differently than the provinces east and west. We want to get to \$10. We want to get that fair deal. It's why the province has been working with the federal government to make that case directly to them.

With respect to Ontario's actions, we've increased investment on an annual basis to build spaces: \$1 billion over five years to build 30,000 more spaces. Last year alone, 16,000 spaces were created, largely by the market, supported by the government. In addition, we introduced a tax credit that incrementally is helping to reduce costs, given the spike in fees that happened under the former Liberal government.

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

**Ms. Kathleen O. Wynne:** I understand that the government has continued the building of the 100,000 child care spaces that had begun under our government, but a tax credit does not create child care opportunities for people who can't afford them in the first place. And each province and territory has a different set of circumstances in its education and child care system, so it is incredibly difficult to compare systems.

But now that the federal government has stepped up and is offering per capita funding and is committed to funding the program on an ongoing basis—another barrier that this government set up, Mr. Speaker—the Premier's excuses for not signing a deal have evaporated. I heard from young parents at their doors on Saturday that they want to see this deal now. Municipalities are frustrated enough that some of them are ready to jump over the province's delay tactics to deal directly with the federal government.

Mr. Speaker, if Alberta, led by Jason Kenney, whose ideology is diametrically opposed to Justin Trudeau's, has been able to craft a deal for the good of the children of

Alberta, how is it that the Ontario government has not been able to do the same? Is it possible, Mr. Speaker, that the Premier believes that by artificially dragging out this negotiation and then magically pulling out an agreement out of the air just before the—

**The Speaker (Hon. Ted Arnott):** Thank you very much. The Minister of Education to reply.

**Hon. Stephen Lecce:** As we reflect on the history and the legacy of the former Liberal government, under the tenure of the former Liberals, child care rose by 400%—40% higher than the national average. And here we have the provincial Liberals lecturing any party in this Legislature, given their reckless record of making child care totally inaccessible and absolutely unaffordable to virtually all families in Ontario—out of touch, disconnected from reality.

The Premier is working hard at the table to land a good, fair deal that finally makes child care affordable for the people we serve. It's why we've increased investments to build spaces. It's why we've dedicated funding to lower the fees on an annual basis.

We know there is more to do. We're going to stay at the table to get a fair deal, a better deal, for the people we serve, Mr. Speaker.

#### COVID-19 TESTING

**Mr. Jamie West:** My office has been flooded with calls angry about the Premier's decision to have symptomatic COVID testing performed in pharmacies. Pharmacies are where people go when they are at their most vulnerable. It's where parents will wait with sick children, waiting to speak with a pharmacist about over-the-counter medications. It's where seniors go to pick up their prescriptions. And people are concerned in Sudbury that COVID tests could be performed at the pharmacy located in the middle of their grocery store. They're concerned that shoppers are browsing for fruit and vegetables while waiting for their COVID-19 test results.

COVID testing at pharmacies, especially pharmacies in grocery stores, exposes vulnerable people and their families to potentially COVID-positive cases, which doesn't make any sense. Leanne has this to say: "We keep hearing how the PC government is doing everything in their power to keep us safe. I disagree with this. The main places that people go for essentials are grocery stores and pharmacies. Leave the testing to sites where people are not intermingled."

My question is to the Premier: When will the Premier finally stop focusing on what's best for his big business buddies and finally focus on protecting community members like Leanne?

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

**Hon. Christine Elliott:** Thank you to the member opposite for the question. Our focus is and always has been the health and welfare of all of the people of Ontario. As we are gradually reopening Ontario, vaccination remains the best way to protect oneself, one's loved ones and one's community. But we also need to have many more places

where people can be tested in a timely manner. The last thing we want to see happen is people who may have symptoms who don't get tested who then pass COVID on to other people. So we need the co-operation of pharmacies, especially in rural and northern Ontario—places that people can quickly get to for testing.

Not every pharmacy is going to be able to offer symptomatic testing, however, just due to the physical configuration of the pharmacy. In some cases, they may be able to have outdoor testing, but that's not the reality for many places in urban areas. But we are going to make sure that if a pharmacy is able to be able to do symptomatic testing due to the configuration of the location, there are very strict infection prevention and control measures which must be followed. It—

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

**Mr. Jamie West:** Speaker, it makes no sense to direct people who may have COVID symptoms toward where there's more people doing their shopping.

I want to tell you about David. He's a pharmacy assistant. It's not his real name; I'm using "David" because he's worried about a reprisal if I use his real name. He works at a pharmacy that's located in a large grocery store. He's a clerk. He's been assigned the additional task of performing these COVID tests. Because of the Premier's decision to have these tests performed in pharmacies, David will soon be in close contact with potentially positive COVID cases on a daily basis. He has received no additional training, no additional PPE. There's no additional hiring to help with the increased workload, and as a reminder, Speaker, people like David lost that "hero pay" 17 months ago.

David is concerned for his health. He's concerned for the health of his co-workers and the health of the vulnerable people he regularly serves at the pharmacy. He is also concerned about the grocery store customers, because potentially COVID-positive people have to walk through the store to get to the pharmacy.

My question is, when will the Premier finally stop focusing on what's best for Shoppers Drug Mart and finally focus on protecting workers like David?

**Hon. Christine Elliott:** The Premier is focused on protecting the health and safety of all Ontarians, and I think there are just a few comments that need to be made with respect to the member's question. First of all, as I said before, not every pharmacy is going to be able to provide symptomatic testing just due to the physical constraints of that pharmacy. Secondly, people are not going to be able to go and do their grocery shopping or other shopping in a pharmacy if they are coming in to be tested. They are going to need to have an appointment. They are going to need to follow the infection prevention and control measures, as will the person performing the test.

This test has been approved by the Chief Medical Officer of Health and Public Health Ontario. There are very strict infection prevention and control measures that are going to be applied: a dedicated space to perform the specimen collections; physical distancing; time between



testing appointments to allow for cleaning and to avoid lineups; wearing masks, of course, inside pharmacies. All of that is going to have to be done.

Dr. Moore has said, with respect to symptomatic testing, “We absolutely anticipate a great partnership with our pharmacy experts and that they will be able to” test “in a safe manner” —

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

#### CLIMATE CHANGE

**Ms. Mitzie Hunter:** My question is to the Minister of Energy. As you know, thanks to the phase-out of coal electricity and introduction of renewables, Ontario has one of the greenest, cleanest grids in North America, which is why I was so surprised to read an op-ed from your hand-picked chair of the Independent Electricity System Operator, who is in charge of that very system. Joe Oliver wrote about how Canadian politicians are adopting increasingly damaging climate policies, and instead he argued that Canada’s climate change targets from COP26 were virtue-signalling and moral gestures.

1130

I ask the Minister of Energy, is this a view shared by your government?

**Hon. Todd Smith:** I’m pleased to say that Ontario’s electricity grid is 94% emissions-free, thanks in large part to the hard work of our nuclear workers, our power workers at —

*Interjections.*

**The Speaker (Hon. Ted Arnott):** Order. The Minister of Energy has the floor.

**Hon. Todd Smith:** Over 60% of Ontario’s electricity every day—the foundation, the backbone of our electricity system—comes from nuclear. It comes from Bruce, it comes from Pickering, and it comes from Darlington. Another 20% to 25% of our electricity comes from our hydroelectric fleet, Mr. Speaker, also emissions-free, and a workhorse when it comes to producing electricity emissions-free in our province. We do have about 8% or so that comes from unreliable renewables so far. That needs to be balanced off with natural gas, and we’re using our natural gas —

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

**Ms. Mitzie Hunter:** Back to the minister—I hope he stops skating around my question.

The op-ed goes on to say, “Prime Minister Trudeau and many Premiers will not have the intellectual honesty to concede their policies are ineffectual and will reduce our standard of living and endanger our security and national unity.” This is from your hand-picked chair of the IESO, Joe Oliver. He went on to say, “Candour would produce a political backlash that would undermine public support for green initiatives and imperil their own political survival.”

Speaker, through you to the minister: Do you share the view that addressing the rising threat of climate change will reduce our standard of living and endanger our security and national unity?

**Hon. Todd Smith:** Thank you to the member opposite for the question.

What I do believe in is that we have to have an energy system and an electricity plan here in Ontario that’s reliable, that’s affordable, that gives customers choice—and we’re providing that choice, finally, to customers across the province—and that’s sustainable.

We saw what the energy policies of the previous Liberal government did to create an unstable environment—

*Interjections.*

**The Speaker (Hon. Ted Arnott):** Order.

**Hon. Todd Smith:** I hear the former Premier over there talking about her policies that created—

*Interjections.*

**The Speaker (Hon. Ted Arnott):** Come to order, member for Scarborough–Guildwood, member for York Centre.

The Minister of Energy to reply.

**Hon. Todd Smith:** Mr. Speaker, they may like to forget, but the people of Ontario do not forget the chaos that was created when it came to our electricity system in Ontario under their guidance. Energy poverty was a thing here in Ontario. We have gone to great—

*Interjections.*

**The Speaker (Hon. Ted Arnott):** Stop the clock. The House will come to order. The Minister of Energy has finished his response. Thank you.

The next question. Start the clock.

#### AFFORDABLE HOUSING

**Mr. Wayne Gates:** My question is to the Premier.

Last week, the Premier voted down a motion in this House designed to tackle the affordability crisis.

In the city of Niagara Falls, the average home price is \$700,000, for those who can even get a bid in. In some cases, we’re seeing homes get sold for cash without inspections and for \$200,000 over asking price, because people are so desperate for a place to live. And now young Niagara families are being torn apart and have to leave the region. In Niagara, we’re seeing developers with no connection to the Niagara region buying up properties, evicting long-term residents and then flipping their houses for a profit. And the people these developers evict, they can’t afford rent, they can’t buy a house anywhere else in Niagara.

How can the Premier allow this to happen to seniors in Niagara under his watch? How can he expect kids to be able to move out of their parents’ homes when they need a down payment for a house that sells for three quarters of a million dollars?

My question is simple: Will the Premier agree that there’s a housing affordability crisis under his watch, and more importantly, is he going to agree to take the steps we need and that the NDP has laid out to resolve this issue?

**The Speaker (Hon. Ted Arnott):** Minister of Municipal Affairs and Housing.

**Hon. Steve Clark:** Speaker, it's National Housing Day, and I'm pleased to respond, through you, to the member opposite. As the member will remember, in 2019, I was proud to introduce More Homes, More Choice, our housing supply action plan, which has focused on making housing more affordable by encouraging development of all types and all kinds. We've made record investments in our community housing system, and we again call on the federal government to pay their fair share. I know they're back to work today.

But again, although our housing supply action plan, despite the pandemic, has created a tremendous increase in housing starts, we know that there's much more for our government to do. I'll have more to say this afternoon as I make my statement on National Housing Day.

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

#### PRIVATE MEMBERS' PUBLIC BUSINESS

**The Speaker (Hon. Ted Arnott):** 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 Ms. Lindo assumes ballot item number 23 and Mr. Vanthof assumes ballot item number 91.

There being no further business at this time, the House stands in recess until 1 p.m.

*The House recessed from 1136 to 1300.*

#### REPORTS BY COMMITTEES

##### STANDING COMMITTEE ON ESTIMATES

**The Speaker (Hon. Ted Arnott):** Standing order 66(a) provides that "The Standing Committee on Estimates shall present one report with respect to all of the estimates and supplementary estimates considered pursuant to standing orders 63 and 65 no later than the third Thursday in November of each calendar year."

The House not having received a report from the Standing Committee on Estimates for certain ministries and offices on Thursday, November 18, 2021, as required by the standing orders of this House, pursuant to standing order 66(b), the estimates and supplementary estimates before the committee of the Ministry of Agriculture, Food and Rural Affairs; Ministry of the Attorney General; Cabinet Office; Ministry of Children, Community and Social Services; Ministry of Colleges and Universities; Ministry of Economic Development, Job Creation and Trade; Ministry of Education; Ministry of Energy, Northern Development and Mines; Ministry of the Environment, Conservation and Parks; Ministry of Finance; Ministry of Francophone Affairs; Ministry of Government and Consumer Services; Ministry of Health; Ministry of Heritage, Sport, Tourism and Culture Industries; Ministry

of Indigenous Affairs; Ministry of Infrastructure; Ministry of Labour, Training and Skills Development; Office of the Lieutenant Governor; Ministry of Long-Term Care; Ministry of Municipal Affairs and Housing; Ministry of Natural Resources and Forestry; Office of the Premier; Ministry for Seniors and Accessibility; Ministry of the Solicitor General; Ministry of Transportation; and Treasury Board Secretariat are deemed to be passed by the committee and are deemed to be reported to and received by the House.

Pursuant to standing orders 64(b) and 65(c), the estimates and supplementary estimates 2021-22 of these ministries and offices, not having been selected for consideration, were deemed to be received and concurred in.

*Report deemed received.*

#### INTRODUCTION OF BILLS

##### MENSTRUAL HEALTH DAY ACT, 2021

LOI DE 2021

##### PROCLAMANT LA JOURNÉE DE LA SANTÉ MENSTRUELLE

Ms. Karpoche moved first reading of the following bill:  
Bill 55, An Act to Proclaim Menstrual Health Day /  
Projet de loi 55, Loi proclamant la Journée de la santé menstruelle.

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

*First reading agreed to.*

**The Speaker (Hon. Ted Arnott):** I'd like to invite the member for Parkdale–High Park to briefly explain her bill.

**Ms. Bhutla Karpoche:** This bill proclaims May 28 of each year as Menstrual Health Day. The day aims to raise awareness of the challenges people who menstruate face due to a lack of access to menstrual health products and gives menstruators and non-menstruators in Ontario the opportunity to celebrate the natural process of menstruation and fight menstrual health inequity and stigma. Menstrual Health Day will contribute to the normalization of menstruation, as menstruating is a natural bodily function and access to menstrual products is as necessary as access to soap, water and toilet paper.

##### 2492725 ONTARIO INC. ACT, 2021

Mr. Yarde moved first reading of the following bill:  
Bill Pr54, An Act to revive 2492725 Ontario Inc.

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

*First reading agreed to.*

**The Speaker (Hon. Ted Arnott):** Pursuant to standing order 89, this bill stands referred to the Standing Committee on Regulations and Private Bills.

**Mr. Roman Baber:** Point of order.

**The Speaker (Hon. Ted Arnott):** Point of order: the member for York Centre.

**Mr. Roman Baber:** Speaker, I have now obtained and reviewed the video from this morning's statement. I see no discernible violation of any standing orders that could give rise to the Speaker ruling my statement out of order or ending it without notice 25 seconds before time expired.

It is not unusual to characterize conduct by government. That is something we do daily in this House. I compared this government's conduct to a political philosophy that is in fact espoused by some of the members of the opposition. I can certainly suggest that the government is acting like the Liberals. There should be nothing to preclude me from comparing the government's conduct to communists, who also have a registered party in Ontario.

Could the Speaker please explain or perhaps consider retracting this morning's ruling?

**The Speaker (Hon. Ted Arnott):** There is no appeal of the Speaker's ruling. The Speaker's rulings are final, as the member knows full well.

I listened to his statement this morning, and some of his language I thought was very inflammatory. I asked him to withdraw. He persisted along the same line and I chose to prevent a grave disorder from erupting in the House, and we moved on. I do not find that there is a valid point of order.

## STATEMENTS BY THE MINISTRY AND RESPONSES

### NATIONAL HOUSING DAY

#### JOURNÉE NATIONALE DE L'HABITATION

**Hon. Steve Clark:** I rise in the Legislature today to mark National Housing Day. I am pleased to be standing here on behalf of the government to acknowledge and thank housing and homelessness partners across Ontario for their commitment and their collaboration, and also to reaffirm how our government is delivering on the commitment that we've made to make it easier for hard-working Ontarians to find a home that is right for them.

Speaker, I want to take you back to 2019, when I was proud to stand in this House and introduce More Homes, More Choice: Ontario's Supply Action Plan to address the province's housing crisis.

Our action plan puts Ontarians first.

Notre plan d'action accorde la priorité aux Ontariennes et aux Ontariens.

Our plan is focused on making housing more affordable by encouraging development of all kinds of homes so that every Ontarian can find the home that meets their unique needs and their budget. This includes streamlining processes and accelerating approval timelines for official plans, zoning bylaws and plans of subdivision so that we can drive progress hand in hand with our municipal partners.

We are also encouraging innovative approaches to building different types of housing and supporting affordable ownership and rentals. For example, we have made it

easier for homeowners to build a second unit in their home. What we've done is we've also turned new rental units by exempting second units from development charges.

We've also allowed development charges to be deferred or paid over several years, to enable more rental and affordable housing projects. Development charges for rental housing, for example, can be paid over a five-year period from occupancy instead of up front. For non-profit housing, development charges can be paid over 20 years from the first occupancy.

Our policies are delivering real results, despite the pandemic. In 2020, the year after More Homes, More Choice was implemented, Ontario had over 81,000 housing starts, which was the highest level of housing starts in the last decade. In 2020, we had nearly 11,000 rental starts, which is the highest number since 1992.

#### 1310

Mr. Speaker, this isn't just about the number of homes or rental units that our government is helping to create, this is about the hundreds of thousands of Ontarians who can now find a home because of our policies. Our government is working hard to get shovels in the ground to create the jobs and increase the housing supply that our province needs today. We're also using every resource at our disposal to put affordable home ownership within reach of more Ontarians. This includes minister's zoning orders, or MZOs.

In partnership with local governments, MZOs are a very important tool as part of our government's policy tool kit to help critical local projects move at the pace Ontarians need and deserve. Using MZOs, we have helped the construction of over 500 supportive housing units.

And Mr. Speaker, I was pleased on Remembrance Week to be in Kingston, on November 10, to announce that I had issued an MZO to accelerate the creation of up to 25 tiny homes for veterans in what will be Ontario's very first veterans' village. The veterans' village is a very exciting example of how our government's housing policies are being put in action. Our government is helping to turn underutilized, provincially owned property into affordable housing, using innovative solutions like pre-fabricated modular housing, under Ontario's Housing Supply Action Plan. I also made an MZO to accelerate the process of zoning to allow residential units on this site, so that our military heroes can access these homes as quickly as possible.

Without the MZO, it would have taken years for the site to be rezoned through a traditional zoning bylaw amendment, leaving these veterans in a continued state of home insecurity and homelessness. I'm proud to have a collaborative relationship that we built with our partners, the city of Kingston and also the Homes for Heroes Foundation.

Our government is supporting the needs of Ontarians across the housing continuum. This includes community and supportive housing. Cela comprend le logement communautaire et le logement avec services de soutien.

Through our Community Housing Renewal Strategy and Ontario's response to COVID-19, we're providing

more than \$3 billion in this fiscal year and in last year. This includes \$1 billion in flexible supports through the social services relief fund to our municipal and Indigenous partners.

*Interruption.*

**Mr. Gilles Bisson:** Sorry, that's your watch.

**Hon. Steve Clark:** My watch is listening to me, Speaker.

**Mr. Gilles Bisson:** Take his watch.

**Hon. Steve Clark:** Yes, you want my watch? Do you want my watch, Bruno?

These funds help them meet critical pandemic-related needs and drive new supportive—

**The Speaker (Hon. Ted Arnott):** If I may offer another ruling: Our watches are not allowed to heckle us. Okay? I rule that out of order.

The Minister of Municipal Affairs has the floor.

**Hon. Steve Clark:** It's the first time I've been heckled by my wrist, so anyway, a new experience.

I'm proud to say that this is one of the biggest investments by the province in affordable housing in Ontario's history. And in addition to our Community Housing Renewal Strategy, we continue to work with our municipal and our sector partners on how we can improve Ontario's community and supportive housing system. It includes many things, including identifying opportunities to streamline and improve coordination so that the people can have a more easy-to-access system that they need. The Minister of Children, Community and Social Services alluded to that all-of-government collaboration this morning in question period.

So what have we done? We've held a number of successful engagement sessions with our community and supportive housing stakeholders. We are currently working with our ministry partners to explore opportunities to not just improve local planning across sectors, but to better connect people to the right housing and also the right support services from the start of their journey and, finally, better integrate programs to make sure they're more efficient. I look forward, in the near future, to sharing further details of our all-of-government work that we've been able to create.

Creating a system where people have greater choice and more opportunities to find a home that's right for them requires decisive action at all levels of government. That's why I'm going to continue to call on the federal government to pay their fair share of funding under the National Housing Strategy. Speaker, I've said this many times in the House: Ontario is projected to receive \$480 million less over the term of the National Housing Strategy when you factor in Ontario's share of households in core housing need. Addressing this funding imbalance is vital to addressing the needs of some of our most vulnerable Ontarians.

Since day one, our government has and will continue to stand shoulder to shoulder with our municipal partners to help them utilize not just the resources but the tools that we're providing to help address housing needs in their communities. One of them includes, to address homelessness—it's called a by-name list. A by-name list is a

tested approach that drives better coordination of services for our most vulnerable Ontarians. Many of our service providers use it. It helps them to identify their homeless populations. It helps them understand their challenges, to not just see a number.

We've already heard since we started implementing this that service managers who have done this, who have got a by-name list, say to us that the difference is between night and day. I'm very pleased to announce that we're on track, that the by-name list of people who experience homelessness will be implemented in every community across our province by the end of this year. I think this is something that all members of this House should be celebrating. My ministry will continue to work with all service managers to implement this evidence-based system, which, I believe, and I've said in this House many times, will tackle homelessness in every single corner of the province.

Mr. Speaker, we're not done yet. Monsieur le Président, notre travail n'est pas encore terminé.

As announced in the fall economic statement, our government is building on the progress our housing policies have already made by establishing a housing affordability task force. The task force will provide recommendations on further opportunities to make housing more affordable for Ontarians and their families. This will include exploring how else we can get shovels in the ground faster, how we can remove duplication and how we can remove the barriers to home ownership.

In closing, on National Housing Day, I want to close by sincerely thanking our municipal partners, our local service managers, our housing providers, our Indigenous program administrators right across this province. They're on the front lines, supporting some of Ontario's most vulnerable. Especially during the pandemic, their commitment and compassion has truly demonstrated the Ontario spirit, and our government will continue to use every resource at our disposal. We will continue to work with our partners to ensure that every Ontarian can find the home that meets their unique needs and their budget.

Notre gouvernement continue d'utiliser toutes les ressources à sa disposition et de travailler avec tous ses partenaires afin que chaque Ontarienne et chaque Ontarien puisse trouver un logement qui répond à ses besoins particuliers et à son budget.

Again, to close, our government stands committed to ensuring that Ontario is the best place to live, to work and to prosper.

I want to thank all members for continuing to be advocates in their local communities on this, our National Housing Day.

**The Speaker (Hon. Ted Arnott):** Responses?

**Mr. Jamie West:** Thank you very much, Speaker. Et merci aussi au ministre des Affaires municipales et du Logement. Il m'a donné deux copies de son discours, toutes les deux en français, et peut-être que cela signifie que mes leçons de français marchent bien.

It's a pleasure to rise to talk about National Housing Day. I want to begin, so I don't forget, by acknowledging

our partners in housing and homelessness and all the work they do across Ontario.

For context, in 1998, the homelessness advocacy group the Toronto Disaster Relief Committee declared homelessness to be a national disaster. That was in 1998. It was immediately endorsed by individuals, communities, agencies, faith groups, labour unions and various government entities. We've been recognizing National Housing Day every year since then for the last 23 years. I think that if we were to declare it today, we'd have the same amount of empathy endorsing it. And it's sad, because it's a reflection of what we've missed out on in the last 23 years. You can't just keep calling for solutions without implementing them.

Their campaign called for the One Percent Solution. One Percent Solution was for all governments to invest an additional 1% towards building social housing. And 23 years later, we haven't done that.

1320

I want to thank our critics. Because of COVID-19, we're in cohort groups, so I want to thank Jessica Bell, the MPP for University–Rosedale, our critic for housing, tenant rights and urban planning, and as well MPP Jeff Burch from Niagara Centre, who's our critic for municipal affairs, for allowing me the opportunity to speak while they're in the other cohort.

The call to build more social housing is near and dear to me. I grew up below the poverty line. My mom worked full time, but she didn't have enough for market rent, and so my mom, my sister and I lived in Sudbury housing for 14 years. Sudbury housing is social housing; it's geared-to-income housing. Having affordable housing is an investment in the community. It's an investment into the future. It means that a kid who grew up in the projects can grow up to do anything. He can even be the MPP for Sudbury.

I'm worried about the future for other kids. For the first time in my life, Sudbury has a tent city, and that's the number-one issue in my riding. The number-one call or email I get is: "How do we save people from being homeless?" Housing is a human right, and Ontario has more homeless than ever before. Sudbury has tent cities. It regularly goes below 25 degrees in my city, and people will be living in tents through this winter.

How did we get here? Sudbury housing, where I grew up, on Cabot Street, the wait-list to get in there now is 10 years—six years when urgent for a three-bedroom, but 10 years. In 2019—this is before COVID-19, Speaker—Feed Ontario reported that the number of food bank users with jobs had increased by 27%.

During question period today, the member from Niagara Falls, MPP Gates, told us that starter housing in his riding was going for \$750,000. The cost of housing is rising exponentially across the province. The idea of owning a home shouldn't be impossible.

Similarly, the MPP for Parkdale–High Park, MPP Bhutla Karpoche, spoke about OW and ODSP rates. She said her constituent Laura has \$497 for rent, while the average rent in Toronto is \$2,000. If you're on OW and

ODSP, you make about \$1,000—a little less for OW, a little more if you're living with a disability. If the average rent is \$2,000 in Toronto or the average rent is \$1,000 in Sudbury, how do you make ends meet? When your entire cheque goes toward rent, how do you pay for food? And if it's not enough for rent, how do you make up the difference?

When people are working full time and going to food banks, it means housing is unaffordable. When people have \$497 for rent and that's more than their entire cheque, it means housing is unaffordable. When housing is unaffordable, it means that any of us—any of us, Speaker—is this close to becoming homeless.

As the Homeless Hub wrote, housing is a human right. We know it. The United Nations know it. The federal and provincial governments know it. Speaker, why aren't we doing more?

**M. Gilles Bisson:** Il y a 42 secondes, so je vais en prendre avantage. Écoute, je veux appuyer les commentaires qui ont été faits par mon collègue de Sudbury. On sait très bien qu'à travers le Nord, comme dans le reste de la province de l'Ontario, on se trouve dans une situation où il y a beaucoup moins d'habilité d'être capable de louer. Pourquoi? Les prix ont augmenté. À la ville de Sudbury, comme à Timmins et autres, on voit les montants augmenter, aller d'environ 800 piastres en moyenne à environ 1 600 ou 2 000 piastres, ce qui est où on se trouve à cette heure avec les nouvelles unités.

So clairement, le plan du gouvernement ne marche pas. Le ministre peut dire tout ce qu'il veut pour dire : « Oh, ça marche. Regardez tout ce qu'on fait. » Mais jusqu'à date, on se trouve dans une situation où le prix du logement continue à augmenter. C'est de plus en plus difficile sur les individus, parce qu'on a tous besoin d'avoir une place où vivre.

On encourage le gouvernement comme cette Assemblée de faire ce qu'il y a à faire pour être capable de s'assurer que le monde trouve une place où vivre et de le faire d'une manière qui fait du bon sens quand ça vient à comment ça nous coûte de la poche.

**Mr. Stephen Blais:** It's an honour to rise and mark National Housing Day today. I'd like to first thank all of the partners in Ottawa who help provide housing—Ottawa housing, Cumberland housing, Habitat for Humanity and many, many others that provide housing in Ottawa and Orléans—for the important work that they do in our community to provide housing supports to those most in need.

The cost of both owning and renting a home has exponentially increased and is now out of control, Mr. Speaker. According to RBC and TD Bank, housing prices in Ontario are up between 16% and 20% this year, if not more. In Ottawa they're up 18%, and in Toronto, it's closer to 20%.

It's becoming increasingly difficult for young people and young families to enter into the housing market and purchase their first home. It's also becoming increasingly difficult for seniors and older adults to downsize, freeing

up important housing stock in existing, built-out communities. There isn't sufficient purpose-built rental close to where their children and, they hope, their grandchildren will be establishing themselves. Selling the family home to downsize is making less and less financial sense, and the supply options simply aren't there, Mr. Speaker.

This is a critical transition to free up supply in our existing communities to help younger families enter into the housing market. The government must take stronger actions to make this housing type easier to build and more affordable, so that this important transition can take place.

I would also like to take a moment to talk about an important part of our affordable housing stock that often gets overlooked, and that is co-ops. Co-ops are a critical element to our housing supply. There's something like 125,000 Ontarians living in 500 different not-for-profit co-ops in the province. Most of these co-ops were built upwards of 30 years ago and their mortgages are quickly coming to an end.

Now, for most of us, Mr. Speaker, being mortgage-free would be a time to celebrate. But for these co-ops, it potentially will mean a drastic reduction in their operating subsidy. It will impact their ability to provide rent and property tax assistance to their members and make it harder to make the capital improvements necessary to renew these aging buildings. There are billions and billions of dollars of renewal and rehabilitation that's needed in Ontario's co-ops, and they require certainty in their operating subsidy so they can refinance and make these necessary investments. These investments in renewal can potentially help maintain or create thousands of jobs in construction and maintenance in the renovation and construction industry. It will be critical to maintaining this valuable housing stock and creating jobs at the same time.

And finally, Mr. Speaker, in a week where we're starting to talk more and more about how we can take stronger actions to combat racism and Islamophobia, we must recognize that these are important factors and elements in the housing crisis that we are experiencing. Too many Ontario Muslims and people of South Asian heritage face housing insecurity, and while there are many contributing factors to this reality, we cannot deny that Islamophobia plays a contributing role. We must ensure that every Ontarian, no matter where they come from, what God they pray to, what kinds of clothes they wear or the colour of their skin, has access to affordable housing. It is a basic human right, Mr. Speaker.

We must ensure that everyone can live without the anxiety of not knowing where they will lay their head at night, or needing to choose between paying the rent and buying groceries for breakfast, or lunch or supper for their kids. We have an obligation to our neighbours, to our children and to each other to make this happen in Ontario.

**Mr. Mike Schreiner:** It's an honour to rise today and talk about National Housing Day, because we have a housing affordability crisis in this province. As the Ontario Greens, we are willing and able to work across party lines to solve this crisis with our housing affordability strategy that some have described as a master-class plan, and it

begins with building affordable housing spaces, 100,000 over the next decade—60,000 permanent supportive housing spaces and 22,000 Indigenous-led and Indigenous-owned affordable housing spaces.

It's a plan that puts people before speculators, because a place to call home is what housing is all about for people. It's about changing our zoning rules so we can have triplexes, duplexes, quadplexes and tiny homes that people can access. It's about building livable, connected, affordable communities where people don't have to travel long distances just to find an affordable place to call home.

People, we have solutions. Let's get to work on delivering them.

**The Speaker (Hon. Ted Arnott):** The government House leader has a point of order.

**Hon. Paul Calandra:** Just to inform the House that there will be no night sitting this evening.

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

1330

## PETITIONS

### ANTI-RACISM ACTIVITIES

**Ms. Bhutla Karpoche:** I have a petition here with me that has been signed by hundreds of my constituents from Parkdale–High Park, and it reads:

“Parkdale Against Anti-Black Racism in Schools.

“To the Legislative Assembly of Ontario:

“Whereas the recent occurrences of anti-Black racist violence against Black students and education workers at Queen Victoria Public School and Parkdale Collegiate Institute have left students, families and communities traumatized;

“Whereas a teacher at Parkdale Collegiate Institute wore blackface, a blatant form of anti-Black racism and violence, to school for Halloween;

“Whereas the principal at Queen Victoria Public School received mail that contained anti-Black racist comments against administrative staff, for the second time;

“Whereas anti-Black racism which perpetuates systemic discrimination and injustice is present in all of our society's institutions;

“Whereas the Parkdale–High Park community and groups like the Black Student Success Committee have organized to make our community a safer place for Black students and to confront anti-Black racism in all its forms;

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

“To rightfully use the Anti-Racism Act, 2017 to maintain an anti-racism strategy that aims to eliminate systemic racism and advance racial equity (as promised in section 2(1) of the Anti-Racism Act, 2017);

“To immediately require collecting race-based province-wide data using the data standards legislated by the Anti-Racism Act, 2017 to tackle systemic discrimination, anti-Black racism, and worsening mental

health outcomes for Black students, education workers, and other staff;

“To implement an action plan for the training and hiring of Black, Indigenous, and racialized educators for an education workforce that reflects the diversity of Ontario whose jobs and presence will be prioritized and protected from being declared surplus/redundant;

“To implement standards and practices for school boards to provide trauma-informed support for students and staff impacted by racial violence;

“To implement a new K-to-12 curriculum that educates about systemic racism, oppression, and intersectional solidarity, with a particular focus on disrupting and confronting white supremacy and Eurocentrism for all students;

“To mandate anti-racism, anti-colonialism, and anti-oppression coursework for all educators as a requirement for early learning and education-related degrees and licensing;

“To require that the Ontario College of Teachers clearly set forth specific standards of practice expected to be understood by every licensed teacher in Ontario, to be able to effectively address anti-Black and systemic racism that causes harm to Black students.”

I fully support my constituents and this petition and will affix my signature to it.

#### NURSES

**M<sup>me</sup> France Gélinas:** I'm happy to present these petitions. There are 209 names, and 207 of them come from Newmarket–Aurora. They read as follows:

“Petition to Stop Unsafe Patient Care and the Erosion of Quality Critical Care at Southlake Regional Health Centre in Newmarket.

“To the Legislative Assembly of Ontario:

“Whereas patients requiring critical care have complex and urgent care needs and their conditions are unstable, unpredictable, and can quickly change and deteriorate; and

“Whereas these patients need registered nurses with specialized education and training who are highly skilled and experienced, and anything less puts patient safety at risk; and

“Whereas Southlake’s response to the RN staffing crisis in its intensive care unit is to hire RNs without providing full education and training in critical care nursing prior to these nurses working in the ICU; and

“Whereas existing expert RNs will be required to intervene to provide care to multiple patients when the appropriate level of care in an ICU is a 1-to-1 nurse-to-patient ratio; and

“Whereas while in ICU RNs are exhausted from providing life-saving care during the COVID-19 pandemic, Southlake’s plan puts patient and staff safety at risk and is driving away the expert and experienced ICU RNs this hospital can’t afford to lose; and

“Whereas cutting skilled care means patients can suffer from unnecessary complications or death” caused by

unnecessary “care needs, delayed care, missed care, miscommunication, or errors which erode safe quality patient care;

“Therefore,” they “petition the Legislative Assembly ... as follows:

“Stop the pre-mentorship program in the ICU at Southlake Regional” health care—“a program that does not provide newly hired RNs with full education and training in critical care nursing prior to working in the ICU;

“Immediately transfer any RNs who were hired under the pre-mentorship program enrolment into the mentorship program—a comprehensive critical care education and training course, the successful completion of which is required prior to working in critical care at Southlake;

“Cease the plan to implement ‘team nursing’ in the ICU at Southlake—a model that does not provide the appropriate level of care for critically ill patients, which is a 1-to-1 nurse-to-patient ratio;

“Cease any subsequent plans to implement the team-based nursing model of care in the cardiac intensive care unit and the cardiovascular intensive care unit at Southlake;

“Create increased opportunity for” full funding of “education and training of new critical care RNs at Southlake;

“Commit to fund initiatives that retain existing specialized, highly skilled, educated, and experienced critical care RNs at Southlake;

“Ensure this hospital recruits appropriately educated and trained critical care RNs to provide safe, quality care to patients who need life-saving care.”

I fully support this petition, Speaker, will affix my name to it, and send it to the Clerk with my good page Alfie.

#### OPTOMETRY SERVICES

**Mr. Jamie West:** I want to thank the patients from Chisholm Optometry for sending this petition to me. It’s entitled “Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

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

“Whereas the government only covers an average of 55% of the cost of an OHIP-insured visit, the lowest rate in Canada; and

“Whereas optometrists must absorb the other 45% for the over four million services delivered annually under OHIP; and

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

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

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

“To instruct the Ontario government to immediately commit to legally binding, formal negotiations to ensure

any future OHIP-insured optometry services are, at a minimum, funded at the cost of delivery.”

I support this petition and the giant box of petitions in my office that I neglected to bring down and will table tomorrow, and will provide it to page Athisha.

#### OPTOMETRY SERVICES

**Miss Monique Taylor:** I have a petition to save eye care in Ontario.

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

I wholeheartedly agree with this. I’m going to affix my name to it and give it to page Joel to bring to the Clerk.

#### HIGHWAY SAFETY

**M<sup>me</sup> France Gélinas:** I would like to thank the Coorham family from Levack in my riding for these petitions.

“Make Highway 144 at Marina Road Safe....

“Whereas residents of Levack, Onaping and Cartier, as well as individuals who travel Highway 144, are concerned about the safety of a stretch of Highway 144 in the vicinity of Marina Road and would like to prevent further accidents and fatalities; and

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

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

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

I fully support this petition. I will affix my name to it and send it to the Clerk with page Serena.

#### OPTOMETRY SERVICES

**Ms. Bhutla Karpoche:** This petition is entitled “Petition to Save Eye Care in Ontario.

“To the Legislative Assembly of Ontario:

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

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

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

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

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

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

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

On behalf of children, seniors and those with disabilities in my community who are waiting for eye care, I fully support this petition and will affix my signature to it.

#### MULTIPLE SCLEROSIS

**M<sup>me</sup> France Gélinas:** I would like to thank Carolyn Larocque, a good friend of mine from Garson in my riding, for these petitions.

“MS Specialized Clinic in Sudbury....

“Whereas northeastern Ontario has one of the highest rates of multiple sclerosis (MS) in Ontario; and

“Whereas specialized MS clinics provide essential health care services to those living with multiple sclerosis, their caregiver and their family; and

“Whereas the city of Greater Sudbury is recognized as a hub for health care in northeastern Ontario;”

They petition the Legislative Assembly as follows:

“Immediately set up a specialized MS clinic in the Sudbury area that is staffed by a neurologist who specializes in the treatment of multiple sclerosis, a physiotherapist and a social worker at a minimum.”

I fully support this petition. I will affix my name to it and send it to the Clerk with page Ellie.

#### LONG-TERM CARE

**M<sup>me</sup> France Gélinas:** I have this petition called “Ban Retirement Home PPE Charges....

“Whereas Ontario’s retirement homes are largely privately owned corporations; and

“Whereas these businesses have a responsibility to provide personal protective equipment (PPE) to their employees; and

“Whereas many retirement homes are adding PPE charges to the residents’ monthly bill, but the PPE is not



for the residents but for the employees of the retirement home; and

“Whereas residents of some Sudbury retirement homes have effectively organized letter-writing campaigns and actions to have the PPE charges to residents cancelled and recognized as a retirement home’s cost of doing business;”

They petition the Legislative Assembly as follows:

“Treat our province’s seniors with respect and ban any additional COVID-related fees, including PPE, to retirement home residents.”

I fully support this petition. I will affix my name to it and send it to the table with my good page Ellie. And I forgot to mention that it was Murray Patterson from Barrie who sent me these petitions.

### GASOLINE PRICES

**M<sup>me</sup> France Gélinas:** I would like to thank Lorraine Harard, who lives in Cartier in my riding, for these petitions.

“Gas prices....”

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

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

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

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

They petition the Legislative Assembly as follows:

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

I support this petition. I will affix my name to it and send it to the table with Ellie.

### ÉDUCATION POSTSECONDAIRE DE LANGUE FRANÇAISE

**M<sup>me</sup> France Gélinas:** Ces pétitions me proviennent de partout en Ontario.

« Pour une université de la langue française dans le nord-est de l’Ontario... »

« Alors que l’Université Laurentienne a annoncé, le 12 avril 2021, son plan de restructuration, qui incluait la fermeture de 69 programmes (dont 28 programmes francophones), la dissolution de la Fédération laurentienne, et la mise à pied de plus de 100 professeur(e)s, et que ces annonces ont un effet dévastateur aux niveaux social, économique, et humain pour la communauté francophone du Moyen-Nord;

« Alors que la communauté franco-ontarienne exige des institutions postsecondaires de langue française depuis les années 1960, et que les manifestations du 1<sup>er</sup> décembre 2018 ont montré l’engagement et la volonté d’avoir des

institutions postsecondaires gérées par, pour, et avec la communauté francophone;

« Alors que le 12 mars 2021, l’Université de Sudbury et l’Assemblée de la francophonie de l’Ontario ont annoncé le souhait que l’Université de Sudbury devienne une université de langue française ... »

Ils et elles pétitionnent « l’Assemblée législative de l’Ontario pour qu’elle entreprenne les actions suivantes :

« —assurer dans les plus brefs délais le rapatriement à l’Université de Sudbury de tous les programmes et les cours offerts en français, et le transfert de toutes les ressources matérielles, physiques, humaines et financières (incluant de façon non limitative les archives, bourses, dons et droit d’auteur) en lien avec l’offre de services en français et la programmation francophone de l’Université Laurentienne, disponibles et offerts en date du 9 avril 2021;

« —mettre en place un moratoire d’un an, renouvelable, sur tous les programmes francophones de l’Université Laurentienne et de ses universités fédérées offerts en date du 9 avril 2021, afin d’assurer qu’ils puissent être offerts dans leur intégralité d’ici la fin de la transition des ressources et programmes francophones vers l’Université de Sudbury;

« —établir une commission de mise en oeuvre qui sera chargée d’assurer le transfert des programmes vers l’Université de Sudbury et d’appuyer cette dernière dans son développement, dans un contexte de pérennité de l’enseignement postsecondaire en français dans le nord de l’Ontario; laquelle considérera en priorité les besoins des étudiant(e)s francophones actuel(le)s et futur(e)s;

« —s’assurer, par tous les moyens, que les étudiant(e)s actuel(le)s des programmes francophones touchés par la restructuration de l’Université Laurentienne puissent obtenir un diplôme dans le programme au sein duquel ils/elles étaient inscrit(e)s en date du 9 avril 2021, sans cours ou coûts supplémentaires à ceux déjà prévus initialement. »

J’appuie cette pétition, je vais la signer et je la donne à Ellie, qui a été très, très patiente.

### ORDERS OF THE DAY

#### EXTENSION OF EMERGENCY ORDERS

**Hon. Sylvia Jones:** I move that, whereas certain orders made pursuant to section 7.0.2 or section 7.1 of the Emergency Management and Civil Protection Act were continued pursuant to section 2 of the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020 (the act); and

Whereas, pursuant to subsection 8(1) of the act, the powers to amend and extend the orders would have expired on July 24, 2021, the first anniversary of the day the orders were continued by the act, if not extended pursuant to subsection 8(2) of the act; and

Whereas, pursuant to subsection 8(2) of the act, the powers to amend and extend the orders may be extended

only by resolution of the Legislative Assembly of Ontario; and

Whereas on May 31, 2021, by resolution of the Legislative Assembly of Ontario, the powers to amend and extend the orders were extended to the end of the day on December 1, 2021; and

Whereas the Premier has recommended that the powers to amend and extend the orders be extended further to the end of the day on March 28, 2022;

Therefore, the powers to amend and extend the orders referred to in subsection 8(1) of the act are extended until the end of the day on March 28, 2022.

**The Acting Speaker (Mrs. Lisa Gretzky):** Ms. Jones has moved government notice of motion number 8.

I look to the Solicitor General.

**Hon. Sylvia Jones:** Thank you, Speaker. I will be sharing my time with the excellent parliamentary assistant to the Solicitor General, the member from Etobicoke–Lakeshore.

It is an honour to be in the House to speak on extending the authority under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020.

**1350**

It's been a long 21 months for all Ontarians. After months of necessary but tough public health measures to stop the spread of COVID-19, people are ready to have the pandemic in their rear-view. And with vaccination rates among Ontarians so incredibly high, we are finally able to take tangible steps to close the book on the pandemic.

After months of steady decline, cases are ticking upward. This was expected as more of the province opened up and fall's arrival signalled a shift to more indoor activities. The rate of increase, however, has been and can be mitigated by Ontarians taking the necessary precautions, such as wearing face coverings and practising physical distancing, following public health advice and, of course, rolling up your sleeve to get vaccinated if you haven't already done so.

These self-protection measures have been further strengthened by orders under the Reopening Ontario (A Flexible Response to COVID-19) Act. For example, under the Reopening Ontario (A Flexible Response to COVID-19) Act, as of September 22, 2021, patrons are required to show proof of being fully vaccinated against COVID-19, subject to limited exceptions, to enter certain public settings and facilities, such as indoor areas of restaurants and bars, theatres, facilities used for sports or recreational fitness activities, sporting events, and certain other public settings and facilities.

Our government has been clear. Nothing will stop us from having the most successful immunization campaign in the country. As of this morning, 86% of Ontarians who are eligible, aged 12 and up, are fully vaccinated, with nearly 90% having received their first dose. It can be said with confidence, therefore, that there is more COVID-19 behind us than ahead of us.

Contrast this, Speaker, with where we were in July 2020, when Ontario's first declared emergency was still in effect and this House was debating the merits of Bill 195,

the Reopening Ontario (A Flexible Response to COVID-19) Act. We knew that vaccines were on the horizon but we didn't know the exact arrival date or how quickly we could get shots in arms. Fairly quickly, as it turned out.

It should be noted that these successes are thanks to partners from around the globe. That includes science leaders developing and safely testing the vaccine with the weight of the whole world on their backs. That includes the global supply chains that get vaccines from the manufacturing plants to us here in Ontario. That includes the local public health leadership, hospital staff, pharmacies and primary care docs and others who have been on the ground, getting shots into arms. And of course that includes the work of the Ontario vaccine distribution task force, which was established in November 2020 to oversee the delivery, storage and distribution of COVID-19 vaccines across Ontario. Most important of all are the millions of eligible Ontarians who rolled up their sleeve in larger numbers than almost any other jurisdiction worldwide.

In March 2020, when a first emergency declaration in response to COVID-19 was made, it was a temporary measure. And while that measure had to be deployed on two other occasions while the vaccine program was in its infancy, an emergency declaration was never going to be a long-term plan.

Some of the questions that dogged the pandemic response in the early months were: How do we return our children to school safely? How do we keep pressures off our health care system and protect our most vulnerable? How do we start to reopen the province while managing the risks of the virus and maintaining the safety of all Ontarians? Simply put, how can we prevent mortality, prevent serious illness and prevent transmission?

It was clear back then, Speaker, that we had to replace temporary measures with a longer-term plan. To quote the Premier, having a bad plan is worse than having no plan at all. Our government presented to this House a solid plan to manage the pandemic. There are three main components to the Reopening Ontario (A Flexible Response to COVID-19) Act.

(1) The continuation of emergency orders made under the Emergency Management and Civil Protection Act that were in effect when the then proposed legislation came into force.

(2) A limitation on the government's powers as compared to the extensive powers available under the Emergency Management and Civil Protection Act during a declared provincial emergency. These include prohibiting new orders and allowing only some orders to be amended, subject to meeting specific criteria—namely, closing or regulating places, including businesses, offices, schools or other establishments; providing for rules or practices that relate to workplaces or the management of workplaces; authorizing the person responsible for a workplace to identify staffing priorities or to develop, modify and implement redeployment plans that are related to the management of the workplace, such as credentialing processes in a health care facility; prohibiting or regulating gatherings for organized public events.

(3) Measures to ensure transparency and accountability, including reporting at least once every 30 days on orders extended during the reporting period and the rationale for those extensions at the Select Committee on Emergency Management Oversight; regularly reporting to the public on those orders that have been continued; issuing reports to this Legislature following the first year of the act's in-force date and following the conclusion of every period of extension thereafter; and, of course, the legislation expires if not extended, hence why I rise today.

The parliamentary assistant will go into more detail on each of these three measures.

I will say that the Reopening Ontario (A Flexible Response to COVID-19) Act has served as a set of guardrails that continue to help Ontario navigate the pandemic, including through some very rough patches. We know, for example, that you don't respond to current challenges using old tactics and that the look of the pandemic changes from season to season and even month to month.

I said at the time that the Reopening Ontario (A Flexible Response to COVID-19) Act was passed that the act would give us the flexibility we needed to quickly respond to changes to COVID-19. The act helped set the stage for a three-step reopening of Ontario and gave us the flexibility to pull back when it appeared that our front-line health care workers, the hospital network and the intensive care units were becoming overwhelmed by a third wave, and it enabled the province to gradually rebound from that third wave to where we are today.

Speaker, the bill that this House passed gave the province the tools we needed to manage the COVID-19 pandemic. It did its job. But COVID-19 is not done with us yet, and we're not done with the Reopening Ontario (A Flexible Response to COVID-19) Act, which is why we are here this afternoon. As we enter another winter of COVID-19, the government must continue to have the tools at our disposal to respond quickly to reduce the dangers of the pandemic and protect lives.

It's important to note that Ontario is doing well compared to other jurisdictions thanks to the continued efforts of Ontarians and our government's cautious, phased approach to reopening. Because of this, we are in a position to have a plan for lifting public health and workplace safety measures across Ontario. Together in consultation with the Chief Medical Officer of Health, we released our Plan to Safely Reopen Ontario and Manage COVID-19 for the Long-Term, which outlines the province's gradual approach to lifting remaining public health and workplace safety measures by March 2022. This plan is built for the long term, and it will guide us safely through the winter and out of this pandemic, while avoiding lockdowns and ensuring we don't lose the hard-fought gains we have made.

As part of that plan, on October 25 we lifted capacity limits in the vast majority of settings where proof of vaccination is required. This includes restaurants, bars and other food or drink establishments; indoor areas of sports and recreation facilities, such as gyms and where personal physical fitness trainers provide instruction; casinos,

bingo halls and other gaming establishments; and indoor meeting and event spaces.

However, as I noted, this pandemic has required flexibility. We demonstrated such ongoing flexibility earlier this month when we pressed the pause button on lifting capacity limits in remaining high-risk settings where proof of vaccination is required, following consultation with the Chief Medical Officer of Health.

**1400**

Dr. Kieran Moore, the Chief Medical Officer of Health, has said that it has always been his advice to our government that, if we have to, we'll pause, but we won't take a step backwards. To keep these safeguards for a bit longer ensures we do not have to take a step backwards. We need to follow this responsible plan as we continue to return to normal in Ontario.

Speaker, expediency will never trump caution as we continue to manage the pandemic. What made the Reopening Ontario (A Flexible Response to COVID-19) Act essential when it was first passed is what continues to make it relevant today. It will allow Ontario to continue along our path to recovery while easing remaining restrictions where appropriate and maintaining select tools to respond to both the known and unknown impacts of COVID-19, including the emergence of any future variants of concern. Without this extension, Ontario would enter a period of uncertainty that would contrast sharply with all we have been able to achieve with the act in place.

I often used the metaphor that this act serves as a dimmer switch for Ontario's COVID-19 response measures. If its authority lapsed in December, as is currently scheduled, all public health measures would cease. Instead, the continuation of this authority would allow the remaining steps as outlined in the Plan to Safely Reopen Ontario and Manage COVID-19 for the Long-Term to take their course over the next several months. This proposed extension would align the expiry date with the government's Plan to Safely Reopen Ontario and Manage COVID-19 for the Long-Term. As announced in October, the government intends for remaining public health and workplace safety measures to be lifted by March 28, which is when the authority under the Reopening Ontario (A Flexible Response to COVID-19) Act would also cease.

To limit the spread of COVID-19 and respond to the evolving nature of the virus, the act, by continuing certain orders made under the Emergency Management and Civil Protection Act and allowing others to be amended, has allowed us to take action throughout this pandemic. Some examples include taking important action such as limiting partially and unvaccinated long-term-care employees to working in no more than one facility in an effort to protect our province's most vulnerable; giving hospitals the flexibility to redeploy staff where they were most urgently needed to contain a COVID-19 outbreak; and providing rules and practices to ensure workplace health and safety.

To guarantee critical services were maintained while managing the effects of COVID-19, the act continued orders to address gaps and human resources pressures to critical services, including those that require training,

licensing, access to information, and justice-related services and requirements. Some examples include: Access to justice was ensured by allowing service of documents in legal matters against the crown to be done electronically instead of in person, thereby reducing unnecessary contact between individuals.

The act also continues orders that provide Ontarians with cost relief and allows municipalities to support local businesses. Our government signalled very early in the pandemic that we would not stand for charging unconscionable prices for necessary goods. The act has made it possible for consumers to file complaints with the Ministry of Government and Consumer Services about price gouging with respect to necessary goods. Orders help municipalities to quickly pass or make changes to temporary-use bylaws allowing restaurants and bars to create or extend their patios to facilitate appropriate distancing and maintain public health measures as the province continued to reopen. And, of course, the act has allowed the implementation of vaccine certification requirements at high-risk settings throughout Ontario.

The reopening Ontario act has allowed for all of that and more, Speaker, but I do want to be clear that the extraordinary authority provided through the act has been as limited as possible. As the Premier has said many times, the orders put in place are not remaining in place a day longer than necessary. By way of example, at its peak, there were 36 orders in place under the reopening Ontario act. Since then, nine orders have been revoked, as they are either no longer necessary or because they have been captured under permanent legislation; and of course, there were dozens of orders made during the period of provincial emergency which are no longer in effect.

Some of these examples include O. Reg. 241/20, which allowed for the redeployment of staff in the education sector. As schools have been able to reopen in person, this order was revoked to facilitate the safe resumption of classes.

O. Reg. 75/20 provided certain regulatory exemptions for sewage workers and water systems. Once the world had the time to adapt to the new COVID normal, this order was revoked, as the regulatory requirements could be met while still keeping everyone safe from the pandemic.

O. Reg. 192/20 allowed for electronic signatures in wills and powers of attorney. This major leap forward in the justice system, spurred on by the pandemic, was established into permanent law so that Ontarians can continue to have access to this convenient way of doing business.

In my ministry, with O. Reg. 132/20, police services were able to deploy enough officers to front-line duties during the pandemic by allowing chiefs of police to authorize certain members of a police service to perform duties involving use of force and to carry a firearm if the member had successfully completed required training within the previous 24 months, instead of the annual training required. Our team worked with police chiefs to ensure that they were able to work through their training backlog, so that order is no longer necessary.

As we no longer need regulations under the reopening Ontario act, we will either let them expire or revoke them, while retaining the essential regulations that keep us all safe.

COVID-19 is not going away anytime soon, but it can be tamed. Look how much the landscape has changed since the Reopening Ontario (A Flexible Response to COVID-19) Act came into force and the first vaccine doses arrived in Ontario. I am sure all of us, as elected representatives, have seen examples of this in our own communities. But COVID-19 remains a greedy virus. Give it an inch and it will take a mile—which is why we cannot let our guard down and risk losing any of Ontario's hard-fought gains.

The next major leap is Health Canada's authorization of a COVID vaccine for children aged five to 11. That is the latest game-changer, adding another layer of protection for our schools and our families. As we have since the beginning, Ontario is ready to vaccinate five-to-11-year-olds as quickly as the pediatric vaccine arrives, as pharmacies, select doctor's offices and every public health unit across Ontario will offer the vaccine in school-based clinics.

In addition, public health units will continue to offer vaccines through mass vaccination clinics, and parents and caregivers will be able to book appointments through the provincial online booking portal for mass vaccination sites, including school-based clinics and public health units using the provincial booking system. This is another major step in bringing the COVID-19 pandemic to an end quicker. Until then, orders under the Reopening Ontario (A Flexible Response to COVID-19) Act must continue to be another front-line defence against the spread of COVID-19, while mitigating the risk for all Ontarians.

There will come a day when none of these orders will be necessary, when we can treat COVID-19 like many of the other everyday diseases which circulate around the world—that proverbial light at the end of the tunnel. And as it gets brighter, we can turn down the dimmer switch on the Reopening Ontario (A Flexible Response to COVID-19) Act until it is fully off. We aren't there yet, but we are close.

**The Acting Speaker (Mrs. Lisa Gretzky):** The member for Etobicoke–Lakeshore.

**Ms. Christine Hogarth:** I'm pleased to join in this debate today. First of all, I'd like to thank the Solicitor General and her team for her tireless work over the last 18 months to get us to where we are today. It has been a difficult road, and I just want to thank the minister and her team and everybody here in the Legislature for doing their part.

**1410**

When this debate came up—I received some emails over the weekend, as I'm sure many of us in this House have, asking about motion number 8. There's a little bit of misinformation out there, so I just want to clarify, for some of those who emailed my office: COVID-19 is real, people do get sick, and, unfortunately, people are dying. So these measures are in place—and it's not just in Ontario; it's all

around the world. This pandemic is everywhere. People are getting sick. If you see what happened in Austria over the weekend—they're actually entering a nationwide lockdown. We saw what happened in Alberta when they took that chance and opened up the province over the summer and how they had to retract, and now their hospitals are in a desperate state.

We want to take a cautious approach, and one thing we cannot do is let our guard down. We must remain vigilant. We want to encourage everyone to continue to be vaccinated. We had that great news this morning that children aged five to 11 will have that opportunity. We have to remember that these are all tools. Masks are a tool. Wear your mask. Social distance. These are all just tools to help make us all safe. We are part of a community. We have to do our part to make sure that everybody is safe.

Speaker, I'm pleased to join the discussion about the Reopening Ontario (A Flexible Response to COVID-19) Act and how it's helping to support the safe reopening of our province as we continue to manage the risks of COVID-19 and why the powers under this essential piece of legislation must be extended. I'd like to begin with some background.

On July 21, 2020, the Ontario Legislature passed Bill 195 to enact the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020. It was a proud day for this House. Once proclaimed into force on July 24, 2020, this act continued certain orders that had been made under section 7.0.2 or 7.1 of the Emergency Management and Civil Protection Act during the first provincial emergency declared on March 17, 2020, in response to COVID-19. Orders made during that emergency period were developed in consultation with the Chief Medical Officer of Health, the Health Command Table and other health experts. The declared emergency was terminated on July 24, 2020, when the Reopening Ontario (A Flexible Response to COVID-19) Act was proclaimed into force.

There were two additional provincial emergencies declared in response to COVID-19, on January 12, 2021, and April 7, 2021. All the while, the Reopening Ontario (A Flexible Response to COVID-19) Act remained and remains the anchor that keeps this government's COVID-19 response in place.

It's hard to believe that we will soon mark the second anniversary of this deadly virus. From the beginning, the government needed the legislative tools in place to enable hospitals and municipalities to continue to deliver critical services, despite the effects of COVID-19. We needed to protect our most vulnerable and cautiously lay out the groundwork for our province to reopen and our businesses to thrive once again.

Speaker, I want to take a moment to recognize the efforts of those who did their part in order to protect and keep Ontarians safe during the course of the second and third provincial emergency orders. Our province saw incredible examples of Ontario's spirit and ingenuity throughout the numerous communities in our province.

Some of those examples can be found in my own riding of Etobicoke–Lakeshore, such as Great Lakes Brewery,

who brought back hundreds of kegs to convert their product into ready-to-use hand sanitizer that was approved by Health Canada. Not only did they produce this much-needed product, but Great Lakes Brewery also provided hand sanitizer to local police, fire halls and ambulance stations who remained on the front lines of our province's pandemic efforts. SanRemo Bakery, who have been a long-time pillar in my community of Etobicoke and are recognized as one of the best bakeries in all of Toronto, brought food to long-term-care workers who diligently and compassionately were helping our most vulnerable during the course of the pandemic. And our Tibetan cultural community centre produced and delivered over 10,000 meals to those in need.

I also want to recognize the efforts of those organizations that have been constantly present in our communities across the province, such as our food banks, our local charities and parishes. They have always been important contributors to the community and they showed their dedication and kindness to the most vulnerable.

In my riding, organizations like Haven on the Queensway, the Daily Bread Food Bank and LAMP have made the extra effort to ensure that their operations not only continued during the course of the provincial emergency orders but ensured that their community had the assistance it needed in order to stay healthy and to stay safe. Their providing food, clothing and other essential items to those in need during the course of the pandemic truly shows the strength of our province and serves as an example for many years to come. I would be remiss if I didn't mention Dymon Storage. They donated over one million face masks to organizations and community groups across the GTA. They're located in Etobicoke–Lakeshore as well.

The Reopening Ontario (A Flexible Response to COVID-19) Act provides these tools and so many more. The act supported us as we travelled cautiously along paths we knew were working, and provided the flexibility to adjust to the unknown. In her opening statement the Solicitor General referenced three basic components when introducing the proposed motion:

- the continuation of emergency orders made under the Emergency Management and Civil Protection Act that were in effect when the act came into force;

- limitations on the government's powers, as compared to the extensive powers available under the Emergency Management and Civil Protection Act during a declared provincial emergency; these included prohibiting new orders and allowing some older orders to be amended, subject to meeting specific criteria;

- transparency and accountability measures.

As we reflect back, Speaker, we realize that all three of those boxes have been ticked.

First of all, I'd like to mention the continuation of the emergency orders. The declared provincial emergency was a temporary solution that provided the province with a set of extraordinary powers under the Emergency Management and Civil Protection Act to deal with the initial urgent phase of the COVID-19 emergency. It would never become a long-term answer to reopening the

province or facilitating the province's recovery while protecting the health care system.

The emergency orders were intended to limit the spread of COVID-19, protect Ontarians, give flexibility to allow front-line providers to support the response, give cost relief to consumers, gradually reopen the province and support local businesses in a way that did not jeopardize our recovery. They worked, Speaker, which is why many of those orders are folded into the Reopening Ontario (A Flexible Response to COVID-19) Act. Those emergency orders that were no longer deemed integral to the fight against COVID-19 were revoked before the act was proclaimed into force.

What remained in the Reopening Ontario (A Flexible Response to COVID-19) Act has enabled the government to limit the spread of COVID-19 and respond to the evolving nature of the virus. It provides the government with the flexibility to address the ongoing risks and effects of the COVID-19 pandemic in the province and to protect vulnerable populations.

The act has supported the continuity of critical services by addressing gaps and human resources pressures, including those that require training, licensing, access to information and justice-related services and requirements. The act supports businesses and provides cost relief to Ontarians.

One important component of the act that is often misrepresented is the limitations on the government's powers. Speaker, this is a government that doesn't intentionally overreach, which is why limitations on the government's powers were drafted into this act. The maximum extension period for these orders has always been limited to 30 days, with the ability for cabinet to extend any of the orders for subsequent periods of up to 30 days at a time.

While the act allows certain orders to be amended, those amendments are subject to certain criteria, including being related to one or more of a limited set of subject matters, such as closing or regulating places such as businesses; prohibiting and regulating gatherings or organized public events; work deployment or workplace management practices, including credentialing processes in health care facilities.

**1420**

Now I'd like to discuss accountability and transparency. Speaker, this is a government that takes great pride in being up front with the people of Ontario. Who doesn't remember Premier Doug Ford's promise to the people of Ontario early in the pandemic that said, "You will know what I know as soon as I know it"? It was music to the ears of those of us who believe passionately in open and accountable government, and it is the spirit that drove the transparency and accountability measures inserted into the Reopening Ontario (A Flexible Response to COVID-19) Act.

Under this act, the Premier or a designated minister must report regularly to the public on orders continued under the act that continue to apply and on any orders that have been extended, to a committee, which I have the pleasure of sitting on, that is designated by the Legislative

Assembly. The Premier is required to table a report within 120 days after the first anniversary of the day the orders were continued under the act which occurred since the act came into force. This report must include information on orders that were amended or extended during this time, including the rationale for amendments and extensions, including how many applicable conditions and limitations on the making of the amendments were satisfied.

The Solicitor General has done a superb job in keeping the community and the committee up to date on the status and changes of the orders under the Reopening Ontario (A Flexible Response to COVID-19) Act and new developments on the fight against the pandemic. Her presentations have answered top-of-mind questions such as: "What is the government doing?", "Why are you doing it?" and "How will this help continue to support the health and safety of Ontarians, not jeopardize the recovery, and prepare us for what lies ahead?"

The select committee meets monthly, and many of us sitting in this chamber also sit on the committee. Some of us are in the room and some of us attend virtually. Last month, we were able to have a presentation from our new Associate Minister of Digital Government, our Minister of Health and our Chief Medical Officer of Health, Dr. Moore. They were all there, present, to answer questions, and I can say that there is no limit to the questions that are proposed.

Speaker, today the Solicitor General tabled the Report on Amendments and Extensions of Orders under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020 from July 24, 2020 to July 24, 2021, in compliance with the 120 days after the first anniversary requirement. This report outlines the 36 orders continued under the act, including extensions and/or amendments to those orders, as well as orders that expired over the July 24, 2020 to July 24, 2021 reporting period. As required in the legislation, the report also details the rationale for extensions and amendments, including how any applicable conditions and limitations on the making of amendments were satisfied. It provides for some interesting reading and is available online.

Speaker, since the darkest days of COVID-19, Ontario has moved from strength to strength. As the Solicitor General noted, 86% of eligible Ontarians aged 12 and up are fully vaccinated, with nearly 90% having received a first dose. That is one of the highest vaccination levels in North America, and we should be extremely proud.

For those who haven't had one shot yet, there is no shortage of locations to do so. I know over the weekend in Toronto, Mayor Tory and Councillor Cressy were out there with get vaccinated Toronto and Vax The Holidays. They're bringing vaccinations straight to Torontonians in shopping malls, community centres and places of worship. There are 14 clinics just right here in the city of Toronto. And, over this weekend, across the province of Ontario, over 18,000 people were vaccinated. People are doing their part, and I thank them for that.

In my riding of Etobicoke-Lakeshore, the Ontario Food Terminal is one of the largest distribution hubs for fruit

and produce in the country and the fourth largest in North America. I was recently at the Ontario Food Terminal with the Minister of Labour, Training and Skills Development, announcing about truck drivers and how they deserve the right to use washrooms at business locations of pickup and drop-off. You know, it's a basic human dignity that wasn't being observed, and one thing that this government has corrected. I wish to laud the truckers of Ontario who keep food on our tables and goods and services moving.

Speaker, these people kept Ontario's economy on wheels through the worst of it and deserve our respect and our gratitude. The terminal still is considered an essential business by the government and stayed open throughout this pandemic. They hosted two vaccination clinics right at that site right early on in the pandemic once the vaccines arrived. They were able to vaccinate both workers and the local community to help us and continue to get that vaccination rate high—high as we enjoy it today.

Speaker, there are over 3,150 locations across the province, including more than 2,500 pharmacies and 650 immunization clinics, hospitals, primary care settings, pop-up clinics, as well as the GO-VAXX mobile clinics that are open today to get vaccinated. Since they've hit the road, Ontario's three GO-VAXX mobile buses have enabled medical professionals to administer almost 14,000 vaccine doses at locations such as shopping malls and farmers' markets, where the arrival of the bus has been enthusiastically received. Sometimes, it's just that first dose, but that first dose is just the first step, and it's an important step.

This vast network is part of Ontario's Last Mile Strategy to get vaccines to people wherever they are located and is part of the legacy of the Ontario vaccine distribution task force that the Solicitor General co-led.

Speaker, my riding hosted a mass immunization clinic at Cloverdale Mall which opened on April 12. Sherway Gardens also hosted an immunization clinic in the month of September as part of the "Get Vaxxed Toronto" plan. I have heard from numerous people in my riding and across the province who relay to my office the care and professionalism of all these workers, volunteers, paramedics, police officers, firefighters, who successfully made Cloverdale Mall and these other locations not just the most efficient vaccination sites but a place where people go to ask questions and get their questions answered, and it was run efficiently.

Speaker, vaccines, self-protection measures such as face masks and handwashing regularly and other orders that are under the Reopening Ontario (A Flexible Response to COVID-19) Act have set the stage for a more open holiday season than the one we experienced last year. I know we all want to be with our family and our friends this holiday season as it has been so sorely missed over the last couple of years.

Starting tomorrow, I mentioned earlier, we are starting our vaccination—we will soon be vaccinating children aged five to 11. We're following Health Canada's approval of the Pfizer COVID-19 vaccine for children from five to 11. They'll be eligible to book their appointments to

receive their vaccine beginning Tuesday, November 23. Approximately one million children aged five to 11 are eligible to receive the vaccine that will help protect our progress in our fight against COVID-19 and help to keep our schools safer and open for in-person learning as more people move indoors and attend family gatherings during the colder months this winter.

One thing we want to make sure we can do is make sure our kids can stay in school. There's nothing more exciting or warming to our heart than when we see those kids come back from class because they were able to go for recess and play with their friends. We certainly don't want to move backwards. One thing that the pandemic has surely taught us is that we simply cannot afford to go backwards.

Speaker, I want to talk a little bit about our government and our Digital Ontario. We have now kind of learned a different way of doing business: a more online world versus an off-line world. Kids are tech-savvy. Our seniors are getting tech-savvy. Our government is building a digital Ontario that will help accelerate growth and create new opportunities for us to lead on the world stage. The new Associate Minister of Digital Government recently rolled out a made-in-Ontario Verify app for businesses and organizations that prove that we're up to the task. But don't take my word for it; the numbers speak for themselves. The minister's team at the Ontario Digital Service and our private sector partners delivered this app in a record-breaking 43 days. To date, we have seen more than a million downloads of the app and 6.43 million scans completed. Scans continue to increase day after day.

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Ontarians can take comfort knowing that Verify Ontario never stores any personal information. The app only shows the minimum amount of information necessary to confirm vaccination, against a government-issued ID. I'm sure many of us, over the weekend or as we're going to shop in our local stores or eat at our local restaurants, have been asked to show this app. It's now as normal to us as wearing our masks out in public.

To create this app, we consulted with small, medium and large businesses, restaurants, sports and cultural institutions and venues of all sizes across all sectors and regions of Ontario. Their feedback helped to inform its design. We continue to iterate on the product, releasing new updates as we receive feedback and learn about how organizations are using the app in real time.

To lead with transparency, we published the app's code online for free so that other jurisdictions can use it too, if they want. Like other leading digital governments, we're supporting taking an open-source software approach.

Success of the Verify app only strengthens our need to stick with the Reopening Ontario (A Flexible Response to COVID-19) Act, because we know from experience that one serious deviation and COVID-19 can turn the clock back on all that the people of Ontario have achieved together, and none of us want that.

Speaker, since we first declared the emergency in response to COVID-19 on March 7, 2020, I have been proud of this government's response to COVID-19. We all

have stories to tell. We all remember what happened over the last 18 months. It kind of went at a snap of the fingers. Babies were born, and we haven't even met them yet. Our government has made two additional declarations of emergency and introduced tough measures as needed, such as the stay-at-home order, to respond to COVID-19.

At the same time, it has been respectful of the people of Ontario. That prudent and deliberate decision-making process continued under the Reopening Ontario (A Flexible Response to COVID-19) Act. That is a high-water mark that the government set with the introduction of the act, and it is a standard that must and would be continued, should the powers under the act be extended by this Legislative Assembly.

Even now, with so many people vaccinated, so many of the parts of this province reopened, the government needs to address unanticipated situations to keep Ontarians safe and prevent our hospitals and our health care workers from being overwhelmed. While the government would prefer to wield these powers for as short a time as possible, nobody can predict right now how short of a time that might be. This is why the Reopening Ontario (A Flexible Response to COVID-19) Act is as relevant today as it was when this House passed it nearly 16 months ago. We must remain vigilant. Yes, we must continue to press forward on the path to recovery, but with caution and careful consideration with each step we take. We must be ready to jump into action when necessary.

We all want this pandemic to end, Speaker. That is why this House must extend the powers under the Reopening Ontario (A Flexible Response to COVID-19) Act.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Gilles Bisson:** What I want to say first off in this debate is that as citizens across the world have been dealing with this—and it has been very difficult. There is no question. There is hardly anybody in our constituencies, in the places that we represent, who hasn't been voicing their opinions when it comes to what's happened as a result of COVID-19. It has meant, yes, that certain of our liberties have been restricted: having to wear a mask when going into public places, being vaccinated to do certain things, limiting our interactions amongst each other. Those are things that I don't think anybody likes. I don't believe, Madam Speaker, as you do, that people like doing these things, but they're things that we had to do. I know, talking to a number of my constituents, as you all talk to your constituents, there are people out there who are hopping mad, who are really upset that we've had to go through this. I guess we're all upset that we've had to go through it, but the reality is, there are certain things that you need to do in order to try to curb the effect of this particular pandemic.

I'm a reader of history. The only thing that I like to read a lot is history. It makes me boring to most of my friends, and that's okay. If you look back at the end of the First World War, the soldiers—because of the living conditions at the time and so many people from around the world being congregated together, there was the Spanish flu that

essentially spread across the world as a result of that interchange of people in Europe as we were finishing up the First World War and people were going into camps and were ready to be discharged back to their home countries. As they came back, the Spanish flu went across North America. If you look at the amount of people who died as a result of that at the time, it's quite shocking. Back then, we didn't know a lot about how to prevent the transmission of something called the flu. COVID-19 is not the Spanish flu, but it's the same type of thing, where people get sick as a result of being in contact with others.

I always remember that my aunt Eva, the family historian, who died many years ago, talked about how many people died in the Porcupine encampment in Timmins at the time when the soldiers came back home. They didn't know what was going on—and that's the difference this time.

The difference this time is that we are much better at understanding how to deal with preventing the transmission of something called COVID-19 or any kind of flu—and it's pretty simple stuff. I remember at the beginning of this, thinking to myself, "Jeez, I'm going to have to do all of this?" But just keeping your distance from other people and wearing a mask, washing your hands, sanitizing your hands, being careful about what you do and where you go were things that really helped to ebb the spread of COVID-19 across Ontario. And do you know who we've got to thank for that? We don't give ourselves applause in this House, Madam Speaker; we've got to thank Ontarians. They're the ones who stepped up to do what had to be done.

I look at my friends and neighbours where I live in Timmins, out at Kamiskotia Lake and in the city of Timmins. People wear their masks. They take it seriously. They sanitize their hands.

I think of my good friends Bev and Francis Low-A-Chee a couple of doors over. He's 90, and she's 80. They're taking it very seriously because they understand that if one of them gets sick, both of them are going to be sick, and who knows where that's going to go? They've done the things that they have to do. Do they like it? They haven't been able to visit their kids, who live down here in Toronto, for the last two years. And how many families and constituents do we know who are in the same situation?

Ontarians have risen to the challenge for the most part. Yes, there are those out there who don't want to wear a mask and who don't want to get vaccinated—I get it—but the vast, vast majority of Ontarians have done the right thing, and we should thank them, because they're the real heroes. They're the ones, quite frankly, who are making the big difference here in Ontario.

We'll talk about the other part of this a little bit later, but I just thought we had to start by thanking those who are making a difference.

I also want to thank both the parliamentary assistant and the minister for their comments. It was informative, although I have differences of opinion as to some of the things they said, but I think they tried to lay out as best they can what the government's rationale is for all of this.



But let me just say that the automatic reaction of the Conservative government under the current Premier and cabinet and the caucus was not to do the things that we did. Let's be real here. The reality is that the Conservative caucus, given the opportunity, would have rather not been in this situation and not had COVID-19 whatsoever. It has caused the delay in some of the decisions that had to be made, and the government had to be pushed, sometimes kicking and screaming, to where they needed to be in order to be able to deal with this particular pandemic, and we'll talk about that in a little bit more detail. But if you go back and think to at the beginning, when the government first came into office, one of the first things that they did was to act on the Liberal policy of reducing the number of public health units in Ontario and reducing their budgets.

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That's something, actually, that Kathleen Wynne's government was trying to do. I was lobbied, as all of us who were in this House prior to the last election were lobbied. The health units were coming to us and saying, "The Kathleen Wynne government is proposing diminishing the number of public health units." For example, where I am, the Porcupine Health Unit, already one of the largest in the province, would have become even larger, with less money. That was a real problem, in our view. We opposed it under Kathleen Wynne, and because the election was close at hand, she decided not to have that fight going into the election, so she put it in abeyance. I would think that if she would have got re-elected, she would have put it in place after.

But the government that came in after, under the Conservatives, picked up that old document that the Liberals had, they took the dust off of it and they started working at enacting what it is that the Liberals had been suggesting, which was to diminish the ability of our public health units to do their job. One thing this pandemic did is to teach the government that you can't do that.

Public health units are an essential part of our health care system. They have to have the ability and the financing to be able to do the things that they do best, and that is dealing with issues around things like the pandemic, but also many other issues that they have to deal with. The first reaction of the current government on coming into office was to go in the other direction. Unfortunately, we ended up with COVID-19 as a world pandemic, and I guess the silver lining behind the cloud was that the government recognized that health units have to be funded and have got to be functional. Without that, we are in trouble.

Think about it: A lot of people back home—most of us here understand in the House, because we deal with these things, but people back home take for granted the work that a health unit does. If you walk into a restaurant and you order a burger, you can rest assured that the burger is going to be okay—you're not going to get salmonella, in most cases; it's very rare that it happens—because health units go in and inspect kitchens in restaurants across this province. If there is a complaint, they look into it. They make sure, along with other agencies of the province, that

our drinking water is safe and that we can drink it. They do the types of things that need to be done in order to make sure that our health and safety are secured when it comes to infections and various things that could happen as a result of poor sanitary conditions or things like a pandemic.

So initially, the government's reaction was not to have a robust public health system. In fact, the government's reaction was to do quite the opposite, and as a result of the pandemic, the government quickly realized that first of all, politically, they couldn't enact the Liberal plan to reduce the number of health units, increase the size of each region and reduce the budget, because, quite frankly, I don't think the public would have stood for it. The government understood that, and they haven't moved on it so far.

Now, who knows what the government is going to do in the future. I have no idea. I'm not sitting there at the P and P committee that makes these decisions—I think they still have priorities and planning; at least they did when I was in government. I'm not quite sure what they're doing at that level, but it is fairly clear that the government's reaction was very different.

I've got to say, at the beginning of this pandemic, back in February to April a couple of years ago, the government was trying to send the right signal. I think of my colleague the government House leader at the time, who was reaching out saying, "We need to work together." We as New Democrats said, "Absolutely. The only way we're going to get through this pandemic is by all of us working together and figuring out things that we can do in order to be able to facilitate the management of this pandemic."

But a funny thing happened on the way to co-operation: The government became less co-operative as time went on. It was extremely frustrating. I remember those first discussions that we had at the House leaders' meetings were about, "Okay, we need to introduce legislation that's similar to what we're doing in this motion today." And all we said to the government was, "Give us a copy of the legislation in advance so we can take a look at it, and we will facilitate quick passage of that legislation." We couldn't get copies of the legislation until the day of or the day before, and you're expected to go through all of that, do your due diligence as a member of this assembly and as the official opposition. The government said, "Oh, you're playing politics because you're trying to slow things down." We didn't slow anything down, but the government didn't do anything to speed it up—that's really what happened.

The government was not matching its actions to the words they were giving. They were saying out there to the public, "We want to be co-operative and we want to work across the aisle with the members of the opposition and with all Ontarians"—and they're wonderful words. As words go, there was nothing wrong with what the government was saying. It was their actions that were so misdirected because what we ended up doing is, as time went on, it got worse and worse when it came to what kind of co-operation we got from the government to deal with certain items.

Now, I understand it, from the government's perspective. You won the election; you have more seats on that side of the House than the official opposition. We're 40; you're 70-some-odd members. The independents I think are around 14. I understand. The government wants to be able to do what it has to do. But as the symbolism in this House says, the opposition is here to keep an eye on the government, and the government has to use its wisdom in whatever way they can to be able to do what's right for Ontarians using their ideas and also listening to the ideas on this side of the House to be able to do what's right for Ontarians.

Instead, the government, in many cases, was just really reluctant to do the right thing. It was frustrating for us because we're sitting there saying, "Well, we don't want to be seen as oppositional, but we can't say anything. We've got to point out that the government, in fact, is not doing what it says it's trying to do." So we tried in several ways, both by way of one-on-ones with individuals across the House, House leaders' meetings, leader-to-leader meetings—there were all kinds of different attempts to be able to do it. But it became very clear that after a while, the government was just going to do what it was going to do. And, in some cases, they did the right thing.

We pushed the government on this side of the House, and the public and the media pushed the government for certain things to happen. For example, the vaccine passports, right? The medical community was saying way before the government ever did, "You need to have a vaccine passport; without that, people are not going to get vaccinated." There has to be an incentive to be vaccinated, number one, but even more important—I would say one-one—is that you need to know that if you're a citizen and you're walking into a restaurant or you're walking into some facility, that you're going into a place that's safer, that people have actually been vaccinated which lessens the probability of transmitting the disease. It doesn't prevent it entirely—let's be clear about that—but it lessens the probability that you're going to be able to spread the disease even further.

I think if you look at the numbers today, yes, they're high—we're about 750 today, and that's a lot higher than any of us want, quite frankly. We want them to be zero. But imagine if we hadn't done vaccine passports and imagine if we didn't have provisions for masks and physical/social distancing, our numbers would be what you saw in Alberta. More important, it would probably be something like what you saw in Texas and Florida. Those numbers have gone through the roof. If you go on the website and you look—I haven't looked at it in a couple of weeks, but I think it's Texas and Florida, on average, have a vaccination rate of around 55% to 60%. But their infection rates are far higher than they are in Ontario.

I'm an NFL fan. Who likes to watch CFL, NFL football? Am I the only one? Oh, there's a few of us—yay. Did you see the Green Bay game yesterday? That was a good game—it depends—I don't cheer for a team, so that's why I love football so much. But, anyway, my point is, if you look in the crowd at an NFL game, nobody's wearing a

mask. You've got 60,000, 70,000 people in a confined space and it's okay. With a 55% to 60% vaccination rate? No wonder you've got high levels of infection in places like Texas and other places across the United States. You look at a CFL game and not everybody is wearing a mask, to be fair, but there's a lot more mask-wearing at a CFL game than there is at an NFL game. But here's the difference: As we said earlier, there's an 85% to 90% vaccination take-up rate in our jurisdiction and in other places like Saskatchewan, British Columbia and Alberta, where there are football games.

**1450**

So our infection rate is lower. Why? Because people are following the directives established by this Legislature and other Legislatures across Canada to be able to do what has to be done. But as I said, a lot of these measures, the government, quite frankly, had to be pushed into doing.

Again, I come back to the vaccine passport: The debate went on how long? I'm not talking about debate here in the House; I'm talking about debate out there in the medical community, the media, the public. There were all kinds of people who were saying, "Listen, bring on the vaccine passport to reopen the economy." We don't want the economy to close down again, and if we don't do things right and we open the economy, it's going to get worse. We're going to have a longer closure, even longer than what we ended up with, Madam Speaker, as a result of the closures that already happened in Ontario.

And what was interesting: It was small businesses that were telling me that in my community. It was my neighbours, my friends, my family. A lot of people were worried that in fact we may be in a situation where if the government didn't do the things that need to be done—like mandatory masks, making sure that there's vaccine passports and other measures in restaurants, bars, sporting events, all those kinds of things—we would lose the battle and have to close down again. Nobody wants to do that. People were sort of scratching their heads saying, "What the heck is the government up to? Let's do this right."

I remember I was on the Rob Snow Show with one of my colleagues on the other side—I don't remember who it was—and we were doing every Friday at 11:30. Rob Snow asked the question of whoever the Conservative member was, "Rob Ford"—Doug Ford, excuse me; Rob was his brother—"The Premier is saying no to vaccine passports. What do you say?" And that poor Conservative member—I forget who it was—had to defend the decision of the Premier. I don't know if he or she agreed with the decision, but defended it valiantly nonetheless. All I said was, "Wait a couple of days. Just wait. I think by the time we do the show next week we're going to have vaccine passports." And the Conservative member said, "Oh no, no, no. That's not going to happen." I said, "Just wait. Just wait." And sure as heck, within two or three days, the Premier changed his mind. And nothing wrong with changing your mind—if you don't change your mind, you're always going to have the same position. I don't think you're going to get very far.

But the point was, the government was dragging its heels on this one because they have a political problem,

and I'm going to come to that a little bit later. They have a number of people in their base who, quite frankly, are not happy with the decisions the government made around the issues of masks, vaccinations and all of those things, and members of the government are hearing it. That's just the reality.

The Conservative base is different, in a sense, and you saw it in the last federal election with the Maxime Bernier party. In Timmins, 5,000 people in the riding of Timmins—James Bay voted for the Maxime Bernier party, and you had similar situations in all of your ridings. It wasn't because—

*Interjection.*

**Mr. Gilles Bisson:** There were New Democrats who voted that way and there were Conservatives who voted that way; that's not the argument I'm making here. My point is, there were a number of people who were upset with the decisions that the federal and provincial governments have done as a result of trying to deal with COVID-19, and they decided to express themselves, and rightfully so, with their vote. So you saw the Maxime Bernier party, whatever—the People's Party, I think they're called—their numbers went up. Now, it wasn't enough to win, obviously, because the vast majority of Ontarians don't agree with that position. The vast majority of Ontarians and Canadians believe governments have got to do what government's have to do in order to put us in a situation to be safe. But my point here is, the Conservative party, Madam Speaker, have a political problem. That's why they've dragged their heels on some of these things. They are trying to figure out how to play to their base, do the right thing and play to the general public.

Well, I've learned one thing in the 32 years in politics—it will be 32 years this fall—that I have been a member. You've got to make a decision, and you've got to pick a lane. You're either with them or you're against them. The minute that you try to be on both sides, you're not making anybody happy in the end and you're probably going to make the wrong decision. That has been the problem with this government. They have been in this sort of middle place, which is not where they need to be. Either you don't agree with this stuff and don't do it or you agree with it and do it. That's really what it comes down to. I think the vaccine passport was just one of many examples of that.

The other one that blows my mind is what we're doing in hospitals. At the beginning of the pandemic, we saw what happened in long-term-care facilities. We had no vaccinations back then. Why? Because vaccines didn't exist. We were just starting to get people to wear masks and have PPE inside long-term-care facilities and retirement homes, and it wasn't enough. At first, some people didn't take it very seriously, and once that virus spread inside the homes, it went like wildfire, and people died. We saw it in places like Kapuskasing. We saw it in Sudbury. We saw it in Niagara Falls. We saw it everywhere, because we didn't have the measures in place that were necessary early enough to be able to deal with making sure that seniors are safe.

Oh, we had great press conferences. I give the Premier great credit for his comments. He was going to put an iron

ring around the long-term-care facilities. That was some iron ring. Unfortunately, the ring wasn't as solid as people thought, and as a result plenty of Ontarians got very sick, and unfortunately too many of them died. Could we have prevented it all? I don't think so. I think at the beginning you're trying to adjust. But I think we could have had a much lesser rate of infection and we could have had much less death in our long-term-care facilities if the government had reacted quickly. We in the opposition, in the media, the doctors and the people in public health were yelling and screaming at the top of their lungs to tell the government to do certain things that were not done. Eventually, they were done, but a whole lot of time evolved from, "Oh, I really don't want to do this" to "I'm putting an iron ring, but I really don't want to do this" to "I'm putting an iron ring." They played that middle, trying to appease their base and saying the right things till finally, when they did put in place the measures, we started to see a difference. So the government didn't pick a lane. They decided that they had a political problem and they needed to deal with the political problem.

I know the government says, "There's no politics in this. We don't play politics with COVID-19." No; there's politics in everything we do in this place, Madam Speaker. You're constantly thinking of that election day further ahead, and political parties, like individual members—myself included—take that into consequence when making decisions.

In this case, I think we correctly picked the lane, in the official opposition. The measures that eventually were taken in long-term care, we were advocating way ahead of them being done, and quite frankly, it was the right lane to pick. Yes, it was unpopular. We all got the phone calls from the families who couldn't go see their loved ones. How many phone calls did you have to return as a member? I got them. I had sons and daughters who were upset on the telephone, sometimes crying, because they couldn't get in to see their loved ones. Unfortunately, for the right reasons, we had to shut down those long-term-care facilities in order to try to get this under control so that we didn't have COVID-19 coming in by the front door or the back door.

But it took a while for the government to finally come around to understanding that these measures were necessary and had to be done. Unfortunately, by the time the government made those decisions, we found ourselves in a position where far too many people became infected and far too many died. I'm sure that's not what the government wanted—nobody wants that—but you are responsible for your actions. I just think that was a wrong way about it. If we had actually done what we had to do at the beginning, we probably would have been better off.

**1500**

The other one is the hospitals. This is the one that, really, to me, you've got to shake your head at. Let me see if I understand this: I can go into my favourite bar, grab a beer and eat a burger—I don't eat burgers anymore. If you haven't noticed, I lost a lot of weight. That's on purpose. One thing about COVID: I had to cook for myself, so I learned how to eat better. But the point is, you can't get

into the bar and you can't get into the restaurant unless you've got one of these. I keep it as a little plasticized card in my wallet. I've got it on my phone as well. And rightfully so, because when I go sit—I was at Rex's bar yesterday with a friend. There were only a couple of us. We were playing backgammon. He had a burger and I had a couple of beers. You felt safe. They've got physical distancing inside the bar. People wear masks. They check the ID when you come in. They're doing the right things.

The same thing—I have two favourite bars in Timmins, and I know I'm going to get heck from everybody for not naming them: Compass Brewing and Full Beard. They're brewers, and I love those. I love that type of beer, unfortunately too much. If I could get rid of that I'd lose another 20 pounds. But anyway, that's a whole other story.

The point was, I can go in there, I can get myself a burger or whatever, and I'm required to have a vaccination certificate to get in to eat the burger. But somebody could go to work at a hospital and they don't have to be vaccinated? Come on.

Hospitals are a place where there's illness. It's where infections happen a lot easier as a result of everybody being in there. Yes, there are measures in place—and I've got to say the hospital in Timmins, Madam Speaker, and those across this province, are doing a great job trying to deal with infection control. There was some real effort put in by the Ministry of Health and hospitals to get that under control. It took a while but we finally got there.

But my point is, why is it that I can't get a burger without a vaccination certificate but I can be treated for whatever at the emergency and the person working on me may not be vaccinated? The government says, "Oh, yes, but if we do that, we're going to lose all these workers and there won't be enough nurses."

Look at the take-up of what happened in long-term care. What are the numbers? In Timmins it's like 99% or something—98% or 99%. The reality is, people understand in the end. My belief is that there are some legitimate reasons why people don't want to be vaccinated. I understand that, but sometimes it's just that you hang on to that position as long as you can. What happened in long-term care is that people, in the end, went out and got vaccinated. And look at what's happening in long-term care today. We're in a lot better position now than we were at the beginning.

So why does a government have one policy for a long-term-care facility and another policy for a hospital? A hospital is a far more infectious place for infection—I think; tell me if I'm wrong—than a long-term-care facility. You've got all kinds of people walking in there. The ambulance comes in with a stretcher. They've got somebody who's sick or who got in a car crash. There's blood and there are all kinds of things that are catalysts towards providing infection, and the government is saying, "It's okay. We don't have to have those people vaccinated"? To me, it's kind of bizarre. I understand their argument: "Oh, we can't do it, and neither did Quebec do it, because if you do, there are too many nurses and doctors who don't want to get vaccinated." By God, if nurses and doctors don't want to get vaccinated, where are we going, right?

I think the government should have thought about this a little bit harder. I think they should have taken the advice of the hospitals that are demanding that their staff be vaccinated, who are a majority, and the public health officials and those in the know who have suggested very strongly that you should vaccinate those workers. Those should be facilities that are mandated to be working with a vaccine certificate. But for reasons of their own, the government decided they weren't going to go there. I think that's the kind of thing that's got people sort of scratching their heads with this particular government. In some cases, they've done the right thing after being pushed to do the right thing, but then you look over here and you say, "Well, what's that all about?" There's a lot of inconsistency as to how that was done.

The other ones who automatically should have been vaccinated are your home care people, because they're going from home to home to home with one worker. My, if there is any place that you've got to make sure that you've got people who are safe—now, mind you, they're wearing masks and they're wearing PPE; I get that, and that's a really good step in the right direction. But that's another place where we should have been looking at that a little bit harder.

The other one is schools. This is the other one that sort of makes you wonder. Right from the beginning, the medical community and the official opposition said to the government, "You've got to reduce class sizes." If we're saying that you can't go into a restaurant and sit next to the person at the table next to you, why should we expect that kids can sit in desks next to each other in a 30- or 40-person class? It doesn't make any sense.

The government has really, really resisted—they've used the right language. Again, the Premier goes out and he gives a good press conference, and he says the right things, but when it comes to action, the government is not doing what needs to be done in order to reduce class sizes—at least on a temporary basis. I think class sizes should be lowered, period, but that's a whole other story. But during this pandemic, you would think that we would find a way to reduce class sizes so that you do have physical distancing in the classes.

I've got four grandkids. A lot of us are lucky here: We have grandchildren, and we love them very much. But in Timmins, Eva and Elissa, who go to Lionel-Gauthier, had like five infections in their school—in Timmins, in Mountjoy township. It was five or six infections in the school.

Eva is seven, and she's immunocompromised. She is both physically and developmentally delayed. She's a wonderful girl. She's really easy to get along with, just a lot of fun to be around. She's always happy. There's always a smile on that little girl. But our daughter Natalie and Shane, her dad, don't want her in school until this whole infection thing is way behind us, which means to say that her older sister, Elissa—who's 10 going on 23, by the way, but that's a whole other story—can't go to school either, because mom and dad cannot take the chance of having her in the school, getting an infection. If Eva gets an infection, it's going to be not a good thing.

So it's like, why don't we reduce class sizes? Lionel-Gauthier is a French public school. I can guarantee you the class sizes aren't as big as the French Catholic school, because the French Catholic board is the largest one in my district—yes, I would say the French Catholic is probably the largest one; I may stand to be corrected, but if they're not, they're pretty darn close.

But my point is that there are class sizes that are larger than they need to be in order to make sure that our kids are safe. The government was told by the official opposition, was told by educators, was told by health professionals, “You need to reduce class sizes,” and the government really dragged its feet on that, and we're back to, you know, class sizes are what they are. Thank our lucky bottom dollar that we are now getting to the point of vaccinating kids from five to 11, because that's going to certainly help, but it's going to take a while before we get there. There is an elevated risk that the pandemic will carry on through those schools.

The other thing is ventilation, and this one drives me a little bit over the edge. The government made an announcement; the Premier and the Minister of Education said, “We are going to increase ventilation in all the schools, and it will all be done by the fall.” Well, go talk to your school boards, because I think we all have. Very few of them have been done. Some of them are new schools, and their ventilation is probably okay. I've got a number of new schools in my riding where the ventilation system is a lot better than the older schools, no question.

Most of the schools in Timmins have been rebuilt over time. There are not very many really, really old ones, but they do have old ventilation systems. So they've rebuilt St. Paul School and a whole bunch of other ones; they rebuilt the infrastructure as far as the classrooms, the hallways, the windows and all of those things, but the ventilation system is still having to be upgraded in some of these schools. I don't know if St. Paul is one of them, but I'm just using that as an example because it was retrofitted maybe about three, four, five years ago.

I know talking to the school boards—and some of the school board trustees were the first ones to call me, out of both the public and the Catholic boards—that in fact, the government was making these announcements that all of the things were going to be done by the fall, and they'd call me to say, “Gilles, it's not going to be done by the fall.” I think every school board in Ontario got some money. In my riding, they all got an amount of money to be able to invest in ventilation systems, but it did maybe 20% of the schools. A lot of that work is not going to be completed until now or sometime after Christmas.

**1510**

The government says the right thing. The Premier goes out and says, “We're going to increase ventilation in all our schools. It will all be done by the fall. Yup, you can trust me. What I say is what I do.” Well, that's not what's happening. And if you talk—Madam Speaker, I'm sure you've already done it. You must have spoken to your trustees, because certainly, they called me, from all four boards, to say that they were upset with that and they were

wondering when they were going to get the rest of the money.

The government says the right things, and for that, they get some marks. But when it comes to actually doing what needs to be done, it leaves a little bit to be desired. I would say it leaves a lot to be desired.

We dragged our heels on long-term-care facilities, what we had to do there. The results, unfortunately, spoke for themselves. We're not doing what we're supposed to be doing when it comes to vaccinations in hospitals and others. I think the only thing that's saving us—I know that we've had some cases in some of our hospitals, but it's a real problem.

I want to give a shout-out. I met with the fire association in Timmins, and I think it's the same in Sudbury. You can nod if you're telling me that's the case: 100% of our firefighters have been vaccinated.

*Interjection.*

**Mr. Gilles Bisson:** Yes, same in Sudbury, right? A lot of police forces and others are doing it themselves because they recognize, as employers, their responsibility for the health and safety of their workers. They're saying, “Listen. I can't have you go to a scene somewhere, contract COVID-19 and, because you're not vaccinated when you get it, you're far more infectious—and then bring it back into the station house or bring it back into the police station or the paramedic ambulance centre.” So we've pretty well 100% vaccinated all our EMS people in Timmins, and I think that's the case in a whole bunch of places across Ontario. I think that's one of the reasons that we have a bit of an ability to feel good about how the infection rates are not as high as they could have been. We'll all agree 750 cases is too much, but imagine where we would be if some of these things were not done.

But here's the sad part: It wasn't the government that forced the fire services and the EMS people generally to do this; it was the EMS people themselves, the hospitals themselves that had to say, “We're doing this. You won't do it as a government? Too bad. We're going to do it, because we know it's the right thing”—which speaks back to the problem that the government's got, which is that they have a bit of a political problem in that they're trying to play both sides of it at the same time: appease their base by not being seen as doing some of the things that were suggested to them by us and by others—but I think if you pick a lane, you're going to be all right.

Nobody, including my base, liked the idea of being in a COVID-19 lockdown; nobody liked it. I don't know anybody who was ecstatic about being locked down. I don't know anybody who was ecstatic about having to go get vaccinated—although I do get my flu shot every year, so I probably would have done it anyway. But the reality is that we do it because we understand it's the right thing to do.

Now, as far as process, both the minister and the parliamentary assistant spoke to the select committee on emergency management that was created by the government as a mechanism to give members of this assembly an ability to ask questions and to provide transparency and clarity to

what the government is doing, when it comes to these emergency orders. The government likes to give itself great credit for having created this committee—how great it is that they've done this and how wonderfully it worked. Well, as a permanent member of that committee, I've got to tell you, Madam Speaker, it ain't very encouraging.

We get three rounds of 10 minutes every time that committee meets, which is about once a month, once every month and a half, where we get to ask questions. The minister doesn't have to answer you. It's like anything else: I can ask a question to the Premier in this House. There's nothing that says that he has to answer it in the way that I want it answered; he just provides the answer that he wants. But there are three 10-minute rotations for the 40 members of the official opposition. What do you do in 10 minutes? I only touched the surface of the health care part of the pandemic. There's a whole business side of the pandemic, which I'm going to talk about after.

But the government says, "Oh, we created this committee, how great it is and how transparent, and we did that out of the goodness of our heart." No, you didn't, because you didn't want to have to come back to the assembly every time where there would be, at a minimum, if we decided as an opposition—not that we would do it every time—that you have to go to six and a half hours of debate. And the government didn't want to waste its legislative time doing these measures.

All I say is, listen, at the beginning of all this—I think it was in May 2020; it would have been May 2020, or was it before? I can't quite remember—the government needed to pass legislation similar to what this motion is doing. Nobody held it up. We understood it had to be done. We asked for some briefings and we asked for some clarity on some stuff, and eventually we passed it. I think it was on a unanimous consent vote, if I remember correctly. I think the motion was introduced and then it was called for by unanimous consent and it went through the House. I think we did that a couple of times while that provision existed.

Then the government said, "Well, we're not going to do that anymore. We don't want to have a debate in this place." So what they decided to do was to create this emergency management committee, where members of the assembly would get each—a grand total of 30 minutes for the official opposition, and I think the independents get 10 or 15 minutes—I can't quite remember, but it's less than us; that's all I remember. But the point is, it's not a very transparent process.

For example, during the pandemic, there were lots of phone calls that my good friends the Solicitor General, the Minister of Northern Development, Mines, Natural Resources and Forestry, the Minister of Health and a few others—where long-term-care facilities or small businesses or whatever were calling our constituency offices wondering what the situation was with whatever. Some of the answers I was able to get, because I would just call the minister. And I'll give the Solicitor General credit: She always took the call and responded. I didn't always get what I wanted, but at least I got an answer. And that's really what you're looking for for your constituent. I give her credit for that. That was the right thing to do.

But my point is that this committee doesn't provide the transparency that the government purports that it does. You don't have the time to be able to ask the questions. Now, the government will say, "Oh, yes, but if you had time, you would just slow things up." No. The powers are in this motion. The power is not in that committee. The committee is only to review the decisions that are made. So if the committee had more time, it would have nothing to do with slowing anything down. It would just have to do with the minister having to answer questions—or their designate; whoever that person is who comes into committee.

I've got to say, it's been really hard getting some answers from ministers on certain things. For example, I think the headache we all got—and I think I'm going to look on both sides of the House, and we're all going to shake our heads like this—was dealing with small businesses and the inability on the part of small businesses to access programs that had been announced. In some cases, they didn't properly fill out the forms, because they're not form-fillers; they run a business, whatever it might be, whatever kind of small business it is, and are not used to applying through forms to the government. They would get denied on the basis of a form not being filled out right. Then you would call the ministry responsible. At first, we had access to the minister's office, where we were able to give them the details and, in some cases, they fixed that. But eventually, the minister's office said, "No, we're not even taking your inquiries anymore." So we were sort of left on our own to try to figure out how to navigate our way through some of the problems that our constituents were having. I'm sure we all got it—businesses that were denied access to funding that was very necessary because they didn't properly fill out the form. And it didn't get a remedy.

In some cases, they did. I think of the McIntyre arena. I got a phone call from somebody one day saying, "We're the only curling club in northern Ontario who didn't get money." Well, it turned out in my good friend France Gélinas's riding and in Mr. West's riding, they got money, but for some reason, they skipped over Timmins. And it wasn't intentional. I never took it that way. It was just that there were a whole bunch of applications, and somehow this one sort of slipped through the cracks. So we got on the phone. We talked to the people responsible. Eventually, they got their money. But how many didn't even know to do that, never got their money, closed their doors and are not there anymore?

**1520**

I've got a—I don't want to say the name of the business, because it would be unfair. But I've got one particular business. They never applied for the first round because they didn't know they were allowed to apply for the type of business that they have. By the time they figured out that they qualified, they missed the second and the third round, so they never got to apply for any of it. So we tried to intervene, saying, "Listen, this is a new business that started just pre-pandemic and, unfortunately, the bookkeeper that was responsible for the financial part of the

business wasn't aware of these programs and they didn't apply." They were never able to get the money.

At committee, as much as we try to raise these issues privately and in the committee, the committee didn't give us the kind of ability that we needed to be able to get through this so that, in fact, those constituents, those small businesses, were able to get what they want.

At the beginning, what a gauche response on the part of the government when they did the original shutdown. Nobody disagreed—well, people did disagree, but by and large, in this assembly, nobody disagreed with the government that there had to be a shutdown of some type. It was done across the world. There was hardly a country where they didn't do it. The pandemic was spreading, it was like wildfire, we didn't have vaccines, and the government had to shut things down.

But they said, "It's okay. You can walk into Walmart." So you had, literally, the situation where you can go buy a toboggan at Walmart, but you couldn't go into the Pro Hardware down the street or an independent small business to buy that sleigh or whatever it is that you were trying to buy. You had to go into a bigger box store, a place that was easier to get infected because it's a lot harder to control people in some of those places as far as where they go and what they do. People were able to just go on and do what they had to do.

You had all these small businesses that were saying, "Listen, I could put measures in place that limit how many people come into my store. I'll let in one at a time, or two at a time, depending on the size of the store. I'll do what the government wants me to do, but allow me to at least keep my doors open so that I can afford to survive through this pandemic." The government was tone-deaf on this one.

All of us in the opposition, in the small business community, the chamber of commerce—the NDP and the chamber of commerce were like this on that issue: Let the small businesses operate in some reduced fashion so that they're able to survive their way through this pandemic. The government was just not going there. It wasn't until they got beat up really bad by public opinion—as a result of the work that we did, the chamber of commerce, individual businesses, the media and others—that the government finally relented and understood that you can't give a leg up, a hand up to the big-box stores and let our small business community go the way of having to close.

I'll tell you, there are still in our communities across this province—and I'm sure it's the same in your community. I've got small businesses that are saying, "Never again. Whatever, Gilles, just put a sign on my lawn, because at least you answered the phone calls, you went to bat for us. We couldn't get the government to respond." Unfortunately, it was because the government decided they were going to help box stores and not small independents, because the news that—any member of this assembly, especially the government members, would have been in a difficult spot to try to answer.

So I just say, how we dealt with—and some of those grants were very helpful. I wouldn't argue for two seconds

that the programs that were put in place were bad. Some of them could have been better, but they were at least a help for small businesses to be able to try to survive. I just say it was slow in coming. It was hard trying to get people to navigate their way through it. I've got to say, it was just a rather difficult situation.

The other thing that's happened through this, and I guess it's a good thing that came out of COVID—maybe it's a bad thing, depending on how you see it. Prior to COVID, I always had the ability in my office to have people work remotely, because the system I have is on the cloud. So all our databases, casework, letters and all that kind of stuff, it's all on the cloud. I had been, for a long time, trying to encourage my staff, "If you want to work from home a day or two a week, let me know, we'll work it out in the schedule." I don't have to have everybody in the office all the time. Well, as a result of having to shut down, we all sent our staff home, not just here in this assembly but in a whole bunch of jobs across Ontario. Just look at downtown Toronto. The amount of people who are not downtown is rather remarkable as compared to what it was before.

But what we've learned how to do is how to work differently. That's because of things like Teams and teleconferences and Zoom. We've found a different way of working, and what I've found as an employer—because, as you, I have staff who work with me—I really want to thank my staff. They stepped up, and quite frankly, are far more productive than they would be if they were at the office, because there are far more distractions at the office. When somebody is on a Zoom call, you're not going to spend an hour where you can do it in five, 10 or 15 minutes, or whatever it is. It's changed the way that we work. I find that we've become much more efficient as a result of using those technologies to be able to service our constituencies. And a lot of businesses are finding the same.

I was meeting with somebody—when was it? I think it was on Thursday last week. They're a medium-sized business. I asked the owner, "Listen, are you looking at getting everybody back?" He says, "Well, those who want to come back, that's fine, but those who are comfortable working at home, we have the systems in place now to be able to manage that, and quite frankly, we don't mind. We need less people in our offices, which means they don't have to be as big, and there is less distraction in the office. If we need them, we can do it by Zoom conference or Teams conference and, if necessary, we can bring people in." But especially for people in the more remote parts of Ontario, it's really opened up the economy in a way that it wasn't opened up before, because you're able to do things remotely and it's more accepted than it ever was before.

One of the things that the government did, because they had no choice, was, for example, in doctors' offices. And I'm going to look at our health critic just to give me a nod if I'm right or wrong on this: Doctors were allowed to take appointments by phone to do prescriptions and stuff, but I believe that's now ended, right?

*Interjection.*

**Mr. Gilles Bisson:** It hasn't ended? Is it about to end?  
*Interjection.*

**Mr. Gilles Bisson:** Hands up. Okay, well, I've just got to say, we should continue that, because one of the things that I found was, for a lot of constituents that I deal with—as you, we have a lot of seniors—it was a lot easier for them. They don't have to put on their snow boots and their hats and their mitts and go clean the car and drive the car to the doctor's office to get their whatever prescription refilled. They're able to do it by phone.

I'll tell you, it's a very efficient way of—now, I understand that doctors and nurse practitioners and other health care professionals have to be able to see somebody at least semi-regularly. But a lot of the work that they're doing can be continued in this way. And I think if there's one thing that comes out of this pandemic, it's that it's taught all of us that there are different ways of working, and quite frankly, they are not necessarily bad. We can actually do things.

The other thing I want to touch on—I've only got six minutes; my God, time flies—is what's happening with long-term care now. At the height of the pandemic, when we were having long-term-care facility after long-term-care facility that was with high levels of infection and people unfortunately were getting sick and dying, there was talk even on right-wing radio shows that maybe we should think about, at least with the bad actors, moving those private homes into the public system, that they become publicly not-for-profit operated.

The government obviously wants to resist that because that's not your ethos. That's not what Conservatives are all about. Conservatives believe in the private sector doing a whole bunch of things, including things in health care. Well, that's where New Democrats and you will disagree. But what it did teach us was, the public sector was in a better position to deal with some of these things, because some of the worst cases that we saw in long-term care—not all of them, but most of them—were in the private sector. And it's because what drives them—they're not bad people; I'm not going to say that for one second. I deal with Extendicare, as you do in your constituencies, and you've got great staff, you've got managers who care, and you want to try to do the same thing. There are some good apples out there.

But there are some bad apples out there. And I don't understand, for the love of God, why the government is rushing to renew all of these contracts with the private sector long-term-care facilities, trying to get it all done before the next election and sign them into 30-year contracts, and some of them are bad actors. Where we've got bad actors, we should be saying, "Okay, we're not going to renew your contract. We're going to review some things, and if necessary, let's move you into the public sector."

**1530**

The government will say, "Well, you can't do that. It won't work." We did it with our health care system. All of our hospitals, by and large, were private. In the 1960s—when I was born, it was a private hospital in 1957. St.

Mary's Hospital was owned by the Catholic church, by the sisters; it wasn't owned by the province. When I went to work there, as a porter prior to joining the armed forces when I was about 16, I guess, it was still owned by the sisters, and it was transferred to the province at about the time that I was there. I can't remember the exact year. It was probably 1973, 1974 or something like that. So it's been done before. We have transitioned private entities into the public sector.

There's a reason that we do that. The public sector is not about profit; it's about saying, "Okay, every dime we get, every dollar that we get, goes towards care." And that allows us to also organize things in a different way when it comes to how we purchase goods, how we purchase medicines, how we organize work. All of those things are done differently as a result of being in the public sector. And the fact that the government is rushing to re-sign some of these contracts into 30-year contracts, Madam Speaker, to me, is troubling, because some of these contracts that are now being negotiated and re-signed are with some of the very bad actors that we had through the pandemic that we all heard about, unfortunately, way too much in the media as a result of what happened in those long-term-care facilities.

So I would caution the government. This is something that we should be taking slowly and making sure that we do right, because if you lock them into a 30-year contract, it's going to be difficult to be able to deal with them depending on what you put in those contracts. Now, we know that the government likes breaking contracts; they've done that before, but that's for another day.

The last point I want to make is something we as northerners talk about a lot, and that's the opioid crisis. The opioid crisis has accelerated under this pandemic. The amount of people that have OD'd as a result of opioid use in all of our communities has shot through the roof, and there's a whole bunch of different reasons for that. People's mental health is not where it needs to be. People were not working, in some cases, and opioid use was a little bit more prevalent in their daily lives. And I, unfortunately, like you, represent a community where we've had a lot of people die as a result of opioids. The government's response, so far, when it comes to opioids has been rather lethargic. Yes, you've done some things. Yes, for example, in Timmins, you invested in more safe beds at the Jubilee Centre. Yes, you've hired a nurse practitioner there. We've put the fire keepers in place, between the federal and provincial dollars, to get First Nations staff to patrol the streets in the city of Timmins in order to deal with some of the homeless people we have. There are things that have been done, but the root causes that cause somebody to take an opioid and die have not been dealt with. And we need to do something, because these are our brothers, our sisters, our neighbours. We know them all. We have members of our families that are addicted to drugs. It's a horrible thing for the individual to go through and for the family to go through. The government has got to do more when it comes to what they are prepared to do in order to be able to deal with the opioid crisis that has



accelerated and gotten worse under this particular pandemic.

With that, Madam Speaker, I want to thank you for this time to debate.

**The Acting Speaker (Ms. Natalia Kusendova):** Further debate?

**Mr. Rudy Cuzzetto:** As always, it's an honour to rise here and to speak on behalf of the people of Mississauga-Lakeshore. I'm proud to speak this afternoon in support of government motion 8, moved by the Solicitor General of Ontario, which would extend the government's powers to amend and extend certain orders made pursuant to section 7 of the Emergency Management and Civil Protection Act and sections 2 and 8 of the reopening Ontario act. If passed, the motion today would extend these powers, which were scheduled to expire next week on Wednesday, December 1, until March 28, 2022.

Speaker, I had the privilege to speak here in support of Bill 195, the Reopening Ontario (A Flexible Response to COVID-19) Act on July 14, 2020. Over the past 16 months, the government has used these powers to take many careful and measured actions, both to reopen Ontario when that was appropriate and to strengthen public health measures when it was necessary to protect the health and safety of Ontarians, based on the public health indicators and based on the advice of the Chief Medical Officer of Health, Dr. Moore, and the local public health officials, including Dr. Lawrence Loh in Peel.

Speaker, this approach is working. It effectively curbed the Delta-driven fourth wave. Thanks to our vaccination program and strong public health measures, including indoor masking, physical distancing and capacity limits, the province's public health indicators have remained stable. Ontario now has the lowest active cases per capita among the largest provinces and states in North America at about 30 cases per 100,000 people. In Peel region, it's half that: about 15 cases per 100,000 people. As the Chief Medical Officer of Health explained, because of these protections offered by the vaccines, even if the case counts do rise, it won't have the same meaning as it did during the earlier wave of the pandemic.

Every Friday, Mississauga and Etobicoke MPPs meet with the senior leadership at Trillium Health Partners. Last week, they reported that as of Friday, there were 11 COVID-19 patients in Trillium Health Partners hospitals, including four in intensive care. With hospitalization and ICU rates fluctuating on a day-to-day basis, figures like these are better than even the most optimistic modelling we received from the science table earlier this year, and we have been able to accept COVID-19 patients from Saskatchewan as well.

Speaker, Ontarians have made many sacrifices over the past 16 months to help stop the spread of COVID-19. We can't allow this progress to be undone, as we're seeing now across Europe and the United States and even in western Canada.

The director of the World Health Organization for Europe, Hans Kluge, warned that Europe is headed for a very hard winter for two reasons: inadequate vaccine

coverage and the removal of public health measures too soon despite the spread of more transmissible Delta variants of COVID-19. As the COVID science table has noted, Finland and Denmark dropped almost all their public measures and then experienced a rapid surge in cases. Germany and Austria have among the lowest vaccine rates in Europe and they're now imposing lockdowns. The hospital system in upper Austria is near collapse and ICUs are overwhelmed with mostly unvaccinated patients. We can't afford to make these same mistakes in Ontario. We can't afford to underestimate this virus or the Delta variant.

A month ago, on October 22, the government released A Plan to Safely Reopen Ontario and Manage COVID-19 for the Long Term, which outlines a slow and cautious approach to lifting our remaining public health and workplace safety measures as early as March 2022. This is a plan that will guide Ontario safely through the winter and out of this pandemic while ensuring we can avoid any future provincial-wide lockdowns and keep our schools open and support the province's economic recovery. As the Chief Medical Officer of Health, Dr. Moore, has said, it is going to be critically important to monitor the public health indicators as we take a deliberate pause in reopening, as families gather over the winter holidays and then as students return to school in January 2022.

If hospitalizations and ICU admissions remain stable, Ontario will move forward to reopen. If additional public health measures are needed, then they will be localized and targeted. And based on the advice of the Chief Medical Officer of Health, we will try to minimize any disruptions to businesses and families as much as possible.

**1540**

If passed, this motion would allow us to continue with important initiatives like the temporary vaccine certificate system, which is helping to expand coverage. And it would allow the government to act quickly to extend or amend existing orders to protect Ontarians, including orders related to workplaces and restrictions on gatherings and events. As always, these decisions would be based on the latest public health advice.

We must remain cautious and continue taking small steps forward. But there are many reasons for optimism. Firstly, the province's billion-dollar COVID-19 vaccination program has been a great success, achieving one of the highest rates of vaccinations in the world. We have administered over 23 million doses, including 2.5 million in Peel region alone. Ninety per cent of residents aged 12 and over have received one dose, and over 85% have received two or more doses. Already over 328,000 people have received their third dose.

I want to thank the hard-working staff and volunteers at Peel Public Health and Trillium Health Partners, and all our partners in the community, including Dr. Banwatt at CarePoint Health, who worked with me to set up vaccine clinics for essential workers. I also want to thank Fontana Garden Banquet Halls and local Tim Hortons owners in Mississauga-Lakeshore, who donated coffee and meals to the staff and volunteers at our 32-hour Doses After Dark

vaccination clinic at the International Centre, which administered almost 5,000 doses.

The GO-VAXX vaccine bus clinics are another important part of the last-mile stretch to make it easier and more convenient for Ontarians to get their vaccinations. I know this was the case when the bus visited the Dixie Outlet Mall on October 16 and ISNA Canada on November 5, both in Mississauga–Lakeshore. These buses have now administered over 10,000 first and second doses at malls, festivals, events and community hubs across Ontario. By bringing vaccines directly to the people, we're helping more residents get the protection they need to keep themselves, their families and their communities safe. I want to thank the Minister of Transportation and our team at Metrolinx for this very important initiative.

Last week, the Ministry of Health, in partnership with Peel region, opened a new vaccine clinic at the Sheridan Centre in Mississauga–Lakeshore. This new clinic is another important part of our strategy to push toward 100% vaccine coverage. They are accepting walk-ins for first and second doses, and booster doses are available by appointment for eligible residents, including seniors over 70, health care workers and essential caregivers. They're open Tuesday to Saturday from 1 p.m. to 8 p.m.

Again, I want to encourage everyone to get your first, second or third dose as soon as you're eligible. Unvaccinated people are about 43% more likely to need intensive care than those who are fully vaccinated. As the Lieutenant Governor said in the speech from the throne, getting vaccinated will protect you from the worst of COVID-19. It will save your life.

Moving forward, with Health Canada's approval of the pediatric Pfizer vaccine on Friday for children aged 5 to 11, the government is prepared to begin distributing and administering doses as soon as they arrive. For those who don't know, the approved vaccine regimen for children under 12 is two 10-microgram doses of the Pfizer vaccine, a third of the 30-microgram dose approved for adults. I know we're working with the federal government to confirm and finalize the details of this shipment, but this is very encouraging news for the health and well-being of our children, especially as more people move indoors and attend family gatherings during the winter months. Vaccines will be available through familiar channels, including doctors' offices, hospitals, pharmacies and school-based vaccine clinics.

At the start of this school year, we also strengthened our testing options for students and staff with a take-home PCR test pilot for high school students. Last month, this initiative was expanded to all publicly funded schools in the province. Ontario is the only province in Canada to offer this kind of comprehensive and accessible testing. With the support of Ontario Health, LifeLabs is also expanding its COVID-19 testing program, including at 950 Southdown Road in Mississauga–Lakeshore. This includes testing, free of charge, for all patients, whether or not you have symptoms. Appointments can be booked online at lifelabs.com. I encourage everyone to take advantage of this option to help keep your families safe from COVID-19.

Ontario now has the infrastructure in place to manage any outbreaks, including a high-volume capacity for testing and people on the ground to perform case and contact management as needed. To support the safe return of our students after the winter break, a rapid antigen screening test kit of five tests will be available to all students in schools across Ontario. I understand that the government has also made an offer to our First Nations schools as well. This will help to reduce risks following the holidays and the reopening of our schools in January, by making testing more accessible for working parents across the province. It's just another tool in our multi-layered approach to keep our students and staff as safe as possible as they return to a normal school year in 2022.

Over the past year, the government has invested over \$600 million to improve ventilation and filtration in schools. This includes over 20,000 stand-alone HEPA filter units, and it was an honour for me to help the Minister of Education deliver some of these to Fernforest Public School in Peel. In total, the government has added over 70,000 ventilation devices to help ensure our schools remain as safe as possible. Ninety-nine per cent of the schools with mechanical ventilation have been reassessed to optimize air flow; 92% of the air filters have either been upgraded to a higher quality or are now being changed more often, and 87% have more fresh air intake.

These investments are essential to help manage and contain COVID-19 and its variants as Ontarians look forward to returning to something closer to normal life after these last 20 months, but so, too, are the orders made under the reopening Ontario act. But as the Premier has said since the start of this pandemic, these emergency orders should not be in place a single day longer than necessary.

Since Bill 195 came into effect, eight emergency orders have been allowed to lapse. Some of these, like work redeployment in education, are no longer needed, and others, like the virtual signing of wills and powers of attorney, have been made permanent. It is important to note there is no power to make any new emergency orders. In Bill 195, the government kept only the powers it needed to support the gradual and safe reopening of Ontario.

Speaker, it's worth taking a moment now to revisit some of the criticisms of the original Bill 195. The Canadian Civil Liberties Association claimed the province would "continue its extraordinary powers ... without the oversight and accountability mechanisms that are crucial when power is concentrated in the executive branch." But many accountability and transparency measures were built directly into Bill 195.

Section 11 requires the Premier to regularly report to the public on orders that remain in effect, and section 12 requires the Premier or a minister to report to an all-party select committee to justify any extensions of emergency orders and to answer questions from MPPs at least once every month. The Premier has been open and transparent about the data and the modelling that drives all of the decisions we're making to protect the health and safety of Ontarians. In fact, the Toronto Star reporter Ed Tubb wrote

that “Ontario has been genuinely world-class at pandemic data reporting ... we’re so far ahead of virtually every other jurisdiction I’ve looked at.”

**1550**

As my friend the Associate Minister of Digital Government has explained, digital tools have been a key part of Ontario’s successful response to the COVID-19 pandemic. But most of all, we’re in this position now because Ontarians have risen to the challenge and supported each other through one of the darkest periods in our history.

As always, I have to thank the front-line workers for their efforts, especially at the Mississauga Hospital in Mississauga–Lakeshore, Peel police, Peel paramedics, Mississauga firefighters and so many others, particularly those who have played a role in our vaccine rollout.

Speaker, I’d like to conclude by recognizing the generosity and compassion of some of our very special high school students in Mississauga–Lakeshore: Kendra Johnston, a student at Clarkson Secondary School, raised \$6,700 dollars to send children with cancer to a non-profit summer camp. D.J. Della Rocca, a student at St. Paul Secondary School and a front-line worker at Longo’s, raised \$2,600 dollars for children at SickKids hospital. Jessica Mercado and Paige Reynolds, students at Iona Catholic Secondary School, volunteered to help support residents at local long-term-care homes. Jack Harris, a student at Lorne Park Secondary School, helped collect donations for the Compass Food Bank. Chernor Jalloh, a student at St. Martin Secondary School, did the same for the Mississauga Food Bank. Marlowe Kelly, a student at Mentor College, helped deliver food from the Sai Dham Food Bank to seniors in the community. Speaker, I could go on. It’s at least in part because of young leaders like this that we’re now on a path to recovery, and I was proud to congratulate them on their outstanding strength of character during this challenging time.

Speaker, extending the powers of the reopening Ontario act until March 28, 2022, acknowledges that we need the safety net of public health measures in place to keep us all safe while we proceed with the vaccination of children under 12 and booster doses for our most vulnerable. We’re making great progress, and ask the other members to join me in voting for this important motion in moving forward during COVID-19 and getting back to normal for 2022.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Sol Mamakwa:** It’s an honour to stand up and speak on behalf of the great people of Kiiwetinoong and speak on government motion number 8.

I know that in this extension the government is recommending that the powers to amend and extend the orders be extended to March 28, 2022. Speaker, we’ve known for a very long time now that we have to protect our health care resources and make sure that we are doing our best to follow public health guidelines and protect ourselves, our elders, our children, our families and our communities.

I know that coming from Kiiwetinoong, I always see things through a very different lens with a different

perspective from what you may see down here in southern Ontario. Today, I want to be able to talk a bit about the health response in the riding of Kiiwetinoong. Speaker, I have four municipalities and 31 First Nations. These First Nations are part of Treaty 9, Treaty 5 and Treaty 3. I know most of you might be unaware that the health system in Kiiwetinoong shows us on a daily basis where there are gaps in the system. Unfortunately, it is the people of Kiiwetinoong who pay for these gaps, and they pay in full: with their health and with their lives.

Just an example: Earlier this year, I had 47 local doctors write to me about the urgent and ongoing need for increased nursing and housing resources in fly-in First Nations in northwestern Ontario. Even pre-COVID, nursing resources in fly-in First Nations communities were woefully inadequate to meet the health care needs of the population. When I keep coming back here, I get thrown with, I guess, the jurisdictional issue that comes into play. Playing that jurisdictional Ping-Pong on the health and the lives of the people of Kiiwetinoong is basically structural violence, structural racism.

But to talk about the nursing crisis, the physicians stated in this letter:

“The situation is increasingly dire in northern communities, with human and physical resources stretched beyond their capacity to provide an acceptable standard of care to our patients. Our direct observation is that nursing resources have dropped back to pre-COVID levels in many communities, despite an ever-increasing burden of testing and follow-up, and soon the added task of community-wide vaccination.

“You will recall that pre-COVID nursing resources were woefully inadequate to meet any of the acute, chronic or preventive health care needs of northern Indigenous communities. COVID has simply brought the issue to a new crisis level. Mental health emergencies have been increasing due to prolonged community isolation, while preventive care has been further deprioritized.

“Nursing stations”—not hospitals; nursing stations—“which were never conceived, designed nor staffed to be 24-hour emergency rooms have become just that. The situation is simply untenable. We therefore believe that in parallel with longer-term planning, funding for more nurses, along with the necessary community-based administrative staff to support their work, must be provided now.”

These are physicians who work on the ground in the riding of Kiiwetinoong.

They start talking about another place, housing for health care personnel:

“Further exacerbating this crisis is an acute shortage of housing for health care personnel. The lack of housing infrastructure limits optimal utilization of existing personnel and seriously hinders longer-term human resource planning efforts. The pandemic context adds an additional challenge, as most health care personnel are obliged to share accommodations, thus eliminating their ability to properly self-isolate and putting these providers and the communities they serve at risk.

“These communities require action in the form of additional housing units for health care personnel now. This means immediate mobilization of funding to get housing units over existing winter roads”—remember, the 24 communities I represent do not have provincial roads or city roads—“to communities on an emergent basis, as well as putting into place a comprehensive plan for meeting residual housing needs over the coming months.

**1600**

“We sound this alarm as physicians who work closely with and in these communities and see first-hand this crisis unfolding.

“We do this while acknowledging the key roles of independent Indigenous communities and tribal councils, the Sioux Lookout First Nations Health Authority and Nishnawbe Aski Nation in defining specific health priorities. We do this in service of a universal and shared goal—our patients’ right to access to an excellent quality of care.”

So that’s from the physicians’ perspective. You have to understand: We have community doctors; we don’t have family doctors.

One of the things that continues to happen is a mental health crisis, a suicide crisis. I know that suicide is a very big issue in our communities. As you know, I speak about it every now and then. I try to speak about it often, when we have young children—12 years old, 13 years old—boys and girls, die by suicide.

In the riding of Kiiwetinoong, in First Nations served by the Sioux Lookout First Nations Health Authority, which represents approximately 31 First Nations, there have been 562 deaths by suicide in the past 35 years. In 2019, the rate of suicide in Canada was eight per 100,000 people; the suicide rate among First Nations people was 24 per 100,000 people. That is three times higher. And in the riding of Kiiwetinoong, which I represent, that rate is much higher. I know 2021 has been hard. It has been tough for families, for communities. We’ve had multiple young people die by suicide in Eabametoong, Webequie, Wunnumin Lake and Poplar Hill.

Madam Speaker, the mental health crisis that exists across Ontario is not letting up. I know that we need to be able to put resources into care, to make sure that if there are any children who have no hope, whereby they do not have water—remember, there are 14 First Nations that are in a long-term boil advisory today, with no clean drinking water. That would not be acceptable anywhere in Ontario. If that was in downtown Toronto, that would not be allowed. But it’s okay in Kiiwetinoong. It’s okay in Neskantaga, to be like that for 26 years.

I know I spoke about the mental health crisis. I always talk about mental health, the suicide crisis. I’m a big believer that mental health should have a no-wrong-door approach. It’s not right to use the excuse that Ontario has no jurisdiction for improving First Nations mental health services, when we have to leave the First Nation for help and we end up using Ontario-funded services. I see that under the emergencies that we have, that I have seen—the

emergency orders—there is no response to be a proper response to address these issues.

One example is Jordan’s Principle. I’m not sure if you’re all familiar with Jordan’s Principle. There was this five-year-old boy who had passed away back in the 1990s in northern Manitoba. He died in a hospital—he was five years old—but the province and the feds could not come to terms on who should pay for the costs. Both levels of government ended up fighting, and they couldn’t determine who would pay for the costs. His name was Jordan River Anderson. That’s how Jordan’s Principle came to be. Jordan’s Principle ensures all First Nations children, no matter where they live, access the services and the support that they need, when they need them.

I share that because the current resourcing for mental health supports is completely inadequate. During this pandemic, during this crisis that we’re going through, I got lots of letters with respect to what is needed to address this. What communities need is to ensure that there’s resources for round-the-clock supports to keep high-risk youth safe and secure while they access mental health services out of the community. I know another thing that is needed is residential facilities to provide Indigenous youth with holistic, culturally appropriate services and supports. I know a letter was sent to Ministers Rickford and Elliott. A reply letter from Minister Rickford did not address the issue.

Another one that they require is trauma teams to help communities come up with community wellness plans. There’s a need of \$3 million to be able to do that. Another one is to address cultural revitalization programming, whether it’s traditional healing, cultural teachings, land-based teachings or activities. You have to remember, the systems that are there, which have been there for the longest time, have been there to get rid of the Indian in the child. That’s the way the systems are built.

**1610**

And another need that is listed there is a mental health policy for status Indians living on-reserve—basically, but then also a suicide prevention strategy.

I know, during COVID, in the riding of Kiiwetinoong, we have travelling specialists that come in. “Specialist” could mean optometrist or dentist. In my home community, we get the dentist twice a year, two weeks at a time, to service the 600 or 700 people that live in the community. Because of lockdowns and limited travel in the riding, we had two deaths during COVID-19 due to dental complications. Right now, there are over 500 children on a wait-list for pediatric dental surgery, who are in pain and malnourished through inability to eat.

In 2016, preschool children in our region received oral health surgery 14 times the Ontario average. The dental clinic that we had in Sioux Lookout will not reopen. It is deemed to be unsafe for long-standing issues. You have to understand: In our First Nations communities, community clinics do not meet the infection control standards, and there are very limited services provided.

I share these stories because, again, I always share stories about how the pandemic has changed or is very

different for the First Nations communities in Kiiwetinoong compared to if you went to Sarnia, if you went to Ottawa, if you went to Toronto. You guys are lucky to be able to turn on the tap, as simple as that, and have water. Meegwetch.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Stephen Crawford:** It's great to be able to participate in this debate here in the Legislature and add my voice to the reopening Ontario act.

Speaker, I'd first like to start out by thanking Ontarians for the great work they have done through COVID-19. COVID-19, as we know, has proven to be dynamic, but repeatedly, the people of the province have stepped up and shown their resilience. In light of a worldwide pandemic, we did what was necessary to keep our family and friends safe. Because of the tremendous sacrifices that have been made, incredible progress in fighting COVID-19 has been made.

We cannot forget that during these months, our health care heroes have been there. The front-line nurses, doctors, personal support workers and staff have been working hard for the health and safety of the province of Ontario.

In the Legislature, the Clerks and staff have gone above and beyond to ensure the House remains open and the important work every member of this assembly does representing constituents gets done.

It has not been easy. These have been trying times for businesses and for the citizens of Ontario, but the government has been there to reduce the burden. For businesses, we implemented regulatory changes such as allowing for alcohol delivery with food takeout. This measure, which was initially temporary, was codified into law.

Direct financial relief to businesses to deal with the present challenges has also been made: The small business grant provided total payments of between \$20,000 and \$40,000 to struggling business. To keep employees safe, the government provided \$60 million in one-time grants of up to \$1,000 for eligible main street businesses in retail, food, accommodations and other services with less than 10 employees, to help offset the costs of PPE. In addition, the province provided approximately \$11.3 billion in cash flow to support a six-month interest-free and penalty-free period to make payments on the majority of provincially administered taxes. For Ontarians, we have provided funding to parents to cover expenditures. We have also put forward tax credits and funding for job reskilling to help individuals kick-start their careers.

Through the worst of this pandemic, we have stuck together and watched out for one another. Community organizations and religious groups volunteered to help those in need. I was able to visit the Dar Foundation to recognize the volunteers who stepped up for their local community.

It's been encouraging that members of this House have worked together to find solutions to keep people safe. The combination of efforts to control the spread of the virus has positioned our province better than others in terms of case counts, and this is certainly true when we look at other provinces within Canada, other states in the United States

and, indeed, other jurisdictions around the world. Ontario is doing very well on a per capita basis.

Ontario consistently has lower case counts per capita than any other province outside of Atlantic Canada. There's no comparison between Ontario and the two other largest provinces, British Columbia and Quebec. Looking at the numbers as of November 19, the rate of cases in British Columbia was 55 per 100,000 people. In Quebec, the case rate was 53 per 100,000 people. Here in Ontario, the number is 30 per 100,000 people. So we've certainly come a long way.

I want to mention that with an active virus, our response has to be cautious. We do not want our hospitals and ICUs to be at overcapacity, which can cause further delays, postponing surgeries and testing. Since day one, our plan has revolved around keeping Ontarians safe. We have consulted with the medical and scientific experts for insights. Our testing strategy is succeeding by quickly identifying cases and having a plan for isolation. In the 2021 budget, our government outlined more than \$3.7 billion over two years for Ontario's comprehensive testing strategy, including \$2.3 billion next year to ensure timely access to testing, targeted testing in vulnerable communities and to expand the capacity to process tests effectively.

It is not only testing. Ontarians have been asked to wear masks and socially distance to reduce the spread. A cautious route was selected. In May of this past year, our government announced a three-step road map. Establishing the road map produced a clear guideline for easing the health measures that have been implemented. Since then, we have advanced through the steps, and leaving the road map is now in sight. Businesses are beginning to reopen. Restaurant owners, gym owners and movie theatre owners are among a small selection of individuals who are delighted with the capacity limits being lifted. Business owners now know they can keep their patrons safe. I, like many of you here in this chamber, meet regularly with business leaders in my riding of Oakville, and they are following health measures and rules because they understand keeping their staff and customers safe keeps our economy moving ahead.

Speaker, this is what we have been working towards: going back to normal. Under the reopening Ontario act, the rules for capacity limits within each step are specified. Our reopening plan has changed, and this is how it has to be. Health officials, including the Chief Medical Officer of Health, have been consulted in the creation of this plan. The overall aim is to keep Ontarians safe. This means limiting the number of contacts a person can have throughout the day. We don't want super-spreader events, where hundreds of people could become infected. As we have seen with other parts of the world, this virus moves fast, and with the Delta variant, additional caution is required. Through regular updates, Ontarians have been kept informed on our situation. Our government has been very transparent on the course of action with the aim of returning to a pre-pandemic Ontario.

**1620**

In the beginning of my speech, I mentioned the various ways our government has been supporting businesses. The

reopening Ontario act includes a regulatory change that greatly assisted restaurants and other food establishments when indoor dining was unavailable. Speaker, O. Reg. 345/20 allows for the expansion of patios. Notably, the order helps municipalities move quickly and pass or amend temporary use bylaws to support their local economies by allowing businesses to expand or create patios when those patios are permitted by public health restrictions to be open. With the order, it could be done in a matter of days because the normal process of passing a bylaw is not needed. Under the order, municipalities do not have to provide public notice and hold a public meeting when passing temporary-use bylaws for patios. It also temporarily removes people's ability to appeal their council's decision to pass these bylaws.

As we have seen, this has benefited local economies since it increases the revenues and stability within the businesses. Expanding an existing patio creates new tables for more customers. It also helps the staff financially with more tips throughout the day.

In Oakville, patios have been established on sidewalks and other areas where they ordinarily have not been permitted, and I know this has been the case throughout the province.

Restaurants and bars have been hit hard by COVID-19 and so have their staff. Extending this order is important since it supports the revenue of small businesses across the province and helps maintain and, indeed, create jobs.

Speaker, I remember in the early days of the pandemic when there was panic buying. I think we all remember those days back in last March and April. Grocery stores and pharmacies were running out of certain products. Personal protective equipment, or PPE, which has become a more important aspect of our lives, was harder than ever to find. Our government looked at the landscape and knew a domestic supply chain had to be secured. Utilizing \$50 million, the Ontario Together Fund was established. Businesses across Ontario, including my riding of Oakville, received funding to produce PPE. Importantly, by making these investments directly into businesses, jobs were created here in the province of Ontario.

I want to take a moment to highlight the community spirit that has occurred. Donations were made to non-profit organizations and others in need by individuals and companies. For instance, I remember dropping donated masks from Grasshopper Energy to locations throughout Oakville.

Speaker, I mention the shortage of goods because there were bad actors. Unfortunately, the bad actors took advantage of the situation by charging more for their goods, essentially price gouging the good people of Ontario. Individuals and families need the necessary goods to address the ongoing threat of the pandemic. Masking, as we all are right here right now, is still a requirement, and purchasing this good is common.

We are safeguarding consumers with a clear order against price gouging. Exploiting customers who need products to protect themselves and others is wrong. Specifically, the order specifies that no person shall sell or

offer to sell necessary goods at an unreasonable price. Necessary goods apply to items such as masks and gloves used as personal protective equipment in relation to infections. Disinfecting products and personal hygiene products such as soap would also be included.

It is disappointing that many instances have been reported. Since the order came into effect on March 28, 2020, over 32,000 consumers have reported incidents of alleged price gouging through the government's online web page and call centre. Some were even reported to the police for their follow up and investigation. Some of the most serious offences where the prices were grossly in excess to customers included protective disposable gloves at a price of \$70 for a box of 100; toilet paper, \$65 for a pack of 12 rolls; a single surgical mask for \$8; and \$15 for 50 millilitres of hand sanitizer.

The ministry is acting on the complaints. The vast majority of businesses are not participating, nor have participated, in this practice. However, for those that are or thinking of it, do not. There are consequences, and if this legislation passes, they will continue. With the occurrences I have just mentioned, I think everyone can support this relevant and important protection under the reopening Ontario act.

Previously, I mentioned the tremendous sacrifices of our health care heroes, both in hospitals and long-term-care facilities. The reopening Ontario act includes measures pertaining to health care, with some having expired, while others will continue, if this act passes. Our government has recognized the hard work of our nurses and personal support workers. Ontario was the first province to implement the pandemic pay program, which was created under the reopening Ontario act. It was the largest program in terms of reach and funding provided.

There were clear goals of this program, which were providing additional support and relief to front-line workers, encouraging staff to continue working and attract prospective employees, and helping maintain safe staffing levels in the operation of critical front-line services.

The pandemic pay program benefited over 375,000 employees across 2,000 employers. Eligible employees received a lump-sum payment directly into their bank accounts. I read the ministry emails sent to my office detailing local employees who received the money. I know first-hand the appreciation felt by the local heroes in my riding. The program was a way of showing that the government had their back when they had ours. The extra hours that health care workers have been putting in and the quality of care being provided have been instrumental in our fight against this pandemic. Unprecedented times call for unprecedented measures.

Further, Speaker, this pandemic has disproportionately affected our seniors. We know that the long-term-care system needs attention due to its mismanagement under the previous Liberal government. With billions of dollars being allocated, seniors will get the care and attention they deserve while living in a comfortable environment.

It is the residents and staff we are protecting by extending these existing orders. Order 146/20 specifies

that individuals are limited to working in one long-term-care facility. This order applies to all long-term-care employees, including registered nurses, registered practical nurses, personal support workers, and kitchen and cleaning staff. Implementing this order is necessary to protect the health and safety of long-term-care residents and staff by limiting the potential spread of the virus. Moreover, the order supports long-term-care homes by maintaining staffing capacity.

On April 23, 2021, the order was amended so that long-term-care employees who are fully immunized against COVID-19 are permitted to work in multiple long-term-care homes or work as employees of other health service providers or retirement homes, unless otherwise directed by a medical officer of health. We do not want an outbreak to occur because an individual worker in one home has moved to another, exposing more residents and staff. A similar order applies to retirement homes in the province.

I would now like to focus on how the reopening Ontario act enables the province to move quickly in the event that more health facilities are needed. During some of the worst times of the pandemic, our hospitals were crowded. Our government directed funding to establish new hospitals beds and build up our ICU capacity.

Speaker, we must be ready for any scenario possible. This is why order 141/20 was established. This order exempts temporary COVID-19-related health and emergency shelter projects from meeting building code requirements as well as some Planning Act requirements. This makes it easier for municipalities and hospitals to repurpose buildings such as hotels and retirement homes for new uses and put up temporary structures, such as field hospitals, to expand our ability to respond to the effects of the COVID-19 pandemic. These measures reduce pressure on health care facilities. They also help support the physical distancing requirements needed to reduce the spread of the virus. In a pandemic, nothing is more important than the health of the people of Ontario. Ontario's municipalities and health services should be able to make contingency plans to ensure that physical distancing recommendations can be maintained in health care facilities and shelters to support patients and vulnerable people. Some buildings are still being used for overflow, while others are being used to ensure distancing. This measure continues to reduce the pressure on care facilities and in turn supports our health care workers.

1630

Speaker, the reopening Ontario act is made up of orders to protect the health of Ontarians and allow for a flexible response to this virus. Many orders have expired. Nevertheless, other orders need to continue in the short term.

We have listened to the top medical and scientific minds in the province. We have received invaluable feedback on how to craft a response that meets the needs of the changing demands of this virus. Every step of the way, we have supported Ontarians.

Speaker, this legislation has evolved over time. Orders no longer needed have ended or been revoked, which is permanent. No new orders can be made or continued under

the act. Existing measures will continue to ensure the health and safety of our family and friends. Orders will not exist a day longer than they are needed. For instance, orders relating to education and stay-at-home orders are no longer in effect and have lapsed. Other orders, such as the virtual signing of wills and powers of attorney and other breakthroughs in moving justice services online, are now permanent and codified into legislation. All of these orders are posted online and are readily available for everybody to see. Transparency is paramount. Ontarians expect nothing less.

One thing learned from this pandemic is how society can keep moving forward. There are better and more efficient ways of doing things. Digital capabilities have allowed for services to be performed and virtual meetings to occur.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Ian Arthur:** It's a pleasure to stand up and contribute to this debate today.

The member opposite ended his speech with a note about how there are better ways of doing things, and I thought that actually really effectively summed up this government's response to the pandemic—that there are better ways we could have done this.

This motion would extend the current emergency powers of the government even further down the road, until the official end of the pandemic. It strikes me that one of the very apparent things about a pandemic is that putting an official end date on a pandemic, when it becomes endemic, is a very difficult thing to do. We've seen the lifting of restrictions in Europe—there are surging cases happening right now across Europe, and they're beginning to implement more restrictions again. So one wonders, with this extension of these emergency orders, what is actually going to be the outcome of that and whether this government is going to begin trying to re-implement some of those orders given that they have now extended their own powers all the way through until next spring.

I'm very concerned about the lack of accountability that has been there throughout this pandemic. The Premier likes to say that the buck stops with him, but whenever there was possibly an avenue for the buck to stop with someone else throughout this pandemic, that is absolutely the path this government has chosen. Whether it was the tragedy in long-term care, when around 4,000 people tragically lost their lives on this government's watch, when we knew what best practices were—and there was foot-dragging, and the response was delayed and never as severe as it needed to be to actually put the iron ring around people. It became a priority, actually, for this government, with Bill 18, to protect those worst players in long-term care instead of going forward and taking the action that they had to.

Emergency powers should be an avenue to provide leadership—and definitive leadership—to pick a point in the future, to take the steps that are necessary and to do it with such decisive urgency that it truly and tremendously

affects the outcome of whatever situation you're in. With these emergency powers, I have not seen this government able to do that.

Throughout this pandemic, what we have seen is Ontarians step up and other jurisdictions step up and step in to fill the gaps, the blatant gaps, in this government's response to the pandemic. They have been proactive instead of reactive, which is what this government has done.

There are lots of examples, but I want to talk about a few of the areas where this government has shirked their responsibilities onto others. They have put enforcement onto municipalities. They've put vaccination policies onto hospitals and employers, and I'm going to get into that more. They've shirked their responsibilities and put them on school boards for planning and implementation for the school year. They've put it onto small businesses for enforcing vaccine mandates.

It's Ontarians who have shown leadership throughout this pandemic. There has been some stuff done by this government, there have been a few things done by this government, but the reason that we have had success in this province is the individuals, the businesses, the hospitals, the organizations, everyone who stepped up to fill the enormous gaps in government policy.

I'll use one example. Our local health unit, Kingston, Frontenac, Lennox and Addington, has done an amazing job at filling those gaps consistently throughout the pandemic, so well that our medical officer of health is now doing his best to inform the Premier on what his policies should be. I commend them for doing what they did. It was tremendous to see it. People have taken on leadership where they found it missing, and it was missing in the actions of this government.

Ontarians have been working incredibly hard to get vaccinated, but there was unclear messaging. The launch of the vaccination portals was abysmal. We knew vaccines were coming for months and months and months before they were actually here and available, and this government couldn't manage to design a portal that didn't crash when it opened? It's not good enough, Speaker. Getting it right the third time for when vaccines open for children—that's not something to be proud of. It should have been right the very first time they tried to do it.

My office received hundreds of calls asking, "What's going on? How do I do this?" I'm sure that happened for all of the MPPs in this chamber, opposition, independent and government, so they have to know—they have to know—that the rollout was terrible, and this was while they had emergency powers to do what they needed to do, to put the resources behind what they were trying to do to actually make it effective. But it was Ontarians who stepped up. They navigated through it. They figured out ways to get to where they needed to go to protect their loved ones, to make it so they could reopen their businesses, so that they could safely visit long-term care homes. It was Ontarians who stepped up and filled those gaps. They took it seriously and they tried to do their best for everyone that they loved.

The majority of them did it; they did what they were supposed to do. They stayed home. They social-distanced when they were out. They waited in lines to go grocery shopping. They got their vaccinations as soon as they were able to. They did everything that they possibly could, and they did it willingly and happily, for the most part—I'm sure some of us were fairly unhappy, standing in lines outside—but they stepped in and they stepped up.

So when this government goes to extend its own emergency powers, I have to actually question why, because it was Ontarians who stepped up and did the hard work of making sure that this pandemic was under control and the government that muddled through policy decision after policy decision that confused people and that extended the potential duration of this pandemic.

#### 1640

I want to talk about something that I feel incredibly passionate about, and I think a lot of people do because I think folks are beginning to get really fed up, and that is vaccination policy and vaccination rates. So many people went out and did what they were supposed to do and got their vaccines, and they were desperate to do it. They were desperate to go and get them. They got them, again, to protect people that they loved, to protect themselves. We knew the conception of where we had to reach, or the levels of vaccination of where we had to reach. We knew where we had to get, and as it opened for each age group we went and did it. Children are finally going to be able to get their vaccines on Tuesday—tomorrow—and that's a tremendous thing. We need to hit those vaccination levels.

But one of the best paths to actually hitting those vaccination levels are vaccine mandates. We know that there are folks out there who don't get the vaccines for a variety of legitimate reasons, for sure. If you have health conditions that don't allow you to get it, then absolutely you should not be forced to get it. But those medical exemptions are incredibly rare. So when you look at what emergency powers actually should be used for, and can be used for, I would put vaccine mandates at the absolute top of that list, and yet this government has refused to implement that. They have shirked it onto individual hospitals, onto employers.

Federally regulated businesses have a mandate for vaccines, but in Ontario, we are missing that. We are missing that, and there should be a vaccine mandate that is as broad as possible, because we need to get to those levels. We want an official end to the pandemic, but if we're going to get to an official end to the pandemic, we know that the path to that is higher vaccination levels, and we're not going to get there without those mandates.

I want to read an excerpt from an article. It's from the Guardian so it's about Britain, but it could just as easily be applied here in Ontario: "In hospital, COVID-19 has largely become a disease of the unvaccinated. The man in his twenties who had always watched what he ate, worked out in the gym, was too healthy to ever catch COVID badly. The 48-year-old who never got round to making the appointment.



“The person in their fifties whose friend had side effects. The woman who wanted to wait for more evidence. The young pregnant lady worried about the effect on her baby.

“The 60-year-old, brought to hospital with oxygen saturations of 70% by the ambulance that he initially called for his partner, who had died by the time it arrived; both believed that the drug companies bribed the government to get the vaccine approved.

“All severely ill with COVID. All unvaccinated and previously healthy. All completely avoidable.”

This is written by a doctor.

“Of course, there are people who have their vaccinations but still get sick. These people may be elderly or frail, or have underlying health problems. Those with illnesses affecting the immune system, particularly patients who have had chemotherapy for blood cancers, are especially vulnerable. Some unlucky healthy people will also end up on our general wards with COVID after being vaccinated, usually needing a modest amount of oxygen for a few days.

“But the story is different on our intensive care unit. Here, the patient population consists of a few vulnerable people with severe underlying health problems and a majority of fit, healthy, younger people unvaccinated by choice. Watching the mix of patients coming in with COVID, it feels to me like hardly anybody has been vaccinated nowadays; of course, this is because the people that have been vaccinated are getting on with their lives at home.”

The article goes on, but I just want to read another important part here: “Some of my frustration is directed upwards, at the flagrant misinformation flourishing in certain places and the utterly woeful example that our leaders continue to set. I have never heard a reason not to take the vaccine that I have agreed with”—apart from medical ones. “Most of all, however, I am now beaten back, exhausted, worn down by the continuous stream of people that we battle to treat when they have consciously passed up the opportunity to save themselves. It” makes “me angry.”

I read another article—this morning, actually—about a precedent-setting move that was made in Alberta, where the owners of an apartment complex have said that new tenants have to provide proof of vaccination in order to rent in that building. They’re doing it hoping that other building owners see that and take that example of leadership and make it across the board. But this is exactly what I’m talking about: individuals stepping up to fill the gaps in policy left by this government.

Vaccine mandates work, and if we want to have an official end of the pandemic and actually get back to a semblance of normality and not have the restrictions drag on—we’re delaying lifting more restrictions for another 30 days here and 60 days here. We’re extending our emergency orders here. The reason we’re even extending the emergency orders—and where we are—is because of inadequate response earlier. We can and should be out of this by now, and especially once we have children vaccinated. We can and should be out of this. There shouldn’t be

a need to do what this government is doing. Vaccine mandates work across the board. We know they work. We’ve seen countries where it works. We’ve seen countries that have been able to move beyond this, and we should be doing that. But the gaps in this government’s policy are why we’re still debating this in the Legislature and why we are where we are.

There are so many other examples that we can get to, Speaker, and I want to talk about a few of them here with the time I have left. I want to talk about small businesses, because the member before me brought that up quite a few times, about all the help they’ve given small businesses and how their orders helped small businesses by opening more patios. Patios should have been the minimum. That’s not something, frankly, to boast about. Allowing restaurants to have more people sitting outside during a pandemic when they’re not allowed to sit inside—I wouldn’t boast about that. That’s the minimum.

Restaurants needed another round of payments. We knew they needed another round of payments—small businesses, not just restaurants. My background is in restaurants, so I feel particularly for them. They needed another round of payments, but it never showed up. This government never brought it forth, and so they have these emergency orders and they’re gloating about or talking about all the things that they did, but it was awful out there. It was awful for those small businesses. Many of them, tons of them, did not make it, and they’re not through it yet. We’re heading into another winter season, which is the time that is most difficult for small businesses to get through. We’re seeing a rise in COVID cases again. We’re having a pause on the lifting of restrictions. And we’re here extending the government’s emergency powers to keep doing what they’re doing. I’m struck; what is the definition of insanity? It’s doing the same thing again and again and expecting a different outcome—expecting a different outcome.

The policies of this government and small businesses—they kept big box stores open and shut down the small businesses that could have actually limited how close people were to each other. It’s absurd. And they allowed them to keep selling all the non-essentials at the same time. You had small business owners who had lost their only means of keeping going, and they weren’t allowed to open. Parts of Ontario had the longest continual lockdown in North America. If you don’t think that’s a failure of policy, if you think the longest continuous lockdown in parts of Ontario justifies extending your emergency orders further—you can’t possibly think that. It’s just crazy.

We look at other things that could actually help with the pandemic and help with our recovery—and I want to spend a little bit of time, because it’s pertinent and we’re once again the worst in Canada here. I don’t understand how we cannot have \$10-a-day child care at this point in time. You want to drive an economic recovery? The whole reason we’re looking at affordable child care in Canada is because Quebec actually did this ages ago, and we have the actual data to show how effective this is at driving economic growth. It’s not a hypothesis; it’s not an idea.

We have the data to actually back it up. So why is it that Ontario is now one of the only jurisdictions in all of Canada not to sign on to that? That's the sort of thing that we should be debating to spur economic recovery in Ontario: not extending emergency orders that are a result of a failure of policy and gaps in policy, but looking at actually implementing the things that need to be there in order to drive economic recovery in the province of Ontario.

1650

We need to be investing in schools and education in a massive way that this government—and, frankly, the previous government before them also—failed to do. If you want to talk again about gaps in policy, the member who was speaking previous to me talked about getting ready so students could have a normal return to school in 2022. There could have been a normal return to school in 2021. They had so much time to get ready for it. They cancelled one school year and said, “We’ll be ready by September.” They weren’t ready by September. They weren’t even close to being ready by September. They knew what they had to do to actually make schools safe for students, and they didn’t even go close to that.

Fundamentally underlying all of that is class sizes and reducing the amount of people in a room. I’ve been talking to teachers about how stressed out students are about the gaps in learning that occurred as a result of this government’s policy. The repercussions of this are going to last years. The pandemic was always going to have an impact, but the response from this government has exaggerated it almost beyond comprehension. The learning supports we’re going to need in the future, the mental health supports we’re going to need for students in the future: All of those things could have been headed off by better policy early on in this pandemic, but they weren’t. They weren’t at all.

Instead, this government downloaded the planning onto individual school boards. They caused confusion—mass confusion. Parents didn’t know what they were doing. They couldn’t get answers from teachers. Even people at the school board didn’t really know what was happening at any given point, and they weren’t given the resources they needed to be prepared. Students were pushed online to do school from home. We could’ve had them back safely. That normal return to school could’ve been a whole lot closer, for September 2021, instead of hoping that it was going to be for September 2022.

The last thing that I want to talk about—I’ve got about a minute left—is that every time we re-debate these emergency orders, there’s this kind of idea that at some point in the near future, this will be enough. And yet, we arrive at the place where we’re once again debating it, and it wasn’t enough, and we need to do more.

I’m going to give a little bit of slack to the government on this: Pandemics are fluid, and they do change, and part of that is a reflection of it. But that’s why you have to make the right decisions and put the resources behind it at the time that you are making those decisions, and the government did not do that. The official end of the pandemic is almost impossible to pinpoint. The variants keep

changing, infection rates keep changing and we don’t seem to be able to hit those vaccination rates that we need to be able to get to that finish line.

**Ms. Natalia Kusendova:** We have the highest vaccination rates.

**Mr. Ian Arthur:** The member opposite says they have the highest vaccination rates. Well, let me conclude with this: They’re not high enough, and the government had the power to get them higher and chose not to.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Will Bouma:** I think I’ll bring the tone back to a generally positive one. I’d like to think, to the member from Timmins, who is in general agreement with what we’ve done—we can quibble about what we should have done or could have done and everything else; we’re dealing with, as the previous member stated, a fluid situation.

But I did want to take a second, Speaker, and go back to the discussion by the member from Mississauga–Lakeshore. He mentioned so many people in his riding who have shown the Ontario spirit, but I wanted to make special mention that if anyone has had the opportunity to look at his social media—I don’t know if there is anyone in this House who has better shown the Ontario spirit than the member from Mississauga–Lakeshore. In just about everything he posts, he’s out in the community, taking care of his community, picking up and delivering different things through COVID.

But let me get back to the task at hand, as we continue to talk about motion number 8, the extension of the emergency orders—which is interesting, because I don’t think there’s anyone in the House this afternoon who is not going to be voting in favour of extending this, so that we can get through this. But I’d like to speak about the work: not only what we are doing as a government to combat COVID-19 and this pandemic, but the amazing work and Ontario spirit that I am seeing locally in my riding of Brantford–Brant. From Apotex in the city of Brantford donating thousands of gallons of hand sanitizer to the Brant Community Healthcare System, local businesses donating boxed lunches to health care workers, the Brantford Blessing Centre serving meals to those in need and finding a new way of doing things when so many of our older members of our community were unable to work because of COVID, to Booster Juice providing free smoothies to first responders, the Ontario spirit has been and is very much present and vibrant in my riding of Brantford–Brant.

Speaker, the reopening Ontario act is just one aspect of how our government is dealing with the impacts related to this global pandemic. We have come so far since this pandemic started, but we need to be flexible when mitigating the waves of uncertainty that we have been dealt. As we know, this global pandemic is unpredictable and governments around the world have struggled to cope. COVID-19 has taken its toll on the province of Ontario, but due to our response and leadership, we have accomplished one of the safest and most effective vaccination rollouts worldwide.

I would like to take this opportunity to express once again my deepest gratitude, thanks and admiration to Ontario's front-line workers who have served us with such dedication during these unprecedented times. To our emergency responders, our health care workers, front-line enforcement and, indeed, all those who continue to serve the public by navigating the ongoing uncertainty of COVID-19, thank you for your continued service.

I also want to acknowledge those who have lost their lives to this virus and those that they have left behind. A single death is one too many, and our province has experienced far too many deaths. We mourn everyone that we have lost and we recognize the suffering of family and friends as they grieve for their loved ones. Ontario is on the path to recovery, but we owe this progress to the people of this province. We must ensure that the collective hard work of Ontarians is not undone.

The reopening Ontario act was designed to be a flexible response to COVID-19, and that's why we are here today. In the fall economic statement, we laid out a plan to protect our progress, to build Ontario and to work for our workers. If we don't have the tools and proper steps to deal with the fluctuating waves of this pandemic, then we have jeopardized everything that we have done to date, not only as a government but Ontario as a whole. Extending these orders allows us to properly deal with the pandemic's unpredictability in a safe, responsible and timely manner. On Thursday, May 20, 2021, our government, in consultation with the Chief Medical Officer of Health, released its Roadmap to Reopen, a three-step plan to safely and cautiously reopen the province and gradually lift public health measures based on the province-wide vaccination rate and improvements in key public health and health care indicators.

In consultation with the Chief Medical Officer of Health, Ontario moved into step three of the road map on July 16, 2021, implemented through amendments to orders under the reopening Ontario act. As the province continues to deal with the impacts of COVID-19, emergency orders currently in force under the Emergency Management and Civil Protection Act have been extended until December 1, 2021, and orders under the reopening Ontario act until December 16, 2021. All orders continued under the reopening Ontario act that remain in effect can continue to be extended by the Lieutenant Governor in Council for periods of up to 30 days. Orders no longer needed have ended or have been revoked.

The reopening Ontario act allows the government to maintain measures for the health and safety of the public in response to COVID-19 by modifying restrictions in accordance with changing public health advice. Powers under the reopening Ontario act to amend and extend orders were initially in place until July 24, 2021, but needed to be extended until the end of the day on December 1, 2021.

On October 22, 2021, in consultation with the Chief Medical Officer of Health, our government released A Plan to Safely Reopen Ontario and Manage COVID-19 for the Long-Term, which outlines the province's gradual

approach to lifting remaining public health and workplace safety measures by March 2022. The plan will be guided by the ongoing assessment of key public health and health care indicators and supported by local or regional tailored responses to the COVID-19 pandemic.

**1700**

Speaker, in order to align with this plan, the government is seeking the Legislature's approval to extend these powers until March 28, 2022, as authorized under the reopening Ontario act, in order to be able to maintain necessary public health and workplace measures until they are no longer needed. This remains critical in order for all Ontarians to follow all public health and workplace safety measures currently in place to help further reduce transmission and to save lives. These orders under the Emergency Management and Civil Protection Act and the reopening Ontario act, in addition to the efforts of every Ontarian in following public health guidelines, have limited the spread of the virus.

We recognize that due to the pandemic, many more people are working from home and many students are learning at home. With the lights, computers and other home-based technologies consuming more electricity from residential homes, we're keeping the regulated price plan the same. The Ontario Energy Board typically adjusts its rates under the regulated price plan, or the RPP, to reflect the anticipated cost of electricity generation. However, RPP prices are remaining unchanged effective November 1 of this year.

This also benefits small businesses and farms through the Ontario Electricity Rebate program. We are adjusting the Ontario Electricity Rebate program to ensure the average residential bill increases by about 2% annually, and we are considering a proposal to set the regulated price plan prices once per year instead of twice per year. Individual customers' bills will vary on several factors, including consumption and local distribution company. However, adjusted for inflation, electricity bills have remained roughly flat since 2018.

Speaker, I want to mention a few other price-assistance programs that are available to electricity customers.

On January 4, 2021, Ontario introduced a new Energy Affordability Program for households struggling to pay their electricity bills. Through the program, participating households can reduce their energy bills by between \$100 and \$1,000 per year, depending on eligibility, and increase their home comfort. What does the program provide? Participants most in need may qualify for a free energy-needs assessment conducted by a trained energy professional that will help identify energy-efficient upgrades available for their homes, such as replacement appliances and weatherstripping. Other income-eligible participants may qualify for free energy-saving kits customized to meet their energy needs. That could include energy-saving timers, faucet aerators and/or even a clothes drying line. The Energy Affordability Program simplifies access to new and updated electricity-saving measures through a single program that replaces the Affordability Fund and the saveONenergy Home Assistance Program, which ceased accepting applications in 2020.

How does the Energy Affordability Program work, you may ask? Well, the program eligibility is consistent across the province, while the offerings are tailored based on household income, home heating system, location, and an assessment of the specific needs of the home. The eligibility for program support is based on total household income and the number of members in the household. Applicants who receive any other eligible Ontario assistance program support, such as the Ontario Electricity Support Program, Low-Income Energy Assistance Program, known as LEAP, and Enbridge Gas's Home Winterproofing Program, within the previous year are also eligible. Applicants must be responsible for the household's electricity bill to qualify. Social housing providers also continue to be eligible for the program.

Speaker, these are measures we've put in place to help deal with the cost of electricity consumption in Ontario during this global pandemic.

COVID-19 continues to be a challenge in Ontario, and it has become even more important now to flatten the curve related to the rate of infection.

We know that many of the orders under the reopening Ontario act were established to take a proactive approach and protect many of our most vulnerable Ontarians in our retirement homes. We have also heard the Minister for Seniors and Accessibility mention that the ministry does not regulate retirement homes directly but has designated a separate, independent authority to regulate the sector.

The health and safety of all residents, staff and their families in retirement homes is a priority for our government. Throughout this pandemic, our response has been guided by the advice from health experts, the Chief Medical Officer of Health and Public Health Ontario. The government is extending multiple continued orders under the reopening Ontario act which had been established to support retirement homes and protect residents and staff. These orders give the Retirement Homes Regulatory Authority expanded powers so they can effectively address outbreaks in retirement homes more quickly. This includes the order originally issued on May 29, 2020, which provides the Retirement Homes Regulatory Authority with expanded powers to issue a mandatory management order to any retirement home in need and quickly assign a manager chosen by the Retirement Homes Regulatory Authority to oversee aspects of the home, including infection prevention and control, as well as addressing staffing issues.

The government also amended the Retirement Homes Act, 2010, regulation O. Reg. 166/11. This change has meant that retirement homes are now reporting any infectious disease outbreaks to the Retirement Homes Regulatory Authority. Retirement homes are continuing to follow the prior existing requirement under the RHA regulation to report outbreaks to the local medical officer of health or designate.

Retirement homes are being monitored for compliance with requirements that protect residents, including IPAC protocols. Public health units are also monitoring a home's compliance with public health requirements, as well as

inspecting homes and undertaking enforcement, including issuing orders to homes. An order issued under the Emergency Management and Civil Protection Act, 1990, on February 5, 2021, that has been continued, also supports retirement home compliance. Order 55/21 provides authority to the Retirement Homes Regulatory Authority registrar to issue an order to a retirement home to comply with recommendations from public health, supporting hospitals and appointed managers to limit and manage the spread of COVID-19. Additionally, the Minister of Labour, Training and Skills Development is conducting occupational health and safety inspections in retirement homes, which includes a review of IPAC practices. The Retirement Homes Regulatory Authority is working with the Ministry of Labour, Training and Skills Development to share information and support further interventions as needed. We will ensure that the health and safety of our residents, front-line workers and their families continues to guide our decision-making process when it comes to extending emergency orders.

Speaker, I will now turn and speak about the work from the Ministry of Government and Consumer Services with respect to price gouging and why it's necessary to continue the order on price gouging under the reopening Ontario act. Ontario families need access to necessary goods, such as protective supplies, to address the ongoing threat of COVID-19 as the province continues on its path to recovery. Necessary goods, such as hand sanitizers and household cleaners, continue to be in high demand all over Ontario. We heard earlier today about some of the issues that have been seen in the market and what people were charging for them. The price gouging order helps to protect Ontario families against retailers and individuals who seek to exploit customers by charging excessive prices for the necessary goods that Ontarians need to protect themselves and their families during the COVID-19 pandemic.

Until we have better certainty about the ability to contain the virus and avoid future outbreaks, the order provides the most effective way of dealing with price gouging complaints. The number of reports received has declined but remains at approximately 10 to 15 per week through the online form. The ministry also receives an average of seven inquiries to their contact centre by phone and email each week. Continuing with this order and the online form also allows the ministry to track and analyze data more efficiently for this specific issue.

In response to rising rates of infection and increased numbers of ICU admissions to hospitals on April 7, 2021, the province declared a state of emergency, pursuant to subsection 7.0.1(3) of the Emergency Management and Civil Protection Act. Members of the public are required to take appropriate preventive action, including the use of masks, maintaining physical distancing and frequent handwashing. As a result, public demand for necessary goods, including hand sanitizer, disinfectant wipes, non-prescription drugs, and personal hygiene products like toilet paper, is not expected to diminish for the foreseeable future and may increase in the immediate term.

1710

How effective has the price gouging order been? Since the order came into effect on March 28, 2020, over 32,400 consumers have reported incidents of alleged price gouging through our online webpage and call centre. Of those reports, with sufficient information to show potential price gouging and identify the business, approximately 900 of the most egregious incidents have been referred to police and law enforcement authorities across the province.

Most complaints have been about hand sanitizer, N95 masks, disinfecting wipes and toilet paper. Hand sanitizers and face masks represent over 50% of the complaints filed through the online form.

In addition, to date, approximately 1,670 notification letters have been sent to businesses across the province advising them that they have been reported as selling necessary goods for prices that grossly exceed the price for similar goods available to like consumers, contrary to the order. These businesses represent over 3,000 individual complaints received by the ministry. The businesses are advised of the requirements under the order and directed to review their pricing policies to ensure that they are in compliance. Speaker, this approach has enabled the ministry to educate businesses about their obligations under the order and gave the ministry insights into the realities of the marketplace and the factors affecting pricing.

The ministry also published information on its website to assist consumers in better understanding what constitutes price gouging before they filed complaints. Also, the ministry created a program-specific email address, it is [eo.pricegouging@ontario.ca](mailto:eo.pricegouging@ontario.ca), for businesses receiving notification letters so they could seek clarification about the complaints that were filed against them.

As I have stated, Ontario is on the path to recovery and we owe this progress to the people of this province. We must ensure that the collective hard work of Ontarians is not undone. The reopening Ontario act was designed to be a flexible response to COVID-19. If we don't have the tools and proper steps to deal with the fluctuating waves of this pandemic, then we jeopardize everything that we have done to date, not only as a government of Ontario but as Ontario as a whole, and that's not the Ontario spirit. Again, extending these orders allows us to properly deal with the pandemic's unpredictability in a safe, responsible and timely manner.

I'll conclude by mentioning that as I was knocking on doors this weekend checking in with my constituents to see how they were making out through the pandemic, what I heard consistently is that people were doing well. When I asked them what they thought about the work of our government and our Premier, they said, "You know what? He got dealt a bad hand. And yet he has done an amazing job with what he has been given."

With that, I would like to close. I appreciate the support that we're getting for this motion on both sides of the aisle.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Ms. Catherine Fife:** It's a pleasure to join the debate this afternoon—almost this evening. I think if people were watching what's happening here in the House today, they would have some legitimate questions about why the Ford government is looking to extend emergency powers under the reopening Ontario act. I think Ontarians would have good cause to question why this is happening right now.

They would also have really legitimate and authentic reasons to wonder why the government's priorities right now, here on November 22, 2021, are on extending their own powers as a government. I'll cover a little bit of what that will mean for them, because I think it creates some good context for how we got here.

For those of you who are watching, including my parents, Allan and Sheila Wood in Peterborough—I think sometimes they're the only ones who are watching, but that's another side—the motion extends the government's current powers until the official end of the pandemic. This is a government that has missed so many opportunities to truly end this pandemic, and I'm going to touch on some of those opportunities, and just a few examples of what actually happens here in this House.

The example of the current government's emergency powers that would be extended include:

"The Premier can control certain aspects of municipalities' administration or facilities that would normally be under the control of municipal government"—continuing, I might add, their very disrespectful relationship that they have with municipalities across Ontario.

"Cabinet can override or even rewrite existing legislation without the involvement of the Legislature" in certain cases. Do we trust the government to do this? I would say, wholeheartedly, on this side of the House, we do not, Madam Speaker.

"Cabinet can make emergency orders that allow it to do things like close any public space, evacuate individuals, regulate or prohibit movement to, from, or between areas, or establish emergency facilities, among other things."

So this is a huge reach for the Ford government to be doing today, on November 22, 2021, especially given the fact that we now have a new character in this pandemic, and that is the vaccines. Now, this is not a government that has been very proactive with the vaccines, as you will recall, Madam Chair. This is a government that was slow to react, to respond and to plan for an effective rollout of the vaccines. I know this for a fact, because my colleagues on this side of the House stood up on behalf of their communities on a regular basis, including Waterloo region, who never received their fair share of the vaccines on a per capita basis. This is a government that has, as I'm fond of saying, lurched from crisis to crisis to crisis, and then sometimes has to backtrack over crisis to crisis and re-establish some calm in the province of Ontario.

The background on this particular motion is that the government recently announced that they plan to move to full reopening by March 28, 2022. So they have already given an end date to the pandemic, which would see an end of mask mandates—not the best policy. The use of vaccine passports—also a very sloppy rollout on behalf of

the Ford government, with regard to vaccine passports. Imagine, Madam Chair: You have to share your vaccine passport and your ID if you go into a restaurant. The person who is serving you does not have to demonstrate that to their employer. The inconsistencies in the rollout of how this government has dealt with this pandemic really will be textbook. Someone in the history of this province will be documenting the missed opportunities that this government had to actually be proactive and to take the best advice, quite honestly, of public health.

What else will happen is that the proof-of-vaccine mandates will start to be lifted on January 17, 2022. You know who celebrated when they found that out, when the Premier announced that you're not going to have to do proof-of-vaccine mandates on January 17, 2022? The anti-vaxxers, the people who do not want to get vaccinated. They said, "You know what? We're going to sit it out. We'll sit it out and we're not going to get vaccinated, because there's an end date"—again, not a very smart policy.

On February 7, proof of vaccine will no longer be required in high-risk places like nightclubs. This makes me think of how slow the Premier was to close the strip joints. I don't know if you remember this, Madam Chair—I think schools closed before strip joints, which gives you some sense of the priorities of this particular Premier.

March 28, 2022: All remaining public health measures, including masks, proof of vaccine and any vaccine mandates, will be lifted and the emergency orders will be ended. So why is this government, at this particular moment, moving—with all of the priorities that this government should be focused on, why are you doing a power grab at this particular time in the history? It bears warrant, it bears a discussion, for sure, because the Auditor General came forward with her report today.

I would think that if you were thinking about priorities, if you were thinking about some sense of urgency, climate change may perhaps be on the radar for this government. The Auditor General found that, "The Ontario government is ignoring the public's right to consultation on environmentally significant decisions as it allows companies off the hook for pollution costs and harm to at-risk species, according to a new set of environmental audits." The Auditor General's report also today, Madam Speaker—the "report on the environment found the government has failed to recoup clean-up costs of hazardous spills and is giving blanket approval to all work proposals that would harm species at risk." Well, that seems pretty important.

"It also found the government will likely fail to meet its own waste diversion targets because businesses aren't being held to account on recycling."

**1720**

Now this is interesting, because this government has a—a trash day? What is their day? You know, a "clean up trash" day, one day in the province of Ontario where you have to clean up some trash. But you're not even approaching the cost of that cleanup, and you're not holding the companies in Ontario that are actually polluting to account.

"The public would expect a ministry named the Ministry of the Environment"—and I think this is a direct quote from the Auditor General—"to take the lead and be proactive in ensuring that Ontario's environment is protected for future generations. However, our work indicated that there are many areas where this is not the case," Auditor General Bonnie Lysyk said....

"Changes made by the Environment Ministry don't reflect a focus on improving the environment, Lysyk noted, and she recommended greater government transparency about its motivations."

So here we are. We have a number of health crises that are happening in the province right now. I want to commend our member who led on this piece of legislation. He talked about what's happening in health care, as did many of our members here in the NDP caucus.

I want to remind the government that the Registered Nurses' Association of Ontario has an ongoing campaign—many of you may have heard of it—that you have 22 days left to repeal Bill 124. Why is that significant, Madam Chair? Because what is happening right now in our hospitals, in our health care sector, is that people are leaving en masse.

You have pushed them to the limit. You have been disrespectful in your discourse with them. You overrode their collective bargaining rights. You have insisted that they operate and exist in working conditions which have pushed them to the point where they are ready to leave, and then you offer them pennies on the dollar as a significant statement of respect, as you put it. You call them health care heroes, and yet you offer them pennies. So you have 22 days to address this.

We have pushed, on this side of the House, and we would argue that the wage suppression policies of your government have actually compromised the integrity and the quality of the health care that we deliver in Ontario. We would put that as an emergency measure. We did, actually. We brought it forward to this House. We brought forward affordability issues to the floor of this House. We brought "repeal Bill 124" to this House. We are bringing sick days and the importance of preventing the spread of COVID-19 in the workplace, in the health care sector and in our education system. We have brought that to the House. You have turned your back on all of those policies, but you've prioritized extending your emergency powers in Ontario. This speaks to your priorities as a government, which I would respectfully suggest to you, through the Speaker, is disrespectful to the people of this province.

The other thing, of course, that is going to be happening is that the health science table, which has recommended mandatory vaccines as a public health policy—you have ignored that as well—they have said that they're going to pause for 30 days, but there's been no discussion of what that means for Ontarians. So once again, if you want to build trust with the people that we're serving, you need to be open and transparent with them. Clearly, from today's Auditor General report, the pattern of behaviour of not being transparent is also compromising our lived environment.

Climate change is real. Everyone sort of pretends that they believe that, but you actually have to act on it to make sure that our emissions and our targets for emissions are actually met. If you don't prioritize those targets, you're never going to meet them. I tell you, the one way that you don't meet those targets is to build more highways and not invest in the public transit that we need.

Highway 413 and the Bradford Bypass, which have been major topics on this side of the House because there's a lack of transparency on where you're going to get the funding, the \$10.9 billion for those infrastructure projects—what else are you going to give up in that context? We have First Nations reserves that are still waiting for clean drinking water. They don't have dental care. They're still waiting for you to have some respect with regard to Grassy Narrows and not doing a run-around and having them go to court. If you're looking at priorities in the province of Ontario, I would put clean drinking water pretty high on the profile, Madam Speaker.

Several of the government members have referenced the small business grant that rolled out during the pandemic. You rolled out one, after huge pressure from this side of the House. You had to roll out a second one because you were so delayed in rolling out the first one, but you also intentionally left out so many businesses that were incredibly disenfranchised through this pandemic. I have to say, we advocated for a third rollout of the small business grant because we recognized that those businesses are back on their heels and they needed some funding to get up, to get rolling and to be really proactive, and to have a shared goal of an economic recovery.

And for women in the province of Ontario, they are literally shaking their heads. In fact, a poll just came out right now, I think yesterday or earlier this morning, indicating how many women don't trust the Premier of Ontario. You know why they don't trust the Premier of Ontario? It's because his policies continue to put them on the back burner and not prioritize them. How can the economy of Ontario ever recover if women are not part of that?

The women that I've been hearing from the most of late happen to be optometrists, for instance. These are small business owners in Ontario who have had the most frustrating experience with the Minister of Health, who I normally have a very positive relationship with. What is the game plan for optometrists in Ontario? Does anybody on that side know?

I know the member from Brantford—Brant actually is an optometrist. They have a member who has actually been moved over here to the independent side—Ms. Gartow? What's her name?—who spoke out about the tough negotiations, the hard handling of optometrists in Ontario, who she has said have a valid point. Optometrists in Ontario have a valid point. Thirty years they've been waiting for some kind of open discussion around the true cost of offering eye exams to children, to seniors and those who are on ODSP or OW. This morning, to hear a question around the importance of getting education back on track and making sure that students have everything they

need—you know what they need? They need to be able to see the board or the whiteboard or their screen, so they need an eye exam. Why not bring that to the floor of the Legislature? Let's get that done, instead of extending your emergency powers as a government.

And I just want to say, on the issue of education—my colleague from Kingston and the Islands referenced this—Ontario's schools were closed for the longest period of time in Canada, and yet in the last budget, they cut almost half a billion dollars from the base funding. I can tell you, my husband, who I'm very proud of, is a teacher. He teaches at Waterloo-Oxford. He's a history and civics teacher. There are 36 17-year-olds in his classroom. He has never had a bigger class. In the course of a pandemic, he gets 36 students. Sometimes he shares the picture, and he's put the little happy faces all over the students. It's incredible, because the classroom in and of itself was designed for maybe 22 or 24 students. God love him, because he goes to work every single day. He changes the curriculum; he makes it relevant. He makes that learning experience for those students real and authentic, and they love him, because he's a great teacher. But he also takes them for a walk every day out of the school. Imagine taking 36 17-year-olds for a walk out in the cornfield—because it actually is a country school. He goes that extra mile.

**1730**

Now, he goes that extra mile, but then he looks over here at this government that's looking to take an extra mile, to take an extra length of power while optometrists and while nurses and while educators go to work every day and show up for the people of this province. And here we are, on November 22, 2021, debating a motion where this government wants more power, wants to extend these powers past the point that clearly is needed in this context, Madam Speaker.

I do want to say that businesses—and we've done a lot of work over the last 20 months. We've built new relationships with business. We've built some trust with those small businesses. They know that when they call, we'll listen. I want to thank, in particular, Michael Wood from Ottawa, who has been in regular contact, sharing some of the challenges of accessing this very elusive small business grant that the government offers up for support. I want to thank Ian McLean and Greg Durocher from the local chamber who continue to advocate and fought, actually, for the rapid tests. They were one of the first chambers in Ontario to secure those rapid tests for businesses, and that grew across all of the chambers across Ontario and led, really, what the government was doing.

Listen, let's be clear: These tests were procured at the federal level. They were paid for by the taxpayers of Ontario and of Canada. These are tests that should have been in the school system in September, and so, once again, the announcement that the minister is going to bring these rapid tests into our schools ahead of Christmas, when we know where the infection rates are happening, really speaks to the delayed response. The reluctance to take these leadership steps—to take on a vaccine passport, for

instance, that would ensure that those who are mandated to have it would reduce infection across Ontario—really is quite something to see. We are watching history play itself out. We are also watching this government put themselves first on so many fronts.

One of the members mentioned that extending patios is such a gift. This really is the bare minimum. And this legislation, if passed—and it's going to pass, because this government has been pushing through pieces of legislation like this since they came into power—will ignore the power of municipalities to have a voice in the health and the well-being of their communities. Even with Bill 13, the prevalence of cannabis store clusters on our main streets, they're fine to let that stand. What a missed opportunity, Madam Speaker, to show some true leadership, to show that you've learned through this pandemic—and to leave us all in the state, once again, in a leadership vacuum.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Lorne Coe:** I think at this juncture of the debate, it's important to remind those people who might be watching today that we're discussing government notice of motion 8, which is the extension of emergency orders. I'd like to expand, to some extent, on the context.

Speaker, on July 21, 2020, the Ontario Legislature passed Bill 195 to enact the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020. Once proclaimed into force on July 24, 2020, this act continued certain orders that had been made under section 7.0.2 or 7.1 of the Emergency Management and Civil Protection Act during the first provincial emergency declared on March 17, 2020, in response to COVID-19.

Now, Speaker, orders made during that emergency period were developed in consultation with the Chief Medical Officer of Health, the health command table and other health experts—for example, in my riding, in the region of Durham, which is an upper-tier government, the chief medical officer of health there, Robert Kyle.

The declared emergency was terminated on July 24, 2020, when the Reopening Ontario (A Flexible Response to COVID-19) Act was proclaimed into force. There were two additional provincial emergencies declared in response to COVID-19—Speaker, I know you're aware of that—on January 12, 2021 and April 7, 2021. All the while, the Reopening Ontario (A Flexible Response to COVID-19) Act remained, and it remains, the anchor that keeps this government's COVID-19 response in place. From the beginning, the government needed the legislative tools in place to enable hospitals and municipalities, like the town of Whitby council, to continue to deliver critical services despite the effects of COVID-19, protect our most vulnerable and cautiously lay out the groundwork for our province to reopen and our businesses to thrive once more.

Speaker, I want to take a moment in my remarks to recognize the efforts by those who did their part in order to protect and keep Ontarians safe during the course of the second and third provincial emergency orders: the public health department of the region of Durham, all the members of that public health department and front-line

responders, such as the paramedics in the region of Durham, the fire department and the Durham Regional Police Service. They did an outstanding job and continue to do an outstanding job every day and every month.

Our province also saw incredible examples of Ontario spirit and ingenuity through numerous communities, including the town of Whitby. Some of the examples can be found in the downtown area of Whitby, such as Brock Street Brewing, who brought back hundreds of kegs to convert their product into ready-to-use hand sanitizer that was approved by Health Canada. Not only did they produce this much-needed product at that time, Brock Street Brewing also provided hand sanitizer to the local Durham Regional Police Service, fire halls and ambulance stations that remained on the front lines of our province's pandemic efforts, but in particular throughout the region of Durham.

I also want to recognize the efforts of those organizations who have been constantly present in our communities across the province. Local charities and parishes, like All Saints' Anglican Church, my parish, have always been important contributors to our communities and have shown their dedication and kindness to our most vulnerable.

The act supported us as we travelled cautiously along paths we knew were working, and provided the flexibility to adjust to the unknown.

Earlier today, the Solicitor General referenced three basic components when introducing the motion: the continuation of emergency orders made under the Emergency Management and Civil Protection Act that were in effect when the act came into force; limitations on the government's powers as compared to the extensive powers available under the Emergency Management and Civil Protection Act during a declared provincial emergency—these included prohibiting new orders and allowing some other orders to be amended, subject to meeting specific criteria; and transparency and accountability measures. As we reflect back, Speaker, we realize that all three of these boxes have been ticked.

First of all, I'd like to discuss the continuation of emergency orders. The declared provincial emergency was a temporary solution that provided the province with a set of extraordinary powers under the Emergency Management and Civil Protection Act to deal with the initial, urgent phase of the COVID-19 emergency. It would never become a long-term answer to reopening the province or facilitating the province's recovery while protecting the health care system.

**1740**

The emergency orders were intended to limit the spread of COVID-19, protect Ontarians, give flexibility to allow our front-line providers that I referred to earlier to support the response, give cost relief to consumers, gradually reopen the province, and support local businesses in a way that did not jeopardize our recovery. And they worked, which was why many of those orders were folded into the Reopening Ontario (A Flexible Response to COVID-19) Act. Those emergency orders that were no longer deemed



integral to the fight against COVID-19 were revoked before the act was proclaimed into force.

Speaker, what remained in the Reopening Ontario (A Flexible Response to COVID-19) Act has enabled the government to limit the spread of COVID-19 and respond to the evolving nature of the virus. It provides the government with the flexibility to address the ongoing risks and effects of the COVID-19 pandemic in the province and protect vulnerable populations. What's clear is that the act has supported the continuity of critical services by addressing gaps and human resources pressures, including those that require training, licensing, access to information, and justice-related services and requirements. The act supports businesses and provides cost relief to Ontarians.

One important component of the act is the limitations on the government's powers. This is a government that doesn't intentionally overreach, which is why limitations on the government's powers were drafted into the act. The maximum extension period for those orders has always been limited to 30 days, with the ability for cabinet to extend any of the orders for subsequent periods of up to 30 days at a time. And while the act allows certain orders to be amended, those amendments are subject to certain criteria, including being related to one or more of the limited set of subject matters.

Speaker, the Reopening Ontario (A Flexible Response to COVID-19) Act is as relevant today as when this House passed it nearly 16 months ago. We must remain vigilant. Yes, we must continue to press forward on the path to recovery, but with caution and careful consideration of each step we make. That's why this House must extend the powers under the Reopening Ontario (A Flexible Response to COVID-19) Act.

**The Acting Speaker (Mrs. Lisa Gretzky):** Further debate?

**Mr. Wayne Gates:** Speaker, it's my pleasure to rise and speak to the government motion today which is seeking to extend the emergency powers. As you know, I rose in this House and spoke against the very first version of the bill. Simply put, I've never believed the Premier should have these emergency powers, and I believe that he has misused the power he gave himself with the original bill. There's absolutely no reason that the Premier cannot work with the other MPPs in this House and respect the voices of the people they represent. There's no reason why the Premier should be able to grant himself powers to ignore the jobs we do here in this Legislature. We are elected by the residents of Ontario to do this, and the government has shown they cannot do it alone.

Speaker, I understand that the Premier won a majority government in the last election, but with that majority comes an incredible amount of deep responsibility. I also want to remind the Conservative government that 60% of the residents in the province of Ontario voted against you. They voted for somebody else. I was in the labour movement, and every single election I had to win, I had to get 50% plus one. Sixty per cent are saying, "Listen to us. We can bring something to the table." Unfortunately, that hasn't happened.

Now, it does not mean we always have to agree, and I know we don't. During the course of this pandemic, there have been many disagreements on how to go forward, and that's all right. Speaker, once again, this motion gives the Premier the ability to ignore the votes in this House and to forge his own path forward, without accountability or transparency. It's because of this motion that the Premier has been allowed to make his own decisions outside the best possible resolve in and out of the chamber.

The Premier can't say we're all in this together and then move to ignore the voices that want to help or to provide better plans. We saw that with the vaccine rollout. It may seem like a long time ago now, but when the vaccine first became available, the Premier was essentially picking and choosing what communities were getting it, and we didn't allow that to happen. In Niagara, we fought back and fought for 5,500 doses of vaccines, and we got them. We're proud that we were successful. We did that to save lives. We never should have had to do it.

Motions like the one today make it possible for the Premier to ignore the needs of Ontarians. That must be reversed. When we saw that Niagara wasn't getting its fair share, we fought back and ensured that it did. That was under his watch. We didn't let it happen then, and we're not going to allow it to happen now with boosters for seniors or vaccines for kids between five and 11.

And I want to say this, because it bothers me every time I stand up here—and I know you guys are all on your phones and you're not paying attention to me. But I want to say to all of you: I believe that if we didn't have this order in place and you worked with the MPPs—we had some ideas around how we could save lives in long-term care facilities, where 4,000 people died. We could have had more PSWs. We could have had more PPE. We could have worked with the government and said, "Let's make sure that that second wave didn't have close to 2,500 people die." But you chose not to listen to us, and that was the end result. But you never stand up here and apologize for that. You never take responsibility for that. I take responsibility for it. I lived it in the retirement homes and long-term-care facilities, as our moms or dads or grandparents were dying. I take responsibility for that, from sitting in here and saying I could have done more, but I never hear that from your government, never. I think that's a mistake.

It's deeply unfortunate that we're seeing this approach to politics, not just with this motion but all across governments. And we see this nowhere more clearly than in the ongoing issue with the eye care doctors. And I'm aware today that it came up that they may get back to the bargaining table and they're going to allow the exams to go forward, but I think I have to raise it. The eye care issue is solely in the hands of the Premier, and that's what you want to do here. That's what this motion essentially does. It creates more situations that will solely be in the hands of the Premier.

So what does that look like? Speaker, I know you're listening passionately. I want to talk about something I'm hearing every day from seniors and young people. It's

something that was missing from the throne speech: ending this dispute over eye care with the doctors in a fair manner. There's absolutely no reason this should have gone on this long. The Premier knew for a full year that this work stoppage was coming, and yet he did nothing. Now, we've gone three months without providing eye exams to OHIP-covered residents in Ontario. Does the government not understand that this is an emergency? Do they understand the ball is in their court in putting a fair and reasonable end to this?

I want the Premier to hear this. These are real stories from real people living in my riding. These are people who need the Premier to get back to the bargaining table, and I'm glad you're getting there. But if you're going to stay down here—I've done a lot of contracts. You've got to come up and make sure you put in a fair offer. He can hide all he wants from the press, but here's who I want him to listen to: the residents. I want you all to listen. I know you guys are having little talks and meetings over there, but this is important. These are our seniors.

Kathy writes: "As a senior who has worn eyeglasses since I was four, I can't afford to pay a doctor and get my eyeglasses. Pensions are thin. My husband got cancer in 2012 and had to leave his job. We had to use his RRSP to get by. He has been on disability since and I myself am disabled as well."

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Sandy wrote and she said, "Why is the provincial government continuing to deny the people of Ontario the right to an eye exam and prescription for eyeglasses?"—

**Hon. Paul Calandra:** Point of order.

**The Acting Speaker (Mrs. Lisa Gretzky):** I recognize the government House leader on a point of order.

**Hon. Paul Calandra:** Madam Speaker, given how passionately you've been listening to this, I know that the passion would desire it to come back to the topic, which is government motion number 8.

**The Acting Speaker (Mrs. Lisa Gretzky):** Thank you. I am listening intently to the speaker, and I believe he is still on topic.

Back to the member for Niagara Falls.

**Mr. Wayne Gates:** I appreciate you jumping in there, but do you know what? We're talking about seniors here, and even if I'm off topic, this is what has happened over the last three months in our province. Quite frankly, we all should be ashamed of it. Seniors shouldn't have to go through this. People with diabetes shouldn't have to go through this. This is what has gone on, so I appreciate you jumping up, but I'm going to tell one more story.

Here's the story of Linda: "I have two teenage boys that require eye exams. The oldest is 16 and is suffering from headaches daily. He has been seen by our family doctor, who has referred him for additional testing, the eye exam being one. My youngest son is 15 and is having difficulty seeing the board at school. As a parent it is difficult to see your children suffer daily, not knowing what or why they are having issues with their vision."

I think it's fair, Speaker: We've had hundreds of emails just like this, so I'm standing here today and asking the

government to quit playing games, get back to the bargaining table and get a deal done that's fair for everybody. If the Premier believes he's a strong enough leader to handle what the motion before us today is calling for, then he surely can do a better job of showing leadership on the eye care issue. Premier, I say this directly to you: Get to the table and get a deal for the residents of Ontario. Our seniors need access to eye care.

Speaker, when I say "quit playing games," I mean it. I have bargaining experience from my decades of union work. I know without a doubt that you can't get a deal done if you walk away on the second day of bargaining. It just doesn't happen.

Here's what a local doctor said: "This government has been impossible to negotiate with—Minister Elliott has tweeted confidential negotiation information"—

**Hon. Paul Calandra:** Point of order.

**The Acting Speaker (Mrs. Lisa Gretzky):** Stop the clock, please. I recognize the government House leader on a point of order.

**Hon. Paul Calandra:** I can appreciate the latitude, Madam Speaker, but we are dealing with a very serious matter, motion number 8, and I would again ask that the Speaker seek to bring the member back on topic.

**The Acting Speaker (Mrs. Lisa Gretzky):** Thank you. I was listening and believe that the member was on topic—although stretching it, so if he could make sure that it's clear that he's on topic.

**Mr. Wayne Gates:** I appreciate that, Speaker, and out of respect for—I think he got my point, quite frankly; I'm just saying. I can certainly move on to some of the other issues that are equally important in this bill.

I want to talk a little bit about how the Premier, in 2019, said, "Go away for March break." We all remember that. Remember that being done? I remember that, because I'm a big Blue Jays fan and I follow the Jays at March break. And here, just a few days ago, maybe a week ago, this is what has been said by the Premier: Proof-of-vaccine mandates will starting to be lifted January 17, 2022, in places like restaurants. Look, I might not be as smart as some people here—I realize that—but I'm thinking maybe that's a little early. I'm just thinking.

On February 7, proof of vaccine will no longer be required in high-risk places like nightclubs. Really? And March 28—and this is interesting—it's around March break time, but you know what else it's close to, brothers and sisters here and fellow colleagues? It's getting closer to the election. On March 28, 2022, all remaining public health measures, including masks, proof of vaccines and any vaccine mandates, will be lifted and the emergency order will be ended. It makes no sense to me. I'm sorry. I don't get why you would say that.

During the emergency orders—

*Interjection.*

**Mr. Wayne Gates:** I believe I'm staying on the bill—

*Interjection.*

**Mr. Wayne Gates:** Okay. I'm just trying to help you, you know. If you want to heckle me, go ahead. I'm in a really good mood today, so it should be fun.

But at the end of the day, the emergency orders should have made life better for all of us, even though COVID-19—we had a lot of deaths. We had a lot of people get COVID-19 and get really sick; our health care, our emergencies, our heroes—by the way, I want to get to that before my time runs out, about our heroes, as well.

But here's what has happened over the time that you guys have had full control—and you can correct me if I'm wrong. There's nothing to help the cost of housing. I'm going to say this very clearly: I have a 24-year-old daughter who is trying to buy a house. She'll bid \$600,000 for a starter home and somebody will come in and bid \$750,000. She can't get the home. Some speculator who's never going to live in the house, who's going to flip it or just hang on to it. What's going on? Your government has done nothing about that.

There's nothing to lower the price of gas—you can agree with me or disagree—and nothing to lower auto insurance. How many times have we talked about auto insurance? They made record profits, billions and billions of dollars, that never went back to the drivers—although, I am glad I have auto insurance right now, but I'll just leave it at that.

There's nothing to lower the price of hydro bills. Think about that. This is what has been done under the emergency orders.

One that I know my colleague from Kitchener talks about all the time—but it happens in Niagara too: Nothing for the third wave for businesses.

**Mrs. Jennifer (Jennie) Stevens:** Nothing.

**Mr. Wayne Gates:** Nothing, as businesses and businesses and businesses are closing down. I don't understand that—again, under the emergency orders. Did it help, having some help for small businesses? Absolutely, but they need a third wave. They need to get through this time.

I will mention real quick, before I get into Bill 124 and a couple of other bills, the casino workers. Whether it's in Windsor, Sarnia, Niagara or Woodbine, thousands of workers are on layoff right now, and those who are working aren't working full-time hours; some are working part-time. But what's happening is that they've got nowhere to go. There's no EI anymore. They're asking to go on OW. These are workers who worked 25, 26, 27 years. Your government has to help casino workers. You haven't done any of that. You can do that under your emergency order. And I'm talking thousands of workers. You've done nothing for them, and that's too bad, quite frankly. I'm getting all those calls. I'm sure the other people are getting calls. Hopefully you guys consider that.

I want to talk about a couple of things in Bill 124. I've only got a few minutes left. You guys are all familiar with Bill 124. Put your hands up if you're familiar with it, for my colleagues. Anybody here know Bill 124? Put your hands up. That's the bill where you attacked the heroes in

our communities right across the province of Ontario. How do you say that I'm a hero? I'll pretend I'm in health care. How do you tell me that I am a hero, and yet you put me at a 1% wage increase? You attack my collective bargaining rights. How does that happen? How does it affect my schedules? I'm working 12 hours a day—1%.

Does anybody on that side—yell it over, because I know you guys follow this. I know your House leader would. Does anybody know what the inflation rate was for the last two months? Help me out. Maybe my side might yell it out: 4.7%. So you give them a 1% pay increase; inflation is 4.7%. I'll help you out with the math. That means it's a pay cut to our heroes of 3.7%.

I'm asking anybody over there. Yell at me; I don't mind. Do you think that's right? Do you think that's how we should be treating our health care workers in the province of Ontario? Because I agree with you: They're heroes. They go to work every day. I've listened to some of those young nurses who got into being a nurse. They weren't expecting what they got when they got into nursing. Yes, they knew that they were going to have some people who would die; they were seeing during COVID-19 where five, six or seven people were dying a night. And what do you do? You put a bill in, Bill 124—I'm begging you to repeal Bill 124. Show them that they're really heroes. Give them what they deserve. Give them back their collective agreements—which, by the way, they spent years bargaining. I think that's fair. I think that's reasonable.

Let me see. I've only got a couple of minutes left. There are other bills—presumptive language; the bill that I'm going to talk about tomorrow on deeming and workers' compensation. Why are we allowing deeming in the province of Ontario when we know you're going to give I think \$3 billion back to employers, but in Peterborough, in Sarnia, in Kitchener and other—I'm done? Okay. Thank you.

**The Acting Speaker (Mrs. Lisa Gretzky):** I apologize—

**Ms. Catherine Fife:** Point of order, Speaker.

**The Acting Speaker (Mrs. Lisa Gretzky):** The member for Waterloo on a point of order.

**Ms. Catherine Fife:** During my 20 minutes on this motion, I misspoke about the member from Thornhill, MPP Martow, who criticized the government on optometry.

**The Acting Speaker (Mrs. Lisa Gretzky):** I apologize to the member for Niagara Falls. You'll be able to finish your time the next time this motion comes forward.

*Debate deemed adjourned.*

**The Acting Speaker (Mrs. Lisa Gretzky):** Seeing the time on the clock, this House now is recessed until tomorrow at 9 a.m.

*The House adjourned at 1800.*

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Fife, Catherine (NDP)	Waterloo	

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Gélinas, France (NDP)	Nickel Belt	
Ghamari, Goldie (PC)	Carleton	
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Harden, Joel (NDP)	Ottawa Centre / Ottawa-Centre	
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Pang, Billy (PC)	Markham—Unionville	
Park, Lindsey (IND)	Durham	
Parsa, Michael (PC)	Aurora—Oak Ridges—Richmond Hill	Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
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Rakocevic, Tom (NDP)	Humber River—Black Creek	
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<b>Rickford, Hon. / L'hon. Greg (PC)</b>	Kenora—Rainy River	Minister of Indigenous Affairs / Ministre des Affaires autochtones Minister of Northern Development, Mines, Natural Resources and Forestry / Ministre du Développement du Nord, des Mines, des Richesses naturelles et des Forêts
Roberts, Jeremy (PC)	Ottawa West—Nepean / Ottawa-Ouest—Nepean	
<b>Romano, Hon. / L'hon. Ross (PC)</b>	Sault Ste. Marie	Minister of Government and Consumer Services / Ministre des Services gouvernementaux et des Services aux consommateurs
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)	Brampton West / Brampton-Ouest	
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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
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Wilson, Jim (IND)	Simcoe—Grey	
Wynne, Kathleen O. (LIB)	Don Valley West / Don Valley-Ouest	
Yakabuski, John (PC)	Renfrew—Nipissing—Pembroke	
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Vacant	Don Valley East / Don Valley-Est	

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**Standing Committee on Justice Policy / Comité permanent de  
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Chair / Président: Daryl Kramp  
Vice-Chair / Vice-présidente: Lucille Collard  
Lucille Collard, Christine Hogarth  
Daryl Kramp, Natalia Kusendova  
Jim McDonell, Suze Morrison  
Randy Pettapiece, Gurratan Singh  
Donna Skelly, Effie J. Triantafilopoulos  
Kevin Yarde  
Committee Clerk / Greffière: Thushitha Kobikrishna

**Standing Committee on the Legislative Assembly / Comité  
permanent de l'Assemblée législative**

Chair / Présidente: Laurie Scott  
Vice-Chair / Vice-présidente: France Gélinas  
Rima Berns-McGown, France Gélinas  
Goldie Ghamari, Faisal Hassan  
Jim McDonell, Sam Oosterhoff  
Laurie Scott, Vijay Thanigasalam  
Jeff Yurek  
Committee Clerk / Greffière: Valerie Quioc Lim

**Standing Committee on Public Accounts / Comité permanent  
des comptes publics**

Chair / Président: Taras Natyshak  
Vice-Chair / Vice-présidente: Christine Hogarth  
Deepak Anand, Toby Barrett  
Jessica Bell, Stephen Blais  
Stephen Crawford, Rudy Cuzzetto  
Christine Hogarth, Michael Mantha  
Taras Natyshak, Michael Parsa  
Amarjot Sandhu  
Committee Clerk / Greffier: Christopher Tyrell

**Standing Committee on Regulations and Private Bills / Comité  
permanent des règlements et des projets de loi d'intérêt privé**

Chair / Président: Aris Babikian  
Vice-Chair / Vice-président: John Fraser  
Aris Babikian, Lorne Coe  
John Fraser, Vincent Ke  
Laura Mae Lindo, Paul Miller  
Billy Pang, Jeremy Roberts  
Dave Smith, Daisy Wai  
Jamie West  
Committee Clerk / Greffier: Isaiah Thorning

**Standing Committee on Social Policy / Comité permanent de  
la politique sociale**

Chair / Présidente: Natalia Kusendova  
Vice-Chair / Vice-présidente: Bhutila Karpoche  
Aris Babikian, Jeff Burch  
Amy Fee, Michael Gravelle  
Joel Harden, Mike Harris  
Bhutila Karpoche, Natalia Kusendova  
Robin Martin, Effie J. Triantafilopoulos  
Jeff Yurek  
Committee Clerk / Greffière: Tanzima Khan

**Select Committee on Emergency Management Oversight /  
Comité spécial de la surveillance de la gestion des situations  
d'urgence**

Chair / Président: Daryl Kramp  
Vice-Chair / Vice-président: Tom Rakocevic  
Robert Bailey, Gilles Bisson  
John Fraser, Christine Hogarth  
Daryl Kramp, Robin Martin  
Sam Oosterhoff, Tom Rakocevic  
Donna Skelly, Sara Singh  
Effie J. Triantafilopoulos  
Committee Clerk / Greffier: Christopher Tyrell