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**Official Report
of Debates
(Hansard)**

EM-7

**Journal
des débats
(Hansard)**

EM-7

**Select Committee
on Emergency Management
Oversight**

Emergency orders review

**Comité spécial de la
surveillance de la gestion
des situations d'urgence**

Étude sur les décrets d'urgence

1st Session
42nd Parliament

Wednesday 13 January 2021

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42^e législature

Mercredi 13 janvier 2021

Chair: Daryl Kramp
Clerk: Christopher Tyrell

Président : Daryl Kramp
Greffier : Christopher Tyrell

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Room 500, West Wing, Legislative Building
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Salle 500, aile ouest, Édifice du Parlement
111, rue Wellesley ouest, Queen's Park
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Téléphone, 416-325-7400; télécopieur, 416-325-7430
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ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**SELECT COMMITTEE
ON EMERGENCY MANAGEMENT
OVERSIGHT**

**COMITÉ SPÉCIAL DE LA
SURVEILLANCE DE LA GESTION
DES SITUATIONS D'URGENCE**

Wednesday 13 January 2021

Mercredi 13 janvier 2021

The committee met at 0934 in committee room 1 and by video conference.

EMERGENCY ORDERS REVIEW

The Chair (Mr. Daryl Kramp): The meeting is now officially open, colleagues, but with a little bit of a difference today, because we've obviously had challenges. We are not in room 151, as we ordinarily would be. We are not having broadcast. It is tremendously important that our meetings be consistent, transparent and open, as we committed to at the start of these proceedings, so we are attempting to find the best vehicle to ensure that that happens, given the problems with technical abilities with the lack of room 151, as well as the connectivity challenges, with a view to try to take any other possibilities.

What I will do very, very quickly though, prior to going into our meeting, is deal with the letter received from Mr. Fraser and also the one from the official opposition that Mr. Bisson, Mr. Rakocevic and Ms. Singh signed. I will give a very, very brief response to both and, at a point, potentially allow a very, very brief comment from the authors of that.

I know, first of all, that Mr. Fraser raised concerns with the lack of public broadcast and has requested to use the Legislature. Subsequently, I did inquire as to the possibilities of that with the Clerk. He advised it was not technically possible at this particular time due to the work in 151 that is obviously ongoing and the connectivity to that, as well as the equipment necessary. But I did agree with his principle as to the transparency and would seek to try to find solutions.

As well, then we had a subsequent letter from the official opposition regarding a similar issue. I certainly, at that time as well, agreed with the need for transparency and checked with the Clerk as to their request for live-streaming authorization. The Clerk said that it had been permitted before on another select occasion. If you will, I will just read a quick comment here from the Clerk on this regarding filming or streaming of committee proceedings:

"In the past, the LAO policy in place is that only members of accredited media are permitted to take pictures or stream committee proceedings. This also applies to the House. However, in the past, the Chair has allowed occasional leniencies for photos or short videos taken in person by presenters or member staff with a

caveat that papers or other documents on members' desks not be filmed."

However, the request today is much more substantial, obviously. I would therefore put it to this committee to see if we can find agreement to be able to move forward. Obviously, with the precedent that we are establishing here today and the one from before, we recognize that we are in unique times, so it is tremendously important that we allow transparency. I will allow authors of both those letters to offer a very, very brief comment, because we must get on to our meeting. But prior to that, or even after that, I would seek the unanimous consent of this committee to allow live-streaming.

I would now go to a question from Mr. Rakocevic, and then I will certainly go to Mr. Fraser for a very brief comment. Mr. Rakocevic, sir?

Mr. Tom Rakocevic: I think we're all very interested in transparency here. The technology that we're using does allow the opportunity for us to be able to record and then live-stream directly off of Zoom. I think in many ways this would achieve what we would have if we were doing this in the other room that would make it available. I think it's a very reasonable request. I hope that all members of committee would agree to this, because certainly we do need transparency, especially during these times, and that would achieve that.

The Chair (Mr. Daryl Kramp): Thank you very kindly. Mr. Fraser, sir?

Mr. John Fraser: Thank you very much for responding to the letter. The nature of the business that we're discussing is of utmost importance right now, so I just believe, for the next meeting, we have to find a solution to this. If we have a subsequent meeting, we can't allow this to happen again. We can discuss this after the meeting. I just wanted to make you aware of how strongly I feel about that.

I will support my colleague's motion to live-stream or record, or your motion. The only thing that would be handy for some committee members is, how do you do that? That's all.

The Chair (Mr. Daryl Kramp): Yes, very quickly, Mr. Bisson?

Mr. Gilles Bisson: Listen, I don't want to repeat what Mr. Rakocevic said, but the idea would be that every member can then press the record button and then essentially utilize that after as a rebroadcast. I obviously

am interested in all members of the committee supporting this, as it is transparency—and as Mr. Fraser just said, there are a lot of questions that people are asking in regard to the announcement yesterday. This would be extremely helpful for them to be able to see this.

The Chair (Mr. Daryl Kramp): Thank you very much, colleagues. I think we all want this as open and transparent as possible, but I can assure you that your Chair is no technical marvel and cannot manage to accommodate every technical request that is there. However, we will do our very, very best. The Clerk is obviously under instruction to do what is within the capacity and capability of the legislative processes and/or their permissions. We will obviously push to do the very best we can, but today at least I'm comfortable in the fact that at least we have the opportunity to live-stream. I thank the members for bringing forward suggestions to be able to do the best we can.

Mrs. Martin, you had a brief question?

Mrs. Robin Martin: I'm not really up on the technology. Obviously, we want to be as transparent as possible, but I think recording is different, as I understand it, than live-streaming. Live-streaming is whenever the committee is live, and I think that's what we normally have when committee is broadcast. I'm not sure I understand what the virtue would be of having a recording of it. I'm a little bit concerned, frankly, about edited recordings and that kind of issue, because it could be used for other purposes rather than just the transparency part of it.

Could somebody help those of us who are maybe not as technically literate with how this would work?

0940

The Chair (Mr. Daryl Kramp): Okay, we're not going to belabour this point at all. Mr. Bisson very, very quickly, and then we will be moving on.

Mr. Gilles Bisson: Just very quickly, we do rebroadcasts of the proceedings of the House all the time. Most of our committees, quite frankly, are not live. Most of our committees are recorded, then they're rebroadcast later. People are able to record and utilize that for whatever reason. So this is no different than what the assembly already does.

The Chair (Mr. Daryl Kramp): Thank you very kindly. Anyway, we will leave that up to the Clerk and the technical people to deal with this issue.

Yes, Mr. Fraser? One last comment, and then we're moving on.

Mr. John Fraser: Why don't we just let the Legislative Assembly record this and share it with all of us? Is that possible?

The Chair (Mr. Daryl Kramp): Mr. Fraser, I do not have any knowledge as to what is possible and what is not. The Clerk will do his very, very best to make every effort to ensure that we have as much connectivity as possible throughout the entire public process on this. Thank you very kindly. I appreciate the care and concern of our colleagues.

We will now go on to the business of our committee.

Interjection.

The Chair (Mr. Daryl Kramp): Excuse me. We will hold just for one second.

Okay, colleagues, what I will do is I will ask the Clerk to give you a summation of the challenge we have right now, and then the Chair has made a decision as to where we will go with this. But I wanted to give you an idea of the complexity involved, and the Chair's decision will come very shortly thereafter.

Please go ahead, Chris.

The Clerk of the Committee (Mr. Christopher Tyrell): So this meeting, which is currently running, is currently running. I have checked the settings for this meeting, and it doesn't seem like I am able to enable recording directly through Zoom because the meeting is already currently in progress. The only way around—there are a couple of options. Either you can find some way independently to record your screen or to stream via your screen, or we would need to end this meeting, I would need to set up a new meeting with recording capability and then we'd start that. It's up to the committee, how they want to proceed.

The Chair (Mr. Daryl Kramp): Mr. Bisson very, very quickly. The Chair is prepared to move ahead.

Mr. Gilles Bisson: Yes, I'm good. We just all need to re-log in, and that will resolve that issue.

The Chair (Mr. Daryl Kramp): Fine. Thank you very kindly.

Colleagues, I see no need at this particular point, even though the challenge is there, to restart the meeting, stop and restart the whole thing. We would be into quite a time constraint on that, and I do believe that we have our witness here ready to go. So we will just go ahead and proceed. Hopefully, we'll not have problems in the future; we will hopefully have some guidelines. But anyway, we are going to go ahead with this now.

We are also joined by staff, as I had mentioned, from legislative research, broadcast and recording, and House Publications and Language Services. To make sure that everybody can understand what is going on, it's important that all participants speak slowly and clearly. Please wait until I recognize you before starting to speak. Please also remember to unmute yourself before you begin speaking.

As always, all comments by members should be directed through the Chair. Are there any questions before we proceed further? Yes, Ms. Martin and then Mr. Bisson.

Mrs. Robin Martin: Thank you, Chair. I thought we were going to take a vote on this, from what you had said earlier.

I think the most consistent thing with what we regularly do would be to livestream the committee hearing. That would achieve the transparency we're all looking for, especially because people have lots of questions at this particular hour.

I don't think that we need to adjourn this meeting to livestream. We just need to have somebody livestream from their phone or whatever. Again, I'm not very technology-savvy, but I'm sure somebody knows how to do that—

The Chair (Mr. Daryl Kramp): Ms. Martin, I've been advised that we cannot do that at this particular point, so

I'm sorry. I don't have the technical ability to pass judgment on this; I'm advised by our technical people in particular that we cannot do that at this point.

Colleagues, we must move on very shortly; we're wasting our time for our meeting. But I will go to Mr. Bisson, then Ms. Park.

Mr. Gilles Bisson: Excuse me, Chair, but transparency is never a waste of time. I'm sure that you can rephrase that.

Listen, two things: First of all, I still think it's the easiest thing to do—if we had restarted the meeting five minutes ago, we'd be done by now. I would ask and urge members that we do so for the sake of transparency.

The second thing is, I'm not convinced at this point or understanding if the assembly, if we don't do that, will even record this particular session, other than it being on Hansard. So my question would be, is the assembly actually recording this? I don't think they are. But if they are not, and if they are, we should reboot and restart anyway, just for the sake of transparency.

The Chair (Mr. Daryl Kramp): Again, the Chair has no difficulty doing that, should that be the wish of this committee. I do take a bit of umbrage, Mr. Bisson. The Chair has certainly demonstrated every willingness to be transparent, and I suggest that your comment is out of order, sir—not out of order, no; it's not out of order, but I do believe it's out of line.

However, we will proceed now. I would like a vote, then, from the members. Would you wish to restart this meeting and do the best hookup that we can available? Ms. Park, one more comment, please.

Ms. Lindsey Park: Perhaps Mr. Tyrell can tell us how long that will take. My guess is, it will only take a few minutes to restart the meeting. If that's the case, perhaps we can vote on it, and if everyone's comfortable, we can quickly restart the meeting.

The Chair (Mr. Daryl Kramp): That's fine. I've just checked with the Clerk and the legislative assistant. It will be roughly 10 minutes in the process.

Mr. Bisson, do you wish to speak?

Mr. Gilles Bisson: I'm fine with that. Ten minutes is a small price to pay for transparency.

The Chair (Mr. Daryl Kramp): That's fine. Colleagues, would we then go offline, curtail and rejoin, according to the process? Give me one second and I'll give you directions on that.

Colleagues, in order to do this, I've been advised by the Clerk that I need unanimous consent. Do I have unanimous consent? Do I have any objections? I cannot see everybody. I see no objections.

Ms. Martin, yes—a question.

Mrs. Robin Martin: I don't even know what we're voting on, Chair. It would be helpful to know that.

The Chair (Mr. Daryl Kramp): Okay. What we are voting on, Ms. Martin, is the opportunity to seek unanimous consent to reboot the meeting to allow for more connectivity at various channels, however they may be. The Chair does not have the luxury of stating which ones they are because I don't know. But if we go to unanimous

consent, it allows permission for all members of the committee to independently live-stream their feed to this proceeding, notwithstanding some of the technical challenges we may be having. Obviously, we have to reboot this process in order to bring in as much technology as possible from either individuals and/or within the Legislature. That is the purpose of asking for a reset now.

Mrs. Robin Martin: Thank you.

The Chair (Mr. Daryl Kramp): Do we have unanimous consent for a reset? We have unanimous permission.

We will reboot the entire process. We will all have to hook in as per normal. Once we have everybody back in, then we will proceed with the meeting. Thank you very kindly. We're recessed.

The committee recessed from 0951 to 1003.

The Chair (Mr. Daryl Kramp): Okay, colleagues, we will resume. It is my understanding from the Clerk and the technical people that everybody has the opportunity to record on your end, from your perspective, as best you can, given the circumstance. We will now go on with the rest of our meeting. I thank all the members of the committee, and certainly, I thank our technical people and thank our Clerk and our witnesses for their patience today as we move through this unique time.

Pursuant to the order of the House dated July 15, 2020, this select committee has been appointed to receive oral reports from the Premier or his designates on any extensions of emergency orders by the Lieutenant Governor in Council related to the COVID-19 pandemic, and the rationale for those extensions.

The Solicitor General, the Honourable Sylvia Jones, who has been designated by the Premier, is here with us today to provide this committee with that report.

Per the motion, the committee is empowered to meet as follows: up to 30 minutes for the Premier or his designate to make an opening statement; up to 60 minutes then for the members of the recognized parties to pose questions to the Premier and/or his designates in three rounds of 10 minutes for each party; and up to 10 minutes for the independent members to pose questions to the Premier or his designates in two rounds of five minutes each.

Following the Solicitor General's opening remarks, we will proceed in the question rotation as follows, as we have since the start of our meetings, which will be: In the first round, 10 minutes to the official opposition, 10 minutes to the government, five minutes to the independent member; followed exactly the same in the second round; and then, in the third round, 10 minutes to the official opposition and 10 minutes to the government.

Are there any questions before we begin? Fine. Seeing none, Solicitor General, welcome here today, and please proceed with your introductory comments whenever you're ready.

Hon. Sylvia Jones: Well, thank you very much, Chair. I appreciate the opportunity to once again appear before you. Would you like me to proceed?

The Chair (Mr. Daryl Kramp): Proceed, please.

Hon. Sylvia Jones: Okay, thank you.

Well, I'd like to start by wishing members a belated happy new year, and welcome to 2021. This was, of

course, a holiday season like no other, after a year like no other. I hope that members were able to have some semblance of restfulness over the holidays.

As members of this committee gather for the seventh meeting of this important work, it is clear that despite all efforts outlined over the previous six meetings in your committee, we are fighting the spread of a virus that has once again led us to the brink of a health crisis. This is an emergency, and we are treating it thusly. That is why Ontario has declared a second provincial emergency under the Emergency Management and Civil Protection Act, as new cases of COVID-19 continue to increase significantly across Ontario. To that end, it is our intention that as of 12:01 on Thursday, January 14, we will implement a stay-at-home order. This will ensure that individuals are only leaving their home for essential reasons, including essential work, groceries and pharmacy trips, as well as exercise.

The stay-at-home order allows outdoor gatherings of five people or fewer, only for the essential purposes outlined in the order. Gatherings over five people are prohibited. The decision to reduce outside gatherings from 10 to five supports our efforts to stop the spread of COVID-19. We strongly encourage people to limit the number of outside social gatherings that are within the parameters of the stay-at-home order and take appropriate measures to limit any potential spread, such as wear a mask and ensure social distancing.

In response to the alarming and exceptional circumstances at hand and to further interrupt the deadly trend of transmission in our communities, we have also created new orders that would, first, provide new authority for police and other provincial offences officers to disperse gatherings or organized public events that are not complying with gathering event limits; and secondly, ensure that all provincial offences officers, not just police, First Nations constables and special constables, can temporarily close premises where prohibited gatherings are occurring and provide additional tools to ensure law enforcement partners are able to hold individuals accountable for non-compliance in order to further support our efforts to stop the spread of COVID-19. This new order will allow police and provincial offence officers to ticket individuals who are not following masking and distancing requirements while outdoors and on the premises of a business or organization.

This is not how any of us wanted to begin 2021. We know that the majority of Ontarians are following public health guidelines, but overall mobility and points of contact are still too high. The latest numbers are alarming: 40% of long-term-care homes are in an outbreak, with one or more COVID-positive residents; hospitalizations have increased over 72% in the past four weeks; ICU occupancy is up over 61%; and one in four hospitals have run out of ICU beds. Without the stricter measures outlined yesterday, we could see more than 20,000 and as many as 40,000 new cases a day by mid-February if we do not act. It is critical, now more than ever, that people follow public health measures, stay home and stay safe. If you do have

to go out, wear a face covering and continue to practise physical distancing.

Regarding amendments to orders: Since the last meeting of this committee and in addition to the new orders I mentioned at the start, a number of other amendments were made during the last 30-day period. Like many jurisdictions around the world, including across Canada, our government implemented a time-limited provincial shutdown with a view to further limit transmission of COVID-19 in Ontario. That went into effect on Saturday, December 26, 2020, at 12:01 a.m.

1010

The additional public health and workplace safety measures related to COVID-19 were intended to apply for 14 days in northern Ontario and 28 days in southern Ontario, with plans to continually evaluate the situation and the need for further restrictions. The province-wide shutdown in northern Ontario has been extended for another 14 days, aligning with the shutdown period in southern Ontario.

The province-wide shutdown required amendments to O. Reg. 82/20, rules for areas in stage 1, and O. Reg. 363/20, stages of reopening. Through these amendments, all public health regions not already in the grey zone of stage 1 were moved into the grey zone, effective 12:01 a.m. on December 26, 2020, and all of Ontario then became subject to the public health measures under O. Reg. 82/20, as amended.

To help interrupt or slow current community transmission of COVID-19 and allow our health care and public health systems that are reaching critical limits to recover and catch up, additional amendments were made to O. Reg. 82/20, for example, setting out public health and workplace safety measures that apply to businesses, organizations, facilities and places during the shutdown; prohibiting indoor organized public events and social gatherings except with members of the same household; prohibiting in-person shopping in most retail settings; and limiting discount and big box retailers selling groceries and stores that sell liquor to 25% capacity for in-store shopping.

Supermarkets, grocery stores, convenience stores, indoor farmers' markets and other stores that primarily sell food, as well as pharmacies, can operate at 50% capacity for in-store shopping. The requirement to limit capacity in a place open to the public so that all members of the public can maintain a two-metre distance from every other person continues to apply.

Restricting access to shopping malls: Shopping malls can only designate one indoor pickup area for patrons to pick up an order from a business or place inside the shopping mall, and patrons may only pick up orders by appointment. Shopping malls will also establish any number of outdoor designated pickup areas at which patrons can pick up orders without making an appointment.

Curbside pickup and delivery have continued. Certain businesses and retailers that are permitted to be open for in-person shopping or for takeout purposes continue to be

subject to physical distancing and face-covering requirements inside and outside when lining up. Indoor and outdoor in-person dining continues to be prohibited under O. Reg. 82/20, with limited exceptions. Restaurants, bars, food trucks, concession stands and other food or drink establishments continue to be permitted to operate by takeout, drive-through and delivery only.

O. Reg. 82/20 was also amended to prohibit in-person teaching or instruction, with limited exceptions, at all publicly funded and private elementary and secondary schools, and only permit teacher-led remote learning for a temporary period after students returned from the winter break.

Despite all of these many actions, COVID case numbers have risen to an all-time high in Ontario and hospital capacity is being stretched to its limits. As I mentioned earlier, now more than ever, it is critical that people reduce their contact with others. We must all do our part to reduce the transmission of this deadly virus.

Regarding orders still in effect: In line with the legislative mandate of this committee, I will now walk through other orders that are still in effect under the Reopening Ontario (A Flexible Response to COVID-19) Act, until January 20, 2021. These orders are being presented in numerical order.

O. Reg. 74/20, work deployment for health service providers: This is a Ministry of Health order. The health sector continues to experience increased demands and pressures as a result of COVID-19. This order authorizes hospitals to take measures with respect to work deployment and staffing, and it is necessary to address surgical backlogs and health human resource shortages across long-term-care homes and to ensure that there are sufficient hospital beds during the COVID-19 pandemic.

O. Reg. 75/20, drinking water systems and sewage works, is out of the Ministry of the Environment, Conservation and Parks. A one-time reduction in annual training for waste water operators from 40 hours to 10 hours in 2020 was needed to address the shortage of available training due to the COVID-19 outbreak. Unlike drinking water operators, who have three years to meet training requirements to maintain their certificates, waste water operators must be provided with 40 hours of training every year. This also allowed operators to remain licensed as they focus on providing proper treatment of waste water.

O. Reg. 76/20 came out of the Attorney General, related to electronic service. This order allows document service in legal matters to be handled electronically instead of in person. The order is needed to continue access to justice while reducing unnecessary contact between individuals, in order to slow the spread of COVID-19.

O. Reg. 77/20 relates to work deployment measures in long-term-care homes, and this of course is a Ministry of Long-Term Care order. This order gives long-term-care homes greater flexibility to identify staffing priorities, deal with staff shortages and address outbreaks. It remains necessary, because flexibility to recruit and reassign staff remains crucial for preventing and managing outbreaks and ensuring stability and quality in long-term-care homes.

O. Reg. 95/20, streamlining requirements for long-term-care homes: This order provides for flexibility and a reduced administrative requirement for long-term-care homes, to respond quickly to the care and safety needs of residents. Namely, it takes preventive measures to protect front-line workers from becoming ill and being unable to work, thereby reducing the risk of staffing shortages and the further spread of the virus among residents. The order is extended to ensure long-term-care homes continue to provide care and safety of residents.

O. Reg. 98/20, prohibition on certain persons charging unconscionable prices for sale of necessary goods: Our government took decisive action against retailers and individuals who chose to exploit consumers by charging excessive prices for goods Ontarians need to protect themselves and their families during the COVID-19 pandemic. The order is in place so that consumers can continue to file complaints with the Ministry of Government and Consumer Services about price gouging with respect to the necessary goods set out in the order, some of which remain in short supply.

O. Reg. 114/20, enforcement of orders: Effective enforcement is essential under the Reopening Ontario (A Flexible Response to COVID-19) Act, to limit the spread and effects of COVID-19. This order ensures a person is required to identify themselves by providing their name, date of birth and address to a police officer or other provincial offences officer if the officer has reasonable and probable grounds to believe the individual has committed an offence under section 10(1) of the ROA. Without disclosure of this identifying information, provincial offences officers would be unable to effectively enforce orders under the ROA.

1020

O. Reg. 116/20, work deployment measures for boards of health: As the province progresses through the framework, there continue to be increased demands on public health units. This order allows boards of health or public health units to take, with respect to redeployment and staffing, any reasonable necessary measures to respond to, prevent and alleviate the COVID-19 pandemic.

O. Reg. 118/20, work deployment measures in retirement homes: This order allows flexibility for retirement home operators to recruit and reassign staff. It remains crucial for helping to prevent and manage outbreaks and to ensure stability and quality in resident care, especially with the increasing cases in recent weeks.

O. Reg. 121/20, staffing flexibility measures for service agencies providing services and supports to adults with developmental disabilities: This order allows developmental service agencies and intervenor service providers to continue to have the authority and flexibility they need to redeploy their staff to support critical services for vulnerable individuals. Streamlined quality assurance requirements continue to be needed so developmental service agencies can alleviate staffing pressure while responding to challenges posed by COVID-19.

O. Reg. 129/20, signatures in wills and powers of attorney: This order allows the execution of wills and

powers of attorney to be completed virtually through technology. Stakeholders have indicated that they are still relying on the order to ensure wills and powers of attorneys can be safely executed, as there are no alternative processes available.

O. Reg. 132/20, use of force and firearms in policing services: This order allows chiefs of police to authorize certain members of a police service to perform duties involving use of force and to carry a firearm if the member has successfully completed the required training with the previous 24 months of this authorization, instead of the annual training required under the Police Services Act. This order allows police personnel to continue to be deployed to keep our communities safe despite delays in annual training due to COVID-19.

O. Reg. 141/20, temporary health or residential facilities: The Ministry of Health, hospitals and municipalities need adequate capacity in the hospital sector and in the emergency shelter system to address possible future outbreaks of COVID-19. The ability to install new temporary health and residential facilities and to convert existing buildings for this purpose will be needed until there is no threat of new waves of COVID-19.

O. Reg. 145/20, staffing flexibility measures for service agencies in the violence against women, anti-human trafficking and crisis line service sectors: This order enables residential violence against women and anti-human trafficking service providers, as well as crisis lines under the violence against women support services program, to continue to have the authority and flexibility they need to redeploy their staff to support critical services for survivors of violence against women and victims of human trafficking.

O. Reg. 146/20, limiting work to a single long-term-care home: This order reduces the movement of employees between long-term-care homes to minimize the risk of COVID-19 transmission to other homes or health care settings. The order is still necessary because limiting the number of staff moving across multiple settings is an important component of infection prevention.

O. Reg. 154/20, work deployment measures for district social services administration boards: This order provides district social services administration boards flexibility to address staffing shortages to ensure personnel are being deployed to critical areas of need to respond to COVID-19. Service areas covered, such as Ontario Works, child care, emergency shelters and homelessness services, under the order play a vital role in responding to COVID-19 and supporting community recovery. While in place, boards are being surveyed on the future of the order and to determine next steps.

O. Reg. 156/20, redeployment of employees of service provider organizations: This Ministry of Health order allows the voluntary deployment of existing home care staff at service provider organizations to provide services such as nursing, personal support services and therapy to other congregate care settings. The need for the order is based on ongoing staffing issues at long-term-care homes and retirement homes.

O. Reg. 157/20, work deployment measures for municipalities: The Ministry of Municipal Affairs and Housing, in response to requests from municipalities, reissued this order to provide flexibility to redeploy staff to ensure front-line services continue to be delivered in critical areas of need. The continuity of service delivery at the municipal level is critical to the health and safety of Ontario's communities and efforts to curb the spread of COVID-19.

O. Reg. 158/20, limiting work to a single retirement home, the Ministry for Seniors and Accessibility: Like the order for long-term-care homes, this order remains necessary, because limiting staff from working in other retirement homes, long-term-care homes and health care settings is an important component of infection prevention and control practices in retirement homes.

O. Reg. 163/20, staffing flexibility for mental health and addictions agencies: This is a Ministry of Health order. This order is necessary to give service providers the required authority to maintain health human resource flexibility, especially as mental health and addictions providers work to maintain in-person services during the second and any potential future waves.

O. Reg. 177/20, congregate care settings: This order has been extended so that staff movement across multiple employers in developmental services, intervenor services, violence against women and anti-human-trafficking sectors will continue to be limited. This infection prevention measure protects staff and vulnerable clients. Notwithstanding any targeted public health measures, it is also critical to ensure these measures are still in place to help prevent or manage an outbreak.

O. Reg. 192/20, certain persons enabled to issue medical certificates of death: This order allows registered nurses appointed as coroner investigators to complete medical certificates of health instead of a physician or a nurse practitioner. This order continues to give physicians and nurse practitioners more time to focus on patient care during the pandemic.

O. Reg. 193/20, hospital credentialing processes: Maintaining flexible health human resources is critical for hospitals during the pandemic. This order allows hospitals to quickly appoint, reappoint and grant privileges to physicians and other professional staff where necessary to prevent and alleviate the outbreak of COVID-19. Hospitals continue to experience increased demands and pressure as a result of the COVID-19 pandemic, making continuation of the order necessary.

O. Reg. 195/20, treatment of temporary COVID-related payments to employees: This order ensures that any temporary COVID-19-related payments, including temporary wage enhancements for personal support workers and direct support workers received by employees in relation to work performed while the order is in effect, are excluded from the maximum increases in compensation set out in the public sector for future generations act under any moderation period.

O. Reg. 210/20, management of long-term-care homes in outbreak: Long-term-care homes continue to experience

outbreaks. This order enables the director, under the Long-Term Care Homes Act, to order the placement of temporary management to effectively protect residents from COVID-19. Maintaining the management order allows the director to swiftly take appropriate actions to reduce or alleviate harm to residents and staff in homes that are in outbreak.

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O. Reg. 240/20, management of retirement homes in outbreak: This order is necessary because retirement homes are still affected by outbreaks. It is important to ensure measures are in place to allow the Retirement Homes Regulatory Authority to act quickly in case of outbreak should an operator be unable or unwilling to manage operations of the home.

O. Reg. 241/20, special rules re temporary pandemic pay: This order was designed to help facilitate implementation of temporary pandemic pay and to provide clarity to employers and employees regarding eligibility for pandemic pay.

O. Reg. 263/20, rules for areas in stage 2: As all non-essential businesses were closed in O. Reg. 82/20, this order was intended to allow some businesses to reopen with restrictions while following public health advice. The order is necessary to support the COVID-19 response framework in the future.

O. Reg. 364/20, rules for areas in stage 3: Similar to O. Reg. 263/20, this order outlines businesses that were permitted to reopen as long as they adhered to sector-specific guidance that was less restrictive than stage 1. Businesses that were not specifically included in the order were permitted to reopen under the general compliance provisions that outline general guidelines that all businesses in stage 3 must follow. The order is necessary to support the COVID-19 response framework into the future.

O. Reg. 345/20, patios: This order helps municipalities quickly pass or make changes to temporary use bylaws, allowing restaurants and bars to extend their patios to facilitate appropriate distancing and maintain public health measures. This order needs to remain in place to help restaurants and bars get ready for the spring patio season, support small business across the province and help maintain and create new jobs to overcome the economic impacts of COVID-19.

COVID-19 defined 2020—not just the pandemic, but how Ontarians rallied to combat the virus, limit the spread and help each other. We need to define 2021 and not let it become a repeat of 2020.

The vaccine has given us hope of a gradual return to normal, whatever “normal” looks like post-pandemic. In the meantime, we must do everything we can to reduce contact and stop the spread by staying at home and abiding by the restrictions in place. These are the precautions that will (a) stop the trend of high COVID-19 transmissions within our communities; (b) preserve health system capacity; (c) safeguard vulnerable populations and those who care for them; and (d) saves lives.

In the meantime, our government will focus on what is important: ramping up vaccine distribution, easing the

burden on our hospitals, long-term-care facilities and health care workers and eventually putting COVID-19 in the rear-view mirror.

Thank you. I'll turn it back over to you, Chair.

The Chair (Mr. Daryl Kramp): Thank you very much, Solicitor General.

We will now proceed in a question rotation as follows. As we always do, we will start up with 10 minutes to the official opposition, 10 minutes to the government and five minutes to the independent member in the first round.

Mr. Rakocevic, you're up, sir: 10 minutes.

Mr. Tom Rakocevic: Thank you, Chair. Thank you, Minister. I just want to wish you and all members of the committee good health and all the best in 2021.

My first question has to do with paid sick days. The associate medical officer of health said that paid sick days would be an effective public health intervention in slowing the spread of COVID-19. Now, Toronto's chief medical officer of health just put out a report calling for the province to provide 10 paid sick days. There are many experts calling for this. My question is: Can the committee share if they have assessed whether guaranteed paid sick leave will drive down the spread of COVID-19, and if they haven't, why haven't they done so?

Hon. Sylvia Jones: Thank you for the question. As the member knows, as with everything that we do to combat COVID-19, it is both working with the federal, the provincial and the municipal governments. I think it's really important when we talk about protecting employees who either have to self-isolate or, unfortunately, contract COVID-19 and cannot go to work, that there are a number of programs in place, including, of course, the two weeks that the federal government has currently provided; many of the supports at the provincial level, particularly led by Minister Clark at municipal affairs and housing; and additional monies provided to our municipalities to allow them to assist individuals who are struggling, whether that is because they are not at work or assistance with their rent and/or mortgage for short periods of time.

So when we're talking about supporting individuals who are struggling as a result of COVID-19, it is a three-government responsibility, and so I think that when we reference things like paid sick leave, it's important to overlay what is already in place. As I say, that is, to some degree, through municipal affairs and housing, flowing to our municipalities, with support on the social services side and, of course, federally with the two weeks. My understanding is that there are ongoing discussions about the federal government extending that program.

Mr. Tom Rakocevic: Thank you, Minister. You're right: COVID response does require all levels of government. But sometimes we're hearing the government say that there are certainly holes in the federal plan, and then at other times they seem to be relying on the federal plan to do the lifting for them.

But I would like to move on. The second part is Dr. Brown. Yesterday he said that he did not believe that a plan without social supports would work, but the new public health measures had nearly no changes or social supports. Certainly, I can attest that my community has

been very hard hit—so has the Premier’s—and many in the community are saying that they’re not receiving the targeted and direct funding they really need to best combat COVID-19. Did the committee receive expert feedback stating that any plan without social supports would fail?

Hon. Sylvia Jones: As I mentioned in my previous response, Chair and honourable member, there have been a number of programs specifically targeting individuals through municipal affairs and housing that flow to our municipal partners and allow people who are right on the ground to assist those individuals.

As opposed to a top-down program, we have empowered municipalities to react and respond to the parts of their community and the individuals within their communities that are most hard hit, which is why we have flowed the money from municipal affairs and housing down to our DSSABs and our municipal partners: to allow them the flexibility to provide supports where they are most in need. I think it’s really important that we understand that the closer you are to the issues, the better we are able, as a government, to assist and respond.

Mr. Tom Rakocevic: Okay. Thank you for that, Minister.

My next question is something that I have brought up time and again in this committee, and it has to do with overcrowding on buses. I had the opportunity to ask it to the Minister of Health here. First I was told that it was a transportation issue; then, about a month after the first time I asked, after she had said she’d bring it back to the table, she said that she would again bring it back to the table. They haven’t discussed it.

Can you comment first on whether or not this has been discussed by the command table? Certainly they should be ruling on places where we think high levels of COVID-19 transmission are. In fact, I just heard from a nurse yesterday saying that she has to get on a packed bus to go to and from work, and it was raising her concerns about the chances of COVID transmission there. So has there been any commentary on this?

Hon. Sylvia Jones: Well, frankly, there has been action. Both Metrolinx as well as, again, all municipal partners, all municipalities that have public transit, have been flowed money from the Ministry of Transportation to make modifications to their bus systems and to continue to allow them to operate when their numbers have decreased. Money has flowed from the Ministry of Transportation, Metrolinx and TTC have modified, and an additional \$15 million was given for cleaning alone. So there are lots of supports that have been added. If you have specific examples, I would encourage you to reach out to either myself or the Minister of Transportation, but the money has flowed, including \$15 million for cleaning.

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Mr. Tom Rakocevic: Minister, I have attended a recent TTC meeting and listened to their presentation. They’re certainly seeing a huge budget shortfall because of lockdown and whatnot and overall ridership numbers. So funding and the discussion of funding has come with strings attached, and the funding that I’ve heard has come

just to deal with some of the shortfalls. But I have not been hearing about specific targeted funding in areas where we have high levels of COVID transmission and a need for, at least on a temporary basis, more buses being added to the line. Each time I’ve brought this up, it was said that it would be brought back and discussed, and to my understanding, the municipality that I’m in within Toronto is not seeing that additional funding for help.

Please bring this back to them because, again, I don’t want to be able to ask this again at the next committee hearing for my community members—that they’re not seeing additional bus service there. People are very concerned.

Hon. Sylvia Jones: I would recommend that you ask where the \$2 billion to all transit agencies—how that has been used, and I would reference the \$15 million that was given for cleaning. The money as flowed and, again, the organizations, the agencies and the municipalities most directly providing the services should have and need, frankly, the flexibility to spend that money in a way that will keep their system operational and as safe as possible for their staff and the residents who are using the transit.

Mr. Tom Rakocevic: Okay. I see you’re leaving this at the feet of the TTC, but I’d like to move on. The next—

Hon. Sylvia Jones: Two billion dollars.

Mr. Tom Rakocevic: Again, they have an overall shortfall—

The Chair (Mr. Daryl Kramp): Two minutes.

Mr. Tom Rakocevic: Oh, two minutes.

They have an overall shortfall that they’re facing right now. They’re just trying to keep afloat, and they need additional targeted resources for specific things like this.

But my last question—and there’s not much time—is, in the last committee meeting, we asked whether the government is tracking workplace outbreaks. At the time, the Solicitor General—who is you—said that there was no need to report on workplace outbreaks. Since then, Toronto Public Health has decided to publish workplace outbreaks, even naming specific workplaces that have major outbreaks. If Toronto Public Health believes this is in the interest of the public, can the committee confirm whether the government has received similar advice to do the same at the provincial level?

Hon. Sylvia Jones: When the place of the business has an outbreak and the public have access to it, I think that there is a very reasonable argument that would suggest that it is incumbent on that business to acknowledge the outbreak, say what they have proactively been doing—“We’re shutting down for two days to do deep cleaning. We will be opening to serve you in 48 hours etc.”—which often is the case. In terms of businesses that do not have access to the public, internally, the staff are notified.

I want to reinforce that through the Ministry of Labour, we have 450 labour inspectors across Ontario who are going into businesses that are open, manufacturers that are open, to make sure that they understand and are adhering to the additional public measures as they go forward, and we’re doing, as I understand it, through the Minister of Labour, Minister McNaughton, some very targeted

enforcement to the communities and the businesses that are experiencing a higher percentage of outbreaks. That work is ongoing, and I think it's important work, because people should have comfort that when they go into a place of work, the business is adhering to all of the public health guidelines and keeping their employees safe.

And if I may, the TTC was given—

The Chair (Mr. Daryl Kramp): Thank you, Minister. Now we'll go to 10 minutes to the government, first round. Ms. Hogarth.

Ms. Christine Hogarth: Happy new year to everyone. I just want to thank the minister and the Premier for your leadership on this file. Any time we can talk about staying home and wearing a mask, it helps save lives, so we just want to make sure we can say that as often as possible.

I also want to thank you for the over \$2 billion that has been allocated through the Safe Restart Agreement for Ontario's 444 municipalities. That really did help the city of Toronto. Over \$400 million was given to the city of Toronto, so I want to thank you for that funding as well.

My question is around the clarification. Yesterday, we talked about—the emergency declaration under the Emergency Management and Civil Protection Act was declared. There was a little confusion, so I'm looking for some explanation about how this interacts with the reopening Ontario act. In your opening statement, you indicated that the ROA orders will continue, but does that mean that there is a double-layered system of rules? Would one set of rules supersede the other?

Hon. Sylvia Jones: No, it's not a case of one overriding the other. We actually work very, very hard to make sure that the regulations under the ROA, the reopening Ontario act, mesh and work together with the EMCPA. The EMCPA, the declaration of emergency, is very targeted, and, frankly, the biggest piece of it is the stay-at-home order. To your earlier comment, it, frankly, is the most critical piece to ensure that we try to limit the spread, because the public health experts have told us that it is community spread that has continued to be on the rise and putting the rest of us at risk.

Ms. Christine Hogarth: I have a follow-up question. Once again, any time we can remind people to stay at home and wear their mask, it is so important, especially in a large city. Obviously, yesterday's declaration of a provincial emergency adds a whole layer of complexity to the already complex system of police enforcement. If the goal is to ensure individuals are following the orders, how does this whole new system make the rules easier to follow? Could you please explain?

Hon. Sylvia Jones: Yes, sure. The easiest way—and I described it this way to my constituents—is that if you don't need to go out, then please don't. At the end of the day, this order will be successful if people respect it. In the same way that the vast majority of us would never think of drinking and driving, the vast majority of us have chosen to adhere to the public health guidelines. We need to convince, and we need, frankly, to make sure that our friends and neighbours who are a little more—how shall we say—lackadaisical, understand how critically important it is. It's not only about protecting yourself; it's about

protecting everyone else that you or the people that you come in contact with interact with. Frankly, the numbers show that the most vulnerable are our seniors and our elderly. I don't think any of us want to be in a place where we don't protect our most senior citizens.

Ms. Christine Hogarth: Thank you, Minister, and thank you once again for your leadership. I'll pass it off to MPP Martin.

Mrs. Robin Martin: Thank you, Minister. Happy new year to everybody. Let's certainly hope 2021 sees us out of this pandemic quickly. It's very difficult, I think, for everybody. Honestly, I would add that we should be careful about everything we're doing as individuals also for our health care workers, who are every day fighting the battle on the front lines. We can't forget that they're putting themselves at risk for us. I want to remind people of that as well.

Throughout the world, Minister, we're seeing rising rates of COVID-19 and increasing hospitalizations. Unfortunately, Ontario has not been immune to these issues. Back on Boxing Day, remember, the government put into place this lockdown to prevent the further spread of the virus, and you mentioned that in your comments. Clearly, since then, more stringent measures are apparently necessary. Could you please explain to the committee why the December shutdown has not really bent the curve, and what specifically our new changes will do to make a difference?

Hon. Sylvia Jones: Yes, it's a good question. The lockdowns that we put in place on December 26—frankly, I think if we had not done that, our numbers would be even more disturbing. So the December 26 strengthening helped us, and we only have to look at other jurisdictions in Canada and around the world to see what happens and how quickly if we don't act, Ireland being the most recent case study.

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I don't want to compare Ontario to, you know, "We're doing better than others because"—but I do believe that when people adhere to the restrictions as we've laid them out, we do see success. As disturbing as 2,000 and 3,000 COVID positives in a day are, I believe that they would have been much worse if we had not done that initial lockdown on December 26. Now with the declaration of emergency, we're reinforcing the "stay at home, stay safe, save lives" piece.

Mrs. Robin Martin: Thank you, Minister. I have another question, which is really about workplaces, because it seems to be that there are some outbreaks happening in workplaces. I want to know if the government, through you, can explain what we're doing to address workplace transmission in sectors that do remain open, and maybe whether we're using data or other things to inform those kinds of decisions, because I think it's really important to get a handle on those.

Hon. Sylvia Jones: Absolutely, that's an important issue to raise. There's no doubt that food production and critical manufacturing must continue to take place. Even when you remove all the non-essentials, there are still workplaces that must be on-site and continue to operate.

As I mentioned previously, the Minister of Labour has 450 labour enforcement officers out across Ontario. To your point about targeting, they are very much focused on the sectors that obviously continue to stay open, but also that have seen outbreaks. We have put additional pieces in the EMCPA, including the need for masking indoors. Pieces like that will help limit the spread, but the enforcement with the labour inspectors is also in place.

Every employer in Ontario, if they are open or continue to operate, must have safety guidelines on-site and understood by all their employees—

The Chair (Mr. Daryl Kramp): Two minutes.

Hon. Sylvia Jones:—and when they don't adhere, frankly, there are fines.

Mrs. Robin Martin: Okay. So we're relying on employers to be setting up these guidelines. We're putting in place indoor masking, as you said, and having our inspectors going around more frequently to some of these places.

Hon. Sylvia Jones: We're not just relying on the employers to set up the plans. The Ministry of Labour has put out literally hundreds of guidelines specifically related to whether you're in construction, the type of construction—very specific guidelines, depending on what your workplace is and does. There has been a lot of feedback and advice provided by the Ministry of Labour.

Mrs. Robin Martin: Thank you, Minister.

The Chair (Mr. Daryl Kramp): You have one minute.

Mrs. Robin Martin: Okay. I guess one thing I didn't get an answer to on that, Minister—I don't know if you have anything specific, but are we using data to inform those decisions about workplaces and outbreaks?

Hon. Sylvia Jones: Yes. The inspectors are focusing on the areas that have had the higher numbers or percentages of outbreaks. The guidance documents that have been provided are very site-specific, so a food processing plant will look very different than an auto manufacturing building. The Ministry of Labour, using the public health guidelines, has put in place documentation to assist businesses and manufacturers to put together those safety guidelines.

The Chair (Mr. Daryl Kramp): Thank you, Minister.

We will now go to the independent member. Five minutes, Mr. Fraser.

Mr. John Fraser: Thank you very much, Minister, for being here. I recognize that you're at the pointy end of the stick, so you're carrying the can for the government.

I have to tell you that I'm very frustrated, like many Ontarians are, about how the government is communicating to people. I know you said we don't want 2021 to be like 2020, but what we did before Christmas is that we said on the Friday, "We'll tell you something on Monday," which we ended up doing on Saturday, when we know that decisions are critical. Quick decisions, quick action, are critical in this pandemic. And now we have a situation where the government is saying on Friday, "We're going to tell you something on Tuesday that we're going to do on Thursday, but all the rules aren't going to be clear until Wednesday." That's really concerning.

In that same package you're saying to people, "Don't go out unless it's absolutely essential," and then you're saying to non-essential businesses, as you described them, "You can stay open." So here's my problem: The messaging is not clear to people, and you're asking peace officers right now to exercise judgment in something that's not totally clear.

There are many people in my community who don't speak English and don't speak French. They're new and maybe people's judgment is different. You're leaving a lot up to people. What I'd like to know is what the government has done to communicate to people clearly, in those communities that are hardest hit, that have problems with language, a different culture, different understandings. How are we going to make sure we protect those communities so that they can do the right thing, but also so that they're not going to be unfairly penalized because it's not being communicated to them clearly?

Hon. Sylvia Jones: Well, when the Premier says, "Stay home. Stay safe. Save lives," that's a pretty clear message to me. In terms of communicating that message to individuals who do not have English or French as their first language, we have done many, many social media campaigns. It is incumbent, frankly, on all of us as members of provincial Parliament in our own communities to assist in that message. I see you nodding, and I trust that you are doing that, because you're an honourable member, but we all need to do that.

When we talk about or feed into the confusion, it's not assisting our community members, our constituents, and it is certainly not keeping them safe. So in terms of the regulations and the message, the clearest message that we can provide—regulations have to be written, legislation has to be prepared, but the clearest message that we can assist and provide our citizens with is: Stay home. Stay safe. Save lives.

The Chair (Mr. Daryl Kramp): One and a half minutes.

Mr. John Fraser: Well, you'd think that we would have prepared a suite of regulations to be ready if we found ourselves in the situation so that when we found out on Friday that things were bad, we would have actually taken that action. But that's not my point.

What I'm saying right now—and I have full respect that you're here and that you are responsible for peace officers. I think what we're asking our peace officers and some members of our community to do—because of the way that we're communicating this, do you know what? The place that I buy my skis from—I can go and get a pair of skis next week, because they're open. I'm not supposed to go out, but they're still open. There are many other examples of that, of things that aren't essential.

When you leave something open that you're calling non-essential and telling people only to go out if it's essential, they're trying to figure out what in God's name you're saying. It's really frustrating. It's hard enough for me to understand, and I speak the language. I've lived here for 60 years. I'm frustrated because I think it's going to be really unfair to some people, and they want to do the right

thing. Because we're not communicating a consistent message clearly and effectively, they're going to be disproportionately affected by this.

The Chair (Mr. Daryl Kramp): Thank you, Mr. Fraser. Your time is up.

We will now go back to the official opposition for 10 minutes. Ms. Singh, I recognize you.

Ms. Sara Singh: Thank you so much, Chair, and happy new year to everyone. I think we're all hoping and praying that 2021 will look very different than 2020.

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But thank you, Minister, for taking time out to be at the committee today and answer some of these very tough questions that we have, because there is just a lot of chaos and confusion right now with the recent announcement. I really think that's what our colleague Mr. Fraser was trying to allude to: that there's a lot of uncertainty and a need for clarification with respect to how these orders will be enforced, what's essential and what's not essential, so maybe I'll start off with trying to wrap our heads around how these decisions were made.

Last week, we saw the Premier say that these numbers were going to make us all fall off our chairs, yet quite a delay in actually springing into action, not only from the Premier but from cabinet as well. It's nearly five days later and things are still very unclear. So can you just help us understand why it took so long for the government to move forward, to put forward new emergency orders? We saw what happened just before Christmas with the surge in caseloads because of your inaction. Can you just help us understand why this process wasn't initiated sooner rather than later?

Hon. Sylvia Jones: All of the decisions that come before cabinet are driven by public health advice, as well as the modelling that we see, because it is not just about seeing a disturbing increase in the numbers of COVID-positive cases; it's also overlaid with things like: Do we have hospital capacity as those numbers increase? Are there specific regions within Ontario and are there specific communities within those regions that are more at risk? Now, these are very important decisions, critically life-and-death decisions, and I think it's really important that we take all of that data in.

As I said, it's not just about COVID positives. If I may, on December 26, we weren't talking about a UK variant and we weren't talking about some of the other pieces that are coming into Ontario that we have to deal with. We have health care workers who have been working flat out for 10 months, and now we have this beautiful opportunity to vaccinate people as quickly as we get the vaccines. So there is another layer of complexity on what are the capacities within our public health units, what are the capacities within our medical professions to provide this other critically important piece that, frankly, we didn't have in most of 2020.

I understand. Everybody can say, "Why can't you work faster? Why can't you do more?" There are a lot of data pieces that must be considered and it is not just about COVID positivity rates, as disturbing as they are.

Ms. Sara Singh: Thank you for that, Minister. I think the concern is that the data is there. It was very clear what direction we were headed in, yet there was a significant delay in actually acting on that, and even now, the measures that have been imposed here in Ontario don't seem to actually address the root problems of the issue. As we've heard my colleagues discuss and ask questions around workplace spread, understanding what the evidence is telling us is that those are the areas that we need to be looking into providing measures for, measures like paid sick days. It isn't just the opposition members who have been asking for paid sick days. In fact, many of the mayors of the large cities, including mine here in Brampton, have been pushing, along with our medical officers of health, for paid sick days.

With that evidence, when we know that the spread is happening, for example, in workplaces, can you help us understand why, from December 26 to now, those measures still haven't been increased or implemented to actually address those root issues within manufacturing, for example, or, again, within those workplace situations?

Hon. Sylvia Jones: Well, respectfully, member, the public health guidelines, the public health units are telling us that the spread is not exclusive to workplaces. It is community spread. It is people gathering together and then taking it back to their homes and infecting their loved ones. It's all part of a very complicated puzzle, and you can't always simplify this. People's lives are at stake, so we have to make sure that we don't oversimplify this very critical piece, and that piece includes if you do not have to go out, don't go out. Some 450 workplace inspectors inspecting essential businesses and manufacturers—I refuse to oversimplify this. I do not want to be responsible for food shortages because we shut down food manufacturing—

Ms. Sara Singh: Sorry, Minister. I don't think anyone's asking for those workplaces to be shut down. I think what we're asking for is support for workers who are going into work who are not feeling well and then going back into their homes, often in congregate living situations, who do not have the ability to isolate and do not have the ability to take time off of work. So they're going back into those workplaces and infecting others, contributing to the community spread that we see. The data is very clear on that.

What we're asking is not that you shut those things down. What we're asking is that they implement proactive policies that would actually address the root of the issue, that both medical experts and policy experts have advised your government are necessary to actually stop the spread of COVID-19 in 2021. Your government has—

Interjection.

Ms. Sara Singh: Can I just ask you a question, then? Cabinet obviously did have a discussion about these paid sick days. A decision was made not to implement them. Can you help us understand how that decision was made and why this government feels that there is a need to rely only on federal supports and not implement additional measures here at a provincial level?

Hon. Sylvia Jones: The ministry, at the request of our municipal partners—because we are all working together on this—has funded some hotels to allow individuals who need to self-isolate away from their family, either because they have COVID or because they are waiting for their test results to come back—those opportunities are available in the hot spots. Municipal affairs and housing has worked with the municipalities to do that. And as you mentioned, the federal government has already implemented a 10-day paid leave.

You cannot look at this in isolation. We have to look at what the federal government has provided and not duplicate their efforts. When necessary, when we see gaps, we augment at the provincial level, and we also give additional resources to the municipalities through their DSSABs and their social services agencies to provide that additional support on specific areas in their community.

Ms. Sara Singh: Okay, thank you for that. But I think it's important to acknowledge that even in the community of Brampton, while there was an announcement about isolation centres, those centres have still yet to be opened. This is all a little too late. Honestly speaking, I think what we're hearing from Ontarians is that this is all a little too late and it's just not all happening quickly enough.

I think we know what we know. We knew these things through the first wave. What's very concerning is that, even as we now enter a new year, the government isn't implementing the measures at a rate that's actually going to help us stop the spread in an effective manner.

The Chair (Mr. Daryl Kramp): Two minutes.

Ms. Sara Singh: Thank you, Chair. I just need to move us over to talk a little bit about long-term care. As we see that there are severe outbreaks across the sector, and as time and time again we heard from government and the Premier that there would be an iron ring built around these long-term-care homes, that they would be prioritized for a vaccine, can you just help us understand what is going on in long-term care? Why is there not an iron ring? Why has the staffing shortage not been addressed by cabinet? This is really contributing to—and the data is clear—significant outbreaks and spread in the community as well. But this is an area where we haven't seen much action from your government. Can you help us understand why that iron ring isn't there and what's going to be done to help address some of the staffing shortages in long-term care?

Hon. Sylvia Jones: I'll begin with the staffing shortages. I won't point to the fact that there have been historic challenges with retaining and keeping PSWs in the workplace. That's a historic issue that we can set aside and talk about at length at another time.

We have some exciting programs through the Ministry of Labour that are fast-tracking individuals who want to become personal support workers and other health care workers. While the numbers are very early, some very exciting feedback is coming that, within a week of someone starting a PSW training program, they're being offered a full-time job. So the opportunities and the jobs are out there. We've set up the programs within the ministry of labour, colleges and training, and that work is ongoing.

Some of the pieces related to protecting our long-term-care residents are critical. There were a number of concerns raised about—

The Chair (Mr. Daryl Kramp): Thank you, Minister. I appreciate that. The time is up, though.

We will move on to 10 minutes to the government, and we will recognize Mr. Oosterhoff, sir.

1110

Mr. Sam Oosterhoff: Thank you very much to the Solicitor General. I know there are a lot of things on the go, and it's obviously very important for the transparency to the people of Ontario that there is this opportunity to hear from yourself. I also appreciate having had guests from other ministries and the chief medical officer as well here in the past and look forward to these continued conversations, because people are frustrated right now. I think we can all get a sense that there's a lot of COVID fatigue. There's a lot of concern about what the future holds. I know something I've heard from many people is this feeling that it was supposed to all be over by now. I get that the pandemic is not over just because people are over it; I understand that. But that is something I know we're struggling to deal with in our community.

My question, I guess, would be around that intersection of the reopening Ontario act and the emergency measures, because I'm getting some confusion around this. People are asking, "Does this mean the reopening Ontario act pieces end January 23 and then the emergency measures act kicks in, or is it now already the emergency measures piece?" Could you lay out some of that framework for people who are confused by what's coming next and what this really changes?

Hon. Sylvia Jones: Sure. In my opening remarks, you'll notice that I referenced many of the regulations. Almost all of those regs are attached to the reopening Ontario act. The EMCPA, the declaration of emergency, works together with the reopening Ontario act. As I mentioned previously, the biggest piece of the EMCPA is the stay home, stay safe, save lives.

I will say, I also have been asked to lead the vaccination rollout. That's the hope that people need. I am seeing COVID fatigue; I think we're all seeing it in some of the activities that, frankly, are making it more challenging for limiting the spread. But as we get more of the vaccines, as we are able to protect our most vulnerable and spread out from there to the people who are providing services—the health care workers, the first responders—and all of our seniors—who, unfortunately, have a disproportionate likelihood of having serious effects if they contract COVID-19, and unfortunately, most disturbingly, the death rates do go up as the age goes up.

The exciting part for us in 2021 is that the vaccines are on their way. We just need a bit of runway to make sure that we stay safe in the interim. The last thing we want to see is, as you start to see vaccination rollout, people let down their guard and people end up paying the price by getting COVID-19.

I get it. I guess the positive for all of us should be that two months ago, we didn't have a vaccine. Now, we have entire long-term-care homes that have been in the hot

zones for the longest period of time fully vaccinated. It's really exciting to see and hear public health officials talk about how individuals who are residents in long-term-care homes are putting their hand up and saying, "Give me the vaccine"—a 90% success rate in terms of willingness to have the vaccine, which, as I understand it, is unheard of. So there is positive news coming down the pipe. As soon as we get more, we can vaccinate more.

Mr. Sam Oosterhoff: Yes, that's a really good point. It wasn't actually going to be my next question, but I'm going to go in that direction, because you raised something that's very important in vaccine hesitancy.

I wouldn't say that there's always necessarily the vaccine denial, but there are questions about RNA and all that sort of stuff. People don't know what's going on. How can we make sure people understand that this is a safe vaccine—that people are aware of the work that has gone into it, the safety, but also how those questions that they have, how we can ensure that there are answers? I think it's easy to just say, "Oh, everyone get vaccinated," and obviously that is, I understand, where we want to be headed, but at the same time, there are those hesitations. What's going to happen to make sure that we're having those conversations that are needed to instill trust in our population?

Hon. Sylvia Jones: That's a really good point. Thanks for raising it. The vaccine task force has very specifically reached out to ethicists, to vaccination experts. We are, of course, relying on Health Canada's guidance and advice on who to vaccinate, the actual manufacturers—currently, of course, we only have two, but we're expecting four to five more coming down the pipe, assuming Health Canada approves them. We are relying on those very specific scientists, ethicists and vaccine experts to ensure and explain: What is the difference between Moderna and Pfizer? What can we expect in terms of side effects, if any?

Again, I will say, the reading that we have been provided and is available through the Health Canada website says that the efficacy for both of those vaccines is in the mid-90s. So really, really positive things coming down through the vaccination side.

One of our responsibilities as a vaccine task force will be to put those experts in front of the public to allow them to ask those questions. We have sent out a number of frequently asked questions to allow long-term-care medical staff to share it with their residents and their workers and their essential caregivers so that they have all the information that they need to make a decision on whether, ultimately, they want to get the vaccine.

Mr. Sam Oosterhoff: Thank you. I'm going to turn it over to MPP Coe, but I very clearly want—a pressing question that I have been getting so much is Joe's Hardware is closed, but Costco is open; why is that? Can you provide some context for the decisions?

The Chair (Mr. Daryl Kramp): Three minutes left.

Hon. Sylvia Jones: Yes, so through the difference between—I referenced it earlier, about food and access to food. I do not want, and I don't think any of us want, a situation where there are food shortages or limits to where people can access their groceries.

So we have made a decision that, to keep as many people safe as possible without causing shortages or perceived shortages, the stores selling primarily food can continue to provide that essential service, and those, like hardware stores, will continue to be able to provide the service curbside. But it does limit the number of customers inside the store, protecting the staff who want to and continue to fulfill those orders. But it gives us another barrier protecting staff and the customers.

Mr. Sam Oosterhoff: Thank you.

The Chair (Mr. Daryl Kramp): Two minutes, Mr. Coe. Go ahead, Mr. Coe.

Mr. Lorne Coe: Good morning, and thank you so much, Minister, for your leadership on this particular important file. Minister, we have heard stories from Quebec about the challenges of enforcing their curfew. How does Ontario intend to avoid these kinds of challenges with the robust stay-at-home order that is in place now?

Hon. Sylvia Jones: Yes, thank you for that question. It's an important one, and one we considered when we made a conscious decision not to go forward with a curfew. We understand that people do not all work traditional 9-to-5 hours. In order to ensure the essential workers can continue, we made a decision to say "stay at home" as a stay-at-home order, as opposed to a curfew. And the big and most important piece of that is an acknowledgement that, in fact, the majority of Ontario workers do not work Monday to Friday, 9 to 5. So we're acknowledging the essential work that is happening outside of traditional hours and just being clear with our stay-at-home regulations about what is allowed and what is not.

The Chair (Mr. Daryl Kramp): You have 30 seconds.

Hon. Sylvia Jones: If I can just loop back to a comment made by MPP Fraser about exercise, that's actually a charter right, that we have the right to exercise, and frankly, for our mental health and everything else, I think it's pretty important for us to continue that. Thank you.

The Chair (Mr. Daryl Kramp): Thank you very much. We are out of time now, so we will now go to Mr. Fraser. You have five minutes, sir.

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Mr. John Fraser: Thank you again, Minister, for being here.

The COVID-19 vaccine rollout is probably the single most important thing we can do to protect each other, get our economy back on its feet again and protect the most vulnerable: seniors in long-term care. At this very moment, there is a technical briefing occurring for vaccines. No members of this committee are invited to join; they can't. We haven't been briefed. No members of the opposition can go into that briefing.

When this pandemic started, critics were getting briefed, members were getting briefed as to the actions of the committee. Now that we have the single most important thing, we haven't really heard very much about it, and there's no real, clear plan, with milestones and goals

and regular reporting and specifics, that I as a member or any of my colleagues can point to.

I think my questions that I have are the same as every other member's on this committee, except I can ask them out loud—questions like, why did we pause vaccinations over Christmas? If we know that the most important thing to do is to get vaccinations into people's arms, why did we stop?

We all need to work together on this, and I know that we all want this to be successful. What I think we need to do is to articulate a clear plan to Ontarians as to how we're going to do this. That hasn't happened up till now. We know that vaccinations are supposed to be getting into long-term care, but there have been people who have been vaccinated who shouldn't have been first in line.

Minister, when are we going to see a clear plan for vaccination rollout? I understand our supplies are limited, so we have to use them wisely. I think that the government saying, as Dr. Kevin Smith did, who is at UHN, is to prioritize speed over precision. I don't think that's what people in long-term care need. So when are we going to see a plan?

The next question after that is, will you commit to making sure that members of this Legislature, members of this committee, are briefed on that very important plan for every Ontarian?

The Chair (Mr. Daryl Kramp): Minutes: two and a half.

Hon. Sylvia Jones: Thank you, Chair.

Phase 1 of the vaccination plan has been made public. It has been out for a number of weeks. We have given the opportunity for members of the media to review it. We have made it a public document, and it's very clear it is long-term-care residents, long-term-care staff, essential caregivers in long-term care and critical health care workers. The vaccine rollout will not be a pathway that is, "You must 100% have long-term care complete before you move to the next section," because, frankly, it is a voluntary vaccination.

To your point about having the local medical officers of health and the hospital CEOs have some local control and discretion about who gets that vaccine, I think it is an important piece of how we ensure that the vaccination is done fairly. There are very specific examples where a health care worker who would traditionally be working with COVID patients is now working in an ICU. I don't think any of us would disagree that they need to be vaccinated.

Mr. John Fraser: Minister, I have to interrupt you, because I [*inaudible*] this and I've got to just quickly say—

The Chair (Mr. Daryl Kramp): One minute.

Mr. John Fraser: —saying "speed over precision" is not what we need. We know that 70% of the deaths are in long-term care. It's imperative that we get it there, and there is no clear plan.

What you're talking about, what you've said, is more of an idea, because what it doesn't actually include is specifics and milestones and regular reporting. All three of those things are missing. That's what you need when you

have a plan, and Ontarians need to know that. We need to know that, at this committee.

My point is, you're leaving all of us in the dark on the most important thing for Ontarians. That's what's happening here.

Hon. Sylvia Jones: I respectfully disagree. The plan is long-term-care residents, long-term-care staff and critical support care workers. In the—

The Chair (Mr. Daryl Kramp): Thank you, colleagues. I'm sorry, but the time is up, now, for the questioning on that. We apologize, but we have our time limitations. The Chair would love to be able to continue the dialogue, but we must carry on.

We now go to the official opposition for 10 minutes. Mr. Bisson, please.

Mr. Gilles Bisson: I've got a series of questions, but the first one I want to ask is—first of all, this comment: Our constituency office phones are ringing off the hook, our emails are loading up, because there has been more confusion created by this government in regard to announcements in the last 30 to 45 days than meets the eye. Part of the questioning that I want you to respond to is to try to clarify some of that.

The first one is, small businesses all across Ontario, let alone in our ridings, are pissed. They see their competitor down the street, Walmart, Costco, in some cases various other types of box stores, that are not selling groceries in some cases—as I see here down in Toronto; I see box stores that don't sell groceries that are operating, and quite frankly, their hours are posted online. So my small businesses, like yours, are asking the simple question: How did you come to this decision, medically or scientifically, that it's safer to walk into a Costco or a Walmart to buy a set of skis or to buy whatever it is that you're looking to buy than it is to go into a smaller business owned by an individual, who is also able to provide the type of isolation necessary in their store? What scientific data did you come up with to come to this decision?

Hon. Sylvia Jones: It was all based on public health guidance on controlling and limiting and flattening the spread of COVID-19 and to ensure that we do not see shortages of food or driving more people to be concerned about shortages—because there are no food shortages in Ontario, mercifully. Part of it is because we have allowed those critical essential services to continue.

Mr. Gilles Bisson: You're allowing stores to remain open that are box stores that are not selling food. Just drive in to Toronto. I'm in Toronto right now, and I've seen that myself as I drive by these stores. Again, I'm going to say, why is it that we trust big box stores more than we trust mom-and-pop self-owned businesses across Ontario to do what's right for their clients in order to keep them safe?

Hon. Sylvia Jones: I would go back to the 450 labour inspectors who are targeting the businesses that remain open because they are essential and ensuring that they are complying with the public health guidelines and the safety standards that must occur. We are doing that. There have been additional labour enforcement officers hired—

Mr. Gilles Bisson: [*Inaudible*] does nothing for small businesses. Minister, just one second. What does that do for the small, independently owned business that's trying to essentially not go under during this pandemic when they see there are large competitors operating with immunity? You can have all the inspectors you want, but those large businesses in some cases don't follow the public health guidelines. As many inspectors as you have, you don't have enough to be able to clamp down.

My question is, why don't we trust the small business sector to do what the large box stores are doing now, period? Why? Do you not like these people?

Hon. Sylvia Jones: Because we are all trying to work together to flatten the spread and avoid the spread of COVID-19.

Mr. Gilles Bisson: Okay. They're not feeling the love right now. They're not feeling—

Hon. Sylvia Jones: Well, then I would respectfully suggest that you have to work with them to make sure that they are tapping into many of the programs that are available, including the \$1,000 for PPE, including relief for both—

Mr. Gilles Bisson: The programs that you're offering [*inaudible*] the money that they're losing as a result of being forced to close. Listen, you've answered pretty well what everybody has understood, which is that the government has decided to help big box stores and forgo small businesses. I think that's wrong. As a New Democrat, I think we should favour small businesses, but that's a whole other issue.

I want to come back to the issue of—in Quebec, they've issued a curfew. In that curfew, you're allowed to go to work, you're allowed to go get groceries, to go to the pharmacy, all those types of things, and not get charged. But if you are doing something other than those actions, such as going to work—you can get charged if you're not out there for the reasons set out in the guidelines.

Can you tell me how your stay-at-home order is any different than a curfew? Because essentially what you've done is, you've said, "Okay, I'm not doing a curfew. The cops aren't going to chase you down the road when you're doing whatever." But you've got a stay-at-home order that, essentially, is the same as a curfew. So what's the difference?

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Hon. Sylvia Jones: The difference is an acknowledgement that the average Ontario worker does not work Monday to Friday, 9 to 5. It's an acknowledgement that we have people who, for very legitimate reasons, must be out of their homes after 8 p.m., using Quebec as an example.

Mr. Gilles Bisson: How is that different—

Hon. Sylvia Jones: With the stay-at-home order, the stay-safe order, we're making sure that people understand there are very specific reasons why you should be leaving your home, and laying that out in a way that they understand.

Mr. Gilles Bisson: Minister, we all agree that Ontario has to do more to contain the spread of this virus. I'm not

arguing for a second that we don't have to do things that are, quite frankly, hard and unpalatable for us as politicians and as chief medical officers of health to do, because we need to keep citizens safe. But my question to you is that I saw the Premier go out yesterday and say, "This is not a curfew. I'll never go there. I don't believe in trampling on people's rights," but you essentially put in a stay-at-home order that is in some ways more restrictive than a curfew. I'm trying to figure out what the difference is and you haven't really provided an answer.

Hon. Sylvia Jones: The difference is an acknowledgement that people work outside of—

Mr. Gilles Bisson: A curfew allows the same thing.

Hon. Sylvia Jones: —6 a.m. and 8 p.m. It ensures that we acknowledge that and we make sure that we are protecting as many people as possible with a very clear message, which is, "Stay at home unless you absolutely need to leave."

Mr. Gilles Bisson: Listen, I don't disagree with you. Stay home. I've been staying at home like everybody else. I'm in my apartment in Toronto rather than being at Queen's Park today, because I want to stay isolated and keep my family and the citizens of the city of Timmins safe. I get it. But my point is, a curfew by any other name is called the stay-at-home order in Ontario.

Anyway, my next question: My other two colleagues raised this issue, and that's the issue of allowing people to get time off with pay so that they can properly isolate. You answered, "Well, the federal government, they've got that program. We don't want to trip all over them. We're working with them, and we're all working together."

But for some employees, they don't have any sick benefits. The employer, in some cases—I know, for example, in the mining sector where I'm at, they provide sick leave for anybody who wants to stay at home because they think they may have COVID, period. That's the thing that we should be doing. But as the medical officers of health have said, there are all kinds of people who don't have the benefit of having an employer that is able to do that and as a result are having to go to work and continue to contaminate other people because they can't afford to stay home.

Why is Ontario not prepared to pony up and put in place its own dollars to augment what the federal government is doing towards making sure that people don't have to go to work when they feel that they are infected?

The Chair (Mr. Daryl Kramp): Two minutes.

Hon. Sylvia Jones: Respectfully, Ontario has put in place—and that is, of course, through the community benefits programs initiated by the Ministry of Municipal Affairs and Housing. We have given those local DSSABs, we have given those local municipalities the ability and the funds to assist more people who may need it.

Mr. Gilles Bisson: Minister, if I'm working at a store or a business that doesn't have this type of ability, nobody is going to pay me to stay at home to convalesce and get better if I think I may be infected. So my question is, why is Ontario not doing that when, quite frankly, it is one of

the chief recommendations that was made by the medical officers of health over the last couple of weeks?

Hon. Sylvia Jones: Because we are not going to duplicate what the federal government is already providing. We have offered additional support—

Mr. Gilles Bisson: If we're relying on the federal government of Justin Trudeau to be able to—

Hon. Sylvia Jones: We are providing additional resources through municipal affairs and housing—

Mr. Gilles Bisson: It's such a sad thing. Look at British Columbia—

Hon. Sylvia Jones: —through DSSABs and social services boards.

The Chair (Mr. Daryl Kramp): One minute.

Mr. Gilles Bisson: Minister, look at other provinces. They're ponying up and putting up their part of the money in order to make sure that we provide what's necessary. I agree with the government: We need to do more in order to make citizens safe. We're going to have to make some tough decisions, but part of those tough decisions is the government ponying up the money to be able to make sure that we have extra staff in our long-term-care facilities; that we provide isolation centres, like you can go to a hotel or whatever to do that; that we provide smaller class sizes—we do all of those things necessary, and I'm sure Ontarians will respond.

But when they see the government creating confusion in the way that you are now, they don't have a lot of confidence. And, quite frankly, 30 minutes at this committee to be able to ask questions is nowhere near what we need to be able to get answers to our constituents' questions. So I've got to say, this whole process that the government has set up in this committee leaves a lot to be desired.

The Chair (Mr. Daryl Kramp): Well, thank you, Mr. Bisson. Your time is up now.

We will now go to the government for 10 minutes. We have, I do believe, Ms. Park, please. Lindsey? We have Lindsey Park, unless we've lost Lindsey. Well, then, we will go to Mr. Bailey then, please. Mr. Bailey.

Mr. Robert Bailey: Thank you, Chair. Oh, there's Lindsey there. I'm already on so maybe I'll go first.

The Chair (Mr. Daryl Kramp): Carry on.

Mr. Robert Bailey: I have a couple of questions, riding-specific, Minister, but I'm sure that they're common to the rest of Ontario. I'm getting a lot of questions on child custody, where the parents share custody and one parent is asking about home visits where they share custody. If they know the other parent is being careless, are the police going to enforce the court orders where they share custody if they refuse to let their children, one child or children, go to the other parent's house? I know it's kind of a tough question to ask you, but I'll just throw it out there. If you know an answer, please get it on the record. But if not, you can get back to us.

Another thing I'd like to say is a statement. As far as the Ministry of Labour—I've looked these up here, and I speak to the minister on a frequent basis—since this all started, COVID-19, the ministry has conducted over 35,000 inspections to date in this province; they've shut

down 55 unsafe workplaces and job sites that have been closed. So that puts the lie to the argument that nothing is being done by the Ministry of Labour in this province.

Minister, if you've got a comment on that custody, fine, but if you need to get back to us, that's fine with me too.

Hon. Sylvia Jones: Yes, I'm sorry. I don't have the specifics on the sharing custody. I know that the EMCPA, the declaration, does allow child custody to continue. Those, of course, are court orders. In terms of when one parent is concerned that perhaps the other parent is not adhering to the guidelines, I would want to take that back to the Attorney General and have a conversation with him about that. My apologies.

Mr. Robert Bailey: That's fine. And just one more thing before I yield to Ms. Park: I had a parent just this morning ask me—they have a child in Ottawa at university, in Mr. Fraser's riding, and they're wanting to know if they can drive from Sarnia-Lambton to Ottawa, pick that student up and bring him or her back home, or if they could be in jeopardy of being fined by the police. That could be happening with a lot of people in Ontario. And then I'm going to yield to Ms. Park.

Hon. Sylvia Jones: Thank you. Specifically related to intra-provincial travel, we have not put restrictions on having a person travel within the province. We are discouraging non-essential travel, but in the scenario that you have laid out we would not prevent that from happening.

Mr. Robert Bailey: Thank you.

The Chair (Mr. Daryl Kramp): Okay. Ms. Park? Lindsey, you're up.

Ms. Lindsey Park: Thank you, Chair. First off, I want to thank the Solicitor General for how responsive she's been to my many inquiries over the last month or so, particularly around vaccine distribution, and for taking the time to appear at this committee so many times to update all of us so that we can share the information with all members of the Legislature and with our constituents.

We have an incredible team in Durham region that's working together to get the vaccine distributed to as many people as quickly as possible. We have the chief of staff at Lakeridge Health, Dr. Tony Stone, as well as his in-house IPAC expert, Dr. Dan Ricciuto, and we also have the head of public health, Dr. Robert Kyle. They're all working so hard, and I see it every day. They're part of a broader Durham region vaccine steering committee that's working to determine how to prioritize those vulnerable populations within Durham region.

As the province and your task force, Minister, have set out a framework to help prioritize—I believe it's called the ethical framework for prioritizing vaccine distribution.

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Can you just tell, if you were speaking directly to our local steering committee, how should they interpret this framework? If you can give some kind of general guidance there when they're determining locally how to prioritize.

Hon. Sylvia Jones: Yes, thanks for the question. It's a good one. We often talk in government about breaking down silos. The positive outcome of the COVID vaccine

and the vaccination rollout has been a very quick breaking down of silos. Public health units are working directly with local hospitals. Local hospitals are working with long-term-care homes and retirement homes. It's, frankly, really, really encouraging to see.

Specifically, the vaccine task force has meetings with public health units, CEOs and hospital CEOs jointly to share the ethical guidelines, to share any concerns that they have, and quickly. That allows all public health units to get the information at the same time, so there's no time lag between, "I have a question about this," and then we roll it out to the 36 PHUs and the 21 hospitals that are currently doing the vaccinations.

Specifically related to the ethical guidelines, as I said earlier, ethicists, vaccine experts, many different types of expertise were brought in to draft that guideline, and it is very much driven by who is getting COVID-19, when they get it and what happens in terms of, is the outbreak more serious? It's pretty clear from the disturbing stats that we have seen, both from individuals in ICU beds as well as, unfortunately, the deaths that have occurred as a result of COVID, that the older you are, the more likely you are to have a serious reaction and repercussion to getting COVID-19. So that drove a lot of the conversation.

That was the easy piece, frankly. Then, expanding beyond that, why are individuals in congregate living—for example, long-term-care homes and retirement homes—more at risk? Well, because staff and visitors move between residents. So all of those pieces were brought together to make the decision about which person or which sector should have a priority.

I would say that the other piece of this—I'll highlight Pfizer as an example. The vaccines are not in individual vials. Once you mix that vaccine—I believe there are four shots within it, and you must use it very quickly. So this comes back to, in some cases, if an appointment is missed, if we don't have a long-term-care resident, then we still want to use that vaccine, and that's when, for example, a nurse in a hospital who deals directly with COVID-positive patients might be getting a vaccine, because it's already prepared and they don't have a long-term-care resident.

When Health Canada and Pfizer gave us the approval to move the Pfizer vaccination and vaccine, that was a game-changer because it allowed us to have public health

units and teams from the local hospitals go directly to the long-term-care residents, and as I mentioned previously, some amazing uptake in terms of people's interest and willingness to get it.

I hope that answers your question. There were a lot of pieces to it.

The Chair (Mr. Daryl Kramp): Just a little over a minute.

Ms. Lindsey Park: I'll just highlight a local example of how that approval to move Pfizer made such a difference. I believe it was 10 p.m. last Wednesday night that Pfizer put out that new information saying how it could be moved, and by the next day, they had set up a pop-up site at Orchard Villa in Pickering. I think they're on track in Durham region to blow out the goal that the Premier set for getting everyone vaccinated by January 21, so I'm just so proud of our region and how they're coming together. Maybe, just to finish off, if you could just explain how big that is, that Pfizer can now be moved.

Hon. Sylvia Jones: Oh, it's a game-changer, because, as I'm sure everybody can appreciate, the vast majority of long-term-care residents are not mobile. It is January in Ontario, so we don't want a scenario where we're attempting to move residents from long-term-care homes or high-risk retirement homes to a hospital site. So it has really, really been a very positive initiative.

You're absolutely right. We talk about goals and guidelines. The Premier, when he requested that all long-term-care homes in the original four hot zones—which, of course, were Windsor-Essex, Toronto, Peel and York—have all of their long-term-care residents vaccinated, staff and critical care, by January 21—I fully anticipate that they will all blow through that goal.

The Chair (Mr. Daryl Kramp): Minister, thank you very much, and thank you to all of our colleagues, all the members of this committee, for your time today.

Interjection.

The Chair (Mr. Daryl Kramp): Yes, you're welcome, John.

Minister, thank you for appearing before the committee today. We will excuse you and then we will pause for a moment as we move into closed session. Thank you.

We are paused for a minute prior to going into closed session.

The committee continued in closed session at 1146.

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