

Legislative
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of Ontario



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**Official Report
of Debates
(Hansard)**

F-4

**Journal
des débats
(Hansard)**

F-4

**Standing Committee on
Finance and Economic Affairs**

Build Ontario Act
(Budget Measures), 2021

2nd Session
42nd Parliament

Monday 29 November 2021

**Comité permanent
des finances
et des affaires économiques**

Loi de 2021 visant à protéger
nos progrès et à bâtir l'Ontario
(mesures budgétaires)

2^e session
42^e législature

Lundi 29 novembre 2021

Chair: Ernie Hardeman
Clerk: Michael Bushara

Président : Ernie Hardeman
Greffier : Michael Bushara

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House Publications and Language Services
Room 500, West Wing, Legislative Building
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Toronto ON M7A 1A2
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Service linguistique et des publications parlementaires
Salle 500, aile ouest, Édifice du Parlement
111, rue Wellesley ouest, Queen's Park
Toronto ON M7A 1A2
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LEGISLATIVE ASSEMBLY OF ONTARIO

**STANDING COMMITTEE ON
FINANCE AND ECONOMIC AFFAIRS**

Monday 29 November 2021

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**COMITÉ PERMANENT DES FINANCES
ET DES AFFAIRES ÉCONOMIQUES**

Lundi 29 novembre 2021

The committee met at 0900 in room 151 and by video conference.

BUILD ONTARIO ACT
(BUDGET MEASURES), 2021

LOI DE 2021 VISANT À PROTÉGER
NOS PROGRÈS ET À BÂTIR L'ONTARIO
(MESURES BUDGÉTAIRES)

Consideration of the following bill:

Bill 43, An Act to implement Budget measures and to enact and amend various statutes / Projet de loi 43, Loi visant à mettre en oeuvre les mesures budgétaires et à édicter et à modifier diverses lois.

The Chair (Mr. Ernie Hardeman): I will call the meeting of the finance and economic affairs committee to order. We are here this morning to continue our public hearings on Bill 43.

I think we have one more attendant to recognize. MPP Mamakwa, I think, has arrived. There he is. If you could introduce yourself and tell us where you are, MPP Mamakwa.

Mr. Sol Mamakwa: Good morning, Chair. Good morning, everyone. I'm here in Treaty 3 territory, in Ontario. Meegwetch.

The Chair (Mr. Ernie Hardeman): Okay, very good. And now we have one more: MPP Arthur.

Mr. Ian Arthur: Good morning, everyone. This is MPP Ian Arthur, and I'm in Kingston, Ontario.

The Chair (Mr. Ernie Hardeman): Very good. Thank you very much.

As I said, we're here to continue with public hearings on Bill 43. Are there any questions from the committee prior to starting with the presentations? If not, we'll start with the presentations.

ONTARIO SECONDARY SCHOOL
TEACHERS' FEDERATION
ONTARIO FEDERATION OF LABOUR
TRANSPARENCY INTERNATIONAL
CANADA

The Chair (Mr. Ernie Hardeman): Our first presentation this morning is from the Ontario Secondary School Teachers' Federation, and I believe they're present.

I just want to outline the process: Each presenter will have seven minutes for their presentation, and after we

have heard from all the presenters, there will be 39 minutes of questions for the members of the committee. This time for questions will be divided into two rounds of seven minutes for each of the opposition and government parties and two rounds of four minutes for the independent member.

The Clerk pro tem (Ms. Julia Douglas): Four and a half.

The Chair (Mr. Ernie Hardeman): Four and a half minutes. We've just gained a half a minute here.

With that, we'll turn it over to the Ontario Secondary School Teachers' Federation. We will ask the presenters if they would give their name prior to starting their presentation, so we can record it in Hansard. And if there are more speakers, then each one can be identified to make sure the comments are attributed to the right people.

Ms. Karen Littlewood: I'm Karen Littlewood. I am the president of the Ontario Secondary School Teachers' Federation. I would like to thank the committee for providing us the opportunity to speak with you today.

The Ontario Secondary School Teachers' Federation was founded in 1919. OSSTF/FEESO represents educators in all four publicly funded school boards in the province, as well as in six universities: almost 60,000 public high school teachers, occasional teachers, educational assistants, instructors, psychologists, secretaries, student services support, speech and language pathologists, social workers, plant support personnel and many other education workers.

Our plan, Strengthen Public Education—Rebuild Ontario, protects and builds up one of the province's most valuable assets: Ontario's world-class publicly funded education system. The global pandemic has revealed the deep levels of inequity in society and highlighted the crucial role that education plays in maintaining a strong and vibrant community. Now is the time to invest in and enhance Ontario's publicly funded education system and to rebuild the province and the people living in it.

But the government continues to shortchange education. Last year, \$2.2 billion in education funding went unspent—\$2.2 billion that could have been used to improve student outcomes and make schools safer. In its May review of education spending, the Financial Accountability Office of Ontario identified a \$200-million funding gap for this year. On top of this, the government's fall economic statement revealed the removal of another \$500 million from education funding. Consequently, school

boards are experiencing financial pressure as enrolment continues to increase and inflation balloons to 4.7%.

The government must address the systemic inequities in education. The pandemic has highlighted the crucial role education plays in maintaining a strong and vibrant society. For example, remote and hybrid learning are failing students, educators, families and communities. For clarification purposes, hybrid learning is where there is a teacher in a classroom of students, but also students following along at home, and the result is a distracted and fractured learning model. In-person learning is better for all students and diminishes the inequities faced by equity-seeking and sovereignty-seeking students.

The last time destreaming was attempted, it failed our students because it was underfunded. Class sizes were too large, resources were non-existent and training was thin at best. OSSTF/FEESO supports a fully funded destreamed academic program. However, without assurances that adequate resources would be provided to support all students in destreamed classes, we have significant concerns. Destreaming should only be done if it leads to a reduction in barriers for marginalized students. It will require investment, not another austerity budget.

Supporting student well-being and positive mental health is essential to student success. Providing permanent, predictable and meaningful funding for specialized programming and supports for all students strengthens learner outcomes and translates into higher graduation rates, more opportunities and increased success.

Having more staff in buildings creates safer schools and campuses, promotes student and worker mental health and supports healthy communities. Mental health services must be available in every school and work site. Tier 1 and tier 2 promotion, prevention and support services—which should be available in all schools—need to be properly funded. Tier 3 supports are more specialized and offered outside of the schools, but are essential for a small group of students. All of the services need to be seamless, accessible and equitable across Ontario.

Violence in schools remains a major concern. The government must establish an education sector health and safety regulation that will end violence against education workers. Mandatory enhanced training must be implemented to prevent, appropriately respond to and report incidents of violence. An increase in the number of trained adults in our schools is needed to maintain the physical and mental health of staff and students.

In post-secondary education, nominal funding increases do not keep up with inflation, nor do those increases address the growing need for educated professionals and skilled workers to fuel Ontario's economic growth. Research and experience from the United States show that performance-based funding for post-secondary institutions will do little to increase accountability or, more importantly, student outcomes. Further investments are needed, including increasing mental health supports for post-secondary students, allowing university and college campuses to thrive.

The foundation of economic growth begins with families and communities. The government must invest in

public services to fuel economic growth. Services such as affordable child care, a universal basic income and improving access to supports will help build stronger, healthier communities.

Ontario needs a well-educated and skilled workforce. Lower tuition fees will reduce the financial burden on students and families and improve access to post-secondary education. Greater investments in community training and education for newcomers to Ontario and skill retraining opportunities for people transitioning back into the workforce are needed. Permanent paid sick days for workers will keep workers and communities healthy, reducing the spread of illness and providing financial security for families.

OSSTF/FEESO calls on the government to invest in our future: the many diverse students in Ontario's public schools and post-secondary institutions. OSSTF/FEESO recommends: firstly, that the government put back the half a billion dollars removed from education in 2021-22—

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Karen Littlewood:—second, that the government fund education and post-secondary education properly to ensure services are not eroded by inflation and economic growth. For public education, this means immediately adding \$200 million to the Grants for Students Needs to close the funding gap that was identified by the FAO; and finally, that the government make further investments in education and post-secondary education to make our schools and communities healthy and safe, to increase access to services for all students, to provide classroom supports for at-risk students and the implementation of destreaming, and to ensure that all students receive the supports they need to survive. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much. The next speaker? [*Inaudible*] Federation of Labour.

Ms. Patty Coates: Good morning. My name is Patty Coates, and I am the president of the Ontario Federation of Labour, representing 54 unions and one million unionized workers across the province. I am joined by James Clark, OFL interim director of research and education.

Almost four weeks ago, Premier Ford announced that his government would be raising Ontario's minimum wage from \$14.35 an hour to \$15 an hour, on January 1, 2022. In his announcement, Mr. Ford stated, "I've always said workers deserve to have more money in their pockets because they earned it. They've worked hard and put in long hours, the least the government can do is ensure we're making life more affordable for them."

0910

Well, it's good news that Mr. Ford has suddenly discovered how hard it is to survive on the minimum wage in Ontario, but it's a real shame he only figured it out seven months before the next provincial election. In 2018, minimum wage workers worked just as hard as they do today and deserved to have more money in their pockets as much as they do now. But instead of making life more affordable for them, Mr. Ford cancelled their wage increase, along with paid sick days and equal pay for equal work. If Mr. Ford hadn't denied these workers their well-

earned raise, the minimum wage today would be \$15.75 an hour.

So despite all the back-slapping and congratulations at Mr. Ford's press conference, his bump fails to return to workers what his government took from them: roughly \$3,200 per minimum wage worker in Ontario. When you add it all up, the total loss for Ontario workers is jaw-dropping. According to the Canadian Centre for Policy Alternatives, the loss of income was \$841 million in 2019, \$484 million in 2020 and \$350 million over the first nine months of 2021. Cumulatively, the delay in raising the minimum wage cost Ontario minimum wage workers \$1.7 billion.

But Mr. Ford did more than cancelling the minimum wage increase; he froze the minimum wage for two whole years, even as the cost of living was going up, which meant that Ontario workers continue to fall behind. As usual, the hardest-hit workers were women, racialized workers, workers with disabilities and injured workers. Meanwhile, the corporations that benefited the most from not having to pay a \$15 minimum wage, including Amazon, Walmart and Loblaws, went on to make record-breaking profits during the pandemic.

To make matters worse, the pandemic is now causing widespread supply shortages and driving the cost of basic goods through the roof. Sadly, Mr. Ford's minimal increase fails to keep up with the skyrocketing cost of living in Ontario today. Gas and home fuel are up 35%. Dairy products are up 12%. Public transit is up 10%. Housing costs are up 5%. By contrast, the long-overdue hike to \$15 an hour only represents an increase of 4.5%.

If Mr. Ford wants legislation that is actually working for workers and not just the rich, he should consult the people who know best what workers need: workers themselves. I am proud to say that while Mr. Ford was making his announcement a month ago, I was meeting with 900 delegates from 54 unions across the province during the 16th biannual convention of the Ontario Federation of Labour, where we voted overwhelmingly to support the demand for a \$20 minimum wage.

All the research shows that raising the minimum wage doesn't hurt the economy. In fact, it does the opposite: It helps it grow. Indeed, this year's winner of the Nobel Prize in economics, Ontario-born economist and professor David Card, who shared the award with two other world-renowned economists, was recognized for his myth-busting research about the minimum wage.

In the words of Sharan Burrow, the general secretary of the International Trade Union Confederation, "These Nobel Prize winners have demolished the unproven, yet influential, theory that ensuring that workers have a decent minimum wage somehow means job losses."

Our own experience in Ontario also shatters this myth. When the minimum wage went up by 21% in 2018, some economists and big business lobbyists predicted that more than 100,000 jobs would be destroyed and that inflation would be off the charts. But what really happened is that nearly 800,000 jobs were added to the Ontario economy and inflation kept up with the national average, just 2.4%.

That's why the OFL supports the demand for \$20 minimum wage in Ontario.

To get there, it should be increased to \$17 an hour on January 1, 2022, not just to \$15 an hour, and regular hikes should be scheduled to get to \$20 an hour as quickly as possible.

In addition, the OFL is calling for protected annual wage adjustments so we just keep up with the cost of living, and for an end to differential minimum wage for students and migrant workers.

We also call for the regulated protection of all liquor workers' tips, which may be clawed back by employers attempting to avoid the minimum wage increase.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Patty Coates: After two years of devastating pandemic, Ontario workers need more than crumbs; they need a livable wage that keeps them out of poverty or from having to hold down two, three or four low-wage jobs just to make ends meet. They need this government to restore the protections they axed in 2018, including paid sick days, equal pay for equal work and fair scheduling.

The OFL is committed to doing what it takes to help Ontario workers and their families win these demands, and we won't rest until they get what they truly need and deserve. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you.

The third delegation will be Transparency International Canada. If we could ask you, as you're getting ready, to introduce yourself before you begin to make sure that we have your name correctly in Hansard. With that, Transparency International Canada.

Mr. James Cohen: Mr. Chairman and members of the committee, thank you for including me in today's discussion. My name is James Cohen, and I am the executive director of Transparency International Canada. TI Canada is a registered charity that is the Canadian chapter of Transparency International, the world's leading anti-corruption movement.

I'm here today to speak about schedule 2 of Bill 43, which addresses the Ontario Business Corporations Act. On behalf of TI Canada, I would like to congratulate the government of Ontario for taking this initial step towards greater beneficial ownership transparency. The amendments to the business corporations act that are proposed in Bill 43 will require Ontario registered businesses to hold beneficial ownership information—"beneficial owner" being the ultimate person who owns the company—on hand for competent authorities to access by request. However, this step is not enough to fight money laundering in Ontario. TI Canada and many experts recommend that Ontario work with the federal government and other provinces to create a pan-Canadian registry of beneficial ownership as well as establish a beneficial ownership land registry in Ontario.

Money laundering jeopardizes a sound business environment for Ontario companies, and experts have estimated that \$8.2 billion was laundered into Ontario in 2015. There are many legitimate shell and shelf companies in Canada, yet Canadian shell companies are being

marketed abroad for tax evasion schemes and used to launder billions of dollars into the Canadian economy. Criminals can remain anonymous for a variety of nefarious activities, including committing fraud, embezzling company funds, paying bribes and distorting market prices, posing serious risks to legitimate small and medium enterprises. Legitimate businesses and investment alike benefit from strong financial regulation of illicit financial flows and the owners of companies being known. A publicly accessible registry of beneficial owners supports these aims and will contribute to a strong business environment.

One of the sectors at high risk is Ontario's real estate sector. In early 2019, TI Canada and our partners in what is known as the End Snowwashing Coalition produced the report *Opacity: Why Criminals Love Canadian Real Estate (and How to Fix It)*. In this report, the coalition assessed 1.4 million residential property transactions in the greater Toronto area between 2008 and 2018. In this time, the coalition found the following risks facing GTA real estate:

“—corporate entities have acquired \$28.4 billion in GTA housing since 2008. The vast majority of those companies are privately owned, with no information on their beneficial owners;

“—\$9.8 billion in GTA housing was acquired by companies through cash purchases” or non-mortgage purchases “during that period, much of it bypassing statutory” anti-money-laundering “checks on source of funds and beneficial owners;

0920

“—from 2008 to 2018, more than \$25 billion in residential mortgages in the GTA were provided by unregulated lenders with no” anti-money-laundering “reporting obligations. Nearly 50% of those unregulated mortgages were issued to corporate buyers, despite corporate purchases accounting for less than 4% of total transactions.”

Opaque ownership is most prevalent in the luxury segment of the market, with more than half of homes above \$7 million owned through companies. There is a global and national momentum towards greater beneficial ownership transparency. Over 100 countries around the world have implemented or committed to implement beneficial ownership transparency. The Financial Action Task Force, the global standard-setting body on anti-money-laundering that gave Canada a dismal review in the 2016 peer evaluation, is currently amending its recommendations to require members to have multiple tools for beneficial ownership transparency. This would include legal entities holding beneficial ownership information on hand, like Bill 43 proposes, but also additional measures, including potentially a registry.

In Canada, there have been a number of initiatives towards greater beneficial ownership transparency. British Columbia has established the Land Ownership Transparency Registry. The government of Quebec passed legislation this summer making beneficial ownership information accessible under corporate registry, and in April, through the 2021 federal budget, the government of

Canada committed to establishing a publicly accessible beneficial ownership registry by to 2025.

With only the fifth-largest corporate registry in the country, the federal government cannot combat the abuse of shell companies for money laundering on its own; it needs the provinces and territories to co-operate. Additionally, Ontario does not want to be left out of greater beneficial ownership transparency initiatives and become the desired easy target in Canada for money launderers.

It is for these reasons that TI Canada strongly recommends that the government of Ontario not stop at the proposed amendments to the Business Corporations Act as a method to fight money laundering. The government of Ontario must co-operate with other jurisdictions on a national registry, and we encourage all parties in the Ontario Legislative Assembly to work on passing the anti-money laundering and real estate bill that was proposed on November 16. Ontario is open for business, but we need to make sure it's the right business.

Thank you. I'm happy to answer any questions.

The Chair (Mr. Ernie Hardeman): Thank you very much for that presentation. We now will go to questions from the panel. We will start with the official opposition, then the independent member, and then the government member. You will have seven minutes—

The Clerk pro tem (Ms. Julia Douglas): Seven and a half.

The Chair (Mr. Ernie Hardeman): Oh, we have another half-minute found, so we have seven and a half minutes. MPP Fife.

Ms. Catherine Fife: Thanks to all the presenters—really good presentations, and very effective potential amendments to this bill.

Karen, I just want to start with you, because your points on destreaming and funding an appropriate model to actually do this kind of work are very important, I think, and we haven't heard a lot about that. Can you just speak to why it is so important right now to be investing in an important policy like this, and not trying to do it on the cheap, essentially?

Ms. Karen Littlewood: Thank you so much for the question. It's sometimes viewed as not a very positive word, and it should be. That comes from the Harris years, where destreaming really was put out and was not supported in any way, shape or form.

OSSTF/FEESO strongly believes that destreaming is necessary in order to provide equity to the province and the students in the province, but you have to have the supports in place. If we're not going to have the funding and the supports, such as smaller class sizes, dedicated educational assistants and other supports in the classroom—training for educators, a curriculum that is going to be provided in a timely fashion, resources that are developed specifically for destreaming and addressing inequity, and culturally relevant supports and a culturally responsive learning environment—well, we might as well just say, “Predict the time that it's going to fail again.”

We want it to be successful. Our members want it to be successful. We have policy saying that we support

destreaming, but we support it with all of the other supports that need to be in place. So I really appreciate the question. We need to be talking about this more, what needs to be in place.

Ms. Catherine Fife: Thanks very much, Karen. Your other points on remote and hybrid learning—it's just a complete mess right now. Full disclosure: My husband teaches here in Waterloo. He has 36 kids in his class, 36 teenagers, in a room that was designed for 24. The remote and hybrid learning is just not working for the students, despite everyone's efforts. Why is provincial leadership needed on this so that we don't have some boards going in a totally different direction?

Ms. Karen Littlewood: We've had thoughts as OSSTF/FEESO in the past about the move to more virtual learning. In fact, it was a major issue in our last round of provincial bargaining. Coupled with the pandemic, as an emergency response, okay, sure, you put whatever you can in place, but it's not necessarily meeting the needs of the students.

In a hybrid classroom, where you have a teacher in the classroom and students at home, who are following along by Chromebook, probably with their cameras off—we have cameras off here today, too—it's hard to tell who is engaged. It's hard to know if you're delivering what's needed. It's hard to support any of the mental health needs of the students in the classroom. Yet the government has given the choice to boards to determine on their own.

There are nine boards in Ontario who are currently using a hybrid model as, really, a cheap way out of a really difficult situation. Other boards have found other ways in order to support students fully, but some boards have just said, "No, we'll just do this. We'll give you a webcam and a laptop, and you're good to go." It's not acceptable. The students of the province deserve better. They don't need to be shortchanged; they need to have all of the supports possible. Without the direction from the government and from the ministry, it makes it really hard to hold boards accountable in order to provide the best model of learning.

Ms. Catherine Fife: And that takes us back to funding, right? If there was ever a time to invest in public education, this would have been the time. There was so-called political will, but that political will didn't translate into funding. You correctly identified the \$2.2 billion that went unspent. That was shocking, actually. The Financial Accountability Officer identified that \$200-million funding gap. And then, I must ask you—because we were genuinely shocked to see a \$467-million cut in the fall economic statement—can you speak to how that is impacting perhaps the morale, or how front-line education workers are feeling right now with this government?

Ms. Karen Littlewood: They're feeling like they don't have the supports they need to go forward, and it's really challenging. We commissioned a report from the Conference Board of Canada in 2019, and it was entitled The Economic Case for Investing in Education. They found that for every dollar spent on education, you get \$1.30 back. So if you talk about \$2.2 billion out of education,

what if you put the money in instead? What does that increase do? How does that increase the supports?

When you're telling people, "Here's a webcam and a laptop, and here's what's going to be provided for you," that's insufficient. You're telling the workers working in education in Ontario, "We don't value you. You're really important, and we really like you, but we're not going to give you what you need in order to do your job." Other professions have what they need for their jobs. For us in education, it's a woman-dominated field, as well, and what you're saying to the women of Ontario is, "We don't have the money for you." It's really, really offensive to many of our members.

Ms. Catherine Fife: Thank you very much for that. It's discouraging to see who this government is willing to invest in and who they're not willing to invest in, and I think it's quite telling.

Chair, how much time do I have?

The Chair (Mr. Ernie Hardeman): One minute and 40 seconds.

Ms. Catherine Fife: Okay, then, very quickly, James, the \$9.8 billion that bypassed anti-laundering statutory responsibilities: Can you just quickly get that on the record for me, please?

Mr. James Cohen: In what sense?

Ms. Catherine Fife: You said in your presentation that \$9.8 million bypassed anti-laundering—a lens around anti-laundering. Where was that \$9.8 billion? Was it Ontario or was it a Canadian number?

Mr. James Cohen: That was in greater Toronto area real estate that we assessed.

Ms. Catherine Fife: That's great. Thank you.

I think that's it, right, Chair?

The Chair (Mr. Ernie Hardeman): You have one minute left.

Ms. Catherine Fife: I still have a minute. Okay, James, you talked about the unregulated lenders having no statutory responsibility to review or look at funding that was coming through the real estate sector. I wanted to give you another opportunity to say why it's so important for us to actually have a registry or some transparency around that money.

0930

Mr. James Cohen: It's important because real estate is one of the preferred mechanisms for money launderers around the world. You can put a large amount of money in a piece of property, over \$1 million if you would like. And as I said, at \$7 million and over, 50% are owned by corporations of which nobody knows who the owner is. You can watch your investment of dirty money go up and you can enjoy your dirty money. And it takes space away from needed housing supply.

I live in Toronto, and people know about these empty condos in the sky, which are basically empty safety deposit boxes for potential crooks, criminals and kleptocrats around the world.

The Chair (Mr. Ernie Hardeman): Thank you very much for that. The time has now run out. We now will go to the independent. MPP Hunter.

Ms. Mitzie Hunter: I do want to thank all of today's presenters. I really appreciate you coming before committee today.

I want to start with Patty Coates, in terms of just a very fulsome assessment that you gave of minimum wage and what this government is really doing for the lowest-wage workers and that it is not doing them any favours. The government's action was to take away legislation that was put in place by the former government to increase the minimum wage to \$15 on January 1, 2019, which was fully consulted on with all parts of the sector, including employers as well as organizations that represent workers, such as yourself, and a process that was put in place to ensure that that minimum wage would go up gradually, which is important for planning purposes and so that everyone knows that it's happening.

This very sudden increase in minimum wage isn't really doing what it should have been doing in the first place, had the government not cancelled the rising of the minimum wage for January 1, 2019, and taken away so many important rights for workers, such as paid sick days, which would have been very helpful during a pandemic when people need to keep themselves and their families safe from the virus.

I want you just to speak to what workers have actually truly lost. I know you said that the minimum wage would have already been at \$15.75, so there is real money that this government has taken out of people's pocket that would have helped them to have adequacy, especially as we see rising inflation right now and all of the challenges that are faced as a result of the pandemic.

Ms. Patty Coates: Thank you, MPP Hunter, for your question. We knew before the pandemic the crisis that was out there for workers, especially minimum wage workers. They weren't making enough to make ends meet and almost all minimum wage workers were working one, two, three and four jobs just to piece together enough money to be able to afford housing, to barely put food on the table and any of the other necessities that they need. We know that it hits racialized workers, women, those that are in precarious work, newcomers to Ontario, injured workers, workers with disabilities more than other workers.

And then we saw, during the pandemic, that was incredibly amplified. And then now, with the pandemic and the lack of resources that are coming into Ontario—

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Patty Coates: —and the costs that have risen, it makes even more apparent that the minimum wage needs to be at least \$20 an hour. We will support \$17 an hour, but quickly move up to \$20 an hour. That's what workers need. That's what workers told us. That's why, at our convention, with over 900 workers from all across Ontario—and many are minimum wage workers—that's what they demanded. That's what they supported as well.

Ms. Mitzie Hunter: Thank you. You know, at a time when we're really seeing no movement on—we're looking at the fall economic statement and the subsequent Bill 43. Nothing was in that for people who are on OW and ODSP,

in terms of ensuring that they can weather this shock that is happening with inflation.

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes your time.

We will go to the government. MPP Crawford.

Mr. Stephen Crawford: Thank you to the three presenters for being here today. I really appreciate you taking the time. Hopefully, in the near future, we will get to go live and in person.

I have questions for three of you, so I hope to be able to get them all in in this session. I'll start out with Mr. Cohen from Transparency International. Obviously, money laundering has been a growing problem throughout the world, but particularly here in Ontario, and I know you obviously touched on that. That's something our government feels very strongly about—reducing that as much as possible. I'm just wondering, in addition to a public registry, what do you think the province can do to tackle money laundering?

Mr. James Cohen: Well, the province can, as I said, go ahead with the land registry, which doesn't require co-operation with the federal government or with other registries. So that is one step that the provincial government can take on its own.

We've been hearing a lot of talk from the federal government in terms of beefing up resources for financial crime agencies. I've definitely talked with federal investigators over the last couple of years, and a little bit with Ontario investigators. I recently presented to Ontario police services on this issue. So it's worth the provincial government looking into what capabilities the provincial police have in investigating financial crime, and regional bodies like the Toronto police, especially Peel and Durham police, have for investigating financial crime; what co-ordination mechanisms these police units, these law investigation units, have with other units within Canada and across jurisdictions, because money laundering doesn't stay in one jurisdiction, obviously; and then even looking into what capabilities the securities commission has and what capabilities need beefing up. So right now it's worth looking into an assessment across Ontario's capabilities on this front.

Mr. Stephen Crawford: And are you concerned about any sorts of privacy issues with the public registry?

Mr. James Cohen: No. I think that the information that we put forward in various reports that we think should be available in the public registry, when you balance it on the scope and mission of what a registry is meant to do, we don't think that the information that we're asking for is particularly invasive, especially when it's asking for corporate information. If these companies were registered as public companies, almost the same information would be requested of them. So why, just because they are a private company, do they get the shield of privacy and then potentially be abused?

Mr. Stephen Crawford: Okay. Thanks.

My next question is for Ms. Littlewood. Thank you, first of all, for all the teachers and all the work they've

been doing through the pandemic. I know it's been a difficult time for everyone.

You touched on a subject that I would like to learn a little bit more about, which was the violence against education workers. I know everybody here wants a safe workforce for everyone in the province, obviously. I wonder if you can just touch on that and give us some perspective on what's happening in the schoolrooms today, the classrooms. Is this a growing problem, or has it been a problem that's been around for years or decades and that has just not been addressed? Or is it something that's really been evolving and growing dramatically recently?

Ms. Karen Littlewood: Thank you very much, MPP Crawford, for the question. Unfortunately, it's been going on for a very long time. My last teaching job that I had, I was in a congregated class with 10 students. It was students with developmental disabilities and/or autism. But violence is not contained in one area of a school. There are many different examples.

I also want to clarify that OSSTF has 60,000 members, but 40,000 are teachers and the other 20,000 are education workers. So they really are the front line, day to day, along with the teachers, all part of an education team. We have people who go to work who have to wear a helmet, who have to wear full body armour. They look like they might be going out to play football—Teflon sleeves—I've had all of those experiences in my own teaching career. It's really challenging, especially when all you want to do is to support the needs of students. It has been a challenge for quite a long period of time.

0940

As OSSTF, we lobbied at Queen's Park a few years ago and had MPPs from all parties standing with us to say, "Stop the violence." It's something that needs to be addressed. It fell out of the public eye during the pandemic, but it is a very real concern. The University of Ottawa, actually, just had a report that came out called *In Harm's Way: The Epidemic of Violence Against Education Sector Workers in Ontario*. It clearly says that education workers are the highest of any occupation as far as those individual incidents that happen, so I would encourage you—or we can send you a copy of that, as well.

We have workers all the way from early childhood educators into the university sector, and it is not a one-off type of thing; it's a daily occurrence for many of our members, sadly.

Mr. Stephen Crawford: Is it growing, though, or is it becoming a [*inaudible*] problem?

Ms. Karen Littlewood: Yes. The problem is we have a lot of people who tolerate inappropriate activity and say, "It's not their fault. They didn't mean it," so tracking of information is really, really challenging. We worked really hard with our members to have them track the data, to identify it. We are not trying to vilify students; we are trying to support students. Without the data and tracking, we can't necessarily have the supports that we need, but it's really important that we can support students wherever we can.

The numbers, I think, sadly, really are growing. In the previous government, with the Liberals, they had committed to an education sector health and safety act, which is really needed. Education workers aren't really covered in the Occupational Health and Safety Act, specifically—

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Karen Littlewood: There's a lot of exemptions. It's a massive concern for us. I really appreciate your question.

Mr. Stephen Crawford: I'd certainly like to learn more about the topic and look into that, so thanks.

And I guess we have very little time, but Ms. Coates, I know you touched on your concerns with the fall economic statement. Would you say that your concerns are universal throughout the labour movement, or is it more from the OFL? Where is your perspective on that?

Ms. Patty Coates: The OFL represents over 54 unions and one million workers in Ontario, so that's quite a large number. We had over 900 delegates at our convention, and it was voted in, overwhelmingly, to support the \$20 minimum wage. And many of those workers were front-line workers. They were grocery clerks, PSWs and other workers who were on the front lines during the pandemic. They told us stories of how difficult it was—

The Chair (Mr. Ernie Hardeman): Thank you very much. We'll have to continue that in the next round. That concludes the time for the government.

Now, we'll go back for the second round, the official opposition for seven and a half minutes: MPP Fife.

Ms. Catherine Fife: I have a quick question and then I'm going to throw it over to MPP Arthur, I think.

Patty, thanks very much for the presentation. Thanks for bringing in the numbers, too, on the wage loss when the government rolled the minimum wage back and held it right there. The \$3,200 per worker—so, this would be after tax? Do you know?

Ms. Patty Coates: I'll pass that over to James, who is our director of research.

Ms. Catherine Fife: Okay. Go ahead, James.

Mr. James Clark: Yes, I believe so. But I'll also add to that number that the \$3,200 represents the loss for the average minimum wage worker over that period of time who would have been working part-time hours. If you consider a minimum wage worker who managed to have full-time hours—so roughly 35 hours a week—the loss would be somewhere between \$6,000 and \$7,000 over that three-year period. We really want to emphasize how staggering that loss was for those workers just at a moment when they would have needed it, when the cost of living is going up. Those workers who had full-time hours would have had a much more significant hit, and in fact, in order for those workers to make up all that was lost over that period of time, they would have to work an additional nine and a half weeks in 2022 just to make up the wages that were lost for that period of time.

So it really was a devastating hit, to have the minimum wage increase cancelled as one of the first acts of this government in 2018, along with the cancellation of paid

sick days, equal pay for equal work, fair scheduling, all those things.

Ms. Catherine Fife: Thank you very much for that.

Patty, I think you wanted—

Ms. Patty Coates: Yes. If I could just add that when a worker has an increase in their wages, not only can they provide for their family, but they spend in the community. They spend in the small businesses. It is economic growth for all of Ontario to have those dollars in the pockets of those workers so they can spend them—and of course, taxes go along with that as well. So that boosts the economy in Ontario.

Ms. Catherine Fife: Thanks. I'm going to throw it to Ian, but I just wanted to thank you, Patty, also for bringing up the clawing back of tips. We did have a private member's bill with Michael Prue a number of years ago, and of course, it stalled under the Liberals. We can't get any action on it under the PCs, but we'll keep trying.

MPP Ian Arthur, over to you.

Mr. Ian Arthur: Good morning, everyone. Thank you. My question is to Transparency International. The approach on the housing crisis so far from this government has been the supposed elimination of red tape and the increase of supply. Would you comment on—

Failure of sound system.

The Chair (Mr. Ernie Hardeman): I think Mr. Arthur has lost our meeting.

Interjection: He seems back.

Interjection: Are you back?

Mr. Ian Arthur: I'm not quite sure where that froze, but I'm so sorry about that. I have no idea what happened.

The Chair (Mr. Ernie Hardeman): You're back on.

Mr. Ian Arthur: Back on. Okay. Thank you. I apologize.

The approach has been to increase supply and eliminate red tape, but if that supply isn't actually going into the right hands, if they are these security boxes or safety deposit boxes in the sky, what is that going to do in terms of slowing down economic growth in Ontario? What is that going to do in terms of driving inflation in Ontario?

Mr. James Cohen: Right. Well, first of all, I'd never say that all elimination of supply or all inflation of housing is due to money laundering.

Mr. Ian Arthur: No, absolutely not.

Mr. James Cohen: There are a multitude of reasons, but it's certainly the worst reason we can think possible, to lose supply and to see home prices inflate because tax dodgers want to use real estate or kleptocrats from some of the most impoverished countries in the world want to steal from their own citizens and stash their money here. So it does take away from supply. We weren't able to calculate what the decrease in supply was, but it's definitely worth looking into, especially luxury condos, which is the area most hit, as they are developed, to look at the transparency around ownership within those units.

In terms of inflation, there was a study conducted by the government of British Columbia. The finance minister there commissioned a report by a panel of experts that found that money laundering increases home prices in BC,

on average, by 5%. That's across BC. That's not the Lower Mainland, where the problem is far more acute.

Mr. Ian Arthur: If you were to have the sort of registry you're talking about, would you be able to then identify the sort of percentage of the supply problems that you were just saying you couldn't get numbers on?

Mr. James Cohen: We'd have a much greater idea of who it is. In our study, we looked at corporations. We weren't able to look at, say, nominees or trusts. A housing registry would address trusts and nominees as well. It might scare some of those who are using Ontario real estate away from the market. There is evidence that this is why a public registry works. Scottish limited partnerships were on the increase in the early 2010s. A lot of people speculated they were being used in eastern European laundromats or money-laundering schemes. When they were incorporated into the persons of significant control registry in the UK in 2016, there was an 80% decrease in the registration of Scottish limited partnerships. That was scaring off everybody who was trying to exploit these systems.

There are going to be people who will remain and think that they can game the system, but with a public registry, you have law enforcement, civil society and journalists searching for who those final people trying to game the system are.

Mr. Ian Arthur: Thank you very much. No further questions, Chair, from me.

The Chair (Mr. Ernie Hardeman): Any further questions? You have one minute, 30 seconds left. MPP Fife?

Ms. Catherine Fife: Patty, I just wanted you to touch on a little bit of your experience of members who received inconsistent—maybe some of your members didn't get this, but we saw, for instance, some personal support workers get an emergency top-up. Some didn't. I know I was on the picket line outside of our hospital here.

0950

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Catherine Fife: It was creating a lot of tension between job classifications. Was this something that your members experienced during the pandemic—which is still ongoing, by the way?

Ms. Patty Coates: Yes, and those are the stories that we did hear, because the money was rolled out to large corporations, these for-profit companies. It wasn't consistent across Ontario. We know that if it was a not-for-profit company or municipal, they did receive the rollout, but it was not consistent across the board.

Ms. Catherine Fife: So there are important lessons to be learned from that, on a go-forward—

Ms. Patty Coates: Absolutely.

Ms. Catherine Fife: We don't need the front-line health care workers or education workers across this province—when the government picks winners and losers, it often goes very wrong, in my experience.

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes the time.

We will now go to the independent.

Ms. Mitzie Hunter: I really want to thank all of the presenters.

Mr. Cohen, while I won't be able to get to you in my final few minutes I have, I do want to thank you for the work that you are doing. I hope that your work on greater transparency in the housing sector in particular does add to increasing the supply of affordable housing in Toronto and elsewhere in the province. Keep on pushing on greater transparency.

I do want to just take the time I have to shift my questions to the education sector. I believe that it is one of our most important responsibilities as a provincial government because it is the sole responsibility of the province to address education. Karen, you talked about the systemic cutting of education that has happened under this government. It is something that I find very concerning. It started before the pandemic. I remember one of the first things that was cut was \$25 million from the education "other" budget, which were dollars actually used for at-risk young people who could have opportunities through programs like focus on youth. That money was taken right out of the education budget.

And we see that, whether it is forcing boards to dip into their reserves to shore up the education system, despite the fact that the federal government was putting in most of the interventions on PPE and HVAC—it's just really, really surprising that even now, with this latest budget, we continue to see the pulling away from education. And our publicly funded education system is at risk as a result of that. The FAO just tabled its report looking at severe underspending on capital renewal. The dollars are there, but they're just not being spent on education at a time when we need it so, so much.

I would like to just kick it back to you, Karen, to talk to us about what the risks are to our public education system as we see this systemic underfunding under this government.

Ms. Karen Littlewood: Thank you so much, MPP Hunter. You mentioned the schools and the PPE and what the focus has been. It has also been an opportunity to highlight the backlog of repairs in schools, too. When it came time to look at air filtration and ventilation—it shouldn't be a surprise to anyone; COVID is airborne. We need to have our schools be safe. We're coming from way behind as far as what we need to do in order to have the schools be safe for the students and the adults working in the building, so it's absolutely a challenge.

Looking at just the mental health supports and what we're going to need to have in place to make up—first of all, we've got learning gaps, but we've got a lot of social and emotional work that's going to need to be done. Are we going to have the personnel in place for that? We need the supports for learners to be needs-based, and we need to have any additional funding from the Grants for Student Needs in order to meet that.

I said already, for every dollar spent on education, it brings back \$1.30. Well, for every dollar cut from education—

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Karen Littlewood:—it cuts \$1.30, as well, so we really have to keep that in mind, that putting money in is an investment, and education should be an investment. We need to make sure that the schools are staffed appropriately and the needs of the students are being met—through a pandemic, and after. We really can help to rebuild Ontario through education.

Ms. Mitzie Hunter: Yes, and I really want to emphasize your comment on the mental health supports. I know when we were there, we were looking at one mental health worker for every high school, and that was something that just went away.

Ms. Karen Littlewood: Yes, and it's different in every board how—the supports should be [*inaudible*] board's personnel. They should be provided through the funding for education. It's not that case across the province. Again, boards get to make the decisions. There are child and youth workers who work between five or six schools. How is that acceptable? When there's a crisis, and there are many crises, they have to respond, leaving other students with other needs unmet.

The Chair (Mr. Ernie Hardeman): That concludes the time. Thank you very much.

We now go to the government. MPP Smith?

Mr. Dave Smith: My first set of questions are going to go to Mr. Cohen. You tweaked some interest in me with some of the things that you're talking about. Specifically, you mentioned the \$9.8 billion in unregulated lenders who loaned money to purchase property in the GTA. I'm curious; do you have any stats on how much of that resulted in liens on property, and how much of it was done without any lien on property?

Mr. James Cohen: I do not have that information on hand. I can go back and see if we had it or anything related to it in our report, but I wouldn't be able to let you know right now.

Mr. Dave Smith: All right. The reason I'm asking about that is, if you're putting a lien on property, to me that seems like that would be a wonderful opportunity then to make sure that we don't have money laundering going on in that case. But if it's essentially an unregistered purchase that way, then yes, absolutely, there are tools that we would need to be looking at to make sure that we're not dealing with money launderers that way.

Mr. James Cohen: Yes. Well, I can't speak to any kinds of stats on how that was used in Ontario. I do know that, looking at British Columbia, where the situation of money laundering and real estate has been heavily profiled for the last few years, there have been case studies involving liens on property. In the connection between underground banks, money launderers and the legal sector, I can't give you the details right now. The case study isn't quite at the top of my head. But it is refreshing my memory of case studies in British Columbia.

Mr. Dave Smith: Because it would seem to me that the mainstream banks, the major four or five that we have in Ontario—we probably don't have the same level of challenge with money laundering going through them. It sounds like a lot of those challenges would be on the unregulated lenders side of it. Which then leads me to that

any time you put any kind of legislation or regulation in, you want to make sure that you're not inadvertently damaging something that does do something positive. The first thing that came to mind for me was vendor take-back mortgages, when someone is purchasing property. If we were to do something along those lines, would that create more of a challenge, then, for that opportunity—the vendor take-back—and actually take some of our lower-income, lower-cost housing out of the marketplace that way?

Mr. James Cohen: That I couldn't speak to. I'm not an expert in that area. However, on the idea of registry affecting business, I believe that a publicly accessible registry would help business in a number of ways in Ontario. It cuts down the amount of actual paperwork that small and medium-sized enterprises need to do in their obligatory due diligence with financial institutions, insurance institutions, accountants now and the legal profession—anybody who is regulated under the Proceeds of Crime (Money Laundering) and Terrorist Financing Act. So instead of filling out the same due diligence paperwork for an SME at every institution, you fill it in once in the registry and every institution has access to that.

Now, also, smaller institutions that aren't the Big Five banks are on a level playing field for access to information. Ontario realtors, Ontario accountants and anybody else who is regulated under the PCMLTFA have to now do that beneficial ownership due diligence. They all now have access to that registry, so it cuts down red tape in that way. Also, it can help prevent frauds for small and medium-sized enterprises that don't have access to the large legal firms that can do due diligence on their behalf. So in a lot of ways, we see a registry actually being very favourable to Ontario business.

Mr. Dave Smith: On the lines of the registry itself, I know that you're looking for something that's a public registry and not a private registry. Prior to ever getting into politics, I probably would have agreed with you. But now that I am an elected official and I've had people look up my address and show up and vandalize my home, which wouldn't have happened previously, I have a lot more concerns about it. Is that something then that could be flushed out in a way where it's—I'm going to refer to it as “semi-private,” where it's not open for every person across Ontario to actually get access to it. I'm purely spitballing as I'm talking on this. I haven't thought through anything on how this would work. It's more to get your impression on it.

Would it be possible, would it be as effective, if it was, as I referred to it, semi-private, where you would have to register in order to get access to the registry, so that then you don't end up with the vigilantism on something where you may have a legitimate company, a legitimate person, doing something as part of the registry, and yet they get targeted because of innuendo, they get targeted because of misinformation? Is there any way that it could be done where you end up with both, where it's still accessible to the public but with a minor hurdle in there to make it inconvenient for those who are purely there to protest and be an activist in a negative way as opposed to in a positive way?

Mr. James Cohen: Right. Well, we do take privacy seriously on this matter. That's why we're saying not all information should be accessible for the public; there should be information that's only accessible to law enforcement.

That said, I go back to—I think it was to MPP Crawford I mentioned a lot of this information is available if you're a privately held company, for directors or other individuals. The only difference is you're now in a public company. In that case, we do believe the UK system has a method where if you can write in to the registrar, you can omit your information if you're under particular threat or definitely if you're a minor, under 18, and you happen to own a business—well done, you. Your information should not be on the registry, because you're a minor. So there are some settings.

Having registration of an individual to access: We prefer to see as few hurdles as possible, as long as there's not a pay hurdle, which can greatly reduce the usefulness of a registry. There could potentially be a registry for access. We wouldn't want to see it by nationality, say, like in Portugal. For their beneficial ownership registry, you have to have a Portuguese citizenship card to access it, and that blocks people who would want to look at the registry from those very same countries that I said are being robbed by kleptocrats who stash their money in Canada.

So there's a balance, most definitely, to be had. We still believe, based on the research we've done on the Charter of Rights and Freedoms and Canada's privacy legislation—

The Chair (Mr. Ernie Hardeman): That completes our time this morning. We thank you for that. The tough part of being chairman: You have to cut them off mid-sentence, because they don't stop between sentences.

We thank you all, all the delegations, all three, this morning, for your presentations. It's quite helpful, and we appreciate that.

With that, for the committee, we will recess until 1 o'clock this afternoon.

The committee recessed from 1004 to 1300.

The Chair (Mr. Ernie Hardeman): I call the meeting back to order. We will proceed as we were doing this morning, reviewing Bill 43, An Act to implement Budget measures and to enact and amend various statutes.

As this morning, we will have the delegations so the delegates will be able to present for seven minutes. When we get through with that, we will then have seven and a half minutes of questions from the opposition, seven and a half minutes from the government side, and four and a half minutes from the independents.

EPILEPSY ONTARIO

ONTARIO REAL ESTATE ASSOCIATION

INJURED WORKERS COMMUNITY
LEGAL CLINIC

The Chair (Mr. Ernie Hardeman): With that, the first presentation this afternoon is Epilepsy Ontario. With that,

we'll turn it over to Drew, I guess, who is going to make the presentation. I'm looking forward to hearing from you.

Mr. Drew Woodley: Thank you so much. My name is Drew Woodley. I'm the director of government relations at Epilepsy Ontario.

As was highlighted in Mr. Bethlenfalvy's economic outlook and fiscal review, the current procedure backlog at Ontario hospitals is considerable, with some procedures now having a delay of years. To address this backlog created by COVID-19, the province has so far concentrated on increasing hospital capacity. Put in economic terms, the province has focused on increasing the supply side to deal with problems of hospital pressure by deploying resources to hospitals to address the backlog. However, this supply-side approach can only go so far, and the complementary step would be to decrease the demand side through focused programs that reduce unnecessary health care usage in general and hospital usage in particular. This approach appears largely absent from the fall update and needs to be immediately addressed. It need not and should not wait until the spring 2022 budget.

Ontario's community epilepsy agencies are a key part of the support available to the 100,000 people living with epilepsy in Ontario. Community epilepsy agencies begin where the doctor's office or hospital ends, with patient education and mental health programs that focus on self-management and community-based care. These programs have a real impact on the quality of life and mental health of people living with epilepsy, and on Ontario's health care system as a whole.

Their core program of epilepsy patient education has a direct impact on hospital usage, reducing unnecessary emergency department visits and in-patient admissions by people who have received the education program. A key element of this education program is training on when an emergency department visit or 911 call is—or, more importantly, is not—necessary, following a seizure. With proper education, people with epilepsy and those around them reduce their avoidable hospital usage considerably. Given the [inaudible] and maintaining and expanding the capacity of community epilepsy agencies to deliver these programs is an important investment to reduce pressure on Ontario's hospital system as it grapples with the care backlog brought on by COVID-19.

Helping address the mental health needs of people with epilepsy, which are considerably higher than the general public's, through programs tailored to the needs of people living with seizures similarly helps reduce usage at other points in the health care system. All of these programs are focused on providing individuals and families impacted by epilepsy with the tools to self-manage a complicated disease. However, the ability of community epilepsy agencies to deliver these programs is precarious.

Unlike other diseases that benefit from this education-and-self-management approach to care, these kinds of programs for epilepsy are not currently funded by the Ministry of Health. This means many parts of the province do not have a local agency directly serving them, and COVID-19 has severely impacted [inaudible] agency

finances. The agencies have been able to re-establish large fundraising events and similar activities, and some agencies have had to lay off staff, at the same time as having reported an increase in requests for services. Without provincial funding for their core programs, these services may be lost, with the effect felt at hospitals and physicians' offices throughout Ontario.

Epilepsy Ontario has proposed investing \$2.8 million per year for four years in community-based epilepsy education and mental health programs. In addition to providing stable and increased support for people with epilepsy, the funding would produce savings of \$21 million, for a net savings of \$9.7 million over that four-year period. These savings will primarily be found through reduced hospital usage, reducing the number of emergency department visits by 16,000 over four years and shortening in-patient admissions.

Funding can be deployed quickly through Ontario's existing community epilepsy agencies and remotely delivered to areas without a local agency currently serving them, rapidly stabilizing and increasing the province's community-based epilepsy program capacity and quickly starting to reduce pressure on hospitals. With this small but significant investment, provincial government can take immediate action to improve hospital capacity by reducing unnecessary usage, creating health care savings and maintaining and improving access to community-based services for thousands of people with epilepsy.

This proposal is not new. Epilepsy Ontario has been recommending funding the allocated community epilepsy agencies for years, going back to the previous government. For too many years, the government of Ontario has said no to funding community epilepsy programs. The government has understandably needed to focus its recent attention on the more immediate needs associated with COVID-19, but as it continues to address the pandemic's longer-term impacts on our health care system, our proposal could not be more relevant. It should not have to wait for next year's budget. Now is the time to say yes to community supports for the 100,000 people living with epilepsy in Ontario and their families.

The government of Ontario can and must invest in patient education and support programs at Ontario's community epilepsy agencies to maintain and grow their capacity while helping reduce unnecessary health care system usage and pressure on hospitals. Our proposal is not the largest that has been made to the government—perhaps that puts us at a disadvantage—but it is reasonable, achievable, fiscally responsible, addresses an urgent problem and will benefit both the health care system and thousands of people affected by epilepsy. I urge you to give it your support and recommendation in your report on this bill. Thank you, and I'll yield back the remainder of my time.

The Chair (Mr. Ernie Hardeman): Thank you very much for the presentation.

Our next presenter is the Ontario Real Estate Association.

Mr. David Oikle: Hi. Good afternoon, Chair and members of the committee. My name is—

The Chair (Mr. Ernie Hardeman): If I could just stop you there just for a moment, I should have mentioned: for everyone that is speaking, if they would introduce themselves for our Hansard, to make sure that we have the proper name to the presentation as it's being presented. With that, I'll turn it back over to you.

Mr. David Oikle: Thank you very much, Chair. My name is David Oikle. I'm a broker at Royal LePage Team Realty in Ottawa and president of the Ontario Real Estate Association. Joining me today are Brian Santos from Kitchener-Waterloo, who is the chair of our government relations committee, as well as Matthew Thornton and Asha Holland from OREA staff. It is our pleasure to be here today to offer our strong support for Bill 43, Build Ontario Act.

OREA believes that for generations, home ownership has been a cornerstone of a prosperous Ontario, building stable communities, supporting families and generating economic activity. But for too many Ontarians, the dream of home ownership is at risk because of a historic lack of supply of homes on the market that has driven prices to a point where many simply cannot afford to buy a home.

We know that the average price of a home in Ontario is now over \$850,000. Let that sink in for a moment: \$850,000. That's not the average cost of a home in Toronto or the GTA; that is a provincial average. Think of how frustrating it is for a young family trying to enter the housing market that cannot afford that amount. These are people who, despite playing by the rules and doing everything right, are seeing a dream of home ownership fade further away from reality. This frustration is now starting to boil over, and people are looking to governments to help address the affordability crisis. We know that during the recent federal election campaign, housing was the number one issue on the minds of voters.

Make no mistake: We are facing a housing affordability crisis, which is why Ontario's 85,000 realtors were pleased to see Bill 43 feature several pro-home-ownership policies that will help address the affordability crisis and make the dream of home ownership a reality for more Ontario families.

I'll now turn it over to Brian.

Mr. Brian Santos: Good afternoon, Chair. I'm Brian Santos. I'm a realtor based out of Kitchener-Waterloo and, as David mentioned, I'm also the chair of OREA's government relations committee.

Particularly, we're pleased to see the establishment of a Housing Affordability Task Force that would report to the Minister of Municipal Affairs and Housing on actions to make housing more affordable for Ontario families.

The More Homes, More Choice Act that the government passed in 2019 was an excellent first step in addressing the housing crisis. In 2020 alone, over 70,000 homes started construction, more than any other year over the past decade. OREA is happy that Ontario has equally prioritized renters, with rental housing starting in 2020 being the highest since 1992. The More Homes, More

Choice Act is already having an impact, but clearly more needs to be done, and we see the establishment of this task force as an important next step in addressing the housing affordability crisis. OREA would like to have a seat at this table so that we can help the government bring innovative solutions forward.

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OREA was also encouraged to see Bill 43 include enhancements to the Brownfields Financial Tax Incentive Program to encourage redevelopment of underused lands. Across the province, there are thousands of brownfield properties that could be repurposed for residential or commercial use but contain potential environmental contamination from previous industrial uses. It is our hope that through enhancements to the Brownfields Financial Tax Incentive Program, the government will review and streamline its development requirements for these sites to help facilitate faster building on these areas. Often, they're near high-density places and also close to transit.

OREA was also pleased to see that the bill extended the Seniors' Home Safety Tax Credit to 2022 and included eligible expenses for the creation of secondary suites. This additional investment will help more seniors age in their homes, while creating jobs and further economic activity. The brownfield policy and the Seniors' Home Safety Tax Credit were both recommendations made to the government as part of OREA's research paper entitled *Rebuilding Ontario: A Framework for Recovery*.

Finally, OREA wanted to take this opportunity to say how happy we are to see the commitment made to Bill 43 to build new transit-oriented communities. The transit-oriented communities plan will encourage a mix of commercial, office, retail, recreational and housing spaces within walking distances of new transit stations. With significant investments from the province into new transit lines, it is important that our housing supply is considered when building transit stations. Transit-oriented communities allow for walkable neighbourhoods, reduce traffic congestion and easily connect those that live within them to new and reliable transit.

I'll now send it back to our president of OREA, Mr. David Oikle.

Mr. David Oikle: Thank you, Brian. In conclusion, the housing supply crisis will not fix itself. Ontario needs innovative solutions to address the problem. While Bill 43 brings forward a number of ideas that will contribute to the increase of housing supply, moving forward OREA would like to see the government adapt some of our other innovative affordability solutions. One of them, lowering the cost of home ownership for first-time homebuyers by doubling the provincial land transfer tax rebate to \$8,000, would help those hurt most by the housing crisis. Also, ending exclusionary zoning would help get more homes built to provide young families the leg up that they need to achieve home ownership.

OREA supports Bill 43 and looks forward to working with the government to bring forward further innovative solutions to addressing the housing supply crisis and to make the dream of home ownership a reality for more

Ontario families. Thank you, Chair, and to the members of your committee for your time today. We are happy to answer any questions you may have when it's our opportunity.

The Chair (Mr. Ernie Hardeman): Thank you very much for the presentation.

Our next presenter is Injured Workers Community Legal Clinic. Again, we ask the speaker to identify themselves before we start, for Hansard.

Mr. Chris Grawey: My name is Chris Grawey and I'm a community legal worker with the Injured Workers Community Legal Clinic. I'm accompanied today by Willy Noiles, acting president of the Ontario Network of Injured Workers Groups.

We are here today to talk about schedule 9 in Bill 43, which proposes to increase the minimum wage to \$15 an hour. Ultimately, we would submit that injured workers should not be collateral damage in the much-needed but insufficient increase to Ontario's minimum wage, and to be clear, we support the OFL's position that the minimum wage be increased to \$20 per hour.

You may ask, how are injured workers collateral damage with an increase to the minimum wage? Simply put, it is because of the WSIB's predatory practice known as deeming. In short, with deeming, the WSIB dreams up a phantom/imaginary job that it claims the injured worker could in theory get, takes away wages the worker is deemed to be earning and leaves the injured worker with little or no compensation benefits, regardless of whether the injured worker is actually employed or not.

For instance, a warehouse worker earns \$20 an hour, when he suffers a permanent leg injury and cannot return to his old job. While recovering, he receives full benefits from WSIB, 85% of his take-home pay. The WSIB eventually tells the injured worker that it is time to return to work, after some retraining. The WSIB then deems the worker in a 40-hour-per-week, \$14.35-minimum-wage job as a cashier, despite the fact that he's not actually working in that position and the fact that his doctor states he's totally disabled and unable to work. This warehouse worker will lose hundreds of dollars per week and thousands of dollars per year as a result of the wages from his deemed/imaginary job of \$14.35 per hour being deducted from his pre-injury warehouse job of \$20 per hour. To add insult to injury, as of January 1, 2022, the warehouse worker will lose even more money, as the minimum wage, and in turn the minimum deemed wage, increases to \$15 an hour.

With the proposed legislation, injured workers deemed in server and bartender positions will be the most impacted. The current minimum wage for servers and bartenders is \$12.55 an hour. On January 1, 2022, the wage for those workers will be harmonized with the general minimum wage at \$15 an hour. While this harmonization in wages is long overdue, the unintended consequence is that injured workers who are deemed as servers and bartenders will ultimately lose significant amounts of money as a result of the much-needed wage hike.

Most egregious and the greatest injustice is inflicted on minimum-wage workers who experience a work-related

injury. Once deemed, the minimum wage injured worker's WSIB benefits will effectively be terminated, as the wages from their deemed job are the same as the wages from their pre-injury job.

With that being said, there's an easy and simple fix to this problem. We propose that Bill 43 be amended to include a provision which would amend the Workplace Safety and Insurance Act. More specifically, the proposed amendment to the WSIA would prohibit the practice of deeming, with the exception of when an injured worker refuses an offer of suitable work in bad faith. This would be consistent with the private member's bill, Bill 119, which was introduced back in 2019. In the alternative, we would request that the government work with the WSIB to declare an immediate moratorium on the practice of deeming until new legislation can be brought forward by the government and/or opposition parties during the next legislative session.

I'll now pass things along to Willy. Thank you.

Mr. Willy Noiles: Thank you, Chris. For the record, I'm Willy Noiles, and I am the acting president of the Ontario Network of Injured Workers Groups. Chris has laid out the very real problems with the increase in the minimum wage combined with the WSIB's practice of deeming. Deeming is ultimately a pretend world where every injured worker can just walk into a new place of employment and get a suitable job just by waving a wand. But this pretend world leads to nearly 46% of permanently injured workers living at or close to the poverty line, with 9% in deep poverty.

I've heard a number of stories from injured workers in my time as ONIWG's leader, but the one that sticks out most is probably Ms. Zhou's story. She's one of our Chinese injured workers who was severely injured in a factory but was deemed able to work as a greeter at Walmart, despite the fact that she couldn't stand for eight hours and also because Walmart doesn't hire full-time greeters. But in the magical world of deeming, one just waves their magic wand and suddenly Walmart is hiring full-time. It must be nice to live in that world. Ms. Zhou was forced onto social assistance. Today she thankfully has a good injured workers support group working with her, as she has suffered serious mental health consequences as a result of her battles with WSIB.

During this pandemic, WSIB kept up this practice. I still remember clearly asking the leadership at WSIB to suspend deeming last year, as it defied all reality when employers had to lay off their existing employees and people were being told to shelter in place. But WSIB essentially said, "Walk out into a pandemic and try to find a needle in a haystack without getting COVID."

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The Chair (Mr. Ernie Hardeman): One minute.

Mr. Willy Noiles: While deeming leads to poverty for injured workers, it also leads to WSIB posting multi-billion-dollar surpluses that should be spent on benefits for injured workers, not being rebated to employers.

Based on an FOI request in 2017, data revealed that about 3,300 [inaudible] injured workers who were on ODSP and receiving some loss-of-earnings benefits. Although

exact numbers weren't provided, a conservative estimate had ODSP topping each individual up by \$500 a month. That would mean that Ontario taxpayers are paying about \$20 billion a year for benefits that WSIB should be responsible for. Not counted in these numbers are the injured workers with no loss of benefits either because by [*inaudible*] there was nothing left or because their case had been denied.

The Chair (Mr. Ernie Hardeman): That concludes the time. Thank you very much for your presentation.

Our next presentation is—

Interjection.

The Chair (Mr. Ernie Hardeman): That's right. That's the third one, so we're now going to questions. We start the questions with the independent member. There we are. MPP Hunter.

Ms. Mitzie Hunter: Thanks, everyone, for your presentations. We really appreciate you taking the time to come to this committee and to talk about amendments to Bill 43.

I'm wondering if we can start with the injured workers. I really thank you for your very fulsome presentation and explanation of deeming and how it is affecting injured workers and adequacy that they need to see. Can you speak to the fact that WSIB now has a surplus and what you believe should happen with that surplus that would really support workers first and foremost to stay safe on the job? We saw a very tragic situation just this past weekend on a work site, where a worker, sadly, lost their life, and we never want to see that. We want to see, when people go to work, that they go back home the same way that they showed up at work. We want safety as paramount. If you could just speak to that in terms of the prevention of workplace injuries and also being fair on the compensation side, especially in the face of that surplus.

Mr. Willy Noiles: I think the first thing I would say is, any money that they incur as a surplus should be re-invested in injured workers, because that was ultimately what the money was there for. Because one of the things we know is that while they were trying to get their unfunded liability corrected, injured workers' benefits paid out were chopped by half. By reinvesting, we could bring those dollars back up to where they were in 2010 instead of what they are now.

And the other thing is that, as Chris suggested, if we were to use that private member's bill idea of, when it comes to deeming, that it's only implemented if the worker refuses a suitable job in bad faith, because that would reduce that surplus coming in dramatically.

Ms. Mitzie Hunter: Thanks very much. Thanks for all the advocacy that you do on behalf of injured workers in Ontario.

I wanted to speak to the epilepsy group in terms of just what you said about the backlog in hospitals, Drew. There is a significant backlog, but one of the things that we see is it's almost a billion dollars in unspent health dollars in the last fiscal year. What do you feel about the fact that the government is actually not spending health dollars that are available to them at a time when people really need that health care?

Mr. Drew Woodley: My area of expertise is the epilepsy field, so there's only so much I can speak to in terms of broader health care spending.

The Chair (Mr. Ernie Hardeman): One minute.

Mr. Drew Woodley: I know that, from looking at health care data going back years involving epilepsy, there's an opportunity for savings here. With the kind of programming that community epilepsy agencies deliver, even a small fraction of the available funding for health care dollars in this province could go to benefiting those people living with epilepsy, benefiting hospitals and, ultimately, saving the government money in terms of its health care spending down the road.

Ms. Mitzie Hunter: That preventative side is where you want to see the upfront health care dollars spent so people don't have to go to acute care; spend the money within the community.

Mr. Drew Woodley: There are pluses to doing both. There are complementary approaches, and, unfortunately, what we've seen in the fall update is the community preventative side just was not touched on to the degree that it needed to be.

Ms. Mitzie Hunter: And the dollars are there, which is my point in terms of the unspent health care dollars—almost \$1 billion in the health budget not spent—and perhaps some of these preventative programs—

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes the time.

We now go to the government side. MPP Bouma.

Mr. Will Bouma: Thank you, Chair. Through you, I'd like to just begin with the Ontario Real Estate Association. Thank you very much for your presentation this morning. Much appreciated.

It's interesting, my first elected office was on municipal council in the county of Brant. I don't think I realized at the time how important the relationship is between the municipality and the province, and it was interesting, during your presentation—I think it has been mentioned that our government has provided municipalities with a wide range of tools they can use to increase housing supply, and some of them are putting these tools to good use and others are not. I was wondering what suggestions you would have, Mr. Oikle, if possible, for municipalities that are looking for options to tackle housing affordability in their communities.

Mr. David Oikle: Thank you very much for the question. There are a certain number of tools that you can give them. You can help with the zoning, with the municipal zoning orders, but at the end of the day, the planning and the will to make those changes have to be done at the municipal level. I think that your encouragement that Steve Clark has been doing and the upcoming housing summit are going to be helpful to see if we can break through a couple of those things to get some stuff happening faster.

I'd encourage, maybe, if Matthew Thornton from our office wants to add to that, as well, if that's okay with you, Mr. Bouma.

Mr. Will Bouma: Absolutely.

Mr. David Oikle: Matthew is muted. Is it okay for Matthew Thornton to be unmuted?

Mr. Will Bouma: Yes, they're just working on it right now.

Mr. Matthew Thornton: Thank you, David, and thank you, MPP Bouma, for the question. I would say the number one thing that we're looking for municipalities to take action on with respect to housing affordability is looking at exclusionary zoning. In high-growth areas where there's just such a strong demand for housing, we really need innovative policy solutions that are going to get more missing middle, more gentle-density homes built in our province, and tackling that single-family exclusionary zoning piece is critical to that.

We're really encouraged that the Premier and Minister Clark are having a housing summit with those big city mayors and regional chairs soon. We're hopeful that they're going to talk about that issue in particular at that housing summit and that we'll see some policies come forward in the near term which I think could open up thousands and thousands of units right across the province; in particular, as I said, in these high-growth areas.

If you look at a country like New Zealand, they just brought this policy forward. It was a non-partisan solution that both the opposition and the government agreed on, as-of-right zoning in their five largest cities. It's going to create over 100,000 units just in that small country.

I think there's a ton of potential in Ontario, and that would be the number one thing that we would encourage municipalities to tackle when it comes to housing supply.

Mr. Will Bouma: You have touched on that a little bit, and that's where I wanted to go with my next set of questions, because, really, it's partnership that finds solutions to some of these problems, so I really appreciate that, and, again, the appreciation for the idea from the minister to have the housing summit and the task force to work with municipalities on finding solutions, because I think we've all identified the same problem.

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I'm just curious. You said exclusionary zoning. What other ideas would the Ontario Real Estate Association want to see brought forward at that housing task force, at the summit? What are the most important things to talk about? Taking vacant buildings—I think if we're talking about the same thing with exclusionary zoning, being able to turn those quickly into housing units as opposed to whatever they might be at this point, that sort of thing—what other good ideas have come from the Ontario Real Estate Association that should be talked about at these opportunities?

Mr. David Oikle: I think "brownfields" is sometimes a term that sounds a little—it doesn't necessarily have to be something that's got hazardous materials on it. It could be a mall that isn't used. Services are already there with electricity and water and sewer—so converting those and having the ability and the will to convert those into housing.

Just to be very, very clear, we're talking about all kinds, all price ranges, all sizes as well as rental units, because

the need is across all the prices and types. This isn't a single-family-home solution that we're talking about; this is for everything. And of course, downtown, as Matthew said, gentle density would maybe be duplexes and triplexes for people that could be near transit lines and near where they work, so that they don't have to commute an hour to get to work, if they're working in the city. So this is something that can work in downtown Toronto and in small towns, because the need is everywhere.

In my role, I get to talk to people around the province, and this is a supply issue from Brockville to Sarnia to Thunder Bay, not just in downtown Toronto. So the solutions have to work in all the communities across the province.

We're encouraged by the discussion, for sure.

Mr. Will Bouma: What you started with when you said that the average value of a home in the province of Ontario—the selling price is now north of \$800,000; I think you said \$850,000, and that's every community, everywhere, where that's at—I think that's absolutely shocking. How on earth can people dream about home ownership, especially first-time homebuyers, when that's what they're looking at? So I really appreciate the ideas that you're bringing forward.

I wanted to just, in the last couple minutes that I have, spin on my heels a little bit and talk to Epilepsy Ontario. Drew, I really appreciated your presentation, where you mentioned that—I think I've got the numbers right; you can correct me if I'm wrong—a \$2.8-million investment by the province of Ontario would see a \$21-million savings—

The Chair (Mr. Ernie Hardeman): One minute.

Mr. Will Bouma: —but you also mentioned that was if we tackled surgical backlog. I was wondering if you could speak a little bit—is that specifically what you mean?

Mr. Drew Woodley: No. Just because we're short for time, \$2.8 million per year for four years gets us to that savings number, but that would primarily be seen through reductions in emergency department use and in-patient admissions from emergency. There are good resources going into the surgical stream right now. Our focus is the community education, so that you don't have to go to the emergency department after every seizure and that you and the people around you know when it's an emergency and when it's not.

Mr. Will Bouma: Good, I appreciate that. I'm probably running out of time, but thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much. We'll now go to the official opposition. MPP Arthur?

Mr. Ian Arthur: I want to start with the realtors' association, OREA. You talked about how important building that missing middle is. I kind of want to get at—you talked about exclusionary zoning and those sorts of things. In your experience, unless builders are pushed in this direction, is this something that is going to happen? Do we need action from the government in order to force the hand of builders to move in this direction to really ramp up that

supply? Do you feel it will be adequate without intervention from the government?

Mr. David Oikle: I think every community will be different, but if the zoning is permitted, I think that there are a lot of efficiencies. If they can build two or three units on a property where they might have previously built one, there are a lot of efficiencies there. So I think builders would be very enthusiastic about that.

I know in Ottawa, where I am—I know you're in Kingston, Ian—there are a lot of duplexes and triplexes being built and semis being built where I am, sort of downtown Ottawa, and the builders can build two where there previously was one on it. I think the builders would be pleased to do it, and it's all different sizes and prices and property types, which we think is very, very important.

Mr. Ian Arthur: If it's sort of municipality by municipality—and I can appreciate the need for slightly different approaches to each one—I'll loop back to what I was getting at: What role does the province need to play in that? Municipalities can move in that direction, if they so choose; how do you see this provincial government working with municipalities to get those desired outcomes? Or how could they best work with these municipalities, I should say?

Mr. David Oikle: If I may, I think Matthew may be able to bail me out on that one, from his experience on this file. Matthew?

Mr. Matthew Thornton: Sure. Thank you, David.

Great question, MPP Arthur. I would say initially it's got to be sort of a carrot-and-stick approach. The carrot: Offer incentives and funding; maybe target the planning department locally to process applications and get zoning and things updated at a local level that are going to speed up the approvals, which are currently moving quite slowly through the process—three to 10 years, depending on the municipality that you're dealing with. And then when I think of the stick, if the municipality won't act, then the province, I think, needs to retain the ability to step in and provide that affordable housing that everyone's looking for right now.

I think we're at a level or a stage in this issue where we really are at an affordability crisis, and we're urging all parties to look at this through the lens of a consumer, through the lens of a young family who's struggling. We need to come together and really work together to find these solutions.

If you are looking at solutions, I think zoning has to be one of those areas that you tackle, and tackle in a meaningful way. I think one of the challenges currently is that at a local level, a lot of local councillors and others are really beholden to residents' association groups and others who really don't want to do see any development happen locally. They don't want to see any changes to their neighbourhoods. That's just not going to work in a province and in a country that's growing by 300,000 or 400,000 new Canadians every single year. We need to be able to accommodate growth, and we need to do it in a practical way, and going through zoning or using zoning as a way to encourage more missing middle, more gentle density, is

probably one of the smartest and most direct ways of tackling that problem.

Mr. Ian Arthur: Thank you very much for your answer. I appreciate that. You are absolutely correct; we're in a crisis point, and the way out of it is, frankly, in my opinion, becoming murkier and murkier as it drags on.

It has been a long time since we meaningfully invested public dollars into affordable housing in Canada. Do you see market-based supply-side actually closing that gap? It's great if you eliminate 3% of costs in red tape reduction, but material costs went up 25% in that same period of time. We're not going to get to the point where we actually have affordable housing. What role would OREA like to see the government play in terms of, I guess, a different type of carrot: putting money into actual missing-middle housing in Ontario?

Mr. Matthew Thornton: If I can, David—

Mr. David Oikle: Yes.

Mr. Matthew Thornton: I think it's a great question, MPP Arthur. It's not just one solution that's going to address this challenge. I think there have to be a number of ideas and policies brought forward, and more investments in affordable housing, absolutely. We've seen investments over time decline—not just at the provincial level, by the way, but also at the federal level—so it's more investments right across the spectrum of housing, from affordable government-owned housing through to ownership.

But at the end of the day, there have been a lot of different things tried in Canada on housing over the last five years, from vacant home taxes to taxes on foreign buyers to changes to rent control and a whole number of other things. Very few of them have had a real, measurable impact on increasing the number of homes out there for people to buy. That's why, as an example, I referenced earlier that New Zealand is turning to these other changes that are targeting things like zoning, because at the end of the day, it's this more permissive and gentle density-permitting zoning that's going to bring in the kinds of numbers of new homes that we really need to start to make a dent in this affordability crisis.

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I think, to answer your question, absolutely, there needs to be a range of things brought forward to tackle the problem: some support, as David mentioned in his remarks, on the demand side, and more help for first-time buyers. But at the end of the day, it is going to be a supply-driven—

The Chair (Mr. Ernie Hardeman): One minute.

Mr. Matthew Thornton: —solution that's going to help make housing more affordable for families.

Mr. Ian Arthur: I have no further questions, Chair.

The Chair (Mr. Ernie Hardeman): Anybody want the rest of the minute? If not, we'll then go to the independent.

Ms. Mitzie Hunter: That's okay, Chair. I'll take their minute that's left. I wanted to actually continue the conversation with OREA on housing. I know that I've met with your group a number of times, and you do great work in representing your sector. I find the conversation around, first of all, government provincially taking its role on as-

of-right housing or inclusionary zoning—so that the housing policy that we see reflected municipally has really the opportunity for density built into it, given the fact that, from an environmental perspective, we want to see the most efficient use of resources as possible.

I also note that the federal government does have a national housing strategy that is looking at housing affordability and sort of that supply side of making sure that there are investments for new units for affordable housing. I'm wondering if you believe, in the continuum and in the spectrum of housing that's needed, that we need to see more being done provincially on the housing affordability side, because that would ease some pressure on prices and that average housing price, which you've rightfully said in Ontario is becoming out of reach, particularly for young people.

Great team there. Hey, David.

Mr. David Oikle: Hi, Mitzie. It's nice to see you again. I'll get it to Brian in a moment. It's all three levels of government. Housing is local, so the municipalities have an incredibly large role, for the reasons that Matthew stated earlier, with zoning and the will to do it.

The province has a role to do as well, if there's anything that they can do to knock out of the way to get homes built quicker: funding, maybe; affordable housing as well. I was director of finance for Ottawa Carleton Regional Housing Authority way back when, from 1991 to 1994, during Mr. Rae's government, so I saw the need; I saw how important it was. And in Ottawa, not much has been built since then. So I think affordable housing is something that we could always invest in.

Federally: Since it is a local and provincial issue, I think federally it could commit dollars to it and let the local governments make the decisions to make something happen. I think that the federal government can support activity with funding. I think that would be the most important role that they could play in their national housing strategy. But it's all hands on deck for sure.

Maybe Brian, did you have your hand up?

Mr. Brian Santos: I did. Thank you, and thank you, MPP Hunter, for your kind words and for the question. As David mentioned, this is all hands on deck. We are in a housing crisis, both for families looking to purchase a home and even for people renting. It just comes down to supply, supply, supply.

The Chair (Mr. Ernie Hardeman): One minute.

Mr. Brian Santos: There are not enough homes out there for people, for Ontarians. So this is all about all levels of government working together, from the federal, provincial and municipal levels, that top-down approach. Having some more flexibility with zoning would be better, because as it stands right now, zoning is just so difficult to address, and what we end up with is just these big builders and you just end up with tall or sprawl. We at OREA think there are definitely some opportunities there for gentle density, where someone could have a duplex or a triplex on their property and have those opportunities for the missing middle, not just these tiny condos or these big

giant homes. We all have to work together on this, because this is a big, big issue right now affecting everyone.

Ms. Mitzie Hunter: Okay. I agree with you: There is definitely a need to address that missing middle or the yellowbelt that we talk about as our population ages, but our planning laws and our zoning laws have not kept up with what families want.

The Chair (Mr. Ernie Hardeman): Thank you very much for that. We now go to the government.

Speak up or forever hold your peace.

Mr. Logan Kanapathi: Thank you, Mr. Chair and thank you—can you hear me, Chair? Can you hear me? I think so. Okay.

Thank you, everyone, for coming out—

The Chair (Mr. Ernie Hardeman): Mr. Kanapathi? Go ahead.

Mr. Logan Kanapathi: Thank you, Chair. Thank you, everyone, for coming out and making the wonderful presentations. Thank you for your work you do each and every day for Ontario.

My first question starts with Drew Woodley, Epilepsy Ontario. You were passionately talking about epilepsy and the current crisis you are facing. Our total investment has been \$580 million since the start of the pandemic to address the surgical backlog, now including the proposed additional thousands of new nurses and PSWs to the health care workers in Bill 43. My question is, how would community organizations like Epilepsy Ontario help [*inaudible*] afford to reduce the surgical backlog? That's my first question.

Mr. Drew Woodley: Sure. We absolutely support the investment on the hospital side, but I also think, from our point of view, there is likely a maximum at which more nurses in hospitals—you hit a cap. So our approach, and our approach for several years, has been, what can we do to reduce overall pressure on hospitals through community programs that mean people are going to the hospital less, that they are going to the emergency department less? There are fewer and shorter admissions from the emergency department because people have a better understanding and the people around them have a better understanding of when a seizure is an emergency and when it's not.

We have good data coming from other jurisdictions where this approach really can have a positive impact on overall hospital usage, not simply the number of people in the emergency department, but the number of people who are subsequently admitted unnecessarily. If they have education, it happens less and it happens for a shorter period of time.

Reducing overall pressure on hospitals frees up resources to deal with procedures—because it's not just surgical procedures, it's testing as well; it's all procedures in the hospital. We can do our part to reduce that burden on the hospital, reduce that pressure on the hospital through a program that just makes sense.

Mr. Logan Kanapathi: Thank you, Drew. I have a follow-up question as well. You mentioned about the key elements of education and community outreach programs. I'm very much involved and very much in support of that

program. My mother is also an epilepsy patient and part of the epilepsy program. Could you elaborate on how this program could help ease the burden on hospitals and other health cases, too?

Mr. Drew Woodley: Absolutely. The key component, really, is around what we call seizure first aid. Once you've been diagnosed with epilepsy, most seizures are not medical emergencies, unless there's a factor that aggravates things, like the person is injured, they have diabetes, they're pregnant, the seizure takes place in water or it lasts an unusually long time—more than about five minutes. Aside from that, most seizures are not medical emergencies, but we know from the usage of Ontario hospitals that quite often, people will go to the hospital following a seizure. They'll receive no additional interventions because by the time they get to the hospital, the seizure has stopped. Paramedics will tell us, "We show up at a scene and we have to take them to the hospital, and it's just not necessary."

We also know that main causes for people doing that, particularly the people around them, so family members, is fear, it's uncertainty and it's a lack of education on when it's appropriate and when it's not. By providing the education programs to people with epilepsy and those around them, they have a much better sense and much more confidence about when to call 911 and when not to. Again, studies in the UK have seen significant drops in hospital usage when you have that education piece, because people just aren't as afraid anymore. They have confidence to know: This is the time to call, this is the time not to call.

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If they do go, there's data to show that they leave the hospital sooner, that they are able to articulate where they're at in terms of their health care. They don't need to spend as much time in in-patient admission, and it happens less. It's about providing the people with seizures and people closest to them, people most likely to call 911, with the information and confidence they need to make informed choices, and we see real effects on how that plays out at the hospital level when they've received that education.

Mr. Logan Kanapathi: Thank you for that answer.

My next question is geared to OREA. You guys are passionately talking about housing supply and the housing price crisis. I used to be a councillor for the city of Markham for three terms. I was on the other side of that spectrum. Thank you for the great work you do and the good advice you are providing us, to our government. Your organization has referred to our government as the most pro-home-ownership government that Ontario has seen in a generation. That is a good compliment. That's something that we are incredibly proud of.

But we know that there is more work to do, more work to be done in the whole economy, like you guys were mentioning. So can you talk about what else the government can do to unlock housing supply across the province?

Mr. David Oikle: I'll start and add a few words, and then I'll ask Asha Holland to add in a little bit in a moment. But thank you very much for the kind words, MPP Kanapathi.

We have been focused on this a lot. Lower development costs, innovative models—we think that we could encourage co-ownership models and see whether we can get those. There are a couple of opportunities that can bring people into equity positions. There are a couple of different innovative businesses around so it doesn't have to be the way we've always done it, and we're encouraged by some of those opportunities. Rent-to-own is something that is always there but never really catches on as something that is a model. We really need to look at all of these things as to how to benefit first-time buyers and people getting into the market.

But maybe I'll ask Asha to add in a couple of other ideas that we have. Asha?

Ms. Asha Holland: Thanks, David. At OREA, I think one of the groups that we're trying to target most when it comes to home ownership are millennials, and those are the people that are experiencing this crisis—

The Chair (Mr. Ernie Hardeman): That concludes that time. I wish the last speaker—if they could introduce themselves too. That was supposed to be first, but then that would have left no time at all.

Ms. Asha Holland: Sorry, am I good to continue?

The Chair (Mr. Ernie Hardeman): Could you introduce yourself?

Ms. Asha Holland: It's Asha Holland, from the Ontario Real Estate Association.

The Chair (Mr. Ernie Hardeman): Very good, thank you.

With that, we'll now move to the official opposition. MPP Fife?

Ms. Catherine Fife: Thank you, Chair. Asha, I'm going to just let you finish that thought, because I have questions for OREA as well. So go ahead, please.

Ms. Asha Holland: Thanks, MPP Fife. I just wanted to say that millennials are being affected by this housing crisis in a big way. I think when we think about what we can do to help the groups that are being affected is, speaking to what David said, rent-to-own, so really overcoming those barriers to home ownership, which for young people right now is coming up with that down payment.

Housing is just way too expensive across the entire province. As we mentioned in our remarks, the average price of a house in Ontario is \$850,000. OREA did some polling recently that stated that almost 50% of millennials that were surveyed were considering moving out of the province because it's just becoming way too expensive to even consider owning a home here. So I think looking towards those affordable housing solutions, especially rent-to-own or co-equity, and amending the Residential Tenancies Act and the Land Transfer Tax Act to allow for those models to actually thrive in Ontario is something that the government can look to as a housing solution.

Ms. Catherine Fife: Okay. Thanks very much, Asha. That's why we built some of those ideas into our plan, as well. We consulted with OREA. We've been listening to millennials and really, even seniors. Seniors are in my office these days asking about where they are going to go and how they are going to be able to afford this.

I want to build off the conversation that MPP Arthur had started with you around the multiple options. Speaking to schedule 2 particularly with Bill 43, there was an organization that came this morning called Transparency International Canada. I don't know if you are familiar with them, but they said that housing prices are skyrocketing out of reach for many Ontarians, and the problem is in part caused by crooks and tax dodgers taking up residential spaces as safety deposit boxes for their dirty money.

We do need to address this issue in Ontario, across the entire province. The city of Toronto is going to be addressing it in 2023, but it won't really take effect until 2024. Their recommendation, which is very much in line with a private member's bill that MPPs Bell and Karpoche have brought forward, is that we need a publicly accessible land ownership transparency registry in Ontario, which would be a crucial tool to fight some of these problems, because we have seen a 25% increase in residential mortgages which were provided by unregulated lenders with no anti-money-laundering reporting obligations from 2008 to 2018.

If we're going to build a tool box, we should amend this piece of legislation to make it as strong as it can be right now. Matthew, David, or Asha, I'd like your commentary on this, please.

Mr. David Oikle: All of us would probably give you the same answer. Asha, you have the floor. You keep going.

Ms. Asha Holland: Thanks, David, and thanks, MPP Fife, for the comments. OREA has been a long-time supporter of a made-in-Ontario public beneficial ownership industry. We don't want to see one cent of dirty money entering our province, especially through the real estate market, really blocking that opportunity for young families to enter the market.

I think that's our position. I don't know, Matthew, if you had anything else to add.

Mr. Matthew Thornton: I would just say that we fully support MPP Bell's bill on this issue and we really look forward to working, MPP Fife, with you and the NDP team on this issue. As Asha said, having that dirty money competing with young families out there in the marketplace is something that we just need to put a stop to. There's no benefit to an issue like this like shining sunlight on it, making sure that every transaction is transparent and numbered companies are out there for everyone to see who's behind them. So yes, we fully support that proposal.

Ms. Catherine Fife: And we've definitely seen an increase, an acceleration of this, I think. The pandemic really did highlight it, I think. Listen, my son has been trying to get in the market in Waterloo.

On another issue, there are empty properties all throughout Waterloo region, and we have a hard line. My mayor said he needs the province to sort of give them permission to increase those vacancy taxes and discourage leaving those empty buildings empty when we have such a dire need for housing. Has OREA weighed in on that yet?

Mr. David Oikle: I'll just be quick. Absolutely, I think every house and rental unit that's available should be productively used. That's our position. Getting data on how many vacant units are there in municipalities or

provinces should make sure that they're productively used. Absolutely, we agree with you, MPP Fife, that this should happen.

Matthew, Asha, do you want to weigh in as well?

Mr. Matthew Thornton: I would just say that one jurisdiction that has really done a lot of work in this area—MPP Fife, as you know—is Vancouver. The Vancouver vacancy tax, I think, is—we're still collecting data on it to see, essentially, how effective that is. I think it has certainly brought some units to bear or brought some new units online in terms of ones that were previously vacant. But when you look at the scope or size of the problem, it's actually quite small overall.

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So I think, to David's point, it's one thing that we can do for sure, but if we're going to focus our time and attention on really getting at the larger issue, looking at those zoning challenges we were outlining earlier would be much more productive in terms of actually getting at the heart of what's causing the crisis itself.

Ms. Catherine Fife: Do I have one minute left, Chair?

The Chair (Mr. Ernie Hardeman): One minute.

Ms. Catherine Fife: We also have to be careful, right, because there are sometimes unintended consequences. One of the issues that we want to address with regard to the public registry is with a system of exemptions such as homes for people who are fleeing domestic violence, because we've seen an uptick on this as well, so we're going to try to build an inclusive model going forward that takes into account some of these other circumstances. People don't usually talk about real estate and domestic violence in the same breath, but the fact of the matter is they're very much connected.

I appreciate your time as always today. Thank you very much. That concludes our questions, Chair.

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes our time for this panel. Thank you all again for participating. We very much appreciate that.

Before we go on to the next panel, I just want to mention I believe we have MPP Simard who's here as an independent to attend, so we just want to make sure. MPP Simard, if you would just introduce yourself and tell us where you are.

M^{lle} Amanda Simard: Amanda Simard, MPP for Glengarry—Prescott—Russell. I'm currently in Toronto.

The Chair (Mr. Ernie Hardeman): Very good. Thank you.

ONTARIO COMMUNITY
SUPPORT ASSOCIATION

ASSEMBLÉE DE LA FRANCOPHONIE
DE L'ONTARIO

The Chair (Mr. Ernie Hardeman): With that, we will start on the next panel. We have, first of all, the Ontario Community Support Association.

Ms. Deborah Simon: Hello. Good afternoon, everyone. I am Deborah Simon. I am the CEO of the Ontario Community Support Association. We call ourselves OCSA. I'd

like to thank the committee for providing me with an opportunity to speak with you this afternoon.

Since 1992, our association has grown to represent 220 not-for-profit organizations of all sizes, providing a wide variety of health and wellness services across Ontario. The home and community care sector is made up of three distinct and equally important service groups: home care, community support services, and independent living. These services not only meet the clients' current needs, but, more importantly, they prevent decline and more serious needs in the future, keeping people in their homes—and out of the hospitals and long-term care—where they want to be. As a result of this, the service is often very invisible to many folks.

I'm here today because our association included a funding ask of \$140 million this year for community support services to provide needed health care system stabilization, and this call has been ignored. Community support service providers keep over one million seniors and people with disabilities living safely and independently in their own homes and communities across Ontario, preventing unnecessary hospitalizations and alleviating pressure on long-term care.

The services our members provide range from nursing and therapies to adult day programs and assisted living programs providing many personal hygiene activities such as toileting, bathing, feeding and homemaking to vulnerable clients across the province. The sector cares for a wide range of clients, with some of those with the highest care needs such as those who have dependencies on dialysis and ventilators. These services allow our clients to live safely in their homes and communities.

Our current funding levels are totally disconnected from the reality of the cost of delivering these services. The fall economic statement fell short in supporting home and community care organizations that serve vulnerable Ontarians. While the Ontario government did announce an injection of \$548 million over three years, these funds were specifically for the expansion of home care services, primarily to support post-hospitalization.

The funding for home care is long overdue; however, these funds will not address core challenges addressing the sector for clients receiving services under community support and independent living programs. Many Ontarians may not realize this is what has occurred. They may believe that home care covers all these services. It does not.

Simply put, the fall economic statement invests in only one third of this critical sector and neglects to invest in the remaining care needs that are key to the optimal health of Ontarians. Some CSS providers have not seen operating budget increases in nearly a decade, which has hampered service delivery, especially with growing inflationary pressures now exceeding 4%. Without new investments, many CSS organizations will be left with financial deficits and will have no choice but to reduce services, increase client fees and create wait-lists for valuable services. This is happening at a point when Ontarians have clearly voiced that they want to receive care at home and in the communities where they are safe.

A recent survey indicated over 8% of seniors who are wait-listed for long-term care could live appropriately in the community if appropriate supports were put in place for them to live independently, alone or with a family member. The sector not only provides safe, quality care to millions of Ontarians, but is cost-effective and alleviating pressure on long-term care and acute care.

The need to invest in both home care and community services is crucial. Ontario has fallen behind other provinces and is now ranked eighth in per capita spending on home and community care. To illustrate this, in 2016, we spent 6.7% of the entire health budget on home and community care, ranking us second out of 10 provinces. Five years later, spending is down, ranking us seventh out of 10 provinces. From 2016 to 2021, Canada's other provinces increased home and community care spending on an average of 30%. Quebec actually increased its spending in home and community care by 59%, versus Ontario at 19%.

Critical home and community care services keep people at home for an average cost of \$103 a day. This is compared to \$201 a day for long-term care and \$730 a day for hospitals, which is the cost that the province currently pays when these services are not available and when people have nowhere else to go but to acute care or institutions.

The degree to which Ontarians rely on the critical role of community support services has been growing exponentially. However, the service, again, as I mentioned, is invisible to many people. The sector has been working so hard to continue to provide care despite the limited infrastructure funding over the years. However, these agencies have now reached the brink of their capacity and can no longer sustain this level of funding. The province has exacerbated this, and without adequate funding, they have no other resources to press on to provide the same levels of care.

Without funding community support services, the lives of clients and the well-being of caregivers will be at risk, and there will be unmanageable impacts on hospitals and long-term care as clients are forced out of their homes and into these institutional settings in the future. By supporting clients who can live independently and safely at home with the help of home and community care services, the whole sector, not just part of it, can protect the limited resources in hospital and long-term care for those who need it most.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Deborah Simon: The need for more investment is clear, the return on investment is clear, and the cost of not investing may be far greater than we, as a province, can afford.

Thank you, and I look forward to answering your questions.

The Chair (Mr. Ernie Hardeman): Thank you very much for that presentation.

Our next is the Assemblée de la francophonie de l'Ontario.

Mr. Carol Jolin: Thank you, Mr. President. Good afternoon, everyone.

Je vais poursuivre en français. J'aimerais souligner que je suis accompagné aujourd'hui par le directeur général de

l'Assemblée de la francophonie de l'Ontario, Peter Hominuk, et par notre analyste politique, Bryan Michaud. J'aimerais remercier les membres du Comité permanent des finances et des affaires économiques de me recevoir pour discuter de l'annexe 13 du projet de loi à l'étude, qui propose une refonte importante de la Loi sur les services en français.

Dans l'ensemble, l'annexe 13 du projet de loi 43 mérite d'être appuyée. Contenant plusieurs avancées importantes pour la communauté franco-ontarienne demandées par l'AFO et l'Association des juristes d'expression française de l'Ontario, elle va permettre d'agrandir l'espace francophone dans la province, tout en solidifiant la structure actuelle de l'offre de services en français par le gouvernement de l'Ontario.

For francophones, the most visible change in the bill will be the enshrinement of the active offer concept. Francophones and francophiles alike will no longer shoulder the burden of knowledge that it is their right to be served in French. The government will assume that responsibility, just as it already does at the federal level. This is a key point of the bill.

L'offre active a le potentiel de devenir une pierre d'assise dans la livraison des services gouvernementaux et des communications en français. De par les changements structurels importants proposés par la Loi sur les services en français et de par l'engagement à moderniser et adopter de nouveaux règlements, les bases seront plus solides pour assurer la livraison de services gouvernementaux en français. Par exemple, nous saluons le fait que tous les ministres seront responsables davantage, face à leurs obligations devant la loi. Ceux-ci, si la loi est adoptée, devront désormais produire un rapport au Cabinet. Au cours de l'année qui suit, la ministre des Affaires francophones devra, à son tour, soumettre un rapport à l'Assemblée législative.

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Par ailleurs, nous recommandons aux membres du comité d'apporter un léger amendement à l'article 12.0.1 de l'annexe 13 du projet de loi pour ajouter le mot « annuel » entre les mots « rapport » et « au ». Nous comprenons que l'intention des législateurs est que les ministres doivent soumettre leurs rapports au Cabinet une fois par an.

La reconnaissance du ministère des Affaires francophones, le nouveau pouvoir de la ministre des Affaires francophones de désigner à tous les niveaux des services dans des régions non désignées, la révision obligatoire de la loi aux 10 ans, l'ajout d'une fonction de promotion des services en français et des affaires francophones à la ministre, ainsi que la formalisation du conseil consultatif des affaires francophones sont des points également importants que nous appuyons fortement.

Un point qui interroge est celui de la traduction et de l'adoption des règlements. En 1980, l'Ontario commençait à traduire et à adopter tous ses projets de loi en français. Outre que d'offrir les projets de loi dans les deux langues officielles du pays, ils ont depuis une valeur juridique égale, quelle que soit la langue officielle utilisée.

Nous notons qu'au cours des dernières décennies les gouvernements se sont servis de plus en plus de l'outil des règlements. La communauté franco-ontarienne a ainsi demandé que cette refonte de la Loi sur les services en français comprenne une obligation que l'ensemble des règlements adoptés par le gouvernement après l'adoption du projet de loi 43 soit traduit et adopté en français.

It is our understanding that the legislators' intention is to go ahead with this demand, given that policy briefs pertaining to "annexe" 13 of Bill 43 sent to organizations by the Ministry of Francophone Affairs clearly state that the regulations adopted after the bill's passage will be translated and adopted in both languages. "Annexe" 13 of Bill 43 lacks clarity in this regard.

Nous croyons également que l'annexe 13 gagnerait à proposer une définition plus précise « d'organisme gouvernemental » et d'inclure une clause « Objets et principes ». Je laisserai à nos amis de l'Association des juristes d'expression française de l'Ontario, qui passent devant votre comité à 16 h, de revenir plus en profondeur sur ces deux questions.

In context of the Ontario government's decision to retain the French language services commissioner role within the Ombudsman's office, AFO requests that bilingualism become a required skill for the Ombudsman role. As the Ombudsman is responsible for overseeing services in French, it only makes sense that the incumbent of this position will be able to speak French. It is an essential qualification, which the current Ombudsman possesses.

The Minister of Francophone Affairs has made a commitment to us that the government will take action to mandate bilingualism for the Ombudsman's role, and it is a commitment that we strongly support. We recommend that the Ontario government implement this commitment within the framework of an amendment to the Ombudsman Act or to one of the regulations under it before the dissolution of the House in the spring.

Le temps file. Nous aurions pu poursuivre en parlant de l'adoption et la modernisation de règlements touchant les services en français et de la stratégie concernant la main-d'oeuvre, francophone et bilingue, mais j'aurai sûrement la chance d'y revenir lors la période des questions. Merci pour votre écoute. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much for the presentation. That concludes the presentations. We'll now start with the questions. We're going to start this round, the first round, with the government. MPP Roberts.

M. Jeremy Roberts: C'est un plaisir de vous voir, monsieur Jolin, ainsi que Peter et Bryan. Je vous remercie pour votre députation. Je pense que la dernière fois que nous avons eu la chance de se voir en personne était dans le comité des finances à Belleville en 2019. Donc, j'espère qu'on aura la chance de vous rencontrer en personne bientôt, peut-être. Mais je vous remercie pour la députation.

Je sais que vous avez eu la chance de rencontrer avec la ministre Mulroney et son équipe, ainsi que l'adjointe parlementaire Kusendova quelquefois, pour partager vos

opinions à propos de la modernisation sur la Loi sur les services en français. Je vous remercie encore pour votre collaboration durant ce processus important.

J'ai quelques questions pour vous, et je veux commencer peut-être par vous demander quel changement est le plus porteur pour la communauté franco-ontarienne? Vos opinions?

M. Carol Jolin: Définitivement l'offre active. Je vais m'exprimer en anglais parce que je veux m'assurer qu'il n'y a pas de problèmes dans la traduction.

The active offer will also contribute to increasing the visibility of francophones in the province. Too often, the francophones are too shy or are afraid to request services in French for fear of being served more slowly or just being told, "I'm sorry, I don't speak French." We see the active offer as the cornerstone beneath the delivery of services in French.

The federal government, which has had the active offer in place for several decades now, is a source of inspiration with respect to regulations related to the active offer. To put this in action, place yourselves in the shoes of a francophone entering a ServiceOntario office. How can the government communicate that he or she can be served in French? By ensuring that the office contains bilingual signs, by putting up signs that say "Bonjour, hi," to the end that when the client arrives at the counter, she is greeted in both official languages by the employee. This, just at this point, will make the other person very comfortable to ask for service in the language that she prefers. If it's a francophone, they'll be able to say, "Oui, bonjour," and then we'll start giving the service in French.

To be able to communicate in both languages to the digital service is just as important. We believe that this aspect of the changes that the law proposes is the most important, or one of the most important. Merci.

M. Jeremy Roberts: Oui, bien sûr, j'espère que cela va être un changement vraiment important. On voit l'offre active à Ottawa, plus de temps, je pense, qu'à d'autres places en Ontario. Donc, j'espère que ça va être bon pour la communauté franco-ontarienne partout dans la province. Je pense que, oui, c'est un changement important.

Comme vous savez, si elle est adoptée, la nouvelle Loi sur les services en français modernisée permettrait la création de nouveaux règlements et de directives gouvernementales pour aider à mieux clarifier les exigences et mieux prescrire comment, quand et où les services en français sont offerts. Peut-être, je veux vous demander, quel règlement serait une priorité pour l'AFO?

M. Carol Jolin: Le règlement le plus important est celui de l'offre active. J'ai mentionné que l'offre active était un point extrêmement prioritaire des changements qui sont dans la refonte, et le fait de travailler aux règlements le plus rapidement possible pour qu'on soit capable d'offrir ces services-là est une priorité.

Et à cet effet-là, la ministre des Affaires francophones s'est engagée dans la refonte, également, à mettre en place un processus pour justement recruter et former davantage de gens en français, pour pouvoir donner les services dans les bureaux, et également, de par le changement qui est

proposé dans la loi, c'est que la ministre peut déterminer qu'on va offrir des services en français dans des endroits non désignés.

Ça, je vous donne simplement un exemple : un endroit comme Barrie en Ontario, où il y a beaucoup de francophones mais qui n'est pas une région désignée, la ministre des Affaires francophones pourrait déterminer que ServiceOntario va donner des services en français à cet endroit-là. Donc, c'est un élément extrêmement important pour augmenter l'espace francophone et avoir davantage de services et avoir cette offre active dans les bureaux où les régions ne sont pas désignées. Ce sont des points extrêmement importants, et on veut travailler—et aider aussi—pour que les règlements avancent le plus rapidement possible pour qu'on puisse mettre en action, mettre en oeuvre cette priorité-là.

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M. Jeremy Roberts: Merci. Je pense que cela c'est aussi très important.

Mr. Chair, how long do I have remaining?

The Chair (Mr. Ernie Hardeman): One minute point three.

Mr. Jeremy Roberts: One minute point three, okay.

M. Jolin, une autre question pour vous : comme vous savez, notre gouvernement essaie de soutenir la création de nouveaux emplois ici en Ontario maintenant qu'on commence à finir notre combat contre la COVID-19. Une chose qu'on voit qui est un avantage compétitif pour l'Ontario, c'est la présence de notre communauté franco-ontarienne. Est-ce que tu penses que ces changements-là vont nous aider à—j'essaie de trouver le mot—«to attract» de nouveaux francophones de venir ici en Ontario et prendre ces emplois qui sont vides ici dans la province?

M. Carol Jolin: Définitivement, le fait d'avoir des gens bilingues en Ontario est une valeur ajoutée à la main-d'oeuvre. Je dirais que ça amène beaucoup à l'aspect économique de la province. On l'a vu avec l'initiative des affaires francophones d'aller de l'avant, d'aider à mettre de l'avant une fédération des gens d'affaires qui vont permettre aux gens d'affaires francophones et bilingues de l'Ontario de faire des affaires en Ontario français, au Québec, au Nouveau-Brunswick et partout au Canada du côté francophone, et également à l'international. Donc, c'est une force que d'avoir—

The Chair (Mr. Ernie Hardeman): Thank you very much. That does conclude the time we've allotted.

Before we go to the opposition for questions, we do have MPP Bourgouin—have I got that almost right?—with us this afternoon, so we want to recognize you. Now we'll then go to the—

Interjection.

The Chair (Mr. Ernie Hardeman): Oh, yes. If you could reintroduce yourself and tell us we're you're at, so we know, we're sure you're in Ontario.

M. Guy Bourgouin: Guy Bourgouin, dans mon bureau à Queen's Park.

The Chair (Mr. Ernie Hardeman): Thank you very much for that. We'll now go to the official opposition.

Who's going to speak? There we go, you're up, with your introduction.

M. Guy Bourgouin: Ma question est pour l'AFO. Je sais qu'on attendait beaucoup la modernisation de la Loi sur les services en français. On voit qu'il y a plusieurs manques que la communauté demandait. On voit qu'il y a beaucoup de choses que la communauté attendait—au moins d'avoir un peu plus que ce qui est dans la modernisation proposée par le gouvernement.

Mais j'aimerais vous entendre. Je sais que vous avez parlé de l'ombudsman bilingue, que la ministre se commet de le faire. Mais je trouve que les gouvernements changent, les ministres changent, puis des fois ça tombe à l'oubliette ou le langage n'est pas fort et les lois ne sont pas fortes ou les règlements ne sont pas forts pour assurer que ces promesses ou ce qui est dit par un gouvernement ou une ministre soit fait. J'aimerais vous entendre là-dessus : qu'est-ce que ça prendrait pour qu'on ait cette promesse-là à long terme, pour rassurer l'AFO puis la communauté francophone?

M. Carol Jolin: Merci pour la question. Premièrement, avant, j'aimerais souligner, monsieur Bourgouin, je vous remercie d'avoir déposé un projet de loi pour la modernisation ou la refonte de la Loi sur les services en français. Je tiens également à remercier Amanda Simard, qui a fait de même, et Nathalie Des Rosiers, qui l'avait fait voilà quelques années. Je pense que cela a mis la nécessité d'une refonte de la Loi sur les services en français vraiment de l'avant, ce qui nous a permis, justement, de nous rendre là où on est aujourd'hui.

Dans le document, c'est certain que—on sait que l'indépendance du commissaire est une priorité pour la communauté. Par contre, on regardait l'ensemble du projet de loi avec les avancées qu'il y avait dedans, puis on y voit un élargissement significatif de l'espace francophone pour la communauté.

Il y a encore des choses à faire. Ce n'est pas parfait. Mais on voit qu'il y a des pas importants qui ont été pris dans la bonne direction, notamment la possibilité d'offrir des services dans des régions non désignées, l'élément de l'offre active qui est extrêmement important, l'élément d'imputabilité et puis la reconnaissance du ministère et d'une révision à l'intérieur dans les 10 ans.

Maintenant, de ce côté-là, c'est très important que l'ombudsman soit bilingue. C'est une crainte qu'on avait qu'un changement—dans le présent, l'ombudsman est parfaitement bilingue, mais on n'a aucune garantie, lorsque M. Dubé aura terminé son terme, que la prochaine personne puisse s'exprimer en français. Donc, c'est un point extrêmement important que ça, ça soit mis de l'avant. C'est un engagement de la ministre, et j'espère que ça va être fait le plus rapidement possible, justement—

M. Guy Bourgouin: Monsieur Jolin, j'apprécie ton—parce que je n'ai pas grand temps puis je veux essayer de vous poser le plus de questions possibles. Écoute, je sais qu'il y avait d'autres choses, aussi, qu'on demandait. Pourquoi est-ce que c'est important qu'on agrandisse la définition? J'ai vu qu'il n'y a pas de définition. Moi, j'ai déposé un projet de loi qui demandait une plus grande

définition, de définir les francophones pour refléter la communauté d'aujourd'hui. J'aimerais vous entendre aussi là-dessus.

M. Carol Jolin: C'est fait au niveau de l'AFO pour ce qui est la communauté francophone. Nous autres, on dit que si tu es francophone et tu demeures en Ontario, tu es Franco-Ontarien ou tu es Franco-Ontarienne, et on parle de 1,5 million de personnes qui peuvent s'exprimer en français. Donc, on n'est pas allé dans cette direction-là.

Peut-être que je vais passer la parole à Bryan Michaud, qui a travaillé sur le comité en question. Alors, Bryan, est-ce qu'on a—

M. Guy Bourgouin: Je ne l'entends pas.

M. Carol Jolin: On ne l'entend pas.

M. Guy Bourgouin: Mais écoute, d'abord, laisse-moi te poser une autre question en attendant.

M. Carol Jolin: Oui.

M. Guy Bourgouin: L'accès aux services en français, on sait que la loi—puis je pense que vous l'avez marqué dans vos documents aussi et dans votre présentation, c'est que « the devil's in the details », comme ils disent en anglais. On va être vigilant, mais on a vu dans le système judiciaire—on a la loi, qui est très claire, qui dit qu'on a droit à des droits équitables quand ça vient aux services, puis on attend deux à trois fois plus tard. Est-ce qu'on a peur de faire face à la même situation quand ça vient aux services en français?

M. Carol Jolin: C'est certain qu'on va être vigilant sur ce point-là. On veut que les règlements—vous voyez le minou à terre. C'est certain qu'on va être vigilant pour les règlements. On veut que les règlements reflètent vraiment l'intention de la loi et viennent prescrire ce qui est supposé être. De ça, c'est certain que l'AFO et ses organisations, on va regarder tout ça, puis on va compter sur vous également pour nous aider justement à s'assurer que les services sont là et que les règlements reflètent ce qui a été discuté dans l'esprit de la loi.

M. Guy Bourgouin: Bien, c'est sûr qu'on va être vigilant, parce que on a entendu souvent le gouvernement faire des belles paroles, mais quand arrive le temps, ils ne livrent pas tout le temps.

J'aimerais—Bryan, toi, tu es—ils ne t'ont pas débloquent encore. J'aurais aimé avoir une réponse sur ce point-là. Mais le rétablissement du commissaire : ça, c'est toujours une priorité pour la communauté franco-ontarienne?

M. Carol Jolin: C'est toujours une priorité, mais voyant les avancements qu'on a vus et le fait qu'on puisse travailler vers un ombudsman qui est bilingue, on a dit que c'est une étape importante qui est franchie, mais ça ne veut pas dire que c'est toujours une priorité pour nous autres. Mais à voir là où on est rendu aujourd'hui et les avancements qu'on voit dans la refonte, l'Assemblée de la francophonie va appuyer le projet de loi.

Mr. Guy Bourgouin: Mr. Chair, how many minutes do I have left?

The Chair (Mr. Ernie Hardeman): One minute.

Mr. Guy Bourgouin: Okay, thank you.

Juste pour avoir—l'importance d'identifier des francophones, parce qu'on sait, comme c'est là, que la

définition—il y a une grosse différence. Si on se fait identifier, ça veut dire plus d'argent qui vient du gouvernement pour la communauté. C'est recensé. J'aimerais vous entendre là-dessus, pourquoi c'est important. Comme tu l'as dit, on est 1,5 million qui parle, mais comme tu le sais, j'avais un assistant, moi, qui n'était même pas reconnu puis on parlait toujours en français, puis sa femme. J'aimerais vous entendre là-dessus : pourquoi est-ce que c'est important, ce point-là? Parce qu'on oublie comment ça se joue—puis qu'on ait l'identification, disons, sur la carte Santé, comment ça aiderait.

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M. Carol Jolin: C'est officiel qu'en ayant des chiffres qui sont précis et plus représentatifs de la communauté, ça va nous aider. Le fait d'avoir l'identification francophone sur la carte Santé va permettre de mieux offrir des services puis de voir où sont nos francophones et quels sont les besoins. C'est officiel que c'est un besoin extrême au niveau de la communauté.

Statistique Canada—dans leur recensement qui a été élargi, on va avoir un meilleur portrait de ce qu'est la francophonie au pays et pour nous autres en Ontario, parce que, justement, on est allé de façon plus précise pour aller recenser les gens qui sont capables de s'exprimer en français.

The Chair (Mr. Ernie Hardeman): Thank you very much. That does conclude the time once again.

We'll now go to the independent, and I believe MPP Simard is going to speak.

M^{lle} Amanda Simard: Yes, thank you. Bonjour, Bryan, Peter et Carol. Je suis vraiment fière que vous êtes ici aujourd'hui. Deux des trois sont mes commettants, alors on produit du bon monde à Glengarry–Prescott–Russell. Je suis extrêmement fière de vous et de tout le travail que vous faites—et Carol aussi, bien sûr.

Vous avez fait plusieurs recommandations à travers les années avec l'AJEFO, et de très bonnes recommandations. Il y en avait plusieurs, et c'est justement ce que moi-même et M. Bourgouin, du NPD, on a pris, et M^{me} Des Rosiers, pour faire deux projets de loi que—on ne s'est pas consulté, moi puis M. Bourgouin, mais on est arrivé avec pas mal les mêmes affaires. Finalement, on se disait que la ministre, ça serait vraiment surprenant qu'elle arriverait avec quelque chose de différent, parce que, justement, on a consulté et pris vos recommandations.

L'offre active, c'est vraiment le « no-brainer » que tout le monde, on est tous en accord qu'il faut que ça soit fait. C'est vraiment le « bare minimum », comme on pourrait dire en anglais. C'est vraiment le minimum de ce qu'on pourrait faire. Alors, moi, je voulais savoir, vous n'êtes pas déçu qu'il n'y a rien d'autre qui a été ajouté? Il va falloir attendre un autre 10 ans pour faire une réforme—si on garde le même gouvernement—à cette loi.

L'autre chose c'est pour l'ombudsman bilingue, je suis totalement d'accord, mais est-ce que vous dites que si on rend l'ombudsman bilingue, la nécessité comme critère—parce que je suis complètement d'accord. Est-ce que ça

veut dire que vous n'allez plus réclamer un commissaire aux services en français indépendant?

M. Carol Jolin: Merci. Pour la première question—je veux juste me rappeler de la première question. Peux-tu me rappeler, Amanda?

M^{lle} Amanda Simard: Oui, c'est que vous avez tellement fait de bonnes recommandations et on était tous prêts et il y a juste vraiment une chose qui est sortie, puis c'était le « no-brainer », right?

M. Carol Jolin: Il y a plusieurs recommandations qu'on a faites qu'on retrouve dans le projet de loi, et celle de l'offre active est primordiale, parce que, justement, les gens souvent sont gênés, ont peur, ou on parle d'insécurité linguistique quand les gens sont là. Ce n'est pas tout le monde qui veut faire de l'offre active. Donc c'est extrêmement important d'aller dans cette voie-là.

Ensuite, le fait que la ministre se donne la possibilité de donner des services en français dans des régions non désignées est un point important, et ça va dans la ligne—on demandait à avoir une grande région désignée en Ontario, d'avoir tout l'Ontario. Le projet de loi ne se rend pas là, mais il fait un pas dans cette direction-là qui permet à la ministre de donner des services dans des régions désignées, et elle peut compter sur l'Assemblée de la francophonie et ses organisations pour justement s'assurer que le MAFO soit bien au courant de ces régions-là et là où le service devrait être donné. Donc, il y a des avancements, et on voit un élargissement dans ce sens-là.

M^{lle} Amanda Simard: Alors là-dessus, sur la désignation, la ministre a dit, parce que c'est ce que nous, on a proposé, d'enlever le concept de désignations et de faire une grande région, et la ministre—

The Chair (Mr. Ernie Hardeman): One minute left.

M^{lle} Amanda Simard: —a dit qu'il n'y a tout simplement pas la main-d'oeuvre pour faire ça, as if it wasn't a worthy objective. Comme on ne fait rien. Donc, comment réagissez-vous à un commentaire comme ça?

M. Carol Jolin: Bien, pour un, moi, j'étais content de voir qu'il va y avoir un programme que la ministre met de l'avant pour faire du recrutement et de formation pour de la main-d'oeuvre francophone, puis c'est un besoin. On a besoin de main-d'oeuvre partout en Ontario—que ça soit en anglais ou en français, comme c'est là—et en français, évidemment, pour pouvoir livrer les services qu'on est en train d'aller chercher, justement, avec la refonte. Donc, cet élément-là de recrutement et de formation est extrêmement important pour être capable, justement, de donner les services, parce que déjà, présentement dans certaines régions, même si elles sont désignées, ce n'est pas évident de donner le service en français. Donc, il y a du travail à—

M^{lle} Amanda Simard: Alors il n'y aurait pas de problème à faire de ça un objectif et de dire : « C'est un objectif. On vous donne cinq ans, on vous donne peu importe combien d'années, et on va créer la main-d'oeuvre, mais »—

The Chair (Mr. Ernie Hardeman): That concludes the time. Thank you very much.

We'll go now to the second round and the government: MPP Smith.

Mr. Dave Smith: Deborah, just so you know, there's an interpretation link down at the bottom of your Zoom screen, if you weren't able to pick up what was being said in French. But I am going to start with you, actually, Deborah. My French, as everybody here would understand, is not strong enough for me to actually ask you the questions in French, so I won't.

One of the things that I've heard from some of our home care providers is that there are some significant differences in what PSWs do. They suggested to me that perhaps we should be looking at doing something a little bit different with our PSWs and have two streams: one for home care and one for long-term care. Do you see any benefit in creating a second stream that way, for PSWs specifically for the home care industry?

Ms. Deborah Simon: Sorry, Dave. I missed the last part of your question.

Mr. Dave Smith: Sure. Sorry about that. Do you see any benefit in creating a second stream specifically for PSWs for home care, to emphasize the differences between home care and long-term-care work while they're in school?

Ms. Deborah Simon: Absolutely. I think in the earlier days, when a PSW program was first contemplated and there weren't the shortages that we are seeing currently in PSWs, the one program where they were trained in a combination of being able to serve both long-term care and home and community care worked. But I do think that there are, as I talked about, very specialized services now in home care and home and community care in particular and probably far more acute services that PSWs support—hospice, dialysis, tracheotomies, all those kinds of things—so that home care could actually sustain a separate training stream for personal support workers, so that they are better-skilled to be able to meet those needs in the community.

Mr. Dave Smith: One of the other challenges that I've heard—I'm wondering if you have a suggestion or a solution for it. I'm in a riding that has an urban centre, the city of Peterborough, and then I also have a significant rural component to it. My riding is actually the sixth-largest geographically. It's about 3,200 or 3,300 square kilometres.

Our home care providers have said to me that they're able to find staff to work in the city of Peterborough, but if we have individuals who need home care or community care outside of the city, it is very, very difficult to get staff who want to do that. It's not necessarily the mileage cost or the mileage that they would be paid; they simply don't want to leave the urban centre. Do you have any suggestions on how we could help alleviate some of those problems for other ridings that are similar to mine, where they have an urban centre and they have a rural component as well?

Ms. Deborah Simon: I think that's interesting, Dave, that you say that they don't want to just leave the urban settings. I'm wondering if that has something to do with

their lack of familiarity with rural roads, if there may be some concerns around increased safety, particularly in winter months, and those kinds of things.

Part of providing training and orientation to personal support workers when they're coming on home and community care is to really provide them with all the tools that they need to be able to work in the settings that they're in, and so consistency of care in a particular geographic area really makes a big difference. I worked for a home care organization that served a fairly largely rural area. We had nurses who actually worked those communities very well. They knew the roads really well because they were not changed from one area to the next. So I think, right now, with the drastic shortage of PSWs, it may be that many are having to move from area to area, and that's not really conducive to them feeling comfortable and safe in areas that they've not travelled in before.

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Mr. Dave Smith: So if you don't mind me, and I'm sure that you—I heard your speech or your presentation, so I know that you did touch on some of this. But could you elaborate a little bit for me on what you think the most significant impediments are right now for home care and the development of home care?

Ms. Deborah Simon: Well, certainly, during the pandemic—we are, of all of the health care system, the lowest-compensated sector. So what happened during the pandemic is many of our personal support workers—who are, within even the continuum of home and community care, the lowest-paid providers—made the shift to accept CERB, where they were actually getting higher compensation from federal funding rather than being able to work in jobs in the community. That's one contribution to the overall.

We've been working as an association, Dave, for decades now in recognizing the important role that personal support workers and home and community care providers in general play. As I mentioned in this presentation, which I didn't get a chance to when we were talking to you and met with you—and thank you for that meeting—our sector is pretty invisible. From the perspective of people who don't know much about home care—when you need it, it becomes increasingly important to you, but we don't have a big H on our services. Our workers are in people's homes and in the communities, where they're pretty innocuous and people don't know that these services exist.

So I think, really, better recognition, along with better compensation, would really stabilize our sector in a big way. People who work in the community love it. They don't want to work in institutions. Everyone has a desire to work in different parts—

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Deborah Simon: —of the health care sector. I'm a nurse. I enjoyed working in nephrology when I was there. But we want to be able to ensure that people, when they choose the areas that they work in, are compensated equally.

Mr. Dave Smith: Thanks, Deborah. In my last minute or so, I'm going to jump over to Carol from AFO, if you don't mind.

Je pense en anglais et je dois traduire en français pour parler. Je ne peux pas penser en français.

I can speak some French, but I don't think in French. I have to translate it when I want to speak it. Is this a similar challenge, then, that a lot of our francophone members of Ontario have when they come into a location and it's only serviced in English?

Mr. Carol Jolin: Well, if you didn't grow up in a bilingual environment or in a French family—I always said, “You don't learn English in Ontario; you catch it.” But if you come in through immigration or from Quebec, for example, and you're learning English, it's exactly the same thing. You think in French and you try to translate word by word to English. And I can tell you, it doesn't always—

The Chair (Mr. Ernie Hardeman): Very good. That concludes the time. Thank you very much. We'll now go to the independent member—

Interjection.

The Chair (Mr. Ernie Hardeman): —opposition. Yes, I'm ahead of myself again. The official opposition—yes, MPP Fife.

Ms. Catherine Fife: I'm going to just take a couple of minutes because then I'm going to throw it back to my colleague MPP Bourgouin. But, Deborah, I did want to give you a chance to specifically address the value, the return on investment for investing in community care.

We saw a very disappointing Financial Accountability Officer report today: \$1 billion was underspent. It was not invested back into the community. As an MPP, I could tell you that I was receiving phone calls from people who were stuck in hospital in an ALC bed who needed to get back to the community, but the missing part was that transitional care piece. So can you just give me some sense, like a very strong point for this government to understand how important it is to invest in community care? Because not only does it provide that intimate, that caring and compassionate level of care, but also, it's good for the overall health care budget to invest in community care. Please go ahead.

Ms. Deborah Simon: Absolutely. Thank you for that question. It's clear to me that, given all of the investments we've had to do through this really horrendous time with the pandemic, this is the time, if not any other time, to turn our attention to really what Ontarians want, what Canadians want. Overwhelmingly, it's to have care in their homes where they're safe and they feel that they are less exposed, particularly with the new variants and things that are coming about.

Home and community care, and particularly community care, is not 100% funded by government. I think people don't appreciate that. Many, many of the programs are supported through these organizations that are not-for-profit, that do a ton of fundraising to be able to support programs. So they're definitely provided by additional

support there, and they have a large component of volunteer services, which is good for all of the community.

Not to support with the money that the government does provide to community the needed component to ensure that these programs sustain themselves, the decades of no increase in funding and operating costs—it doesn't make economic sense, nor does it make sense from the perspective of what Ontarians have said that they want. So it's clear cut from my perspective that this is the direction we should be going in. Other countries like Denmark that have invested in home and community care have reduced their needs for long-term-care beds. Those beds cost double what it costs to provide care in the community.

I just want to—

Interjection.

Ms. Deborah Simon: Sorry.

Ms. Catherine Fife: No, go ahead.

Ms. Deborah Simon: I also want to say that care in community also comes with a requirement for care for the caregiver. I think everyone that's sitting here probably has some component of caregiving that they give to someone, and that caregiving needs to also be funded in order for home and community care to be whole as a program.

Ms. Catherine Fife: Yes, and if you're looking at retaining staff as well, the wages and the suppression of wages in Ontario is really driving very good people out of home care and community care. As you point out, the not-for-profit sector, they are positioned to accelerate and to amp up. They just need the funding, right?

Ms. Deborah Simon: Exactly. And if I could just add to that as well, in home and community care, we do have the added impediment of having Bill 124 right now, which actually impedes our ability to provide additional compensation to our staff who are already sitting way behind acute care and long-term care. We need that support to be able to provide them with appropriate compensation.

Ms. Catherine Fife: Thank you very much. You summed it all up, and it's all connected. Thank you very much, Deborah.

MPP Bourgouin, please go ahead.

M. Guy Bourgouin: Merci. Ma question, c'est encore pour l'AFO. Écoute, s'il y a quelque chose qu'on a appris dans la pandémie, c'est qu'on a besoin des services en français. On a une loi qu'on veut moderniser, mais on a omis d'assujettir les bureaux régionaux de santé publique à la loi, ce qui fait partie de votre présentation. Puis on est chanceux : on sait que notre nouveau médecin en chef parle un peu français. Mais vous demandez que ça fasse aussi partie des nouveaux règlements. Pourquoi est-ce que c'est important?

M. Carol Jolin: On l'a vu dans le cadre de la pandémie, d'ailleurs, que ça a été très difficile pour les services en français. L'AFO a soumis un rapport au MAFO, au gouvernement, et on l'a fait au gouvernement fédéral également. Ça a été extrêmement difficile de ce côté-là. C'est important que la personne qui a le poste de médecin en chef pour la province soit capable de s'exprimer dans les deux langues, parce qu'on a vu la fréquence qu'on voyait cette personne-là pendant les conférences de presse.

Et de ça, d'être capable—le projet de loi amène un mécanisme de reddition de comptes, parce que les ministères vont devoir fournir un rapport à la ministre des Affaires francophones qui—

M. Guy Bourgouin: Je vais t'arrêter, parce que je pense que le point est important. On réforme la loi, là. C'est le temps de le mettre. On le sait que c'est un gros manque de la communauté. Et là on ne va pas entrer dans—quand on dit : « Oui, c'est bien beau que les ministères ont fait des rapports, mais ce n'est pas défini encore comment »—est-ce que c'est par année? Ce n'est pas clair encore, ça. Mais pourquoi—

M. Carol Jolin: On a demandé l'amendement pour avoir les rapports annuels, premièrement. Ça, c'est extrêmement important que cet amendement-là soit là, parce qu'on s'entend que ça se fasse à toutes les années, que ces rapports-là soient faits. Puis on demande, évidemment, que le médecin en chef soit bilingue. On demande que les services de santé publique le soient également, parce qu'on les a vus travailler avec les systèmes scolaires. Ce sont ces conseils scolaires qui faisaient la traduction parce que les systèmes de santé publique nous disaient : « Ce n'est pas notre responsabilité. » Bien, il faut faire en sorte que ça devienne leur responsabilité, et ça fait partie des demandes qu'on fait au niveau de la loi.

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M. Guy Bourgouin: Ça va sans dire que la communauté est déçue de ne pas avoir ça, parce que s'il y a de quoi qu'on aurait dû apprendre dans une pandémie c'est, au minimum, ça. C'est un « low-hanging fruit » qui aurait dû rentrer automatiquement—

The Chair (Mr. Ernie Hardeman): One minute.

M. Guy Bourgouin: Ces services-là, on en a besoin. Je pense que c'est un gros manque du gouvernement sur ce point-là. Juste pour—you said one minute?

The Chair (Mr. Ernie Hardeman): Yes.

M. Guy Bourgouin: Okay, thank you. Écoute, je ne vais rien que revenir sur l'accès aux services en français partout en Ontario. Ça, c'était une des grosses demandes que—je trouve qu'on aurait eu l'opportunité de le faire, puis on ne l'a pas fait. Juste de dire que le ministre, il peut élargir les services, je trouve que c'est un gros manque. Je trouve qu'on a besoin—j'aimerais vous entendre sur pourquoi c'est nécessaire de donner ces services-là à tous les francophones.

M. Carol Jolin: C'est un pas important dans cette direction-là que la ministre puisse donner des services dans des régions désignées. On sait que 80 % des francophones en Ontario demeurent dans des régions désignées. Il y en a 20 % qui n'ont pas ces services-là—

M. Guy Bourgouin: Écoute, Carol, je ne vais rien que t'arrêter pour une seconde. Je comprends. Je respecte ton sujet là-dessus, mais on—

The Chair (Mr. Ernie Hardeman): Thank you very much. Each time, they don't leave enough time for the answer. But we do thank you.

We will now move on to the independents, as I was going to do earlier. I believe it's MPP Hunter.

Ms. Mitzie Hunter: Thank you, Chair. Merci beaucoup for this great discussion.

I want to direct my questions for more discussion on home care. I really liked how you described the different parts of the sector, the fact that we do have hospitals that sort of move people into the community and that there's a specific need for that recovery and that support. Then, we also have people who need ongoing support in their home so that they can live in their homes and age in place. Of course, our long-term care—there has been a lot of discussion around the need for investments.

I really wanted to get your sense of training, how we support the workers in your particular sector and what effects the pandemic has had on their work.

Ms. Deborah Simon: Thank you very much, Mitzie, for that question. Throughout the pandemic, our sector tried to hold its own in terms of our staffing. Again, as I mentioned at the beginning and during my presentation, our workers are the lowest compensated in both our professionals and our unregulated. Both are not compensated nearly as high as acute care facilities. When it comes to personal care workers, they make 19% less than hospital workers, and when it comes to nurses, on average, they make \$11 less an hour.

We have looked at a lot of training programs. The government has put in a lot of training and development opportunities, and they have included home and community care. But the bottom line is that we will train up our staff, we'll train up individuals to come into our sector, but we will lose them because they will not stay when they have options to support their families with better compensation in other sectors. I don't believe that we want a health care system where people are having to make decisions about where they work as health care professionals based on the amount of compensation they're getting for doing, in many cases, equal or far more complex care.

I think that while your question is important, along with community opportunities for training and development, we also require that funding for their compensation to meet parity so that we can actually get people to stay within the sector that they want to be in.

Ms. Mitzie Hunter: I think that's really important, because we need these workers at every stage in our health care system or health care settings. As we have an aging population, we have to make those investments.

I would support your request. I did actually note in the fall economic statement that it was specifically investing in those who were leaving hospital to go into home care—

The Chair (Mr. Ernie Hardeman): One minute.

Ms. Mitzie Hunter: —and that did leave out a whole section of individuals who require support.

I also really appreciate your acknowledgement of the role of the caregiver. The only way that this actually works is if we pay attention to supporting caregivers; otherwise, people will be moved into long-term care. I've just experienced that with someone in my riding. They want to stay in their home, but they did not have that caregiver support to do so.

Ms. Deborah Simon: Your comment around post-acute care: While it's important—and, of course, we're very grateful for increased funding for home care. We need to get those backlogs of clients moved through the system. But people who are sustaining their care in the community need the same kind of support, and that support will only come through funding through community support services and independent living.

I just want to emphasize that there are people with very acute care needs—people who are on ventilators, people who—

The Chair (Mr. Ernie Hardeman): Thank you very much. We've reached the end of the time for this panel. I thank all the presenters for being here and enlightening us.

We also want to recognize that we have another committee member, Donna Skelly. Please identify yourself and tell us where you are.

Ms. Donna Skelly: Good afternoon, Mr. Chair. It's lovely to see you. I'm MPP Skelly, and I am in Toronto.

The Chair (Mr. Ernie Hardeman): Thank you very much.

ONTARIO TRUCKING ASSOCIATION
REGISTERED PRACTICAL NURSES
ASSOCIATION OF ONTARIO (WeRPN)

ONTARIO LONG TERM
CARE ASSOCIATION

The Chair (Mr. Ernie Hardeman): We'll move on to the next presentation. The first delegation is the Ontario Trucking Association.

Please introduce yourself for Hansard.

Mr. Stephen Laskowski: Good afternoon, everyone, and thank you for having me. My name is Stephen Laskowski. I'm president and CEO of the Ontario Trucking Association.

By way of background, OTA was founded in 1926 and is the voice of the responsible trucking industry in Ontario. OTA is the only trucking association to represent all segments of our industry, and is one of the largest trucking associations in North America.

As you all know, these are very fluid times. There are a number of factors that are coming together which are placing a tremendous amount of stress on the supply chain. While the trucking industry has always prided itself on meeting this challenge, we also need forward-thinking and strong government partners to help us navigate these uncertain times. On this front, OTA has found a strong, stable partner in the government of Ontario. That has allowed our sector to keep the economy rolling in these very challenging times. Investments and initiatives such as those relating to rest stops, bathroom access and building of new infrastructure are just a few recent examples of this support. These efforts have not gone unnoticed by our industry, and we are very thankful.

The pandemic has placed pressures on numerous industries, including ours. In trucking, access to labour continues to be one of our chief challenges. With one of the oldest workforces in the economy, the pandemic has

made things worse, as we have seen an acceleration of retirements over the last two years. Currently, there are over 18,000 truck driver vacancies in Canada, with the lion's share being in Ontario. We expect this number of vacancies to rise to 50,000 nationally by 2023.

As the economic engine of the country, shortages in our sector are always felt most in Ontario, as we compete for market share in a very competitive North American supply chain.

One of the OTA's main asks over the past year has been for greater support when it comes to training the next generation of workers in our sectors. On this front, programs like the Ontario Jobs Training Tax Credit play a critical role in helping us train the talent we need. This tax credit is intended to connect job-seekers with industries like trucking that are hiring, and we definitely are hiring. Initiatives like this are very timely for our industry, and OTA was delighted to see it be extended.

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Once again, I would like to thank the government of Ontario for their continuing support of our industry, and we look forward to working with the government of Ontario to continue to ensure that Ontario has a strong and resilient supply chain.

Thank you all. I'd be happy to take questions.

The Chair (Mr. Ernie Hardeman): The next presenter is the registered practical nurses association. Are we here? There we go.

Ms. Dianne Martin: Hi. Thank you.

The Chair (Mr. Ernie Hardeman): Again, I just want to re-emphasize: Everyone that speaks, if we could ask them to identify themselves to make sure we get the name in Hansard appropriately. With that, the floor is yours.

Ms. Dianne Martin: Thank you so much. My name is Dianne Martin and I am the CEO at WeRPN, the Registered Practical Nurses Association of Ontario. It's always an honour to speak on behalf of WeRPN's members, so thank you for this opportunity to share our views on Bill 43, the Build Ontario Act, and how it can be improved.

There are 50,000-plus registered practical nurses registered to work in Ontario, making them the second-largest group of regulated health professionals in the province. Ontario's RPNs are experts and innovators in nursing practice, leading positive change at the point of care and improving patients' accessibility to quality care across the health system. Approximately 33% of nurses employed in Ontario's health care workforce are RPNs, and almost 95% of those work in direct patient care. We're sort of evenly split between long-term care and hospitals as our major employers, and 20% in home and community care, and 12% in primary care.

With my limited time, I hope to focus on the parts of the bill that directly impact RPNs. But first of all, I want to thank this government for a recently announced \$100-million investment in the career-laddering BEGIN initiative. WeRPN has long been championing this approach to growing new nurses—PSWs to RPNs, and RPNs to RNs—and we are grateful for your trust in us as an organization to deliver this exciting new program that will re-energize

nurses within their professions and do a better job of retaining them in health care.

I have followed the debate on Bill 43 across all political parties. There is an agreement that strengthening Ontario's nursing workforce must be mission critical. Nurses are the backbone of our health system and WeRPN has long advocated for standardized nursing workloads. The establishment in the law to increase the average hours of care per resident per day to four hours by March 31, 2025, and to increase care provided by allied health care professionals to an average of 36 minutes per day per resident by March 31, 2023, is commendable.

While some may criticize the interim annual targets and want the four hours of care to come in place sooner, the reality is that there is not currently an adequate supply of nurses and allied health care professionals today to deliver this level of care per resident. At this point, we are aware of the problem of nursing shortages. We all know it's an issue and, in fact, 95% of Ontarians expressed a desire to see more nurses hired to meet the growing needs in the province, especially for its aging population.

What I would like to talk about is the solution, a made-in-Ontario solution for managing nursing recruitment and retention. WeRPN has created a variety of solutions that will work in tandem to solve the puzzle of what makes a nursing career a career of choice. The puzzle was made up of many large and small pieces, some of which have been resolved, but today I want to address the three most important pieces: pay, workload and educational supports.

First, let's address pay. RPNs were excluded from the ongoing pandemic top-up of \$3 an hour awarded to our closest allies, personal support workers. We work so closely with them and we were thrilled with that, that they received that, but it left RPNs making basically the same wage as the PSWs they supervise, with an incredible level of wage compression. RPNs support fair compensation for PSWs, for sure. But this policy, intended to support the retention of PSWs, unintentionally risks pushing RPNs to leave the profession, clearly because the pay does not reflect the amount of accountability and knowledge that they have to bring to the role.

Wage compression is real. It's having a real impact on RPNs whose wages are already, pre-pandemic, close to PSWs and not at all reflective of the additional education, skill level and responsibilities RPNs are expected to have. So, we strongly recommend making permanent the pandemic pay top-up for PSWs, restoring the wage differential between RPNs and making it retroactive by providing the same top-up to RPNs. We further propose establishing a provincial minimum wage for RPNs that is appropriately proportioned to RNs. After all, RPN work is much closer to the work of an RN than it is to a PSW.

The next piece of the puzzle is workload. Nurses have always worked hard and they expect to work hard, but today's nursing shortage creates a workload that leads to moral distress in nurses when they feel they cannot adequately and compassionately meet the needs of their patients and residents. It's important that we are matching care provider numbers and competencies with resident and

patient needs, to ensure manageable nurse workloads, job satisfaction and an environment that is conducive to attracting and retaining staff. In order to achieve this goal, we recommend that there be legislated staffing and workload standards that promote a culture of safety for the patient, the resident and the nurse, and moving to 75% full-time positions so that nurses don't have to cobble together multiple jobs to support their families.

The last piece is education, and the recent government announcements like the career-laddering BEGIN initiative that I noted earlier, the renewal of the long-standing Nursing Education Initiative—

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Dianne Martin: Thank you—and opening additional seats in college education programs are important first steps, so we're really grateful for the work that's been done. We have two additional recommendations, including streamlining the education process so that nurses do not need to learn the same thing twice when they move ahead in their career; and investing in the apprenticeship incentive programs for RPNs who take on a student on top of their already heavy workloads.

When these three distinct pieces are assembled together, we will have created an attractive work environment for Ontario's RPNs and Ontario's health human resources goals will be met. I thank you for your time and I'm happy to take your questions.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation.

Our next presenter is the Ontario Long Term Care Association. And if I could, I will just mention it again—I'm sure you heard it from the previous presenter. If you could, as you speak, before you start, introduce yourself for Hansard. Okay?

Ms. Donna Duncan: Thank you very much, Chair. Good afternoon. My name is Donna Duncan, CEO of the Ontario Long Term Care Association. We represent 70% of Ontario's long-term-care homes, including non-profit, private, municipal, northern, rural and culturally specific homes, including First Nations homes, across Ontario. I am joined today by Brent Gingerich, chair of the board of OLTCA and chief executive officer of peopleCare Communities, which operates and manages long-term-care homes in southwestern Ontario. We are joined by Ruth McFarlane, vice-chair of the OLTCA board, chair of our health human resources emergency task force, chair of our recovery and modernisation advisory group and chief executive officer of Durham Christian Homes, which operates several non-profit homes in Durham region. We thank you for this opportunity to comment on Bill 43 this afternoon.

The tragedy of the COVID-19 pandemic highlighted the long-standing systemic and structural issues in Ontario's long-term-care system, including old buildings with three or four people living in a room, a critical human resources shortage, long-term-care homes isolated from the rest of the health and home and community care sectors, and models of care, staffing and funding that had

not evolved over decades to support the increasingly more complex care needs of our residents.

To address these long-standing systemic issues, the government has made historic commitments, more than \$11 billion, to increase the hours of direct resident care, to help rebuild outdated homes and to build more homes and spaces to meet the needs of our growing senior population. The province's capital program has approved more than 80 new projects and recently opened applications for 10,000 more spaces, and the first tranche of funding for the additional time for care has begun, allowing homes to hire more PSWs and nurses in a first step towards reaching an average of four hours of care by 2025, and to add more allied health professionals as well. The rebuilding and expansion of long-term-care homes will be one of the largest infrastructure programs ever seen in the province. Adding thousands of new front-line staff will be life-changing for residents and for their care teams.

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These are unprecedented, extraordinary investments in the long-term-care sector, and we are grateful for this government's dedication to improving the care, safety and quality of life of Ontario's long-term-care residents. The scope and scale of these major changes will require all of us working together to support successful implementation. To that end, there are a number of important considerations.

Staffing: Staffing is the foundational element of transforming the long-term-care sector for our residents. As you know, there's a severe shortage of front-line staff across the health system, and long-term care has been particularly affected. Many staff continue to struggle with trauma from the pandemic. The continued staffing shortages significantly affect staff morale and increase workplace stress. Retention is a major challenge. The use of agency staff and the related additional costs is at an unprecedented level.

There are strategies under way to increase the workforce, such as the government's investments in tuition and other supports for new nurses, RPNs and PSWs, but there will be significant gaps in time while the staffing supply is being built. The staffing crisis is a complex problem that requires filtering all legislation, regulation, policy, process and funding through the lens of the impact on our front lines. The funding and staffing models need to evolve. As one example, OLTCA has asked for the proposed Fixing Long-Term Care Act to be amended to allow all regulated health professionals to work to their full scope of practice in long-term care, which is currently not the case.

It is also important to provide homes with ongoing adaptability to allow for entry-level support roles, such as resident support aides, and to expand the roles of allied health professionals. The aide role, which has been permitted under the emergency orders, has been an integral part of homes' staffing plans and has highlighted an important entry point into homes, expanding opportunities for career laddering into the field.

To realize the government's capital redevelopment commitments, it is important to expedite the construction

of approved homes and streamline the approval process so that projects can be approved quickly and rebuilt before their licences expire in 2025. There are also unique redevelopment challenges for rural, northern and urban homes that need specific attention and strategies to ensure their success. There are also inflationary pressures to be addressed such as the rising costs of labour and construction materials.

One significant area that puts capital redevelopment at risk is the major changes to insurance across the globe as a result of the pandemic. Ontario's legislation for liability coverage specific to COVID-19 mitigates some of the risks, but it does not provide sufficient protection. Without further government intervention, such as an insurance backstop, some homes will close because they cannot obtain insurance, and others will not take the risk to redevelop.

Finally, taking on the significant task of redevelopment and financing it, if you are a lender, requires a guarantee of stability and predictable funding. The closure of ward rooms, the move to single rooms, a shift in admissions to accommodate alternate-level-of-care patients from hospitals and community crisis placements, and ongoing COVID prevention and containment costs have undermined the current funding model. This has created cash flow challenges for many homes, especially small, independent homes. It is important to develop a new funding model that adequately reflects these new realities and creates a stable financial environment that is more encouraging for redevelopment and service.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Donna Duncan: These are significant challenges, but we have developed a comprehensive platform with these and other recommendations for change. Together, we have an opportunity to transform our long-term-care system and support our homes in providing a high quality of care and quality of life to residents, now and in the future.

Thank you for your consideration. We welcome your questions.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation.

That concludes the presentations for this panel. We will now start with the questions. We're going to start with the opposition. Who is going to speak? MPP Arthur.

Mr. Ian Arthur: Good afternoon. Thank you so much for coming before committee today. I want to start my questions with WeRPN. I wondered if you would comment on the role that retention actually plays. The recruitment of new nurses is certainly important in Ontario, but if we're constantly training them and losing them to other provinces where they can access higher levels of pay, better work conditions, if Ontario just isn't keeping up, how are we going to retain any of those new nurses that we're training? There was a recent Star article on this. I think it's one of the most important issues facing the sector right now.

Ms. Dianne Martin: Yes, I've read that article in the Star, and it was pretty representative of what I am hearing from nurses. I think that a lot of nurses aren't even, sadly,

going to other provinces; they are leaving nursing. This is the first time in my 43 years in nursing—and I have a mom who's a nurse and a daughter who's a nurse. It's the first time I've seen people leave nursing. Jobs, yes, but a profession, no. That's why we've laid out a plan that really talks about the problems with the wages, the problems with the workloads and the problems with not having a bright future to look forward to, the moral distress that they feel when they can't provide the care properly. It's going to take a lot of focused initiatives to keep them. We could educate nurses all day long, but that's a very expensive proposition, and if we don't keep them when they get here, it will be a waste of money.

Mr. Ian Arthur: Thank you very much. It's certainly, I think, for my friends who are nurses, a calling or a profession, like you say, and not just a job. The people I know who go into it certainly view it that way, that they want to spend their lives helping others, and that's fundamentally important.

I want to, on the wage levels, talk a little bit about Bill 124 and the 1% wage cap. That was a bill that was brought in pre-COVID and pre- the shifts we're seeing in inflation. Would you talk about the ongoing legacy of that if we do have increased inflation in the coming years? Certainly the federal government is kind of repositioning themselves in terms of what their mandate is going to look like and what they need to do to keep that under control. Would you just comment on what it's going to be like to be a nurse capped at 1% if inflation continues to climb?

Ms. Dianne Martin: Yes, absolutely. First of all, it's sort of demoralizing when you are included in legislation that doesn't even include other people that you work closely with and identify closely with. Police officers, for example, and nurses see ourselves as partners in a community. That makes it really hard to feel like, "I'm going to work in a really risky, difficult situation, but I'm doing it for a bigger reason." That gets really difficult under this sort of legislation.

But, also, the education level is very high. A lot of people are surprised when they learn how much knowledge it takes to be a nurse. Then to fall behind in society in terms of your financial well-being while being such a knowledgeable and educated profession is also demoralizing.

Mr. Ian Arthur: Thank you very much. I'm going to move over to the long-term-care association now. Thank you so much for your comments, Dianne. I appreciate it.

I want to talk about the changes in the mandated care and get your comments on that. First of all, it's an average of the time for care, and also it's a target. It's aspirational in terms of the care provided to residents. There's been a lack of clarity or a lack of information on the government's part about what happens for the long-term-care homes that do not actually meet that standard of care. There doesn't seem to be any sort of [*inaudible*]. It looks really good on paper. Would you comment on how enforceable you see that and if you think it's actually important to go beyond having that as a target?

Ms. Donna Duncan: Thank you very much, MPP Arthur. We are very supportive of the government's approach for a provincial average of four hours of care. Our concern with something more specific is that it would get locked in rigidly, and those individuals who require more than four hours of care would not get that advanced care, and others who may require more supportive living and perhaps less intensive supports would not benefit either.

We would like to, ultimately, in the future move to a model that is more customized around the specific needs of homes, and we've recommended that the government allow for the development of new types of homes. For instance, some of our members who are hospitals are recommending or are building proposals to offer long-term-care homes that are more mental-health-and-addictions-oriented for different populations, or developing homes for younger populations who may have recovered from a stroke or an acquired brain injury—so, to start to look at more differentiated models. Look at using allied health professionals in different ways, at stronger partnerships with hospitals and paramedics, but recognizing that every individual who lives in long-term care has very diverse and specific needs. We want to ensure that the models of care are built around their needs for living and for care.

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Mr. Ian Arthur: Certainly, and I appreciate that. The need for differentiated models, I think, is clear. I don't think anyone would really argue with that. I'm more wondering—part of what we saw in COVID was the stark difference between best and worst actors, unfortunately in particular in your sector. We had certain homes that performed exponentially worse—

The Chair (Mr. Ernie Hardeman): One minute.

Mr. Ian Arthur: —in a truly tragic and devastating way, where the death toll was significantly higher, for instance, in private long-term-care homes than public and not-for-profit. And so, when you have a target that is aspirational, that they're supposed to hit, but without the kind of stick if they fail to hit that average—I mean, you're here representing the sector and I know you certainly want to see everyone in the sector succeed, but those worst actors are going to drag you down as an association. So how would you approach the ones that fail to meet a target that is, frankly, aspirational and not actually mandated or legislated in a manner that's enforceable?

Ms. Donna Duncan: Thank you. As we look at the devastating and tragic loss of life in homes over the last 20 months, sadly we saw—

The Chair (Mr. Ernie Hardeman): Thank you very much.

Mr. Ian Arthur: I'm sorry.

The Chair (Mr. Ernie Hardeman): You'll have to answer the rest of it in the next round. That concludes the time for this round. The next one is the independent member, and who is that going to be? MPP Hunter.

Ms. Mitzie Hunter: Thank you to all of the presenters. I'm wondering—I want to continue the discussion with our nurses. I want to thank you for the work you're doing in such challenging times. I know that we need to do more

to thank your members on the front line. We don't have a health system without our nurses at all spectrums of the profession, and so I just really appreciate that. I appreciate the advice that you've given to government to think through some of the things that they're doing with respect to policy and how it affects—so the wage compression really should be addressed because it's very natural that when you raise one level, it affects another level. That, to me, is something that needs to be addressed, and also making these wages permanent so that there is not this uncertainty while we expect everything from those that are doing the hands-on care. I know that Bill 124 is also something that the sector has spoken up about. But really it is about the health and the well-being of people who work in the sector and the retention of experienced people at a time when we have so many complex needs.

And so, I'm wondering about the solutions that you see, and you've offered many, many good ones here today. But, the government is here; they are listening to your presentation. What advice would you have on the recruitment and the retention of nurses within the band that you represent?

Ms. Dianne Martin: Thank you for that question, MPP Hunter. Like I said, there's not a magic panacea. There's not one little thing we can do and it'll all be done. We're going to have to come at it from several angles. Since you kind of opened the door for me to say this, I will say that I do sometimes wonder, the burden that is placed upon us as being a primarily female profession in that when—I'm married to an engineer. A lot of the ways in which we are compensated, thanked, appreciated and listened to are not reflective of the same way his profession would be. I think that recognizing the professionalism of nurses, where we stand in terms of our education and responsibilities, and really considering why anyone would stay in a profession that requires that much knowledge and responsibility and yet isn't really recognized in ways that normal professions are—I think that's a change in attitude that would be great if we could do that.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Mitzie Hunter: I would definitely say that the pandemic has been very, very hard on women and on women professions and work. I agree with you, and I see people exiting. This is the concern in an area where we already are facing shortages and we have increased demand.

I do want to reiterate that we have about \$1 billion in unspent health care dollars. The FAO updated our reports just this morning on the second-quarter spending. So we're not spending health care dollars, and yet we're not investing in our nursing area. I think that's wrong and we should be doing better for the people who have helped stabilize and who help heal. Thank you for all that you and your colleagues do.

Ms. Dianne Martin: Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much for that, but that ends that time. We will now go to the government. MPP Smith.

Mr. Dave Smith: Thank you, Chair. I appreciate that. Donna, I'm going to start with you. You were talking a little bit about the staffing crisis. You basically thanked us

for the increase in funding to ramp up staffing to an average of four hours per resident in long-term care, but you also mentioned that it was ramping up. One of the things that the opposition has attacked us on is they've said that we should be giving that much money right now and just hire everybody right away. I'm not in the long-term-care industry; is that actually something that can be done, or do we have to train more PSWs, more nurses, more RNs and RPNs combined in order to get to the point where we can have four hours of care?

Ms. Donna Duncan: That's a great question, MPP Smith, and I can build on WeRPN. We have a staffing crisis. We have people leaving the sector. We need to replace the employees who left the sector over the last 20 months as we build new. We believe that this is a manageable target right now, but we are struggling in our recruitment and retention initiatives.

I'm going to pass the floor to Ruth McFarlane, because Ruth has actually been very involved in this, both in her own home and staffing a brand new home, as well as chairing our task force. Ruth?

Ms. Ruth McFarlane: Several years ago, our members identified that human resources was the top challenge that we had. We really do need to make some bold changes right now in enabling our staff to work to full scope of practice, but also in looking at the flexibility and the adaptability that was provided by the emergency orders. We should perhaps turn our minds to the resident support aides we've actually brought into our homes to be able to stabilize our sector and be able to take care of our residents and how we might be able to on-site micro-credential them to enable them to be on the floor and then train on the floor. It is wonderful; the investments are wonderful in order to be able to educate PSWs, RPNs, RNs, nurse practitioners and the allied health professions, but we really do have some pressing need now.

As you know, each resident has individualized holistic care needs and each resident is distinct. Every resident of the population is distinct too. So there is no one cookie-cutter solution that will work in order to support the diversity and quality outcomes that we want in long-term care.

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Mr. Dave Smith: Along similar lines, Brent, I note that you guys have projects in the works right now with Trent University that will be coupled with their centre for aging and their nursing program.

Is this something that we should be expanding in other universities and colleges as a way to attract people into long-term care rather than just into hospital care; for example, if you're coming through as a nurse or an RPN or a PSW or a nurse practitioner?

Mr. Brent Gingerich: First of all, it's great to see WeRPN here. We love our RPNs in long-term care. They're definitely the backbone of what we do. They're a really important part of our care teams.

To answer your question, yes, the model that peopleCare has proposed—and working with on it, Peterborough's Trent University—will be excellent. There are a few other

similar teaching-type long-term-care homes, and it's going to be an incredible model to give students that exposure to the sector and encourage them to dedicate their careers toward it.

Definitely, what we need in the sector is bold leadership and vision and new models, and to attract people to the sector.

Mr. Dave Smith: Chair, how much time do I have left?

The Chair (Mr. Ernie Hardeman): We have two and a half minutes left.

I would just like to ask Brent and Ruth to introduce themselves for the Hansard.

Mr. Brent Gingerich: I'm Brent Gingerich, chair of the Ontario Long Term Care Association.

Ms. Ruth McFarlane: I'm Ruth McFarlane, vice-chair of the Ontario Long Term Care Association board of directors.

The Chair (Mr. Ernie Hardeman): Thank you very much.

MPP Smith, you now have two minutes and 12 seconds.

Mr. Dave Smith: Dianne, I'm going to switch over to you.

My sister started off as a PSW and became an RPN, and she is now an RN and actually is assistant director of care in a long-term-care facility. One of the things that she has noted over her career is that it's very cyclical—there were times when the sector wanted more RPNs and less RNs, and conversely, there were times when the system wanted more RNs and less RPNs.

Do you have any suggestions on how we could approach that in a way, moving forward, that we don't have those cycles and it is predictable and sustainable?

Ms. Dianne Martin: Yes, I do. In fact, I copyrighted a model of nursing that looks at decision-making around what care provider you need so that we can end up with the right number of RNs and the right number of RPNs, in a predictable way that advances with the education of those people as they gain education.

However, when a shortage happens or a surplus happens—in the 1990s, nurses could not get a job anywhere, and now there's a shortage. So that sometimes dictates how we use people; it shouldn't, but the reality is, there are patients in beds who need care and we deal with it that way.

But once we start treating it like a profession, we are going to start to see that there are answers to this issue based on the needs of patients, clients and residents and knowledge bases of each category of nurse.

I designed something that does that. I use it in organizations across Ontario—big hospitals like St. Mike's, small hospitals like Stratford hospital or Listowel hospital—and actually, it's used around the world now.

So there are answers to this. It just requires a lot of work, because we're a profession; we're not making widgets in a factory here—but very astute to note that for your sister, absolutely.

Mr. Dave Smith: Chair, how much time do I have?

The Chair (Mr. Ernie Hardeman): It's down to four seconds, so I don't think you can get another question in.

Now we'll do the second round, and we'll go to the official opposition. MPP Arthur.

Mr. Ian Arthur: I just want to pick up—we ran out of time last time, so I want to talk with the LTC association about the lack of enforcement and the worst actors. To reiterate what I'm talking about with the worst actors, these are the ones where seniors were left lying in their own feces in their bed. They were dying of dehydration. Your job is to represent your entire industry, but how do you deal with that lack of enforcement? Because those worst actors are not going to go away unless they're made to go away.

Ms. Donna Duncan: Thank you. To be clear, we've been through devastating loss in our entire sector over the last 20 months in Ontario and around the world, and we have zero tolerance for neglect—zero tolerance. We are supportive of the government's new initiatives around enforcement and compliance and are very supportive of new initiatives as we think about the future of long-term care. Our number one priority is our residents and working together across the entire sector to ensure that everyone receives the safe care that they deserve. We want to ensure that lives lost were not lost in vain.

It's going to take all of us working together to deal with this urgent crisis in staffing. If we don't have people to care for our residents, then we are doing a disservice to everyone, quite honestly. We have to deal with these old buildings, and we've got to be realistic around how we're going to support one another and ensure that we are investing in the measures that will meet the needs of our aging population. The population over 80 will double in the next 13 years in Ontario alone. We need to make sure that we are using taxpayers' dollars wisely. To replace our long-term-care homes, to the private sector, would take approximately \$40 billion. We would prefer to see \$40 billion put in front-line care, recruiting a workforce, differentiating our care, ensuring that we're investing in the broader health care system and that we are moving with great urgency and expeditiously together.

Our members are all working together. Our plan has been developed by our small non-profit homes, our First Nations homes, together with our health care sector partners, the Ontario Medical Association, nurses, our residents and our families. Our steely focus is going to be on, how do we make this better, and how do we make it better today and make sure that the tools and supports are there today? Thank you.

The Chair (Mr. Ernie Hardeman): MPP Fife.

Ms. Catherine Fife: I'm just going to pick up where MPP Arthur took us. Donna, correct me if I'm wrong, but in your opening comments, I think you referenced the fact that the government had protected long-term care from liability during the height of some of the painful situations that played themselves out. You said something like more is going to have to be done, because we will still lose some homes. But I also wanted to connect that to the fact that the government also made long-term-care homes whole. There was a financial protection, if you will.

I'm trying to get a sense of how that impacted the long-term-care homes in your association and why you think that even though the government is protecting you from liability, more will have to be done or you will lose more homes. There are just two issues that are—please go ahead.

Ms. Donna Duncan: The government measures still allow for due process for families to seek remedies, and absolutely, the government has now introduced other tools where there's neglect or abuse—zero tolerance for neglect and abuse. The challenges that we're facing today with insurance have to do with the global insurance market and reinsurance market. We were successful in securing a moratorium on the withdrawal of insurance in long-term-care homes. We are actually struggling because we're finding that it's our small non-profit homes that are most vulnerable, where because of the pandemic, because of the removal of liability coverage for infectious diseases and the removal of insurance coverage for a pandemic, our non-profit boards are exposed and our non-profit homes are struggling to secure financing through lenders because of the lack of insurance coverage, so—

Ms. Catherine Fife: I'm sorry to interrupt, but I have so little time.

1540

I'm happy that you raised the issue of insurance, because the last finance minister, who succeeded the first finance minister, struck a committee to look at how insurance has impacted all sectors: the not-for-profit sector, the business sector. We're seeing massive increases in premiums and really, it's essentially the Wild West out there. So this is good feedback for us as a committee to hear from all sectors. I'm sure the trucking industry has also been negatively affected by an increase in insurance during this period of time. So that is really good to hear, and thank you for clarifying the “made whole” piece, and then also the liability.

I'm just going to go over to Dianne Martin very quickly for RPNs. Just like MPP Smith, I have a member of my family who's actually going from RPN to RN. She describes this, Dianne, as the most challenging obstacles to upskill, even though she's practising as an RPN and active in the field, and now going back to school.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Catherine Fife: In her opinion, they've made it as hard as possible. Are there ways for us to streamline this, from RPN to RN? Because we need both, don't get me wrong, but I know a number of RPNs have just had it. They've hit the wall and they want to move up in the channel.

Ms. Dianne Martin: Yes. First of all, a lot of them move up because they want more choices. I went from RPN to RN. I loved being an RPN, but I wanted to experience some new things.

Yes, we have to streamline the courses. Previously, it was because the colleges and universities were siloed, and there was a lack of respect among them, so the universities weren't accepting certain things. Now I'm seeing a change. Colleges can now be degree-granting, and also with some

new funding. I have a meeting next week with Western University and they want to talk about the new program, which they've created that is much shorter in length and recognizes, for some people—

The Chair (Mr. Ernie Hardeman): Thank you very much. That does conclude the time.

We'll move along to the independent. MPP Hunter.

Ms. Mitzie Hunter: Thank you, Chair. I wondered if the folks from the Ontario Long Term Care Association could just speak to the learnings that have happened within the sector and how we can better support the sector. We've talked a lot about staffing; do you support that permanent wage increase for PSWs? I'm not sure if I heard that today. And anything else other than the staffing component that you felt the sector has learned from what we just experienced—and are still going through, frankly—with respect to the pandemic.

Ms. Donna Duncan: Thank you. The pandemic really laid bare the challenges in the sector. There wasn't a recognition as to who our residents are and what their needs are. There wasn't a full recognition of the critical nature of the staffing crisis and the pressures. Dianne from WeRPN has spoken about the wage compression issues with our RPNs. We are losing staff.

We've got to make sure that as we're making changes in policy, whether it's in funding or thinking about wage enhancements, there's always a domino effect. It's going to be important for us to learn from these lessons and make sure that we're not cannibalizing either other parts of the health care system or, in fact, professions as we go forward. It really is this unique opportunity for us to look at how we better collaborate with our acute care, home and community care and primary care partners and rationalize the use of our scarce human resources. It really is a critical time.

We have also learned that we have 20,000 internationally educated health professionals who haven't been able to transition into credentialed roles into our homes. I don't think there's a full awareness of the size and scope of that opportunity that we have that is, as yet, unrealized. And we know that we have to redevelop our homes as quickly as possible, and we are facing tremendous pressures in northern, rural and urban centres, and we're running out of time—so, the sense of urgency that we all have to work together to respond to the HR crisis as well as the physical plant and make sure that we are focused on quality and outcomes, that we are focused on moving away from cookie-cutter approaches to care and that we really are prepared to meet the needs of our aging population today and to move with great boldness and speed. Thank you.

Ms. Mitzie Hunter: Thank you, Donna. That was an excellent summary.

I do want to also ask the Ontario Trucking Association a question, too. My dad was a trucker. That lifestyle was part of my home as I was growing up, and I just know how hard our truckers work and the critical role they play in our supply chain and every aspect of our economy, which we don't notice until for some reason it's disrupted.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Mitzie Hunter: You did talk about even just things like bathroom access. We didn't really think about that in the beginning, and they were forgotten. How do we make sure that that does not happen as we move forward, that we keep our truckers at the forefront?

Mr. Stephen Laskowski: Thanks very much, MPP Hunter. I appreciate the question. The government of Ontario really stepped up for bathroom access when this all started. There was moral suasion, and then the government actually introduced portable bathrooms at weigh scales for truck drivers, and the ONroutes, and then the recent introduction by Minister McNaughton of making it mandatory for people we deliver to, to provide access to washrooms. Out of a lot of horrible stuff with COVID—and I don't want to say there's a silver lining in this, because it would just not be the appropriate word, but out of all of this, the light shining on that—

The Chair (Mr. Ernie Hardeman): Thank you very much. That does conclude the time.

We'll now move on to the government. Mr. Bouma.

Mr. Will Bouma: Chair, through you, I'd like to ask a version of one question to both the trucking association and WeRPN, because I really appreciated how you both brought out the work that our government has done in order to bring more employees online and how important that is, whether that's through development, recruitment and skills training and retraining. You both mentioned some of those things. I was wondering if you could briefly speak about other ideas that you might be able to bring to this table about good ideas and how to solve some of the labour issues that we struggle with—well, it's through the entire province, but specifically in your sectors.

I'll start with Stephen. I wanted to give you a chance to say it, because you've been sitting there patiently and haven't had a chance to say a whole lot, so if I could start with Stephen Laskowski.

Mr. Stephen Laskowski: Thanks very much for the question. I guess it's twofold. One, the industry itself has to continually compete in the labour market and recruiting. We actually launched a national campaign that will be going on for at least 36 months, today. So that's part one.

With regard to the government role, there are two roles: improved access to training dollars, which we mentioned already, and then improved access to immigration. We will be working with the province of Ontario with regard to improving access to immigration for truck drivers, but through what we would like to see as the known employer model, where new people coming to Canada will thrive. They will go to trucking companies with the appropriate labour records, safety records etc., and thrive in the industry and receive the proper training.

I think the short answer is, industry has to do some things, and we need to work with government on continuing access to training dollars and immigration, but through trusted employer models.

Mr. Will Bouma: I appreciate that very much, Stephen.

Dianne, then, to you: You've talked about laddering and how to improve and how to keep people interested in

developing in their chosen career and skill field. I was wondering if you had any other bright ideas that we could take back.

1550

Ms. Dianne Martin: First of all, the career laddering is going to really—the number of calls we got following the announcement of that program was massive. People want to have these opportunities. As I said before, we have to see nursing as a profession like any other profession, because that's what it takes to get in.

But also I will say one more thing: There's no place in health care for turfism. For example, the RPNs have to realize that we're not always the best care providers; that PSWs are incredibly valuable, and others as well. I think when we all realize that—the respect needs to be shown to everyone. We have to deal with the wage compression. We have to deal with all of those things that feel like a lack of respect to each profession. That's going to be incredibly important.

Mr. Will Bouma: I really appreciate that, actually. I love being able to make connections and build bridges and work together. I'm a volunteer firefighter at home. I was talking to professional firefighters last week, but I also speak to paramedics and to the police, and when we're all on the scene together, we each have our roles to play, and the mutual respect has to absolutely be there. You're preaching to the choir when you say that. I appreciate that very much.

Ms. Dianne Martin: Excellent.

Mr. Will Bouma: I wanted to move on to Donna Duncan. Donna, we were debating this in the House last week. I was intrigued by the opposition plan to nationalize all for-profit long-term-care homes. I was wondering if the Ontario Long Term Care Association has a comment on that plan to, as they say, take profit out of long-term care and what that could do to the industry.

Ms. Donna Duncan: Thank you. MPP Bouma, homes are not able to profit from care the way the funding model is structured. It is not permitted. We are very concerned that if the focus is on dismantling the existing system rather than building a new one, much time and resources will be diverted from the rebuilding of our long-term-care homes when we know, as I mentioned earlier, that the population over 80 will double in Ontario and that the needs of our aging population are only going to escalate.

In conversations with our global colleagues, including our partners in Australia—our partners in Australia were subject to a royal commission throughout the pandemic that preceded the pandemic, and their homes are nationalized. They are regulated federally. They would argue that they have exactly the same issues that we have. In fact, the bigger issue is one of ageism and the failure of governments around the world to recognize and acknowledge the needs of seniors and our aging population and ensuring that we continue to invest in and support them through their aging journey, including in home and community care, as well as our long-term-care sector.

What is the problem we're here to solve today? We know what the issues are around infrastructure, those old

homes. We know that we have a critical staffing shortage. We know that our seniors have more complex needs and we know that that's really where we need to be working together to stabilize.

Mr. Will Bouma: I was hoping you could give me your opinion, then, because in conversations that I've had and working with the former Minister of Long-Term Care, it seemed to me that the issue with building and redeveloping long-term-care homes was that the funding model that the province of Ontario had was flawed in such a way that basically by the time you built your long-term-care home, the construction costs were higher than what the actual value of that long-term-care home was. We needed to change that formula so that a long-term-care home or a municipality or a not-for-profit could actually go to a financial institution and get the financial backing using a funding formula from the province of Ontario.

The Chair (Mr. Ernie Hardeman): One minute left.

Mr. Will Bouma: I'll give you the full minute to comment on that and what happened with the changes that we made to the funding formula, if you could, please, just to help us understand that better.

Ms. Donna Duncan: Thank you. I'm going to ask Brent Gingerich to respond to the question. Thank you.

Mr. Brent Gingerich: Thank you for that question. The government provided significant increase into our capital funding formula and created tiers, depending on the part of the province you were building in, and really unlocked and enabled construction in the sector again.

In addition to what Donna said about Australia and some of the issues that were highlighted in the pandemic, the age of the infrastructure we felt was the actual largest contributor to problems during the COVID pandemic: residents in four-bedroom ward rooms still. It's really unacceptable as a type of accommodation. Really, these homes should have been rebuilt way before this government took over.

The Chair (Mr. Ernie Hardeman): I wish we had more time, but we have reached the end of it. Thank you very much for your presentations. That concludes this panel. Thank you all for joining us today.

L'ASSOCIATION DES JURISTES
D'EXPRESSION FRANÇAISE
DE L'ONTARIO
CANADIAN MENTAL HEALTH
ASSOCIATION, ONTARIO

The Chair (Mr. Ernie Hardeman): We'll move on to the next panel. The first one is l'Association des juristes d'expression française de l'Ontario. If I say it real fast, I don't have as much trouble with it. With that, we'll turn it over. As with all the others, I just re-emphasize that everyone that's speaking introduce oneself first so we can get it on the Hansard. We also ask for your consideration, and going forward, each section will present for seven minutes and then we will have questions divided as we have for all of the others. We thank you very much for participating.

My apologies for not being very good at the French part of it, but I will put my earphones on to make sure I don't miss a word. So thank you very much for being here today. With that, we'll turn it over to you.

M. Marc Sauvé: Mesdames et messieurs les députés, bonjour. Je vous remercie d'avoir invité l'Association des juristes d'expression française de l'Ontario, ou l'AJEFO, à témoigner aujourd'hui. Je suis Marc Sauvé, le président de l'AJEFO. Je suis aussi accompagné aujourd'hui par M^{me} Alexandra Waite, la directrice générale par intérim de l'AJEFO.

L'ensemble de la refonte de la Loi sur les services en français, présenté à l'annexe 13 du projet de loi 43, est une avancée importante pour la communauté franco-ontarienne. Au courant des prochaines minutes, nous souhaitons, dans un premier temps, souligner certaines modifications importantes à la loi, que l'AJEFO appuie; dans un deuxième temps, proposer quelques changements au projet de loi; et enfin aborder les suivis essentiels au projet de loi, notamment la rédaction des règlements, ainsi que le recrutement de main-d'oeuvre francophone et bilingue qualifiée.

D'abord, l'AJEFO reconnaît des modifications importantes à la loi dont l'enchâssement de l'offre active à la loi, une imputabilité accrue devant la loi et l'ajout d'une obligation de réviser la loi à chaque 10 ans.

Pour l'offre active : trop souvent, les francophones acceptent passivement les services en anglais—parfois, parce qu'ils sont gênés de demander des services en français, ou parce qu'ils craignent ou sont effectivement servis plus lentement, ou même parce qu'ils ne connaissent pas leur droit d'être servis en français. Les mesures aux fins de l'offre active permettront de porter la disponibilité des services en français à l'attention des francophones, qui en ont le droit. Mais l'AJEFO note qu'aucun délai n'a été mis en place pour assurer l'exécution de cette offre active, et on s'intéresse à savoir comment et quand le gouvernement prévoit mettre cela en place.

L'AJEFO reconnaît aussi la création d'un mécanisme de reddition de comptes, prévu au projet de loi. Plus particulièrement, l'article 10 de l'annexe 13 créerait une nouvelle obligation pour les ministres de faire rapport au conseil exécutif sur la mise en oeuvre de la loi et la qualité de services en français dans leur ministère. L'AJEFO est d'avis qu'une mise à jour annuelle des progrès est nécessaire. Nous proposons qu'une mention de la fréquence annuelle soit faite à l'article 10 de l'annexe. Enfin, nous sommes d'avis qu'un examen périodique de 10 ans, prévu dans la loi proposée, est crucial afin d'appuyer le développement légitime de la francophonie ontarienne.

En ce qui concerne les changements qu'on propose, l'AJEFO souhaite proposer quatre changements à l'annexe 13 du projet de loi 43, soit l'ajout d'une section « Objets et principes », la définition de « l'institution de la législature », la version française de tous les nouveaux règlements, et la désignation bilingue du poste de l'ombudsman de l'Ontario.

D'abord, l'AJEFO aimerait voir l'ajout d'une section « Objets et principes » à la Loi sur les services en français.

Ce type de section est courant dans les lois portant sur des questions sociales et constitutionnelles et sert de guide au niveau de l'application de la loi. Nous étions surpris de voir qu'une telle section n'est pas prévue au projet de refonte de la loi. La section « Objets et principes » que nous proposons sera présentée dans le mémoire écrit par nos amis de l'AFO, qui ont témoigné plus tôt aujourd'hui. Celle-ci pourrait vous servir à titre d'exemple.

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Deuxièmement, nous croyons qu'il est aussi nécessaire de préciser la définition du terme « institution de la législature » dans la loi. Les organismes gouvernementaux et les institutions de la législature sont assujettis à la Loi sur les services en français. Bien qu'une définition de « l'organisme gouvernemental » est prévue à la loi, la définition de « l'institution de la législature » est absente. L'AJEFO est d'avis que cela rend la portée de la loi ambiguë. Une définition exhaustive a été suggérée dans la proposition communautaire de l'AJEFO et de l'AFO et vous sera présentée dans les mémoires écrits par nos amis de l'AFO.

Par ailleurs, l'AJEFO souhaite que les ordres professionnels créés par une loi provinciale soient également mentionnés dans la définition et assujettis à la loi. L'AJEFO a récemment intervenu à la Cour divisionnaire à l'affaire Bélanger contre l'Ordre des médecins et chirurgiens de l'Ontario. Dans cette affaire, le D^r Bélanger avait demandé une audience bilingue devant un sous-comité disciplinaire de son ordre. Cependant, faute de suffisamment de membres bilingues—un manque de décideurs bilingues—l'audience disciplinaire avait procédé avec l'aide d'interprètes. À la Cour divisionnaire, l'AJEFO a présenté l'argument que l'ordre est une « institution de la législature » au sens de la loi et aurait dû donc assurer que le D^r Bélanger se fasse comprendre et puisse s'exprimer en français sans recours aux services d'interprétation. Malheureusement, la cour n'a pas tranché cette question. Nous ne savons toujours pas ce qu'est une « institution de la législature » au sens de la loi, et ainsi nous proposons que la définition de l'AJEFO et de l'AFO, qui comprend l'ajout des ordres professionnels, soit ajoutée au projet de loi.

Depuis 1980, toutes les lois doivent être bilingues. Nous souhaitons qu'il en soit de même pour les règlements. L'article 5 de l'annexe 13 du projet de loi donne la possibilité au lieutenant-gouverneur en conseil d'exiger l'adoption des règlements en français et en anglais. Le projet de loi devrait plutôt prévoir que tous les règlements futurs soient pris en français et en anglais, sans exception, dès la sanction royale du projet de loi.

Quatrièmement, le retour du commissariat indépendant demeure l'objectif de la communauté franco-ontarienne. Vu l'absence de ceci dans le projet de loi, l'AJEFO souhaite au minimum avoir la désignation bilingue du poste de l'ombudsman de l'Ontario dans l'annexe 13 du projet de loi 43. Il est vrai que l'ombudsman actuel, M. Paul Dubé, est un francophone, mais l'AJEFO se préoccupe toutefois que le prochain ombudsman—

The Chair (Mr. Ernie Hardeman): One minute.

M. Marc Sauvé: —ne puisse s'exprimer en français. Actuellement, il n'y a rien dans la Loi sur l'ombudsman qui mandate que la personne qui a la responsabilité de veiller aux droits des francophones de l'Ontario puisse parler ou comprendre le français. C'est du non-sens. L'AJEFO demande au gouvernement de désigner le poste de l'ombudsman bilingue et propose que cette modification à la Loi sur l'ombudsman soit insérée dans la modification corrélative de l'annexe 13.

Enfin, la communauté franco-ontarienne rêve d'avoir accès aux services en français partout en Ontario. Le gouvernement a refusé notre recommandation d'enlever les juridictions bilingues. Il se justifie en disant qu'il y a une pénurie actuelle dans la main-d'oeuvre francophone et bilingue qualifiée. Le 5 novembre dernier, le ministère des Affaires francophones a annoncé une stratégie sur les services en français qui comprenait l'augmentation de la main-d'oeuvre francophone et bilingue, un plan très précis pour augmenter la main-d'oeuvre bilingue, tels que des investissements dans les écoles, collèges et universités bilingues, une immersion [*inaudible*] notre règle—

The Chair (Mr. Ernie Hardeman): Thank you very much, and maybe we can get the rest of it in the questions coming forward. We will now start with the questions.

Interjection.

The Chair (Mr. Ernie Hardeman): Oh, there's another delegation here. First of all, we hear from the Canadian Mental Health Association. With that, the rules apply the same. If they want to come forward, we again ask that identify yourself first so we can make sure we get the name in Hansard, and the floor is yours.

Ms. Helen Fishburn: Great. Thank you so much. I'm the CEO of the Canadian Mental Health Association in Waterloo-Wellington. Today, I'm honoured to represent the CMHA Ontario branch, specifically my colleague Camille Quenneville, who is the CEO of CMHA Ontario, who would typically attend this hearing, but unfortunately not able to be here today. I'll do my very best to answer any questions to the committee on her behalf.

CMHA Ontario and the network of nearly 30 CMHA branches province-wide are supportive of the government's budget investments for the community mental health and addictions sector. In particular, we're pleased with the commitment of \$12.4 million to support the mental health of our front-line health care workers. Along with our health care partners, we are seeing our staff really struggling with stress and burnout. As the CEO of the largest CMHA in Canada, this is one of my biggest worries for my 450 staff who have had to manage a much bigger demand for service since March 2020. It's a very heavy load to carry. We're pleased to collaborate with the government to use this funding to create psychological supports for these front-line workers and health care administrators.

The budget has also provided \$7 million to help another unique but important population: farmers. Again, CMHA Ontario is very pleased to leverage this government investment. We will create crisis response, counselling and mental health promotion services for rural and agricultural

communities. We have a large farming community in my area, in rural Wellington and in the rural parts of Waterloo region. This support will ensure farmers who don't typically reach out to us and who often suffer in silence will get the actual hands-on support in ways that they need.

Additionally, we'd like to recognize the continued investment in structured psychotherapy and in children and youth mental health during the pandemic. These proactive investments will help to address mental health and addictions challenges upstream in order to prevent a crisis later in life.

It's been a difficult 20 months during the pandemic. Many Ontarians are struggling, particularly those with pre-existing mental health and addiction issues. In my 20 years at CMHA, I've honestly never seen anything like the need that exists right now. CMHA Ontario public polling shows that Ontarians are 57% lonelier compared to when the pandemic began. Also, 80% believe that we'll have a mental health crisis on our hands once the pandemic is over. Also, a third of Ontarians consider their state of mental health as very good or excellent, which is a decrease from 52% when the pandemic began. It's no surprise at all that demand for CMHA services across the province is at an all-time high.

Here in Waterloo-Wellington, we've demonstrated a 40% increase in our calls and referrals. Prior to the pandemic, we had 3,500 to 4,000 calls per month into our access service, called Here 24/7. Since the pandemic, our new baseline is 6,000 to 6,500 calls per month. Another stark example is the demand for crisis counselling and safe or stabilization beds, which has doubled at some of our branches.

In spite of these increased pressures on our system, we're thankful that the topic of mental health is so prevalent at Queen's Park. That's been the silver lining of this pandemic for us. The government is to be applauded for its investment into the mental health and addictions system.

However, the pandemic has also exposed a long-standing issue in our sector. That's the immense need for base funding increases for the community mental health and addictions sector. Even before the pandemic, CMHA branches were struggling to meet the demand. We haven't received base increases that other parts of our health system have received. What funding we receive is often tied to specific programs, rather than the rise in operating base costs. This forces us to make difficult decisions on the program and services side. It also affects our human health resources, particularly right now.

Like other health care providers, we're losing dedicated and talented staff not only to stress and burnout, but to higher-paying jobs. Registered nurses, case workers and crisis staff are leaving to other health care providers that pay between 15% and 30% more. At our CMHA Toronto branch, for example, more than 65% of resignations over the past two years have been salary-based. If it's not salary, they're leaving for work that is better resourced for other providers.

I'd like to stress that this long-standing funding inequity for the community mental health and addictions system

has existed for many years and makes our community-based sector very vulnerable at a time when we have the highest volumes and needs in our history. But this government has created a necessary momentum for our sector, and we really look forward to working with Queen's Park to close this inequity gap. A stably funded sector will allow us to retain staff, reduce wait times and deliver the quality and safe services that people in Ontario need right now.

I'd like to shift gears for a moment and speak about the rise in addictions and the need for additional investments in this area. It's been well documented that opioid-related deaths have reached an all-time high during the pandemic. We've also seen a rise in alcohol and other substance use since March 2020 as well. In fact, many of our branches, especially those in northern Ontario, are supporting clients with substance use issues more so than mental health challenges caused by the pandemic. This is not surprising. The conditions of the pandemic have really created the perfect storm for addiction issues to flourish. It's been heartbreaking to see these tragic losses and deaths as well as the damage created by the increased rates of substance abuse, and we know that these are preventable.

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Looking ahead, we are supportive of the province's Roadmap to Wellness and we'll steadfastly help with its implementation. The road map, as well as the recommendations made by the select committee, are positive strategies to guide our improvement.

CMHA Ontario and our sector partners are pleased to work with the centre of excellence to develop appropriate standards and data indicators to help improve the system, and we're already doing this now. Our excellence in quality improvement program was created several years ago to help the community sector achieve higher-quality client care. Every Ontarian deserves the best mental health care possible.

In closing, this is a critical time for the community mental health and addiction system. The conditions of this pandemic have created a deeply empathetic and compassionate care for mental health and addiction experiences. Given the collective experience that we've all had in the past 20 months, this is our time to finally address the mental health and addiction issues that Ontarians struggle with every single day with increased funding. As we all recover from this pandemic, CMHA Ontario and CMHA branches across Ontario are eager partners. We look forward to building on the positive effects the provincial government has already undertaken to support the mental health of Ontarians. Let's keep going.

Mr. Chair, that concludes my remarks, and I'm very happy to take any questions at the appropriate time.

The Chair (Mr. Ernie Hardeman): Thank you very much for those remarks. We will start the first round of questions with the independent. I believe MPP Simard is going to ask the first round.

M^{lle} Amanda Simard: Thank you, Mr. Chair. I'm the first one to speak. I didn't know the independents got the first round.

Merci beaucoup, Marc et l'AJEFO, d'être ici aujourd'hui avec nous—très, très important. Toutes les questions que

j'avais, à chaque fois que j'écrivais, vous y répondiez—par exemple, c'est quoi la façon préférée pour modifier la loi pour avoir le critère de bilinguisme pour l'ombudsman. Je pense que ça, c'est très, très important et c'était justement dans mon projet de loi que j'ai présenté avec M^{me} Collard. Il y avait tellement plus dans ce projet de loi aussi, et c'est encore en Chambre.

Votre organisation, l'AJEFO, et l'AFO font tellement de recommandations. À toutes les années, il y a beaucoup de bonnes choses qui sortent de vos recommandations, et je trouve ça dommage qu'elles ne sont pas adoptées en ce moment dans la modernisation parce qu'on ne fait pas une modernisation à toutes les années. Je ne veux certainement pas attendre un autre 10 ans pour ajouter certains des éléments dont vous avez parlé : par exemple, le bilinguisme de l'ombudsman, le retour du commissaire—c'est encore une priorité, j'espère—et la traduction des règlements, certainement.

Je pense qu'il y a aussi la question des ordres professionnels, dont on a parlé. Ça, c'est très, très, très important. C'est dans notre projet de loi. Ça n'a pas été inséré dans le projet de loi de modernisation, ce qui est assez surprenant. Tout ce qu'on voit, vraiment, c'est l'offre active et le pouvoir de désigner quelques autres régions à la demande du ministre. Mais je pense qu'il y a quand même des éléments à modifier, et c'est ce qu'on veut faire.

Considérant tout l'excellent travail que vous faites et vraiment les rapports détaillés—souvent, ce qu'on prend, c'est de vous—j'aimerais savoir à combien de reprises vous avez rencontré le ministère et qui vous a consulté pour moderniser la Loi sur les services en français.

M. Marc Sauvé: Cette question-là, je crois qu'Alexandra pourrait y répondre plus précisément. Je veux dire, de notre côté, on a été consulté. On a fait des présentations, si vous vous rappelez bien aussi, à plusieurs des membres du Parlement, entre autres, à vous-même, à M. Bourgouin aussi. Puis on voulait aussi saluer votre projet de loi qui a été présenté, mais également celui de M. Bourgouin, qui avaient une plus grande portée pour les francophones. Donc, c'est certain qu'on nous a consultés. Il y a toujours de la place pour de l'amélioration, c'est certain. On n'a pas enlevé, par exemple, la question des juridictions bilingues. Donc, un francophone ne peut pas s'assurer d'avoir des services en français partout en Ontario. Ça, c'est un problème.

Vous avez noté en particulier la question des ordres professionnels. Je pense que ça c'est quelque chose qui peut facilement être corrigé dans ce projet de loi en définissant c'est quoi une « institution de la législature ». Il faut simplement ajouter l'ordre professionnel.

Sur ce point-là, je vous dirais que l'exemple parfait, c'est la traduction qui a eu lieu de mon témoignage. Today, I was asked a question and I gave a discourse in French. I did it quite quickly because I only had seven minutes, but also to show that—

The Chair (Mr. Ernie Hardeman): One minute left.

Mr. Marc Sauvé: —we don't necessarily understand everything and capture everything through translation.

And that's very important, especially for professional orders, such as doctors and lawyers, who are governed and who—essentially, either their licences depend on it or whatnot. Imagine being in a situation where not everything is captured through translation, as probably my speech was today.

So you can see how important that is, especially going forward, that just tweaking and defining what is an « institution de la législature », ça pourrait corriger tout ça. Donc, je fais ce point-là parce que je pense qu'il y a beaucoup de choses qu'on pourrait quand même faire, même si toutes les recommandations n'ont pas été acceptées.

M^{lle} Amanda Simard: Merci, Marc. Thank you, Mr. Chair.

The Chair (Mr. Ernie Hardeman): Okay, thank you. We'll now go to the government. MPP Roberts?

Mr. Jeremy Roberts: Thank you, Chair. Thank you to all of our presenters this round. Helen, I know my colleague MPP Skelly is going to have some questions for you, but I just wanted to say you did a great job carrying the torch for CMHA today. You guys are doing such phenomenal work.

Supporting individuals with their mental health needs throughout the pandemic and beyond has been a priority for me, as I know it is for Minister Tibollo. I was quite excited. This past year, we secured, in Ottawa, funding to expand the Queensway Carleton's mental health unit in my riding, as well as a new building for CHEO, to support mental health needs for kids there. A lot of work yet to be done but I think, as you said, there's a lot of great momentum under way already, so thank you again.

Je vais maintenant changer de direction. Marc et Alexandra, merci beaucoup pour votre députation de la part de l'AJEFO. C'est un plaisir de vous rencontrer encore. Je vais juste commencer—Marc, je sais que vous aviez presque fini votre présentation quand les sept minutes étaient finies. Est-ce que tu veux prendre une minute pour conclure tes remarques, ou est-ce que tu as déjà dit tout ce que tu voulais dire?

M. Marc Sauvé: Je vous remercie beaucoup, monsieur Roberts. Ça me fait plaisir d'être ici. Merci pour cette invitation.

J'avais plus ou moins terminé, simplement en disant que je veux noter quand même que même si on n'a pas eu tout ce que la communauté franco-ontarienne désirait, il y a quand même eu un avancement important, puis je veux le souligner. C'est important. Oui, il y a toujours place à l'amélioration, mais je veux saluer le gouvernement pour, par exemple, l'offre active. L'offre active, c'est quelque chose de nouveau. C'est maintenant dans la législation. Il y a également les mécanismes pour réviser puis s'assurer qu'il y a une reddition de comptes, donc s'assurer que les services sont effectivement offerts. Cette mesure-là vient vraiment nous appuyer.

Ma conclusion était pour miser sur ces points-là, en espérant qu'un jour, avec le plan—puis là, je reviens à cette question-là—de mise en oeuvre pour la main-d'oeuvre, ça va être vraiment important pour nous de savoir c'est

quoi ça, parce que ça c'est une des raisons pourquoi on nous dit qu'on ne peut pas enlever la question des juridictions bilingues. Pour nous, on a beaucoup d'espoir à voir les investissements que le gouvernement va faire, puis on apprécie les démarches qui ont été faites.

M. Jeremy Roberts: Excellent. Merci. Et je vous remercie aussi pour participer dans les consultations à propos de la modernisation. Je sais que vous avez eu la chance de rencontrer des membres de l'équipe de la ministre Mulroney, et j'espère que l'adjoindante parlementaire Kusendova aussi a eu la chance de vous parler. Je sais que vous participez activement au comité consultatif du procureur général aussi, donc toutes de bonnes opportunités pour la collaboration. Comme vous avez dit, vous soutenez les changements au sujet de l'offre active. On a déjà entendu l'AFO à ce sujet aujourd'hui, mais je veux savoir, selon vous, comment l'offre active prendra forme sur le terrain, et spécifiquement pour vous avec vos membres. Peut-être que tu peux parler un petit peu à ce sujet.

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M. Marc Sauvé: C'est une excellente question. Donc, pour nous, la façon qu'on le voit, c'est qu'une des choses qui va être importante est à savoir quand est-ce que ces services-là vont commencer. Évidemment, une fois qu'il y a la sanction royale du projet de loi, ça va être mis en oeuvre, mais il n'y a pas eu de questions de « quand ». Est-ce que ça va se faire dans la prochaine année, dans les prochains six mois, dans les prochains deux, trois ans? Puis comment est-ce que ça va se faire?

Évidemment, ça existe déjà, disons, à Ottawa, puis vous, vous le savez à cause qu'Ottawa, c'est maintenant une ville bilingue. Donc, quand on se présente à un comptoir pour des services, on dit : « Allo, bonjour. Hello, bonjour. » On démontre dès le départ qu'on peut offrir des services bilingues.

Deuxièmement, l'affichage : de dire que, oui, tu peux être desservi en français ou en anglais. Ça, c'est une autre façon de le faire, puis ça invite—disons dans le cas d'un client, un justiciable, quelqu'un qui veut des services au tribunal—de se présenter en français et ne pas craindre : « Est-ce que je me présente devant quelqu'un qui ne peut pas me comprendre, donc je vais simplement procéder en anglais? » Ça encourage vraiment les gens d'utiliser leur langue. D'ailleurs, ça assure que la personne va pouvoir bien préciser ce qu'il ou elle désire de cette façon-là.

L'autre façon c'est également, disons, dans le triage, quand on appelle. Par exemple, nous présentement, avec le financement qu'on a reçu du gouvernement, l'AJEFO opère le CIJO, le Centre d'information juridique de l'Ontario. Puis les gens, les justiciables, peuvent appeler et demander des questions et recevoir de l'information juridique—pas un avis juridique, mais de l'information juridique. Nos statistiques démontrent que 30 % des gens qui appellent demandent pour des services en français, même si l'Ontario—quand même, environ 5 % des francophones représentent la population de l'Ontario.

Donc, vous pouvez voir comment l'offre active dans les programmes qui existent déjà, mis en place et financés par le gouvernement, viennent ouvrir la porte aux francophones

pour aller chercher ces services-là en français. On pense que ça c'est tout à fait possible dans tous les services, puis on espère qu'un jour, avec l'avènement de la technologie, on va pouvoir desservir la communauté francophone partout en Ontario. Donc toute la question des juges bilingues, avoir des audiences en français, en anglais, c'est tout à fait possible. Moi-même, dans mes procès puis dans mes motions, je procède à Toronto, je procède dans le nord de l'Ontario, puis je peux tout le faire virtuellement, donc clairement on peut avoir des juges qui sont un peu partout en province qui pourraient venir et desservir des gens en français pour ne pas que ces personnes-là soient obligées de procéder dans une langue qui n'est pas la leur. Comme vous voyez, parfois les gens peuvent avoir de la difficulté pour procéder et désirent, surtout au niveau judiciaire, de procéder dans leur langue maternelle, surtout quand ça vient à des questions super importantes, comme celle-là,

The Chair (Mr. Ernie Hardeman): One minute left.

M. Jeremy Roberts: Oui, bien sûr. Et comme tu dis, c'est quelque chose de familier pour les personnes à Ottawa. Je pense que la croissance des services virtuels va aider à assurer que les personnes puissent avoir accès aux services dans leur langue primaire tout autour de la province. Donc, je pense que c'est un bon point.

Mr. Chair, you said we're in the final minute?

The Chair (Mr. Ernie Hardeman): You've got 25 seconds left.

M. Jeremy Roberts: OK. Bien, Marc, Alexandra, merci beaucoup encore pour votre députation et pour votre collaboration dans ce processus. J'espère qu'on va continuer à travailler ensemble pour améliorer et moderniser ces services dans l'avenir, donc merci.

M. Marc Sauvé: Merci, monsieur Roberts, et merci à l'équipe de M^{me} Mulroney aussi.

The Chair (Mr. Ernie Hardeman): That concludes that time there. We'll now go to the opposition. Mr. Bourgouin.

M. Guy Bourgouin: Ma question est pour l'AJEFO. Marc, tu as absolument raison quand ça vient à l'interprétation, comme tu l'as dit, et comment ils vont t'interpréter. Je peux te dire, quand je fais des « member's statements » ou quand je pose des questions, je griche des dents après ça quand on écoute. Je peux juste imaginer ce que tu viens de dire. Ça a frappé, là, la tête du clou drette sur la tête. Ça n'a aucun sens, des fois, l'interprétation.

Mais j'aimerais—il y a deux points, deux petites questions que je voudrais te poser, mais probablement avec des longues réponses que tu vas me donner. Ceci dit, la première que je vais te demander, c'est pourquoi, encore, on entend des Franco-Ontariens dire : « J'attends deux à trois fois plus longtemps pour avoir une audience en français dans les cours criminelle et familiale? Pourquoi on a droit aux mêmes services équitables et on ne les a pas? »

M. Marc Sauvé: Excellente question. Je peux te dire, monsieur Bourgouin, que, personnellement, je connais ce délai. Je l'ai vu de mes propres yeux dans les derniers quelques mois. Parfois, c'est un manque de sténographes bilingues, donc un manque de personnel. Tout le monde dans la salle est bilingue sauf le sténographe. Pourquoi est-

ce qu'on ne peut pas assurer qu'il y ait un sténographe bilingue en attente quelque part en Ontario qui peut desservir dans ces instances-là? Puis dans ces instances-là, la partie était obligée de procéder en anglais, même si tout le monde était francophone, même si le tribunal avait été avisé à l'avance que ça allait procéder en français et même si le président de l'AJEFO faisait partie de cette séance. C'était absolument, je veux dire, du non-sens.

M. Guy Bourgoin: C'est aberrant.

M. Marc Sauvé: Puis [*inaudible*] on retarde les affaires par des mois. Donc ça, c'est une fois.

Une autre fois, manque de juges bilingues, et je retourne à mon point : pourquoi est-ce qu'on ne peut pas assurer, virtuellement, qu'un juge soit disponible? Chaque fois que je procède devant le judiciaire dernièrement, c'est tout virtuel. Il y a seulement les procès criminels présentement qui procèdent en personne, et même certains procèdent virtuellement. Donc, pourquoi est-ce qu'on ne peut pas s'assurer, quelque part dans la province, qu'il y ait des juges qui, par exemple, pendant leur semaine où ils sont en train de travailler sur leurs décisions, soient là, à la disposition en cas d'urgence ou s'il y a vraiment un manquement?

Je veux dire, c'est correct si ça arrive une ou deux fois. Ça arrive en anglais aussi dans les audiences, qu'il y ait un manque de juges pour une raison ou une autre. Mais on dirait que c'est toujours les francophones qui doivent attendre et, dans cette instance-là, l'audience ne pouvait pas procéder au mois d'août. L'audience a procédé au mois de novembre. Ça, c'était la prochaine date disponible pour un francophone pour procéder en français. C'est encore du non-sens, et il fallait [*inaudible*] les questions.

M. Guy Bourgoin: Et après ça on se demande pourquoi les francophones s'en vont dans les cours en anglais. C'est parce qu'ils sont tannés d'attendre. Ils disent : « Je suis capable de comprendre. Je vais utiliser les services en anglais ». C'est encore de l'assimilation.

L'autre question, pour revenir un petit peu et faire un cercle complet avec ça, à cette heure tu as mentionné que l'offre active—le gros problème, c'est « quand »; la grosse question, c'est quand est-ce qu'ils vont l'implémenter, parce que ce n'est pas mentionné dans le projet de loi. Ce n'est pas mentionné.

Ma question est : Marc, as-tu peur qu'on fasse face—puis moi, c'est une de mes craintes, là. L'AFO, ils l'ont mentionné aussi, quand ils ont fait leur présentation. La crainte est que ce n'est pas défini, puis qu'on rentre dans la même situation où on est pour les services en français juridiques, qu'on se ramasse avec une offre active mais, « Excuse, monsieur, on n'a pas l'argent », ou ce n'est pas bien défini, ou « Bien, on ne trouve pas de personnes francophones pour donner le service ». Ça, on l'entend assez souvent : « Il faut donner le service. On engage un anglophone à la place jusqu'à temps qu'on trouve quelqu'un de francophone. » Puis éventuellement, on se remonte dans le même « jackpot » où on est, là.

C'est pour ça, quand tu parles d'une des grosses questions, c'est « quand »—puis qui va essayer de remédier à ce point-là quand ça vient à l'offre active?

M. Marc Sauvé: C'est exactement ça qu'on soulève. Il y a un manque de clarté qui crée une ambiguïté qui crée d'autres délais. Idéalement, ça serait dès la sanction royale du projet de loi, mais si ce n'est pas pour être ici, on va nous dire : « Ah, écoute, on ne peut pas le faire. » Précisez quand ça va venir en fonction. Au minimum, donnez-nous un temps. Sans cette précision, quand est-ce que et comment est-ce qu'on va rendre cette obligation redevable? Le plus qu'on attend, le plus qu'il y a de l'assimilation et le plus que les gens vont simplement dire qu'ils s'en foutent de procéder en français, et on manque des opportunités.

M. Guy Bourgoin: Je n'ai pas besoin de te dire ça, à un avocat : le diable est dans les détails. Je pense que tu comprends vraiment ce que je veux dire. Ça, c'est un exemple parfait que le diable est dans les détails, puis même, je pense que c'est délibérément fait pour ça. Le langage a été mis de cette façon-là, parce que si on dit qu'on va déposer ça, il me semble qu'on va créer un « deadline », qu'on mettrait un point pour que ça soit clair, l'offre active.

Moi, je me dis qu'on va se ramasser dans la même affaire comme—quand ça vient aux choses juridiques, c'est très clair. La loi est très claire. On a le droit à l'équivalent, puis on ne l'a pas. Si on n'investit pas pour les services, on ne les aura pas. Le diable est dans les détails. C'est pour ça que les règlements vont être très à « watcher ». C'est pour ça que je veux revenir aussi puis je veux te donner—je sais que je parle vite, parce que je veux essayer de faire rentrer plus de questions. Tu as mentionné à plusieurs occasions « l'institution de la législature ». Je veux que tu me réexpliques ça pour que le comité le comprenne très bien.

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M. Marc Sauvé: OK. Présentement, le projet de loi ne définit pas c'est quoi une « institution de la législature ». Ça crée une ambiguïté qui va créer des litiges devant les tribunaux et prendre du temps et des ressources du gouvernement pour définir quelque chose qu'ils peuvent faire en ce moment. On avait proposé, quand on avait rencontré les divers membres du Parlement, une définition de c'est quoi une « institution de la législature ». Qui est assujéti à cette loi? Ce n'est encore pas clair.

Je vous donne un exemple. Le barreau de l'Ontario, créé par une loi provinciale, qui met en place des règlements et des lois provinciaux : est-ce qu'il est régi et assujéti à la Loi sur les services en français? Pas clair. On devrait le définir et dire clairement que les ordres professionnels comme le barreau et l'Ordre des médecins et chirurgiens sont assujéti à la Loi sur les services en français. De cette façon-là, on va assurer qu'un professionnel—un médecin, un avocat—et les gens qui se présentent devant ces ordres professionnels-là pour leurs licences, pour leurs droits et tout ça vont pouvoir témoigner en français. Imaginez-vous si j'avais procédé devant un panel du barreau en français et que j'avais témoigné de la façon que j'ai faite aujourd'hui.

The Chair (Mr. Ernie Hardeman): One minute left.

M. Marc Sauvé: On aurait capturé seulement—même pas 50 % de ce que j'ai dit, un; et deux, même pas de la même nature que vous le comprenez, que M^e Simard le comprend, que M. Roberts le comprend et d'autres gens qui comprennent le français. Donc, pourquoi est-ce que je n'ai pas le droit de procéder en français quand ça vient à l'interprétation d'une loi qui est régie par une institution qui, selon moi, est une institution de la législature? Ça, c'est une précision, c'est une définition qui peut facilement être faite. On l'a proposée, et l'AFO l'a mise dans son mémoire.

M. Guy Bourgouin: Et j'espère qu'ils vont l'écouter, votre mémoire, Marc, parce que je pense que c'est très clair, c'est précis. Puis s'ils ne l'acceptent pas, ça veut dire que leur projet de loi était « by design », que c'était fait exprès pour faire certain que ce qu'on demande, ce que la communauté demande, des services auxquels on a droit, c'était omis par exprès.

M. Marc Sauvé: On aimerait beaucoup voir ces changements.

The Chair (Mr. Ernie Hardeman): That concludes the time, so we'll catch up with that in the next round.

We'll start the next round with the independent.

M^{lle} Amanda Simard: Merci beaucoup au député Bourgouin et à Marc pour cet échange, parce que je pense que c'est très constructif. Je ne peux pas croire qu'avec toutes les ressources du gouvernement, on n'a pas mis un délai pour faire une transition, puis qu'on n'a pas de définition de c'est quoi une institution publique. Je pense que c'est super important. Nous, on l'a mis dans notre projet de loi. Je suis pas mal certaine que M. Bourgouin l'a fait aussi. On n'est que des simples députés avec nos ressources limitées. On a vraiment fait certain de couvrir tout.

Donc, une « institution publique », on dit : « Une institution mandatée par une loi de l'Assemblée législative pour exercer des pouvoirs législatifs, exécutifs ou judiciaires dans l'intérêt public. » Donc « sont compris »—et même on spécifie—« les ordres professionnels, les fonctionnaires de l'Assemblée législative et l'administration des tribunaux. » Est-ce que cette définition-là, c'est une définition qui couvre assez? Moi, je pense que oui, mais je voudrais vous entendre là-dessus, sur si on pourrait insérer ça. Mais je pense que ça c'est vraiment décevant.

Vous avez soulevé un autre point dans votre échange. On parlait de faire valoir nos droits et tout ça, mais je pense qu'il y a aussi un manque, et ça c'est dans mon projet de loi : c'est d'avoir un programme d'appui aux droits linguistiques, parce que ce n'est pas tout le monde qui a les ressources pour faire valoir leurs droits quand ils sont brimés, et on ne va pas prendre la peine de le faire si on ne peut pas le faire. Alors, ça, je pense que c'est important aussi, et au fédéral, ils ont ce programme pour une raison, parce qu'on reconnaît l'importance de faire valoir nos droits linguistiques.

Je voulais aussi donner un exemple que plusieurs ne savent peut-être pas, parce que ça démontre l'importance d'avoir dans plusieurs secteurs la traduction—mais ce

n'est pas une traduction. C'est vraiment une traduction du sens. Ce n'est pas littéral. Je voulais donner un « shout-out » aux interprètes, aux traducteurs, parce que ce n'est pas facile de nous suivre, surtout quand on parle vite comme ça et avec nos expressions. C'est pourquoi c'est très important d'avoir par écrit les traductions aussi dans le Hansard, par exemple, et c'est l'exemple que je vais donner, parce j'étais tellement sous le choc lorsque je suis arrivée à la législature de l'Ontario—parce que je travaillais au Parlement du Canada avant—et toutes mes interventions sont seulement dans le Hansard dans la langue dans laquelle elles ont été faites. Ça veut dire que je suis pénalisée d'utiliser ma langue, parce que mes collègues ne pourront pas me comprendre dans le Hansard. Et moi, si je ne parlais pas l'anglais, je ne pourrais pas comprendre ce que tous les autres discours sont. Je ne vois aucun sens là-dedans, et je pense que ça, cela aurait été une réforme aussi extrêmement importante, parce que ce n'est pas juste pour les députés; c'est pour les recherches, c'est une source primaire—ou secondaire—les débats législatifs. C'est une source importante, et je pense qu'on est privé de cette information-là.

Donc, je voulais savoir un peu vos commentaires sur un programme d'appui aux droits linguistiques, et l'autre chose que j'ai dite c'est la définition « d'institution publique », si c'était suffisant. Je vais communiquer avec vous par après aussi pour voir si c'est assez, mais juste de ce que j'ai lu, qu'est-ce que vous pensez?

The Chair (Mr. Ernie Hardeman): One minute left.

M. Marc Sauvé: Merci pour ces commentaires. Très rapidement, une chose qui peut être faite—je l'ai mentionnée—c'est toute la question des règlements. Présentement, on dit qu'on « peut » les traduire, le lieutenant-gouverneur en conseil. On propose juste un changement d'un mot : « doit » ce faire. Pourquoi est-ce que le règlement serait seulement—dorénavant, là. On parle de dorénavant, futur, et toutes les modifications. Pourquoi est-ce que ce n'est pas dans les deux langues? Les droits le sont; les règlements qui viennent les mettre en oeuvre, au sens pratique, ne le sont pas. Encore un changement très précis.

Par rapport à la définition, oui, on est d'accord. Je ne peux pas vous dire exactement, dans le temps que j'ai, c'est quoi la définition, mais je vous référerais au mémoire—

M^{lle} Amanda Simard: Je pense que je l'ai prise directement de vous, ce qui fait que—

M. Marc Sauvé: Bon. Alexandra pourrait peut-être confirmer que c'est bien ça.

M^{me} Alexandra Waite: Oui, en effet. D'ailleurs, on propose que le terme « entité publique », « public entity », englobe « organismes gouvernementaux » et « institutions de la législature », et puis notre définition complète dans le mémoire va pouvoir venir appuyer cela.

M^{lle} Amanda Simard: Merci beaucoup.

The Chair (Mr. Ernie Hardeman): That concludes the time.

I would ask Alexandra Waite if you would introduce yourself for the record so it would be on Hansard.

Ms. Alexandra Waite: Yes, absolutely: Alexandra Waite from l'AJEFO.

The Chair (Mr. Ernie Hardeman): Okay. Thank you very much.

Now, we'll go to the government. MPP Skelly.

Ms. Donna Skelly: Good afternoon, Chair—it's lovely to see you in the chair—and good afternoon to all of the presenters. It's nice to see you.

My questions this afternoon are for Helen Fishburn. May I call you Helen? Thank you. We're heading up to two years in a global pandemic. Of course, it has taken its toll on workers in just about every sector across the province, but particularly in our health care sector. I'm wondering if, despite the funding or besides the funding that we have committed to in our fall economic statement, there are other things that you would suggest for people to perhaps practise or those who are in a supervisory capacity to recognize and to put in practice that can help our workers get through the pandemic, especially our health care workers, who are dealing with this global pandemic and unprecedented pressures and challenges that we have simply never seen before. Is there something beyond the financial commitment that our government and other sectors right across the province can do to help their workers?

Ms. Helen Fishburn: Excellent question. I can tell you, as I said in my comments, that we are really, really concerned about the heavy load that is being carried across health care, and certainly within mental health and addictions, where we've seen just a massive increase in demand. Certainly the government's investment of \$12 million into the mental health of front-line workers is a great start.

We've been anticipating these needs all the way through the pandemic, and certainly several branches across Ontario, like my own in Waterloo-Wellington, in Hamilton, and in York-South Simcoe, for example, have all launched front-line health care supports for acute care partners and community-based partners during the pandemic. Our own program was called Here 4 Healthcare and really provided a range of supports, including psychiatry, nursing, social work, group counselling, individual counselling.

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We know that stigma, in particular, also hits our health care workforce very hard. We are trained to support other people. It's often difficult for health care workers to look at their own needs, and stigma around that is particularly entrenched. So we are really encouraging the ongoing conversations and dialogue. As I mentioned, the pandemic has been the silver lining for us. It has opened up these doors for all of us to be able to have very open and transparent conversations about mental health. It has really moved the marker with stigma. It's still there and we still fight against it, but it's better than it was. I think having the conversations with health care workers directly is incredibly important. It needs to be built into the culture of everything we're doing.

I can tell you, within my own shop, we brought a compassion fatigue specialist in just to address the specific issues relating to burnout in health care in particular. We've learned a lot, but it really is an ongoing dialogue and discussion that's so important.

Ms. Donna Skelly: You mentioned addictions, and I'd like to expand a little bit about addictions.

A significant portion of our workforce is working virtually. I came from the private sector—broadcasting, actually—before I entered politics. We had a human resources department that could identify and recognize changes in personality, changes in behaviour, which led to a discussion to help someone who might be dealing with an addictions issue. I'm wondering, is working virtually preventing our colleagues from recognizing that people need help, and if so, is there something that we as colleagues or we as supervisors can look for to help people before these issues get out of control?

Ms. Helen Fishburn: A very quick answer to that is yes. Working virtually has made it much more difficult for us to be able to identify and track some of the concerns and trends. It has been a lot easier for people to hide—and then on top of that, you add the isolation, you add the loss of some of those connections and support networks, which are so important in terms of helping people manage their stress, stay well, stay connected. It has been a lot harder. That has been part of that perfect storm I talked about, which has really fed addiction use and escalated some of the problems.

It has also been a significant factor in overdose deaths related to opioid use because, again, people are using in isolation and they don't have that network of care and support around them. The toxic supply of opioids on the streets has made it incredibly dangerous.

Just from a workplace perspective, what we really encourage supervisors to do is to, again, open up the conversations and ask people specifically how they're managing, how they're coping, and also to pay attention to some of the themes and trends. If people are losing work time, if their productivity is down, if they don't seem as engaged, focused and connected as they normally are, those are things to pay attention to in this pandemic, in particular.

I think opening up that conversation when you're concerned about somebody—people are often nervous to do that. We don't suggest that people have to become clinical psychologists to do that. What we really do suggest is to take a caring and compassionate approach. You can say things like, "You don't seem like yourself. I've noticed through the pandemic you've been quieter. You haven't engaged as much. I'm quite concerned about you." You can say those kinds of things, which, again, invites people into that space—rather than coming from a place of judgment or criticism, which, of course, shuts those conversations down.

Ms. Donna Skelly: Conversely, while the pandemic has obviously created challenges and we've seen increases in addictions, it has provided this technology. I love Zoom,

but I'm wondering, is it beneficial in helping people who have addictions, who need some virtual help?

Ms. Helen Fishburn: It is. I will tell you that the mental health and addictions sector has been late to the technology party. The pandemic has actually opened up this door for us. On a dime, literally overnight, we had to create Zoom-like platforms where we could connect with people. Here at CMHA, we had 10,000 clients we were used to seeing in person. We literally overnight had to be able to find ways to connect with those people, not only by phone but also that virtual link so we could lay eyes on folks that we were worried about. It has opened up a whole other way of connecting.

I will say, particularly for people who have mild to moderate mental health and addictions concerns, it's worked extremely well. Who it hasn't worked well for are the people who are more complex, at high acuity and high risk. Those folks need to be seen by treatment teams that involve psychiatry, nursing, social work, support—

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes the time on that one.

We'll now go to the official opposition. MPP Mamakwa?

Mr. Sol Mamakwa: Thank you to Marc, Alexandra and also Helen for the presentations. I did listen to some of the French translations, and I can understand the struggles, me as a first-language speaker of my language. But I see things in a very different lens, me being a First Nations person. This system that is here was never built for us. But I think often people forget to understand that the issues that we face, especially from the north, they're similar struggles.

I think I want to ask Helen about—you spoke about the opioid crisis in the north. I'm just wondering—there's a lot of unnecessary suffering that's happening, needless deaths that are happening in the north with respect to the crisis, the opioid crisis. I'm just wondering, from the mental health or addictions perspective, what would be some of the key measures that would help reduce and address the issue?

Ms. Helen Fishburn: Thank you for that question. It's so important. I can tell you that the relationship that we have with our Indigenous communities is so vital. I've worked here for 20 years and I can honestly tell you what we have done in some of the traditional CMHA programs, which are excellent, need to be broadened to include more engagement with the community, to bridge the gap between what we have now and what's needed to better support our Indigenous communities. I'm talking specifically about Indigenous-led mental health and addictions services. That would complement what we offer and, really, is about what Indigenous communities need. It builds that bridge, and I think we can complement our services fairly well.

I would absolutely say that additional resources are needed, not only, of course, in mental health and addictions proper but really desperately for Indigenous communities. We have a couple of branches across Ontario that do a great job with this. There is CMHA in Muskoka-Parry Sound

and CMHA in Lambton-Kent. Both have Indigenous-specific supports for their communities.

We know, and you've referenced this, that opioid deaths in particular, our First Nations communities have been extremely hard hit. We've had a 36% increase in opioid poisonings related to First Nations persons, and that's a 132% increase in opioid-related deaths compared to 68% in non-First Nations persons. It's dramatic, the change, so we have to respond to those needs. We have to build Indigenous-led mental health services, to have services that work for Indigenous communities. I can't do that, and my staff, as much as we love working with Indigenous people; we need non-traditional healing programs. That's that bridge and that's exactly what will work much better and what we need more of.

Mr. Sol Mamakwa: Thank you for that. I know that with respect to the pandemic over the last 20 months, it really has exacerbated some of the key issues of mental health, access to services. But also, I think, since May of 2021, the finding of the children, the 215 that were found, certainly has peeled off the old wounds of all First Nations and Indigenous people across the country, but specifically in Ontario as well.

There is much work to be done. There's a phrase that you used, but it was more specific on the opioid crisis: "the perfect storm." What do you see happening or what do you see when we talk about mental health? What would a no-wrong-door approach to access to mental health services look like for you?

Ms. Helen Fishburn: Well, we actually have that here in my community of Waterloo-Wellington. It's called Here 24/7. We have all of our mental health and addictions funded partners who are connected to this service, and we remove all barriers to people calling and trying to get support.

Prior to Here 24/7, people in our community would have to call all 11 different partners and get on different housing lists and care lists, and it was a really tremendously burdensome system and very fragmented. What we did is we made one phone call, one phone number; we have a website—and people can also show up at any of our offices, and one Here 24/7 staff that they talk to has access to all 11 funded mental health and addictions partners. It's also our mobile crisis service. So basically, you can call us at any time of the day or night. We are never closed.

We take calls from people themselves who are concerned. We take calls from any referral sources, a family doctor, a school—anyone. We also take referrals from family members, next-door neighbours, work colleagues, all of which are designed to support that person and get them the care that they need. Sometimes, as you know, people don't see their own struggle and we need to work with family members or neighbours or other loved ones who can reach that person and really engage them and get them the care that they need.

The Chair (Mr. Ernie Hardeman): One minute left.

Ms. Helen Fishburn: That's the kind of access mechanism that we need. Make it open, remove all the

barriers, have anyone be able to access it at any time of the day or night and then really bridge that person to the care that's available. That's worked really, really well for our community. The problem we have is we don't have enough care past our Here 24/7 door. That's where our waiting list gaps are and that's the investments and funding that we need.

Mr. Sol Mamakwa: Okay, thank you very much. I think you kind of defined that there's never enough resourcing to be able to meet the needs of the communities for mental health and addictions. Meegwetch.

The Chair (Mr. Ernie Hardeman): Thank you all very much. Ladies and gentlemen, that concludes our business for today. First of all, I want to thank all the

presenters for coming in here and presenting their views, and I'm sure that it will be helpful as we move forward with Bill 43. It also concludes the business for today.

As a reminder, the deadline for written submissions is 7 p.m. on Tuesday, November 30. The deadline to file amendments with the Clerk of the Committee is 6 p.m. on Wednesday, December 1, 2021; I'm a couple of years out here.

The committee is now adjourned until 9 a.m. on Friday, December 3, 2021, when we will meet for the clause-by-clause consideration of Bill 43. Thank you, everyone, again, for participating, and we'll see the committee members on Friday.

The committee adjourned at 1654.

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