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(Hansard)**

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**Standing Committee on
Finance and Economic Affairs**

Pre-budget consultations

2nd Session
42nd Parliament

Wednesday 19 January 2022

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

Consultations prébudgétaires

2^e session
42^e législature

Mercredi 19 janvier 2022

Chair: Ernie Hardeman
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Président : Ernie Hardeman
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LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

**STANDING COMMITTEE ON
FINANCE AND ECONOMIC AFFAIRS**

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

Wednesday 19 January 2022

Mercredi 19 janvier 2022

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

PRE-BUDGET CONSULTATIONS

The Chair (Mr. Ernie Hardeman): I call this meeting to order. We are meeting today to continue public hearings on pre-budget consultations 2022 for the greater Toronto and Hamilton areas.

As a reminder, I ask that everyone speak slowly and clearly. Please wait until I recognize you before starting to speak.

Each presenter will have seven minutes for their presentation. After we've heard from all of the presenters, there will be 39 minutes of questions from members of the committee. This time for questions will be divided into two rounds of seven and a half minutes for the government members and the opposition members, and two rounds of four and a half minutes for the independent members.

ONTARIO REAL ESTATE ASSOCIATION

**ONTARIO COUNCIL OF HOSPITAL
UNIONS/CUPE
SPIRITS CANADA**

The Chair (Mr. Ernie Hardeman): I will now call the first delegation, the Ontario Real Estate Association. As they come forward, we will ask them to come forward, introduce themselves, give us their name for Hansard, and then make sure that if there are more than one member in the delegation speaking, before you speak please leave us your name for Hansard and then speak. With that, we'll turn it over to the Ontario Real Estate Association.

Mr. David Oikle: Good morning, Chair, and members of the committee. My name is David Oikle and I'm the president of the Ontario Real Estate Association, and I am in Ottawa. Joining me today from London is Stacey Evoy, OREA's president-elect, and Jason Lagerquist, OREA's head of advocacy and stakeholder relations.

Everyone on this committee knows that Ontario is currently facing a housing affordability crisis. In fact, Ontario is one of the most unaffordable jurisdictions on the planet when it comes to housing. As a result, young people are leaving Ontario at an unprecedented rate in search of a better future. We know that the average cost of a home in Ontario is now over \$856,000. That's an

increase of \$165,000 in the last year alone, nearly double the average gross household income. Let that sink in for a moment. There is a historic lack of new housing inventory on the market and that is driving up costs to a point where many are unable to afford a home.

Trends like bidding wars that once were thought to be a GTHA issue exclusively are taking place across Ontario, with more and more prospective buyers losing out. These trends are causing frustration and anxiety for families across Ontario. People are losing hope and we are looking to the governments for solutions.

With that in mind, OREA is here today to discuss the existing affordability crisis and offer three policy solutions that we believe will make Ontario's housing more affordable.

First, and alongside supply-side issues, Ontario needs to give young families hope in their dream to achieve home ownership. The best tool to help young buyers is to double the first-time homebuyers' land transfer tax rebate from its current rate of \$4,000 to \$8,000. Homebuyers are currently paying, on average, \$13,000 in land transfer tax costs on an average-priced Ontario home. Further compounding the problem is that the land transfer tax is not able to be rolled into a mortgage and must be paid up front, further exacerbating the affordability problem. Doubling the rebate to \$8,000 would provide immediate help to our millennials and new Canadians, who are most hurt by the affordability crisis.

I'll now turn it over to Stacey to provide recommendations 2 and 3.

Ms. Stacey Evoy: Good morning. Thank you. As David said, I'm Stacey Evoy and I'm from London.

On the supply side of the equation, OREA is urging the province to end harmful exclusionary zoning in large, high-growth municipalities. Across Ontario, most large cities are dominated by local zoning rules that protect single-family homes and create incentives to build tall or to build sprawl. We are asking the province to consider implementing as-of-right zoning policies in large urban municipalities to encourage gentle density, including duplexes, triplexes and fourplexes, without having to go through a lengthy rezoning process. We know that currently, if someone owns a wartime bungalow and wants to tear it down to build a monster mansion, they can do so. But if that same person wants to tear down that bungalow to build a duplex, for example, they are required to go through a lengthy process.

Implementing as-of-right zoning has been done in jurisdictions like California, Minneapolis and New Zealand. It would eliminate that process and encourage more missing middle development in our larger urban areas. While incentives like grants and funding may help, ultimately, Ontario should follow New Zealand's lead and use its legislative powers to roll back exclusionary zoning.

Finally, the pandemic has forever changed how Ontarians live and work. People are so frequently opting to shop online that across our cities we have thousands of quiet strip malls, retail outlets and plazas with existing infrastructure near high-traffic or downtown areas that have access to transit. With a simple zoning change, you could build hundreds of residential units on these properties. The residences will bring foot traffic, which helps the business case of the retail space below it, and you could even use the vacant retail spaces to put in services that are in demand, such as child care centres, dentists' offices etc. This type of conversion is also incredibly well-suited for malls, and all that is really needed to embrace a conversion from commercial to residential or mixed use is a zoning change.

Much like it already does through things like community improvement plans, the province should expand the tool box available to municipalities to update their zoning rules and lower development charges in areas where commercial properties are being underused. The province should also consider using MZOs or implementing as-of-right zoning changes that would accelerate the conversion of commercial properties into residential housing units.

I'll now pass it back to David Oikle, our president.

Mr. David Oikle: Thank you very much, Stacey. In conclusion, years of bad public policy at all three levels of government created the affordability crisis that we see today.

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

Mr. David Oikle: Thank you. This government took a substantial step forward when it passed the More Homes, More Choice Act, and we are thankful for that. But we need to ensure that the momentum continues to put Ontario back on track towards being a place where all families have an equal shot at achieving the Canadian dream of home ownership. The 2022 Ontario budget presents a real opportunity to help ensure that current and future generations can do what we have taken for granted for so many years: own a home.

Thank you, Chair.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation. Our next presentation is the Ontario Council of Hospital Unions and the Canadian Union of Public Employees. We'll ask them to come forward and introduce themselves for Hansard. I didn't in the previous delegation, but I just suggest that at the end of the presentation, the last minute, I will announce, "One minute left." With that, the floor is yours.

Mr. Michael Hurley: Thank you very much for the opportunity to present this morning. My name is Michael Hurley. I'm the president of the Ontario Council of Hospital Unions of CUPE. Doug Allan is a senior research officer in health with CUPE. Doug is going to begin.

Mr. Doug Allan: Thank you, Michael. The Ontario Council of Hospital Unions represents 40,000 workers across the province. Today, we will (1) review the underfunding and associated understaffing situation in hospitals prior to COVID; (2) discuss how COVID exacerbated these problems; (3) note how existing plans in the last budget fall short; and (4) indicate how plans should be improved.

Long-term problems: Ontario provides much less funding per capita to hospitals than other provinces—about 20% less. The consequences, the results of this underfunding are predictable: fewer staff, fewer beds than the rest of Canada; far fewer beds than other developed countries; extraordinarily high levels of bed occupancy; very short length of stay; a low level of patients treated in hospitals; higher-than-average levels of readmissions and rising levels of readmissions; and a dramatically rising acuity of patients receiving home care.

0910

Things became much worse during COVID. Health care staffing shortages grew tremendously. During COVID, there was a 116% one-year increase in RPN vacancies in the first year of COVID in Ontario. That's 2,000 extra vacancies that were created, just in the relevant quarter. RPN vacancies are now six times higher than they were in 2015. That trend has also been represented in other service occupations, which have seen a threefold increase among health care workers.

Surging demand is coming directly at us for more health care workers. The needed changes to LTC, as the government has announced, will require 59,200 extra RPNs, RNs and PSWs by 2024-25. Plans fall short to date, notably including wage suppression.

In Ontario health care, wage settlements have fallen behind municipal and private-sector settlements—as well, of course, as inflation—for more than a decade. We're about 5% behind. Inflation is currently running—today they just made a new announcement—at 5.2% in Ontario for the year of 2021. Broader public sector settlements have been capped by Bill 124 at 1%. That means an effective 4.2% reduction in real wages this year alone, just about doubling where we were over the last decade.

Hospitals and government have also failed to protect hospital workers from airborne spread of COVID and the widespread violence against the predominantly female staff in hospitals. During the week of January 1 to 8, 2022, Public Health Ontario reported 1,302 health care workers were infected with COVID. As of January 16, there are 236 ongoing outbreaks in Ontario hospitals, with many more each day.

The plan ahead: In the last budget, there was a plan to decrease by billions the transfers to hospitals for program payments as a result of the elimination or the reduction in COVID special funding, but even aside from these cuts, the nominal health care increases planned up until 2029-30 fall well short of the nominal increases over the previous nine years, i.e. the period of public-sector austerity that followed the last recession and which helped to create the problems that we are now facing.

Over to you, Michael.

Mr. Michael Hurley: Thank you very much, Doug.

I hope that everyone would agree with the editorial board of the Globe and Mail, which said that we have to increase hospital capacity in Canada and, of course, in Ontario, with the lowest hospital capacity of any province in Canada or any country with a developed economy in the world.

The situation is most grim, and the consequences of that lack of capacity have been felt by all of your constituents, with cancer treatments which are postponed or other surgeries which are now in limbo, waiting for the pandemic to subside, and the cancellation of all but emergency diagnostics in hospitals, even though this screening is vital to detecting cancer etc. at an early stage. All of that is the consequence of a hospital system which hasn't enough capacity and which has to turn its attention, obviously—and a good thing too—to the care of the people in Ontario who have COVID at the moment.

I hope you would agree that we don't have enough capacity, and that it would be a good goal for us to aspire to something like working to achieve to have at least as much capacity as the average of all the Canadian provinces. If we could at least get to that point, we would be in much better shape. And, believe me, that wouldn't take us past a point which we have been at in our history as recently as the year 2000.

We also have to talk about the rate at which hospitals are being funded. Years of funding below the rate of inflation means ongoing cuts, and those are felt in services and backlogs and reduced staffing.

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

Mr. Michael Hurley: So we'd ask you to fund hospitals at least at the rate of inflation and accounting for aging and population growth.

And we'd also ask the government to table a plan for the recruitment and retention of the 75,000 or so health care workers we're going to need in this province to replace what we're losing to attrition and for what we need to do in long-term care.

Finally, if we want to retain health care staff, we need to scrap Bill 124, which limits nurses' wage increases to 1%, for example, while allowing hospitals to pay them \$170 an hour if they work for a private agency and come back to do the same work.

Thank you very much for the opportunity to present.

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

We now have Spirits Canada.

Mr. Jan Westcott: Good morning, and thank you, Mr. Chairman and members of the committee. I appreciate the opportunity to speak to you today. My name is Jan Westcott. I'm the president of Spirits Canada, the trade association representing Ontario manufacturers and marketers of premium distilled spirits.

For those of you who know me, I ask your indulgence, as you have heard what I am about to say, some of you more than once. Nonetheless, it's important context for my appearance today.

The production of spirits is an important Ontario enterprise, creating and sustaining jobs and economic activity in most parts of the province. It is an enterprise that has been generating wealth and livelihoods for Ontario and its citizens for a long time—centuries, actually. The brands we produce are known globally, and our whiskies have won prestigious international awards for quality and their unique Canadian attributes. Indeed, some of them—Canadian Club and J.P. Wiser's Canadian whiskies, for example—have been produced here in Ontario since well before Canada became a country. We're proud to note that virtually all of our head offices are here, something that was not always the case, and that Ontario remains the home of the Canadian spirits industry.

Also significant is the ongoing support that our industry provides to small communities and rural areas across the province. This occurs through our close relationship with Ontario farmers who supply 100% of the grain we use to manufacture Canadian whisky and other spirits. Many of you have heard me boast about being an industry that sources all of our inputs in the province, particularly the 225,000 to 250,000 tonnes of grain that we annually buy from Ontario farmers. We have the privilege of turning their excellent crops into some of the world's finest whiskies and other spirits.

We have significant operations in Ontario, including North America's largest potable distillery, Hiram Walker and Sons, in Windsor.

Last but not least, distilled spirits make up between two thirds and three quarters of the billion dollars' worth of Canadian annual beverage alcohol exports, the vast majority of which is shipped to global markets from Ontario.

I'll conclude these background comments by reminding you that within the process of the food and beverage sector, spirits are amongst the highest-value-added product made in Ontario and, indeed, in Canada. I tell you all these things because I want to reinforce the Ontario-centric industry and activity my member companies represent. I last appeared before this committee in Belleville on January 22, 2020. A number of you listened to me that day, so you may have some sense of my request. Indeed, when I made my remarks in 2020, quite a few of you indicated your support and did so across party lines.

Our employees, our farming partners, our union members, the Ontario suppliers of a myriad of other goods and services that we use in our business and our companies, along with our consumers, do not understand why beverage alcohol products from other countries—let me underline that, from other countries—continue to enjoy better access to Ontario consumers than products made here by Ontario workers exclusively from grain grown by Ontario farmers. Yet almost seven years after beer and wine were granted permission to be sold in select Ontario grocery stores and through two different governments, spirits still do not enjoy this same retail opportunity.

Spirits Canada and its members have answered every conceivable question from the government to support our request to be treated no less favourably than competing

products from other countries, products that support jobs and economic activity in those jurisdictions instead of supporting jobs and economic activity right here in Ontario.

0920

At the government's request, we commissioned an independent firm to detail a business case, one that spoke to the new jobs and revenues that selling spirits in grocery stores alongside beer and wine would generate, as well as the potentially dire consequences if spirits continue to be denied this chance to compete. I'll be happy to expand on this during the question period.

Ontario consumers are supportive of being able to buy spirits when they do their grocery shopping, just like they can with beer, wine and cider. Indeed, this has been a particularly acute request during the pandemic, as people seek to limit their exposure to COVID by reducing the number of stops they have to make to get what they need.

To be fair, the government has made a number of policy changes and shown flexibility to help people cope with the privations of the pandemic, and we're grateful for those, especially as these policy decisions afforded spirits the same opportunities as offered to beer, wine and cider. These policy changes and flexibility have proven exceedingly popular with Ontarians who have responded to them responsibly and in a mature manner.

Yet, here we are, literally two years later, once again asking that we be treated the same as our colleagues in the beer and wine businesses. I do not mean to gloss over the challenges faced since March 2020. We recognize that governments everywhere have had their hands full managing COVID and working to keep their citizens as safe as possible. In fact, to help alleviate any lingering concerns some may have, we have suggested a modest pilot be undertaken to test spirits in a limited number of grocery stores currently selling beer and wine. But just as the government has been able and willing to take decisions on many other issues, including on beverage alcohol matters, it's time they responded to our request.

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

Mr. Jan Westcott: To conclude, my request of you is simple. We hope that the committee will include in its recommendations to the Legislature and the Minister of Finance that the government take the obvious next step and allow spirits to be sold in those grocery stores authorized to sell beer, wine and cider. Thank you for your attention.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation. That concludes the three delegates in this panel.

We'll now go to the questions, and we start with the government. MPP Crawford.

Mr. Stephen Crawford: I want to thank all the presenters for being here, first thing this morning, to hear your feedback. There's a lot to digest. My first questions and conversations I'd like to have are with the real estate association. Actually, our timing is good, as I'm sure you're aware. You probably have a lot of representatives, or certainly some people dialed into the summit that the

Premier and Minister Clark are hosting today on housing affordability.

Now, obviously, this is a big, complex subject, and you've provided some ideas. I just want to go over those and see if those are something that can be utilized. The first point you bring up is about doubling the land transfer tax rebate for new buyers, \$4,000 to \$8,000. That's an interesting, possible solution. I guess my question to you is, is that only going to spur more demand for housing? What sort of back work do you have on this? Is this something that you've done surveys on? Do you have any idea of what the cost would be? Because obviously everything we do as a government is weighing cost-benefit. In this particular case, do you have any idea of what it would potentially cost the government? I'll start off with that point and I'll throw it out to any of the three representatives.

Mr. David Oikle: Thank you very much for the question. I'll start. Approximately 25% of buyers are first-time buyers, and so we want to make sure that we give those folks hope. We have talked a lot, and a lot of the issues that will be talked about today at the summit are addressing the supply imbalance. I think that that's the priority of the recommendations, and I expect that there will be some good recommendations out of that today. But as prices go up, land transfer tax goes up, and the rebate is not keeping pace with the increase in prices. We want to make sure that we give hope to the young and new Canadians that are first-time buyers to mitigate that cost. We know it's a big ask when the treasury is challenged, but we think that it's an important goal to give the young buyers hope on a cost that can't be rolled into the mortgage.

I will ask if Jason would want to add to that any comments to answer the question about the costs and other research.

Mr. Jason Lagerquist: Yes. Thank you so much for the question, MPP Crawford. It's wonderful and timely that we're appearing before the committee today when the government has moved forward with the summit that's happening. So it is timely.

The analysis we've done on the costing around the increase to the rebate is in the neighbourhood of \$185 million to \$200 million, is what we would expect it to cost the government on an annual basis. So that's the analysis we've done there.

Mr. Stephen Crawford: Okay, no, that's great. It's good you've done the research on that. Thank you.

The second point about exclusionary zoning, I find that quite interesting. Look, this is a problem, as you mentioned, across the entire province of Ontario, the GTA in particular. I'm sure a lot of MPPs—I'm sure every single one of them sees it in their own communities where we do have a limited supply.

In my case, which is the great community of Oakville, we want to maintain, for example, the character of downtown Oakville, not put up 20-storey, 30-storey towers in downtown Oakville. I know Burlington did a bit of an experiment there and there was pushback on that. We want

to keep green space. We've preserved Glen Abbey. There's a lot of talk right now about Halton sprawl, so building on farmland, which a lot of people are opposed to. So there is this real tug of war. We want to preserve green space; we want to preserve farmland. I think we all want to do that. But on the other hand, we get such resistance when we want to increase the intensification in communities. That's an issue I think we all face and I think it's a huge issue going forward. So I certainly think that this is very reasonable, to make some changes in the exclusionary zoning.

You did mention California and New Zealand. I'll throw this out to you, because my understanding is New Zealand has the highest real estate in the world. So, I don't know. Has that had a positive impact there? California, of course, in general has pretty high real estate as well. I don't know, from the outset it seems pretty reasonable to me, but I just want to get a little more of your perspective on that and my comments on that as well.

Mr. David Oikle: Thank you very much for that. I'll start and again maybe throw it to Jason or Stacey after that.

There is really a middle ground and every community is going to have a different character. As you say, many don't want to go up too high in particular communities. But there's some middle ground there between only allowing single-family homes and possibly allowing duplexes, triplexes and fourplexes without going up 20 storeys. You can have some sort of balance there. I understand why you wouldn't want to put a big building right in the middle of where you've not traditionally had that. When Stacey spoke, she did use the term "gentle density," because I think that that's the middle ground.

New Zealand has decided to do this just very recently to address that issue that you're talking about. They have confidence that that's the right way to go to address it, and so I think the proof will be in the pudding over the next little while. We all, yourselves and ourselves, will be looking to see what the experience is.

But again, Jason or Stacey—maybe Jason on the policy side, if you wanted to expand on that a little bit.

Mr. Jason Lagerquist: Thanks, David. I think our president, Mr. Oikle, did a really good job of outlining the situation. The one point I would add with respect to New Zealand and the question around—

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

Mr. Jason Lagerquist: —the cost of housing in that jurisdiction is that it's still a relatively new policy. The government in New Zealand only moved forward with it within the last few months. So it's a little bit premature, I would say, to say exactly what impact it's going to have on cost and whether or not it's caused further acceleration.

Mr. Stephen Crawford: Okay, thanks. Sorry, Chair, how much time do we have left?

The Chair (Mr. Ernie Hardeman): Thirty-seven seconds.

Mr. Stephen Crawford: Oh, jeez. Well, I'm sorry I didn't get to Jan from Spirits Canada. I believe one of my colleagues will, but it's good to see you.

A final question for the real estate folks—supply of labour in the sector: Do we need to bring more people into the province and the country to work in the trades? Because that seems to be an issue here.

0930

Mr. David Oikle: Yes. I don't have a lot of time, but yes. I know Minister McNaughton is focused on that. If you're going to build more homes, then you need all kinds of trades and all kinds of people.

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

I believe I want the second-last speaker from the real estate group to introduce themselves. When they started to speak, I don't believe we got an introduction.

Mr. Jason Lagerquist: Okay. My name is Jason Lagerquist. I'm the head of advocacy and stakeholder relations at the Ontario Real Estate Association.

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

Okay, we'll now go on to the opposition. MPP Fife.

Ms. Catherine Fife: Good morning, everyone. It's a pleasure to be here with you, and thank you for your presentations.

I'm going to start with Doug Allan and Michael Hurley. You made some very strong points, as you have throughout this entire pandemic, actually, so I want to thank you for your advocacy on that.

Michael, the school of pharmacy, at the behest of Ontario Health, put out an emergency call for volunteers—I believe it was this week—to help do molecular testing; volunteers to assist in long-term-care homes, to do basic support with food handling and cooking and environmental services; and volunteers to assist the medical laboratory technologists in hospitals. This was a call-out to volunteers to try to hold Ontario's health care system together. You've been warning various governments of different stripes for many years about the systemic underfunding in our health care system. I don't think any of us thought that it would get to this breaking point.

In your presentation, Doug, you mentioned the acuity of the state of residents who are in home care and how high that is right now. I want to give you both a chance to talk about what a piece of legislation like Bill 124 does to the overall state of affairs in our health care system and perhaps draw upon the systemic underfunding. And if you can, please, Michael—you mentioned Bill 124 and the counterpoint of where private agencies have been able to pay higher wages and become more competitive in, really, a crisis in our health care system. Please go ahead.

Mr. Michael Hurley: Thanks very much, MPP Fife. We mentioned the fact that Ontario is an outlier in terms of its capacity in the hospital sector. It's got the fewest staff and beds of any developed economy. How does it actually cope with a growing and aging population? It does that by demanding more and more of its workforce. I think it's pretty well documented that the impact this has on workers of every kind across the health care sector is an ongoing moral injury, a feeling that they're unable to meet,

in a meaningful way, the care needs of the people they look after.

When you compound this with the fact that they can't get access to protective equipment, or that the authorities deny that COVID is airborne for most of the pandemic and deny them airborne protections, or tolerate a level of violence, sexual violence, racialized violence, physical violence against them, which is just off the charts, all these things together—working short all the time, never being able to get any time off. I can tell you about people who have had to quit to be able to go to their own wedding. It's bad, and I won't go on and on about it.

Then, when you have legislation that says that wage increases are limited to 1%—last year, when inflation was 5% in Ontario and health care workers got a 1% increase, they took a 4% real-wage cut. They're also prevented from bargaining. For example, a lot of the collective agreements have no psychological support, and some of the impacts that have been abundantly clear for health care workers through this crisis have been an increase in depression, in anxiety, in post-traumatic stress, in addiction, and yet, we can't bargain help for them. In their own minds, they think that that jars against this narrative that their work is valued and that they're heroic and that they're making such a contribution.

It also jars enormously when they see people who are brought in as agency staff making significantly more, two and sometimes three times more, than they would in their job—people who aren't required to work on weekends, who aren't required to work evenings, who aren't required to work nights. And for that, they get paid significantly more, and it just demoralizes people.

We have to think about, why can't we keep the people we have? I think I've gone over that. Why do we have an immediate shortage? Part of the reason is because people are getting sick, and why are they getting sick? It's because they're not being protected properly, we would say. We don't have enough capacity, which is a huge problem.

Doug, I'm sorry I took up so much of that.

Ms. Catherine Fife: That's okay. Go ahead, Doug. Can you unmute Doug, please?

Mr. Doug Allan: Thank you.

Ms. Catherine Fife: There you go.

Mr. Doug Allan: Yes, the staffing crisis has certainly been exacerbated during COVID. It's apparent to, I think, everybody. But it has been growing for a number of years, throughout most occupations in the hospital sector.

I think the government has built itself a bit of a problem that it has to figure a way out of. The idea of recruiting the number of staff that we alluded to in our brief—and that's just in the long-term-care sector—in a few years, in these conditions, where there are real wage increases going on of the order that we're talking about now, with inflation running at 5.2% in Ontario, is really a big problem for the government. How can they solve that problem? They're going to have to, I think, go back and seriously consider Bill 124 and find ways that they can actually make hospitals and long-term care and other health care facilities actually attractive places to work one more time.

Yes, it does mean wages, but it also means taking on the violence that affects so many of our hospital workers and it also means fully recognizing airborne transmission and preparing of the workers in the hospitals to actually deal with that airborne transmission of COVID. The fact that we had to fight for two years to get any degree of recognition of airborne transmission and the way to deal with that is truly a disgrace. I think we would have had a very different experience of COVID if the government had acted earlier on those.

So, all of those things are needed in order to make a workplace that is actually attractive to the staff, and that's our main contribution today.

Ms. Catherine Fife: Thank you. I was walking the line with some RPNs who expressed such frustration about how some members—

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

We now move on to the independent members. MPP Wynne.

Ms. Kathleen O. Wynne: Thanks everyone for being here.

I want to address my first question to Doug Allan and Michael Hurley. First of all, thank you for continuing to advocate. I know this has been an incredibly stressful time. I don't want anyone on the committee or any of the delegates to think that I haven't heard the comments to previous governments. I get that. Michael, we've sat across the table from each other many times, and I understand that there have been debates for a long time, and I can't fully answer those today.

What I really am interested in is: You have called for the repeal of Bill 124, which I completely, completely support, and we have worked with the other opposition parties to call for that as well. I wanted to just ask you, Michael and Doug, what are the other specific asks in terms of an approach to dealing with the shortages, dealing with the funding that needs to be particularly in the hospital sector right now? What are your specific asks for the budget, beyond the repeal of Bill 124? Have you attached numbers to those? I didn't hear anything in the presentation.

0940

Mr. Michael Hurley: Thank you very much, Kathleen. It's very nice to see you again.

What we're looking for from the government is the kind of bold action that Quebec took last year after their disaster in the CHSLDs, the long-term-care facilities, when they knew that they had a problem keeping and recruiting personal support workers in that instance, and so they decided that they would hire 10,000 people. They knew they would have to pay more in order to keep them, so they offered \$26 an hour. They offered pensions, benefits and, most importantly, full-time employment. Given that three quarters of the home care workforce, 60% of long-term care and half the hospital workforce is part-time, offering people full-time employment is key, and they've been able to keep about 8,700 of those people.

In Ontario, that would mean 17,000, and by contrast, we've only announced plans to hire 2,200 people in long-

term care, but we're imagining that we need to hire about 59,000 in long-term care alone, given the full-time/part-time ratio. When you compound that with attrition in the hospital sector and the need to up-staff to bring us to a level where capacity is more normal, you're probably looking at trying to find 75,000 people.

To do that, you need to be talking about a significant investment, recruiting, a commitment to full-time employment, a commitment to stable employment. You're going to have to look at lifting things that interfere in the labour market like Bill 124. From this government, it's particularly ironic that the limitations on the markets happen on the labour side, but not on other aspects. You're going to have to deal with that in order to be able to retain and recruit people.

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

Ms. Kathleen O. Wynne: What about labour laws, Michael? And over how much time would that staffing have to be phased in? What's the hiring period, do you think?

Mr. Michael Hurley: Doug, do you want to jump in here?

Mr. Doug Allan: Our figures are taken from the Financial Accountability Office, Kathleen, and that is 59,000 extra long-term-care PSWs, RPNs and RNs by 2024-25, so it's very urgent. So far, the government has made plans for about 13,000 of those workers, but, of course, there's just normal loss of staff that's going on as well, especially at the moment right now.

Just on your other question: We typically have always asked for, including to your government, a 5.3% increase that was based upon inflation—

The Chair (Mr. Ernie Hardeman): Thank you. That concludes the time for that round.

Ms. Kathleen O. Wynne: Thank you, guys.

The Chair (Mr. Ernie Hardeman): We'll now start the second round with the government. MPP Bouma?

Mr. Will Bouma: Thank you, Mr. Chair. Good to see you this morning.

I'd like to begin just by thanking all the presenters for coming before us today. I have to say, I really appreciate the on-the-ground, first-hand experience from so many people. We just don't have the opportunity to see so many of these things.

But I would like to have a conversation with Mr. Westcott. He has been waiting patiently. Jan, it's good to see you today. I know we've chatted about this before, and I wanted to start with how it's been a little while now that we've seen beer and wine in grocery stores and I think the spirits industry has had concerns about the impact that that would have on these Ontario-based businesses. I was wondering if you're seeing those early results at all, or if you have that data on the impact of beer and wine in grocery stores, without spirits being there also. Do you have that for us?

Mr. Jan Westcott: Thank you very much. We started to see that through 2019. In fact, when I presented to the committee in 2020, we put some numbers in front of the committee that started to show a small decline in spirits,

balanced off against the growth they were seeing in beer and wine. The reality is, Mr. Bouma, that COVID has sort of disrupted all of the normal things that have taken place. It has disrupted that, so it's hard to draw that line.

I will tell you our experience elsewhere. In the 1980s, the government of Quebec allowed beer and wine to be sold in grocery stores and in *depanneurs* across the province. When they made that decision, if you looked at all the beverage alcohol consumed in Quebec, spirits had about a 40% share of the market. Within about seven or eight years, the market share for spirits collapsed to 14%. So it pretty much killed the business in Quebec. One of the lasting legacies of that is that spirits are still made in Quebec, but Quebec has essentially been taken out of the North American supply chain, unlike Ontario.

There's no sinister aspect here. It's just convenience. People get into the habit of buying products when they do their grocery shopping. What that leads to is they go to the places where you can buy spirits a little bit less, and so the opportunity to buy spirits goes down. We've seen that.

We were asked by the government to develop a business case. We hired an outside firm, as I said, and we did that. One of the things that people have to bear in mind is—and this is not a shot at anybody—in Ontario, if you take exactly the same amount of alcohol, exactly to the decimal point, spirits pay four times as much as the equivalent amount if it's wine, and twice as much if it's beer. So if there is a market shift away from spirits to these other products, whatever the reason for that is, it will cost the government a significant amount of money as consumers move to products where the government is making significantly less revenue. There are some real-world consequences, both for the industry in terms of what it does to our business and also to, as I say, revenues going forward.

Mr. Will Bouma: I appreciate that testimony. I appreciate that getting into the record.

In my community, we have some small distillers, we have some small breweries, we have a cidery that I know of, and we have some wine being produced here. I was wondering if you could go into and describe some of the issues that a small distiller will have that, say, a small brewery wouldn't have in that. Or are those issues here, in the marketplace?

Mr. Jan Westcott: They have been particularly acute during the pandemic, because a large amount of what smaller producers sell, whether it's beer, wine or spirits, and certainly for folks from the distilleries, is from their premises. Many of them have tasting rooms where they bring people in. Their issue is really getting exposure, getting people to know about their products, being able to have that. Obviously, as the pandemic has seen the closure of many places, they've all suffered from that. Their business has taken a real hit—to a certain extent, very much like the bars and restaurants, right?

We're currently in the middle of another period of restriction. So much of their sales go through there. There's hope that once the pandemic is over, they will be able to come back. But there's no question that's having a

devastating effect on them, simply because more of what they sell goes through their own premises and their own operations versus through the LCBO. In other senses, the issues are the same. It's the amount of tax people pay, it's the opportunity to have access to the products, those kinds of things. The LCBO does a great job, but the walls aren't made out of rubber. They can only put so many products on the shelves, and so there's intense competition, and the LCBO, being a good retailer, wants to put things on the shelf that customers are picking off and buying. They don't want things sitting there that period of time.

So the issues are relatively the same. COVID has, as with many, many other businesses, skewed impacts to certain players more than others.

Mr. Will Bouma: I think those are very good points. I was wondering: Obviously, we know some of the really big distillers and the economic impact they have in the province of Ontario. When you speak of Spirits Canada, how many small distillers are there in the province of Ontario right now? Do you know offhand?

Mr. Jan Westcott: I think there are about 60. Some of them would be so small—a number of them I've met and visited are actually running their business literally out of their house or in some place adjacent to their house. So there's a good range of these smaller places.

0950

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

Mr. Jan Westcott: There are some larger ones that are going to be increasing in size. A good case in point: Forty Creek, over in Grimsby, was a small distiller. It was acquired by one of the larger companies, and lots of investment has gone into that business. We've seen the same thing in the beer industry and very much the same thing in the wine industry.

Mr. Will Bouma: Oh, good. I will leave it there, Jan. Thank you very much for expanding on that a little bit and taking that opportunity. Again, I would like to thank all the presenters who are before the committee today.

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

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

Mr. Ian Arthur: I'm going to start with OREA and some questions, because I've been following the zoning changes that happened in New Zealand. I think they're really interesting, but there are some really important details to what they've done, I think—put some limits on it that weren't really touched on. It's the five major cities, and it applies to about 50% of the residences that are currently zoned as single-family residential, and it puts a limit on the development of three storeys. So they're not suddenly going in and building huge buildings. You can build up to three units, up to three storeys tall. Personally, I think that's really smart. In real-world examples, that plays out very well in terms of creating more housing supply, increasing densification without overwhelming public services that an area would have. If you look, for example, to Montreal, it remarkably has a higher population density than Toronto does, and they rely almost solely

on those types of three-storey, maybe four-storey, buildings to achieve that.

With that in mind and what New Zealand is actually doing, are there limits to these zoning changes? In your presentation, it very much seems, "Let's follow New Zealand. Let's open it up for development and densification." And you did use the words "gentle densification." But would you want to emulate New Zealand for what they're actually doing, or do you want to go beyond what New Zealand has done?

Mr. David Oikle: Thank you very much. It's nice to see you again, MPP Arthur. I really think that it's great to have a conversation, to see what their experience is, and then I think that our communities all have very different characters, and one-size-fits-all may not be the right answer. But to have the conversation to understand that this is a solution to a problem is really the starting point, and I think that's really great that it might be a possibility, because I think you're right. I think we don't want to change the downtown character. In Stacey's comments, she always said you don't want to go tall and sprawl. I think that this is an opportunity.

Jason or Stacey, if you wanted to add—I don't want to take up too much of your time, if you have another question, MPP Arthur, but I'll see if others want to weigh in. Jason?

Mr. Jason Lagerquist: Stacey had her hand up.

Mr. David Oikle: Stacey?

Ms. Stacey Evoy: MPP Arthur, thank you so much for the question. I think that we would look at it province-based. I think you could say it would make sense to start with Toronto and the area around the Golden Horseshoe. However, with what we're seeing across the province, housing supply and challenges used to be more limited to the urban centres, and everyone was flocking to those areas, yet with this recent supply issue, we're seeing it across the province. So I think it's something that you could look at, starting in areas where there was an immediate need: for example, Toronto and surrounding area; Hamilton comes to mind; Oakville. But put a circle around Toronto and sort of start there, and then just see if it's successful and then push it out to smaller areas.

I know in London, where I'm from—and I'm a working realtor here—we are really challenged here for that middle density. It's really hard to come by. We have lots of single-family, and then, as I think MPP Crawford touched on, we're getting the pushback for building real high in current residential areas. In my own market and surrounding area, this would be really helpful.

Mr. Ian Arthur: I agree, and we have to spur the development of what they're calling the missing middle, and that kind of three-storey level I think would be a really, really good way to do that. It would be unfortunate to go too far too early and face the possible backlash from those changes, if you allowed for too tall or too big, and folks lost the character of the neighbourhood.

One other item I want to touch on—this wasn't in your presentation, but I'm curious about it, because it's growing in popularity across Canada—is the use of PACE

programs, or property assessed clean energy programs, to do energy-efficient rebates. I'm curious if OREA would have an opinion on using a similar approach, backed by the province, distributed through municipalities, for adding income suites to properties that were tied to the property itself rather than the individual in it, as a way to fund the development of those additional units on a small, individual scale—large when it's all added together.

Mr. David Oikle: Thank you very much for that question. I'm going to turn that over to Jason. I think he'd be better placed to answer that.

Mr. Jason Lagerquist: Thank you for the question, MPP Arthur. Just so that I understand it correctly, you're asking for our position on secondary units, secondary suites?

Mr. Ian Arthur: Well, on a way to spur the development of those secondary suites. I know you support the increase in secondary suites across Ontario, but the property-assessed avenue of providing municipally backed, low-interest long-term loans that are actually tied to the property rather than the individual, when done right, has been extremely successful for energy-efficient retrofits and buildings. I'm just wondering if you have any thoughts on whether that method could be applied to the addition of income suites to get folks who wouldn't have access to the capital to do it on properties they own.

Mr. Jason Lagerquist: It's a really good question, MPP Arthur. It's something that I think I'm going to have to come back to you on. I'd just say at a very high level, OREA is very supportive of measures to increase the prevalence of secondary units across the province. We see this as a really innovative way of increasing supply. But to your specific question, I am going to have to come back with additional information.

Mr. Ian Arthur: Sure. I'd love to do a follow-up on that.

Mr. Jason Lagerquist: Sure.

Mr. Ian Arthur: No further questions, Chair.

The Chair (Mr. Ernie Hardeman): Thank you very much. We now go to the independent. MPP Wynne.

Ms. Kathleen O. Wynne: I actually want to pick up where Ian left off. So to Jason, David and Stacey, first of all, I appreciate your presentation and I appreciated the conversation we had when we were able to sit down and talk. Your recommendations really do not end at building over green space. You've come up with some creative ideas.

The principle of secondary suites, which was legislation that we put in place that was optional for municipalities, I think leads us into this conversation about the other things that you're putting forward: the notion of shared equity, the notion of the gentle density, Stacey, that you talked about. I feel like in the riding I represent, we're kind of down the road in terms of the changing nature of communities, and NIMBYism is a reality that I've lived with as a resident and as a politician for 25 years.

Do you see these changes as having to be mandated provincially? Even if they're part of the provincial policy statement, they won't necessarily get implemented unless

they are mandated, because we know that secondary suites have met all sorts of roadblocks in municipalities. Now that this current government has changed the rules around the OMB that we put in place, municipalities don't have the same kind of control. So how do you balance those decision-making authorities, and what would you be asking the government to do?

Mr. David Oikle: I'm going to ask Stacey to take it from here, MPP Wynne.

Ms. Kathleen O. Wynne: Thanks, David.

Ms. Stacey Evoy: Good morning, MPP Wynne. Thank you so much for asking us to expand on this.

I think it is a question of: How do we get municipalities to act? Of course, that is a challenge. I think you are 100% correct when you say it's something that's going to have to be mandated by the province in order to make change, because it's just too easy for the municipalities to not take action. The government could spend all kinds of time and money looking at this, and if it's not going to be implemented in the end, it's not going to see change.

On the supply issue overall, we see the levels of government really having to work more closely together in terms of making this happen, but the province needs to take the initial steps, and then, definitely, the municipalities need to pick it up and figure out how these changes can be implemented in their communities.

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Ms. Kathleen O. Wynne: Stacey, what's AMO saying to you about this, for example?

Ms. Stacey Evoy: We're not hearing much from them; however, we have been invited to speak to them at one of their large meetings coming up in the spring. I think it just keeps getting postponed because of COVID and them not meeting, maybe, as regularly, and also not meeting in person. But not as much is coming from them these days in terms of any questions.

I'm going to just pass it over to Jason in case he's aware of something that I'm not.

Mr. Jason Lagerquist: No, Stacey, I think you did a good job there.

We are looking to sit down with AMO at some point in the future. We haven't had an opportunity to have that conversation as of yet.

Ms. Kathleen O. Wynne: I just want to support the notion that these strategies would be taken up with AMO, that they would be taken up—

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

Ms. Kathleen O. Wynne: —as suggestions for mandatory implementations. Sorry, Chair. Thanks very much.

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

Ms. Kathleen O. Wynne: Oh, sorry; I thought you said I was done.

I just think that the NIMBYism issue is not going to go away.

A quick other question: The impact on employment lands of the idea around allowing residential buildings in some of those commercial areas—have you talked about the employment lands conundrum?

Mr. David Oikle: Jason?

Mr. Jason Lagerquist: The short answer to your question is no. That's not something we've had extensive discussion about as of yet.

Ms. Kathleen O. Wynne: Okay. That's something that you probably need to look at because municipalities, particularly urban municipalities, struggle with maintaining employment lands.

Mr. Jason Lagerquist: Okay, thank you; that's a great suggestion.

Ms. Kathleen O. Wynne: Thank you, Chair.

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

That concludes the time for this panel. I just wanted to remind all the presenters that the deadline for written submissions is 7 p.m., Wednesday, January 26. So, any questions that I had to cut off, if you have more to add, put it in a written submission and get it in by that time and it will be taken into consideration.

We also have two more members who have joined us: MPP Smith, if he would introduce himself.

Interjection.

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

Mr. Billy Pang: Good morning, Mr. Chair. MPP Billy Pang from Markham–Unionville. I am in my riding of Markham–Unionville. Thank you.

The Chair (Mr. Ernie Hardeman): I see MPP Smith has just snuck back into the corner of my screen.

Mr. Dave Smith: Good morning, Chair. This is MPP Dave Smith and I am in beautiful God's country, Peterborough.

The Chair (Mr. Ernie Hardeman): Thank you very much, and thank you again to the panel for the presentation this morning.

CANADIAN CENTRE
FOR POLICY ALTERNATIVES
REGISTERED PRACTICAL NURSES
ASSOCIATION OF ONTARIO
ASSOCIATION OF LOCAL PUBLIC
HEALTH AGENCIES

The Chair (Mr. Ernie Hardeman): The next round, we start off with the Canadian Centre for Policy Alternatives. Again, the same as with previous panels: If they will come forward and introduce themselves for Hansard. There will be seven minutes of presentation, and I will give notice of the approaching one-minute mark of the completion. With that, the Canadian Centre for Policy Alternatives.

Mr. Randy Robinson: Okay. I see that I am unmuted so I'm going to say good morning. My name is Randy Robinson, and I'm the Ontario director of the Canadian Centre for Policy Alternatives. Thank you for the opportunity to speak to you today.

Time is short so I'll get right to the point of my presentation. For some time now, Queen's Park has been failing to adequately fund the public services Ontarians depend

on. In order to begin to fix that, the province needs to raise more revenue. I will leave it to others to speak about the government's spending in response to the ongoing COVID-19 pandemic. What I want to talk about today relates to the revenues needed to bring base program spending up to Canadian standards.

Ontario's public services are in crisis, and not just because of COVID-19. Going into the pandemic, Ontario had the fewest hospital beds per capita of any province and was tied with Mexico for fewest beds of any OECD country. We have the fewest registered nurses per capita of any province. Our community colleges now receive more funding from international students than they do from Queen's Park. As of 2019, one in six Ontario children live in poverty. Single Ontarians trying to survive on Ontario Works receive \$733 a month, a number that would have to rise by 67% to reach the level it was at in 1993 after inflation is taken into account. According to the Auditor General, Ontario's plan to reduce greenhouse gas emissions will take us just 19% of the way to meeting our 2030 climate targets.

In education, we know that COVID-19 has been very, very hard on our two million elementary and secondary school students. The pandemic has interfered with their learning; it has interfered with their personal and social development. Helping students get back to where they should be by boosting investment in public education must be an urgent priority for the 2022 budget.

In long-term care, in housing, in the justice system, in post-secondary education, everywhere you look, our public services need more money. This is not a new phenomenon. For 10 years, successive finance ministers have boasted that we spend less per capita on programs than any other province, and not by a little—by a lot. According to the Financial Accountability Office, Ontario spends roughly \$2,000 less per person on programs than the average of the other provinces.

Ontario does not have a spending problem by Canadian standards. What we have is a revenue problem. But you don't have to take it from me. Both our current Premier and our finance minister have made it clear, repeatedly, that Ontario needs more money. Their demand that the federal government transfer an additional \$10 billion a year to Ontario through the Canada Health Transfer is all the evidence you need of that. So it is strange that even as the government is recognizing the need for more revenue, it is reducing its own revenues by at least \$5 billion a year through a variety of tax cuts since 2018.

Whatever you may think of tax cuts or tax credits, one thing is clear: The government has taken no steps to replace the \$5 billion in revenue that has disappeared as a result of them. So no one should be surprised that the government of Canada wants strings attached to health care funding to provinces. Ottawa wants to know that it's funding health care, not subsidizing \$3,000-a-week Muskoka cottage rentals through new tax credits.

Health care is provincial jurisdiction. So is education. So is social assistance. Federal funding is useful, especially to maintain national standards, but that does not take

away the province's responsibility to pay its own way, especially when that province is Ontario.

We have plenty of room to raise taxes, but we need to make the fiscal effort to do so. According to a 2019 report from the FAO, Ontario could increase its collection of personal income tax by 18% and all that would happen is that we would be collecting personal income tax as a share of labour income at the same rate as the average of the other provinces.

Unfortunately, we live in an era in which tax cuts have been pitched to voters as consequence-free. They are not. The desperate situation our public services are in today is a direct result of a quarter century of tax cuts of different kinds at different times. This is why program spending per capita is \$2,000 behind the other provinces.

Let's be clear on what that means. With 15 million Ontarians, we would need to spend another \$30 billion a year on programs just to be average. But instead of raising revenues to close the gap, the current government has cut them. As if being \$2,000 per person behind wasn't bad enough, the FAO estimated in June that planned provincial program spending was on a trajectory that would see it fall by a further \$1,281 per Ontarian in 2020 dollars by the end of this decade. We are heading in the wrong direction.

In the 2018 election campaign, the current Premier made a commitment to cut personal and corporate income taxes, at a cost to the treasury of \$2.3 billion a year for the former and an estimated \$1.5 billion a year for the latter. These proposed cuts have not gone ahead, and it would be a grave mistake if they were included in the 2022 budget. Public services simply cannot take any more pummelling.

If the Ontario government is reluctant to pay for public services, it is not because the province can't afford to do so. Ontario's real GDP per capita, which is a common measure of the prosperity of any jurisdiction, hit an all-time high in 2019, right before the pandemic. COVID-19 has been an economic setback, but it hasn't changed the fact that Ontario is a rich province in a rich country. The problem is income inequality is at crisis levels these days. It's true that many Ontarians are barely scraping by, but others are laughing all the way to the bank. In 2020, the incomes of Canada's top 100 CEOs were 191 times the incomes of the average full-time, full-year worker.

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

Mr. Randy Robinson: The wealth of Canada's 59 billionaires has increased by \$111 billion since the pandemic began. There is money in this country and in this province, but we will never tackle all the problems we face if we don't harness that money for the common good, and that means raising taxes, especially on those most able to pay.

1010

Thank you. I look forward to the discussion.

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

Our next delegation is WeRPN, the Registered Practical Nurses Association of Ontario. We will ask again for the speakers to come forward and introduce themselves

for Hansard. You have seven minutes, and we'll notify you when one minute is left. With that, the floor is yours.

Ms. Dianne Martin: My name is Dianne Martin, and I am the CEO of the Registered Practical Nurses Association of Ontario, or WeRPN. It's always an honour to speak on behalf of WeRPN's members, so thank you for this opportunity to share our recommendations.

There are more than 50,000 registered practical nurses registered to practise in Ontario, making them the second-largest group of regulated health care professionals in the province. Ontario's RPNs are experts and innovators in nursing practice, leading to positive change at the point of care and improving patients' access to quality care across the health system. Almost 95% of these nurses work in roles that provide direct care to Ontarians.

First, I want to thank the government for the recently announced \$100-million investment in the career-laddering BEGIN initiative: Bridging Educational Grant In Nursing. WeRPN has long been the champion for this approach to growing new nurses—PSWs to RPNs; RPNs to RNs—a plan that will see health care providers have a reason to stay within the health care environment. We are grateful for your trust in us as an organization to deliver this new program.

We appreciate the government's commitment to stabilizing and sustaining the nursing workforce, and commend this necessary step towards this goal, but we also need to point out when things are not working as intended. As an unintended consequence of the \$3-an-hour pandemic pay top-up that you rightly awarded to PSWs, RPNs are experiencing a wage compression that, in some cases, means that RPNs are supervising PSWs and are receiving less than that PSW staff they manage. As you can imagine, for RPNs, this is unfair and demoralizing and gives them very little reason to stay within the health care profession.

With my limited time here today, I'm here to deliver a message from Ontario's 50,000 RPNs: After 22 months of working in almost unbearable conditions, caring for countless patients, RPNs are burnt out, angry and frustrated. They are disappointed that the extraordinary additional work, risk and stress they have borne has not been properly recognized with commensurate compensation.

The Ontario government can change this now by bringing fairness to how RPNs are compensated. In our 2022 pre-budget submission, a copy of which will be submitted to the committee, recommendation number one is to make permanent the pandemic pay top-up for PSWs and extend the \$3-an-hour pandemic pay to RPNs retroactively. It's about fairness, plain and simple.

I will briefly touch on our other recommendations within our pre-budget submission. Nurses are the backbone of the health care system—it has become almost a saying, but literally, if you watch the functioning of the health care system without the nurses who are the glue holding every sector together, we are in a great deal of trouble—but we have a shortage, a fact that we can all agree on, regardless of where we are in our roles or our political affiliation. In fact, in a recent survey, 95% of Ontarians expressed a desire to see more nurses hired to

meet the growing needs of the province and especially its aging population.

WeRPN has proposed a made-in-Ontario solution for managing nursing recruitment and retention. We have developed a series of steps that will work in tandem to solve the puzzle of what makes a nursing career an attractive opportunity. The puzzle is made up of three pieces: pay, workload and education.

I've already talked about the ongoing pandemic pay top-up, but we also propose establishing a provincial minimum wage for RPNs that is appropriately proportioned to RNs. After all, while RPNs are not RNs, their work is more closely aligned with the RNs than it is to a PSW.

The next piece of the puzzle is workload. Nurses have always worked hard and have always expected to work hard. But today's nursing shortage creates a workload that leads to moral distress in our nurses when they feel they cannot adequately and compassionately meet the needs of their patients and residents. They tell us of an acute and ongoing sense of failure every day when they go home, through no fault of their own.

It's important that we match care provider numbers and competencies with patient and resident needs in order to ensure a manageable nurse workload and job satisfaction while creating a work environment that is conducive to attracting and retaining staff. To achieve this goal, we recommend that government legislate staffing and workload standards to promote a culture of safety for the patients, the residents and for the nurses, and moving to 75% full-time positions for RPNs in long-term care, home and community care.

The last piece of the puzzle is education. Recent government announcements like the BEGIN initiative, which I noted earlier, have been important. But now we need a renewal of the long-standing Nursing Education Initiative, which provides nurses who want to stay within their category of nurse but gain extra knowledge to better care for their patients to have some funding to support that growth. Opening additional seats in college education programs are first steps.

We have two additional recommendations that include the streamlining of the education process from RPN to RN to grow nurses into their role faster—

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

Ms. Dianne Martin: Thank you—and investing in a preceptorship incentive program for RPNs who take a student on top of their already heavy workloads, an important piece to growing our nursing workforce.

When these three puzzle pieces are assembled together, we will have created an attractive work environment for RPNs, and Ontario's RPN health human resource goals will be met.

I thank you for your time, and I look forward to taking your questions.

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

Our next presenter will be the Association of Local Public Health Agencies. Again, we ask you to identify the

speaker. You have seven minutes to make your presentation, and I will notify you of the last minute left. The floor is yours.

Dr. Robert Kyle: Good morning, Mr. Chair, committee members and fellow deputants. I'm Dr. Robert Kyle, treasurer of the Association of Local Public Health Agencies, better known as ALPHA, and Durham region's medical officer of health.

ALPHA represents all of Ontario's 34 boards of health, medical officers of health and senior public health managers in each of the public health disciplines. For nearly two years, ALPHA's members have distinguished themselves on the front line of the pandemic response, preventing COVID-19 infections, transmission, hospitalizations and death through enactment and enforcement of public health measures, case and contact management, outbreak management, infection prevention and control in institutions, communication of credible advice to the public, response coordination with local and provincial partners and leadership of the most complex vaccination campaign in Ontario's history.

The Ontario government is to be commended for the financial commitments that have been made to local public health to support its response to this crisis and to defray numerous extraordinary costs. This resource-intensive work has unfortunately come at the near total expense of public health's regular mandated programs and services, which are defined in the Ontario Public Health Standards under the following categories: chronic disease prevention and well-being, emergency management, food safety, health equity, healthy environments, healthy growth and development, non-COVID-19 immunization, infectious and communicable diseases prevention and control, population health assessment, safe water, school health, and substance use and injury prevention. Our inability to deliver these programs is the public health equivalent of the health care sector's surgical backlog. Failure to catch up will have significant impacts on population health, with increased burdens of illness on the health care system for years to come. Avoiding these impacts will require an infusion of resources that will allow us to clear the backlog, resume these regular activities and maintain an effective pandemic response.

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Local public health is on the front line of keeping people well at all times and results in an excellent return on investment. Its value has been demonstrated more clearly than ever throughout the ongoing pandemic.

The commitment to local public health the government has demonstrated during the crisis needs to be entrenched and reinforced to ensure that our public health system can carry out each of its health protection and promotion duties, both regular and responsive, to ensure a healthy population. To achieve this, we make the following recommendations for your consideration as the 2022 Ontario budget is prepared: Ontario must commit to stable and sufficient investments in public health to ensure continued support for an ongoing pandemic response; enhanced support for local public health recovery and sustainability;

additional support for COVID-19 response, evaluation and improvements; and preservation of the integrity of Ontario's locally based public health system.

We have made more specific recommendations for each of these in our accompanying written submission, and I would like to take the opportunity to highlight some of these for the committee. The 2022 Ontario budget should:

- plan for additional one-time allocations to support the ongoing pandemic response;

- plan for additional one-time funding to support recovery efforts and close the gaps for public health programs and services;

- ensure that the total funding envelope is sufficient for all local public health agencies to deliver their entire OPHS mandate, in addition to responding to the pandemic;

- immediately revert to the 75-25 per cent provincial-municipal public health cost-sharing formula;

- consider continuing to provide 100% provincial funding for provincial priorities such as the Ontario Seniors Dental Care Program;

- make provisions for a comprehensive review and assessment of all aspects of the pandemic response and recovery;

- recognize that investments in health protection and promotion yield significant returns on investment by reducing the burden of illness on Ontario's health care system.

We look forward to emerging from the COVID-19 crisis, but a full recovery will not be possible without meaningful investments in local public health and the central supports that it relies on. A healthy economy is not possible without healthy people.

These investments will also be foundational to achieving certain priorities outlined in the 2021 Build Ontario fall economic statement, mainly safely reopening Ontario and managing COVID-19 for the long term, keeping schools safe and increasing access to dental health programs for seniors.

ALPHA values and appreciates Ontario's leadership, guidance and support throughout the pandemic response, including financial support for its pandemic-related extraordinary costs. ALPHA anticipates this continued commitment as we look forward to entering a new normal. Thank you for your attention, and I look forward to answering your questions.

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes the presentations for this panel. We will now start the questions with the opposition. MPP Fife.

Ms. Catherine Fife: Thank you to all presenters this morning. I appreciate it.

I'm going to start with Randy from the Canadian Centre for Policy Alternatives. Now, Randy, you had referenced the various tax cuts and credits that the government has brought in and also referenced the latest estimate from the Ontario Financial Accountability Officer cancelling the previous government's cap-and-trade climate plan and the cost of that, which I think was about \$1.9 billion or \$2 billion, and then the corporate tax cuts through the Ontario

Job Creation Investment Incentive, which cost the treasury about \$595 million a year. I guess the question is, Randy, do you really think that this is a government that's going to reverse course on the loss of revenue? The bulk of the delegations that we've heard from are asking for significant funds to make up for that systemic underfunding of education, of health care and really on climate change as well.

So \$2,000 per capita less: This is something that previous governments have bragged about. I want to just give you an opportunity to weigh in on the politics of this, of where we are right now, please.

Mr. Randy Robinson: Well, that's a very fun question, but as a non-partisan organization, it's not really my job to speculate on what any particular party will or won't do.

Looking at the \$5 billion in tax cuts and tax credits, you can have a conversation about whether or not any of those are smart policy decisions or whether they are as smart as other alternative policy positions. There's nothing wrong with tax credits per se. Our film industry thrives on tax credits; that's how you get into the game. If you don't have tax credits, you don't have an industry, as Saskatchewan found out to its chagrin a few years back.

The question is not, "Are these the right policy moves at the right time?" For me, based on my presentation today, it's, "What are we going to do to get the money back that we've lost?" and "What are we going to do to recoup the money that is keeping us \$2,000 below the average of the other provinces?" I have to reiterate, that is a lot of money. We have 15 million Ontarians—almost; we'll soon hit that number. It's \$30 billion in extra spending that we would need just to be average.

It seems like we've come a long way if we've got to the point where Ontario's highest ambition is to be average, and I just don't think that's acceptable.

I wanted to comment on a couple of things. I see MPP Mamakwa there. The highest rate of child poverty in Ontario is across the street from the bank towers that are basically a fountain of money gushing at the corner of King Street and Bay Street. The average income of the CEOs of the banks is over \$11 billion a year.

The second-highest rate of child poverty in Ontario is way up in northwestern Ontario where all the gold mines are. Of the 100 CEOs who are on the richest Canadian CEOs list, six of them work for a company that has the word "gold" in the name.

So there's no shortage of wealth in this province. People have been convinced that somehow Ontario is broke and we can't do anything. It's absolutely not the case.

Ms. Catherine Fife: If you were in our hospitals and you talked to some of our front-line health care workers, I think that people would tell you that the money is not there for those services. But it's been a long time coming, and the pandemic has certainly highlighted those weaknesses.

I like to ask fun questions, Randy, but I understand that you're making the case and asking the government in this upcoming budget—which I would argue is one of the most important budgets our province has seen in a long time—

for a better approach to chart a course to restore provincial revenues through progressive taxation. That, obviously, is a call of your centre, and I appreciate that.

I did want to give you an opportunity also, though, to weigh in on the fact that Ontario has not signed a deal with the federal government on child care, and really highlight the importance of Ontario securing this deal for equality, for the economy and for the future of the province.

Mr. Randy Robinson: Well, I don't know what is happening inside those negotiations between the province and the federal government, but I know one thing, which is that the province is saying, "It's not enough." That, to me, is merely another indication that we do not have enough money in this province for public services. This is a new program, but it is absolutely the case that when the Premier says, "We need \$10 billion for health care," that he might be right. And if we do, in fact, need \$10 billion, then we have to take responsibility, because it's an area of provincial jurisdiction, for figuring out ways to fund that. It's all well and good to go to the federal government and say, "Well, you have greater spending powers; you have a greater ability to fund these things," but we have provinces for a reason. If you're going to say, "This is our jurisdiction; we don't want any strings attached," then you absolutely have to say, "Yes, we will pony up the money to pay for it."

Ms. Catherine Fife: Thank you. Chair, how much time do I have?

The Chair (Mr. Ernie Hardeman): One minute.
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Ms. Catherine Fife: Thanks very much, Randy.

I'm going to move over quickly to Robert. You've asked the government, quite rightly, to reverse the 75-25 per cent cost-sharing formula. Can you highlight how important that is in order to truly create some balance with our public health agencies? Go ahead.

Dr. Robert Kyle: Thank you for the question. Prior to the pandemic, funding for public health had been flatlined for a number of years, and of course your ongoing costs continue to increase, so that often means not filling vacancies etc. Once we get through the pandemic, we hope we'll return to some sort of normalcy, and it is important for public health to have appropriate baseline funding. At the very least, we need to stop the further erosion in the cost-share formula and ideally reverse the cuts that have been made, or the change in the formula that has been made, just so that we can carry on with the core public health programs and services—

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

Ms. Catherine Fife: Thank you, Robert.

The Chair (Mr. Ernie Hardeman): That concludes the time. We will now go to the independent. MPP Wynne?

Ms. Kathleen O. Wynne: I notice that my colleague MPP Hunter has joined, and so she will take the next round, but I'd like to just make a couple of comments.

Again, thank you all for being here, all three groups. I just want to make a couple of comments. As the former

Premier and member of two governments that raised taxes in a number of different ways, including on the wealthiest in the province, and who made that comment about the fact that we are the leanest government—I was always making that comment in the context of people who were attacking us for spending too much. I was always making the point that, in fact, we were not overspending; in fact, we were trying to put in place the supports that are needed. Randy, I know you know that, and I appreciate your comments on the need for revenue.

But Dianne, I want to ask you a question. You've talked about RPNs. Often in this conversation about the economy, we don't talk about the caring economy. We talk about the balance sheets and we talk about the need for revenue, and that is absolutely necessary, which is why we raised revenues when we were in office. But Dianne, could you just paint a bit of a picture of what will happen if we do not acknowledge the need for support for the people who are caring for the—not just in long-term care, but in hospitals and across the health care sector. Can you just talk a little bit about what you see coming at us if we don't see that permanent pandemic pay, if we don't see legislated staffing and workload standards that you're asking for?

Ms. Dianne Martin: Thank you, MPP Wynne, for that question. I think it's an important one. First of all, I think the reality among nurses varies because of the very low pay level of the RPNs, actually, at the PSW level. I think what we'll see is, rather than a loud warning that we're going to lose our RPNs, they are going to just move on. It will be a quiet exodus. It's already happening. The resignations of people from our organization's membership cross my desk. They move on to other jobs, because they don't have to do this job for that amount of money. There are other things that they can do, the way the situation is today.

But from a patient perspective, which is what I care about, which the nurses care about and which, of course, you care about, the actual lived reality of nurses—I don't even know if I can talk about this without crying, but the actual lived reality of patients is being unfed, lying in wet beds. This is our reality today. I can't even let myself go to imagining what it would be tomorrow. Knowing that a patient has suffered a health consequence due to the fact that the ability of a nurse to go to that patient was hindered by the fact that they have double the patient load they've had before—the nurses take that moral distress home with them, and they become ill themselves. Some of our nurses call it moral devastation. I think that we have to realize that the patients who are in those beds or in their homes are suffering something that you can't unsee. And I wonder sometimes if we're doing too little to describe that experience—

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

Ms. Dianne Martin: Thank you—and if we should be doing more to describe what that lived experience is. Thank you.

Ms. Kathleen O. Wynne: And I think the added piece to that, Dianne, is those people are, in massive numbers

and in a massive majority, women and are bearing the load at home as well. I think that that's part of the picture in terms of the care load that's being carried by your members across the province. Thank you so much for painting that picture.

Take care, everybody. Mitzie is going to take over.

The Chair (Mr. Ernie Hardeman): Thank you very much. MPP Hunter has just arrived. If she would introduce herself. MPP Hunter?

Interjection.

The Chair (Mr. Ernie Hardeman): Oh, okay.

We now move to government questions. MPP Martin.

Mrs. Robin Martin: I just want to thank all of the presenters for being here today. It's certainly interesting to hear all of the things you're bringing to the table. We very much look forward to these meetings to understand a lot of your concerns and ideas and suggestions. I think that's very helpful.

I'm going to focus on the RPNs. I had a recent meeting with Dianne and the WeRPN organization, which I greatly appreciated. I have to start, of course, by saying that we understand how difficult the pandemic has been for the lives of our RPNs and our other nursing providers and the strain that it has placed on them, on mental health and otherwise, and that obviously is a very important thing that we're experiencing during the pandemic. We really do care about those issues, and you know we've taken some steps, which I'll get to in a minute.

But the other issue you talked about is the workload and, obviously, recruitment and retention. You laid out the plan that we had discussed before that you have to deal with pay, to deal with workload and education, which are all important components of that. And I know that we have tried very hard, given our resources during the pandemic, to be able to recruit and retain more nursing staff, especially—of all kinds. I think we've so far increased it by 6,700 positions during the pandemic, and we've got another 6,000 which should be in place by March of 2022. That included \$52 million to recruit, retain and support over 3,700 front-line health care workers through our fall preparedness plan, which I think was one of the largest health care recruitment initiatives ever done in the province's history.

I just wanted to ask you if you have any comments about how these steps are helping with HHR recruitment. I kind of wish we were 20 years ago and we could have a plan for 20 years in the future for our demands and needs, but maybe that's what we need going forward. If you have any insights you can offer, Dianne, about RPN recruitment specifically and how we make sure that we are providing the tools needed to keep our nursing workforce there.

Ms. Dianne Martin: Well, first of all, 20 years ago the Canadian Nurses Association released a report called Nursing 2020 that told us exactly where we would be today, so that did exist. But having said that, recruitment is important. Recruitment is very hard in a situation—it's not hard to recruit nurses; the waiting lists to get into nursing school are massive, so this is not our problem. But it's hard to bring nursing students into an environment where there aren't the existing nurses to help them learn.

That is a problem. So I would say that our focus needs to be, yes, on bringing new nurses into the system but even more so on retaining the ones who are there. And there is no one issue that retains nurses, although right now, the one we're hearing about most frequently is, of course, compensation for what they are doing—double the workloads they had before. So I would say that's the number one issue today.

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But any government that's in place will have to put into place a number of initiatives to work in tandem to solve the retention problem. We have long talked about the fact that there is no one magic panacea that's going to resolve this for us. It needs to be a variety of programs and, certainly, we are working on every committee that's designing any of those programs. But I think more has to be done, and I think it has to be done in a hurry, because I think every month that we wait, we are losing more nurses.

But certainly, the programs that are put in place, I see my own fingerprints on those plans. We are consulted and I'm thankful for those programs, but we have to do more quickly.

Mrs. Robin Martin: In that regard, I think you mentioned preceptorship—I was taking notes and I had a note that you had mentioned that and you said something we should do with respect to preceptorship. Could you just reiterate that? Because I think I missed the point.

Ms. Dianne Martin: Okay. Believe it or not, it is not extra help when the school assigns a nursing student to you as a staff member in a hospital. That's not help; that's a workload. When you have nurses who are normally caring for five patients or, in ICU, one patient, or whatever, and now have at least double that, and cry before every shift and cry at the end of every shift, then I think when you ask them to take a student, they can't. So what we have to do is do whatever we can to make that a better, more appealing thing, or we can't even educate the nurses that we're trying to educate now. There's not a lot we can do about that except solve all the problems, plus give an incentive to the nurses that say, "I will teach. I will teach the student."

Mrs. Robin Martin: Yes, I think that's a really important point. I also think that works for people going into home care. It's very hard to send a new PSW off into somebody's home and leave them there to provide care. I think they need more of that kind of training to be able to—and the same for RPNs. But somebody who is just starting out and being sent off by themselves, it's a real challenge, I think, so it's something we need to work on.

The other thing I wanted to ask about was the mental health programs. We did, in our fall economic statement, provide additional funding of \$8.7 million for 2022-23 to support existing and expanded mental health and addictions supports for health care workers and mental health services, which we've tried to focus on for health care workers. I know WeRPN has its own programs—

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

Mrs. Robin Martin:—which we cheer on. So if you could just comment a bit on how those supports are helping and what else maybe needs to be done.

Ms. Dianne Martin: With the mental health supports, what we need is a variety for people—I don't know if you've ever accessed mental health care, but people find their path. People find the right thing for them. We need a variety. We offer some. The government supports some. There's some privately offered. The more of those that we have the better.

I would like to mention the PTSD program that the government has started. We fought for a long time to have nurses in that, because it's devastating to nurses when police and firefighters are exempted from things that nurses have to live under, or nurses are exempted from the things that help police and firefighters. We're devastated when that happens, and so are the police and firefighters who are our closest colleagues. But with the PTSD program, we were finally recognized as being as important—

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

I believe MPP Hunter is present now. If you could introduce yourself and where you are.

Ms. Mitzie Hunter: It's MPP Mitzie Hunter and I am in Toronto.

The Chair (Mr. Ernie Hardeman): We'll now start the second round. We'll start with the official opposition. MPP French.

Ms. Jennifer K. French: I'm very glad to see everyone today. Thank you very much for really important presentations.

I would also like to say hello and welcome to Dr. Robert Kyle. I feel like I've seen you recently and, of course, being from the Durham region, fully appreciate the really important hands-on care and work—unimaginable work—that our public health folks are doing. I'll start briefly with you. I do know that my colleague MPP Mamakwa would like some time this round as well.

Dr. Kyle, obviously folks across communities are having a better understanding for the work that you, as public health units, have been doing across the province with the pandemic in mind. Could you give us a few examples of what that regular work is? And I say "regular"; it's not the best word. But when we get back to a sense of normal, what will that look like if you are not appropriately funded, if we don't see an improvement to the cost-share funding and if we continue to see this government make cuts to public health? What will that look like in terms of the normal flow of health across our communities?

Dr. Robert Kyle: Thanks for your question. Chronic disease and well-being, for example—we deal with diseases that have a high burden of illness on the health care system, so diabetes, smoking-related illness, that sort of thing. And those impacts, of course, relate to chronic diseases and health care requirements.

We make the case in our submission that we're trying to reduce the burden of illness. Food safety, immunizations outside of COVID-19, infection prevention and control outside of COVID-19, healthy environments, addressing health equity: All of those programs, first and foremost, protect and promote the health of communities

and try to redress health inequities and, second, to the extent that these illnesses in the long term lead to conditions that require primary care, acute care, long-term care, to bear the cost of those health care burdens—that's what we're trying to do.

During the pandemic, of course, when we talk about return on investment, I think a good example is us working with others with respect to the vaccine rollout and it having an appreciable impact on the Delta variant.

Those are the types of programs we need to get back to. As we say in our submission, it's our equivalent of the surgical backlog. I think it's fair to say that pretty well 90% of our programming has focused on pandemic response and vaccine rollout, and so we need to return to those mandated programs and we need to have secure and stable funding as we recover and as we restore these programs and services.

Ms. Jennifer K. French: Thank you. This is a comment as opposed to a question, but I also hope that you are able to have those strong relationships with government that will allow health units across the province to get information as soon as it's available. I know it has been an unbelievable task for our health departments to scramble with these announcements and try to rally and put systems into place with the school clinics and different things like that. So thank you for the work you're doing.

Ms. Martin, thank you. Right now my loved one, my grandma, is in care. I've been in the hospital just about every day for the past two months, so I'm seeing it up close and personal—many of us are—and we both appreciate the work that the nurses are doing. But I am proud to be a New Democrat: We've called for the permanent wage increases; we've called for fairness for funding. And all the ways that we can support nurses, we do.

With that, I'm going to hand this over to my colleague Mr. Mamakwa.

Mr. Sol Mamakwa: Meegwetch. How much time do I have?

The Chair (Mr. Ernie Hardeman): Three minutes.

Mr. Sol Mamakwa: Okay. Thank you, Randy, Dianne and Dr. Kyle for the presentations. As you know, I'm the MPP for Kiiwetinoong in northwestern Ontario.

Maybe I'll focus my question to Randy. I know you spoke about child poverty in northern Ontario. In northern Ontario, we have 20 long-term-care beds only. Not only that, we have 14 long-term boil-water advisories. One of the things I struggle with is, when I'm a provincial member, the system here, the provincial institution, the government that we have here uses jurisdictions as an excuse to not address the issues that are happening on-reserve. It's being used to be complacent and not do anything, and people pay with their lives when those things happen.

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Last week, we had very devastating news from Sandy Lake, where a little boy named Grant, nine years old, died; Remi, a little girl aged six, died; and a little boy, four years old, named Wilfred. When we talk about policy approaches, Randy, just your thoughts to the committee,

your thoughts to the government: What could be done, in your thoughts, to address these issues that we face as First Nations when we are living in the backyard of Ontario, one of the richest provinces in Canada, when we are living in one of the richest countries, in Canada? Meegwetch.

Mr. Randy Robinson: Thank you for that tragic information, but also thank you for the question.

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

Mr. Randy Robinson: I'm not an expert on Indigenous affairs by any stretch of the imagination, but I do know that Jordan's Principle is based on the idea that different levels of government should not stand around arguing about who's responsible and then wait for more tragedies to happen. I think it's incumbent on all levels of government to really jump in there and do things.

The basis of my presentation is really about revenue. There's one mine in the Kenora federal riding that has three million ounces of gold reserves, and gold sells for 1,800 bucks an ounce right now, so it's not in any way a question of the financial resources. Those resources are there, absolutely. It's just a matter of the political will. All those of us who want to make change with boil-water advisories or public health or long-term care can do is keep on saying, "Listen, this is not"—

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

We now move to the independent member. MPP Hunter.

Ms. Mitzie Hunter: I really want to thank all of the panel members. The work you do is so vital in our province. We can go through as many of you as we are able to with the time that I have to address—the pandemic has shone a light on health care inequities in our province, and there are certain communities in my area of Scarborough–Guildwood, for instance, that have been and continue to be COVID hot spots, and we have serious consequences to health outcomes as a result of that. As we look to lessons learned from the pandemic and how to have a more inclusive and fair society, what, in your areas, would you want to see this province focus on so that we can have better health equity outcomes?

Maybe, Dr. Kyle, I'll start with you. I have so much respect for the local public health units. Every time I ask the health minister for what the plan is, I'm told that we have 34 plans, because it's in the hands of public health. I know that you've been closest to this. Toronto Public Health has led the collection of race-based data that really shows by postal code what is happening. If you could start, please.

Dr. Robert Kyle: Thank you for the question. Pre-pandemic—and I guess I'm giving you Durham's perspective, not ALPHA's perspective. Years prior to the pandemic, we created a health neighbourhood resource that looked at the burden of illness across 50 health neighbourhoods in Durham region. We provided that information to our community partners. It was embraced, and many municipalities, school boards and ourselves have used that information for planning purposes and for other things being equal; for example, we would make

sure that we provided programming in a priority neighbourhood.

During the pandemic, of course, it has shone a light further on burdens of illness in racialized and marginalized communities. I think together with the provincial direction, we've tried to get at some of those inequities: for example, by changing vaccine supply policy so that we make investments in hot spots.

In our submission, we make the suggestion that, as was done with SARS, first of all, there would be a period of rest. I've been working seven days a week for close to two years now, so I do think there needs to be some rest, but reflection as to what are the lessons learned: How can we improve things and how can we apply a health equity lens as we build a better health care system and public health system?

I'll stop there and let my other deputants wade in. Thank you.

Ms. Mitzie Hunter: Dianne, are you wanting to comment?

Ms. Dianne Martin: Yes. I think the most important thing, when it comes to equity—

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

Ms. Dianne Martin: —that was revealed was the inequity among sectors in health care, which reflects how we value people. So home care, and particularly in long-term care as well—clearly not even remotely able to access the types of care that are happening in the hospital, our acute-care system, although even that is not great. I would say that's where the biggest inequity in our world is.

Ms. Mitzie Hunter: Thank you. And, Randy, any—

Mr. Randy Robinson: Yes, I'm going to jump onto a slightly different topic, because we do a lot of work around labour market issues, and talk about the minimum wage and employment standards. We know that racialized people, Indigenous people are overrepresented in low-wage jobs, in low-wage sectors, in low-wage industries, and yet we just don't seem to get the idea that—

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

We now have to go on to the government. MPP Skelly.

Ms. Donna Skelly: Thank you, Chair. Good morning, and good morning to all of you. Thank you all for your presentations this morning.

My question is to Dr. Kyle, who is with the Association of Local Public Health Agencies. First of all, Dr. Kyle, thank you for all of the work you have done, and members of your organization. I cannot imagine the amount of stress that you all have been under, and I can't imagine four years ago that you ever thought you would be put in a position like this.

My question to you is going to be about vaccines. It's interesting; in November, when I was going through—it's kind of a long way of getting around this, but my grandfather was in the First World War. I have his First World War diary and his attestation papers. In this document, it says, "Would you be willing to get a vaccine?" This is from 1916. I thought it was so interesting, because here we

are today trying to encourage people to get a vaccine, which we know is the best way to fight this virus and to get through this pandemic. We've had a pretty good response, I'd say, by our adult population. At this point, it's 88.6% of Ontarians who have had two doses; over 90% for the first dose. But we really are lagging in a certain demographic, and that is our young people aged five to 11.

McMaster University—back in the summer, I toured Mac and they showed us an innovative device that they have invented. It's a nasal spray, a nasal applicant, that they are hoping they can use for people who are vaccine-hesitant—needle-hesitant—to administer this particular vaccine. But I'm wondering, in your experience and moving forward, do you have suggestions on how we can get needles in the arms of the overall population, but specifically in the five- to 11-year-olds?

Dr. Robert Kyle: Thank you for the question. I think it's complex and you have to use a multitude of strategies: of course, education, supply and a safe vaccine, multiple access, multiple channels. You need to be prepared to answer questions that parents may have. You may want to use some policy measures—incentives, if you will—to promote vaccination.

I don't think there's a magic bullet. I think you have to work at it on all cylinders. I understand that that will be a focus next week, with respect to multiple partners weighing in with respect to the education piece. I'd say where we are right now in Ontario is we don't have a supply or an access issue. It's probably more a hesitancy issue, and you just have to chip away at myth-busting, answering questions and, yes, in the case of kids, having a kid-friendly kind of environment, so that you deal with the personal stresses, concerns and that sort of thing. I think PHUs have done a very credible job in that regard, together with our community partners. Thanks for the question.

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Ms. Donna Skelly: You mentioned incentives. Have you got ideas or suggestions on what we could be doing as a government? I know that, as you said, it's a multiple-pronged approach in order to address the reluctance, but are there any specific things, ideas that you have, that would incentivize people to get a jab in the arm?

Dr. Robert Kyle: You're catching me a bit flat-footed; I didn't prep for this. But I would think anything that cast a light on kids, for example, actually getting their vaccine—if they're willing and there are no privacy concerns, kind of amplifying those messages. I think there are folks who are experts in behavioural sciences who probably can answer this question off the top of their head, but I do think that reward recognition could be part of the picture, whatever makes the most sense in that population. But off the top of my head, I can't give you any concrete examples, other than that you just need to be prepared to chip away at this.

Ms. Donna Skelly: Two years into a pandemic, of course, we are all laser-focused on getting through this and recovery, beyond just the health component but also our economy etc. But there are other issues in Ontario, and one

in particular—I wanted to ask you about this, as something near and dear to my heart—is care for seniors.

We introduced a program a while ago on dental health care for seniors, for our vulnerable population of low-income seniors. Are you familiar with it? Do you have any feedback to provide? Because it's something I'd like to see us grow and direct more resources to. It's completely outside of the pandemic at this point, but it's something I was quite interested in prior to the pandemic, and so many of the programs that we need for our seniors have been set aside, simply because we're so laser-focused on this. I'm just curious as to your thoughts on this particular program and what we can do to improve it.

Dr. Robert Kyle: I can't give you an association answer, but I can give you a personal answer. In Durham region, this is a high priority. We think it's a great program. It's one of the few programs that we have retained, with appropriate infection prevention and control, throughout the pandemic. The need is great. You're servicing a population that probably have not had access to dental care, for a variety of reasons, for many, many years, so you're seeing a lot of the pathology, if you will.

So we welcome the announcement for additional dollars to the program. I think it will be well received across the province, and I think it's a real success story. We try to draw attention to that in our submission, and if there are other provincial priorities that are best delivered by PHUs, we would recommend, at least as a start-up, that they be 100% provincially funded. So thank you for the question.

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

Ms. Donna Skelly: Thank you, Dr. Kyle. Again, thank you. I know that, as you said, you haven't had a day off. I cannot imagine the pressure you are under, and so many of your colleagues, but we do want you to know that we appreciate everything you have done. It has been a tough two years, but we could not have gone through this and gotten to the stage we are in right now without your support and all of your hard work, so thank you, and to your colleagues.

Mr. Chair, those are my questions. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes this panel. I would just remind all the presenters that the deadline for written submissions is 7 p.m. on Wednesday, January 26, 2022. That, of course, gives the presenters all the opportunity to completely answer all the questions that they were asked this morning, but I cut them off because the time ran out.

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The Chair (Mr. Ernie Hardeman): With that, we'll go on to the next presenters, if they're here. The next presenters will be from Bayshore HealthCare Ltd. Again, if they would come forward. It's a seven-minute presentation. We will ask you to introduce oneself, or anyone else

who is willing to speak. At the one-minute mark, I will bring that to your attention. With that, we'll turn it over to Bayshore HealthCare Ltd.

Ms. Janet Daghish: Thank you very much, Chair. I just want to confirm that you can hear me.

The Chair (Mr. Ernie Hardeman): Just great.

Ms. Janet Daghish: Wonderful. Thank you very much. I'm Janet Daghish and I'm national director, business development and government relations for Bayshore HealthCare.

We would like to take this opportunity to applaud the Ministry of Health's courageous vision for transforming the home care sector to achieve a more connected and integrated health care system. We believe bringing an integrated strategy allowing interdisciplinary team-based care, and leveraging a digital approach to implementing these new models of care, will help to energize these OHTs, Ontario health teams, to deliver better care and outcomes for patients and families.

Ontarians want to remain at home. COVID has demonstrated the numerous benefits for families by having their loved ones cared for at home.

There are three fundamental considerations during the implementation of home care system transformation. One, we need to fix the chronic underfunding of the sector before transitioning accountability over to OHTs. Secondly, we need to ensure that patients and families are engaged in creating a shared vision for the future of home care. And third and last, we need to modernize the contracted framework to support a more integrated primary care and home care relationship for a connected health care journey for patients in order to avoid hospitalizations.

Some of the principles we feel are really important to highlight: Prior to implementing any system transformation, we need to fix that historic underfunding of the home care sector through substantial investments and closing the disparity, particularly in nursing wage gaps. We need to allow that culture of partnership and trust to flourish. We need to align providers to the OHT geography so we can start to work together. We need to structure home care programs that really support that connectedness between patients, home care provider teams, and primary care practitioners. We need to create those seamless journey experiences. We need to be able to build in flexibility for innovative new models of care. We need to make sure that interdisciplinary, team-based care is fundamental to how we develop these new models. We have to have a phased implementation plan. We need to modernize these models to allow for scale so that we can ensure a consistent experience for all Ontarians across the province. We need to remove outdated language that prevents scale of these new models, and we need to ensure that we have support in standardized metrics and evaluation frameworks to evaluate how well we are doing at achieving these objectives.

Chair, and for all on the call today, we really just want to support strong evaluation frameworks that allow for continuous quality improvement that drive a better experience for patients and families in this province. Thank you for your time today.

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

We will now go to Community Living Ontario. Again, the rules are the same: a seven-minute presentation. As you come forward, please introduce yourself to make sure that you are recognized by Hansard—and anyone else in your delegation who wishes to speak. There will be a one-minute notice near the end. We'll turn it over to Community Living Ontario.

Mr. Chris Beesley: Great. Thank you very much. I'm a lone wolf this morning. My name is Chris Beesley and I am the chief executive officer at Community Living Ontario.

Community Living Ontario is a provincial confederation that advocates for people who have an intellectual disability to be fully included in all aspects of community life. We serve and advocate on behalf of our 105 front-line agencies across the province, the over 100,000 Ontario citizens who have an intellectual disability as well as all of their families.

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I'd like to start my remarks with something a little bit unusual, a bit of good news: People who have an intellectual disability have come a long way. From the 1860s through the 1950s, most were effectively imprisoned in large, inhumane residential facilities, and then from the 1960s, fewer and fewer were institutionalized, until 2009, when the last institution in Ontario was closed. Now most are living in the community with other Ontarians and often in homes of their own, with the supports they need. Some are included in the regular life of schools and colleges, and some are also earning a living through employment in the mainstream workforce, so we know what is possible.

Throughout the pandemic, people who have an intellectual disability and their families have been incredibly resilient, because they've had decades of practice. They have always faced serious barriers to getting equitable access to the health care and social supports they require. So I'd like to offer the following perspective: For the past two years during the pandemic, all of society, all of us, have had a little taste of what it's like to have an intellectual disability or to be a family member supporting a loved one, living every day with some level of fear and anxiety, not knowing what's going to happen next, not knowing if you'll have enough money to pay for food and shelter, not having a job, feeling isolated, every day feeling tired and vulnerable, through no fault of your own. We can all relate to some or maybe all of these feelings and experiences. But what if you were told that this is the way it's going to be for the rest of your life?

The government has stepped up in a myriad of ways during the pandemic to support its citizens through various income supports, business compensation and other social supports, and when this pandemic is finally over, things will settle down, and the world will go on as before. But for the people and families we represent, this survival mindset will continue just as it was before the pandemic. I ask this committee to keep this perspective in mind as I focus on the pressing need to continue to support the well-

being of this population, which, again, numbers over 100,000 across the province.

Despite our progress, people who have an intellectual disability continue to be highly marginalized and vulnerable. For example, three quarters of adults who have an intellectual disability and live away from their parents live in poverty. Some 35,000 people are waiting for at least one service for which they are eligible—things like support in the home and respite care. And more than 20,000 of those waiting are receiving no provincially funded services at all.

This population's vulnerability leads to negative outcomes both at the individual and social-systemic levels. People who have an intellectual disability are nearly twice as likely to have frequent repeat emergency department visits. They are more than twice as likely to be readmitted to hospital within 30 days of an initial discharge, and they are more likely to be inappropriately placed in long-term-care facilities, even when they are relatively young. Currently, there are more than 2,000 younger adults who have an intellectual disability living in long-term-care facilities in Ontario. These and other issues create an unnecessary burden for people, for families and for our support systems. People are not getting the supports they need when they need them, and we all pay for it later through increased downstream health and social costs.

The bottom line is that people who have an intellectual disability desperately need access to resources and services. Specifically, they need ODSP benefits to increase, now more than ever, with inflation running near 5%. They need ODSP asset limits to increase. We recommend eliminating the \$10,000 limit on voluntary gifts and payments and increasing the asset limit to \$100,000 for single-person households. They need access to the full amount of funds for which they are eligible through the Passport program. People are losing out on thousands of dollars per year in supports they were promised based on their diagnosis and their assessed level-of-support needs.

In order to increase service access and promote stability in this sector, we're also calling on the provincial government to make the \$3 pandemic wage increase in developmental services permanent so that agencies can compete effectively for quality staff and meet service needs.

Lastly, in light of the disastrous experience of people who have intellectual disabilities in the education system over the course of the pandemic, we're recommending that students be allowed to attend school for an additional year, up to the year in which they turn 22.

Things have moved backwards for so many over the last two years, and this is doubly the case for people who have an intellectual disability and their families.

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

Mr. Chris Beesley: Please make this population a central part of your considerations and recommendations for the 2022 provincial budget. Thank you very much.

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

Our next presenter is the YWCA of Toronto. I expect you heard the direction before, but you'll have seven

minutes for a presentation. When you come forward, make sure you give Hansard your name to make it proper for the record. With that, we'll turn it over to you.

Ms. Jasmine Ramze Rezae: Great. Good morning, Mr. Chair and honourable members of the committee. My name is Jasmine Ramze Rezae. I'm the director of advocacy and communications at YWCA Toronto. Thank you very much for the opportunity to address the committee today.

YWCA Toronto is a multi-service non-profit located in the city of Toronto. Each year, we serve approximately 13,000 people, primarily women but also gender-diverse community members, through a variety of programs and services. We are actually one of the leading housing providers for women in the country and we specialize in affordable and supportive housing.

We also offer more than 30 programs across 11 locations, from an early learning centre to settlement services to employment and skills training programs to girls' programs, and we're connected to a provincial YWCA Ontario movement. There are, in total, 11 member associations across the province, from Sudbury to Hamilton. Together, we serve over 50,000 individuals. We also engage in systemic advocacy to address gender and racial inequities in our province and in our city.

YWCA Toronto has a long and proud history of partnership with the province of Ontario in working towards full equality for women and girls. Many of our programs, like our violence against women shelters and our employment programs for newcomers, are either partially or fully funded by the province. Some of our programs, like our girls' centre in Scarborough which is one of only a few in Canada, should be, but are not funded by any level of government.

We can say with absolute certainty that every social, political and economic issue in our province is a women's issue. Women are impacted by the labour market, the housing market and the rising cost of living; by the rise of working poverty and precarious employment; and by deeply inadequate social assistance rates. And they are experiencing these challenges in distinct and nuanced ways.

As you know, women have been on the front lines of this pandemic in essential services, ensuring our shelters and supportive housing programs remain open; in child care and health care systems; in the non-profit sector, which is a women-majority sector; at home, caring for children and elderly. What we have repeatedly observed is women on the front lines, assuming a great level of risk, performing a critical role in our labour market and at home, with few protections and little support.

I actually spoke to this committee in January 2020. That was before COVID was declared a global pandemic. The concerns I raised at that time were about the rising poverty and inequality in the province along gender and racial lines, and the lack of awareness about the gendered impact of such inequities. Fast-forward two years later: We're grappling with an ongoing pandemic which is threatening to deepen poverty and inequality.

I think it's important to say that poverty is a women's issue: 73% of minimum wage workers in Ontario are women. Women are overrepresented in single-parent families and in precarious employment, and it is the poverty of women that is actually behind the poverty of so many children in our province as well. It's important to note that poverty is heightened for Indigenous, racialized and Black women, and that women are not a monolith, ultimately. Right? There are intersections of gender and race and class—for example, folks living with disabilities, as the previous speaker spoke about.

So one of the concerns we have—and last year, I met with multiple provincial government committees and advisory bodies about this—is around decent work for women. Work can offer a powerful path out of poverty, but many women are trapped in industries, feminized industries, even in the care economy, with low wages and few job protections. For example, child care workers—again, who are overwhelmingly women—often earn very low wages, and the pandemic has exposed that. Our essential workers provide a critical role in keeping our economy open and supporting our communities, but we don't adequately compensate their labour or protect them from harm.

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Ontario is the only province yet to sign the federal child care agreement. Signing this agreement will result in significant wage increases for workers and operating dollars for child care providers while lowering expenses for parents, which will really allow women to participate in the labour market on a more equal footing. We really hope the 2022 budget reflects new child care investments and that the province signs this child care agreement.

But decent work requires more than better wages. It requires access to sick days and job security and flexibility from employers. It requires the recognition and understanding that workers have caregiving responsibilities and that women shouldn't lose out financially or have earning potential undermined for having children. We are echoing the calls by our partners for legislated paid sick days and multi-year funding for women-led employment and training programs to help women enter the skilled trades and other better-paying industries, while calling for stronger employment standards across the board.

The Ministry of Labour, Training and Skills Development made a great deal of funding available for skilled trades development, but none of it has actually flowed to women's organizations. Several YWCAs applied for funding but were not successful. It's important that government investments have clear gender targets. Applying an intersectional gender lens to budget allocations and funding considerations and these new investment dollars will help address gender and racial disparities in our province.

As an employer and service provider, the safety and well-being of our staff and program participants are our top priorities, but it hasn't been easy. The recent COVID variant has greatly impacted our shelter, housing and child care programs. Our last bill for N95 masks was over \$16,000. Last year, on top of our 18 paid sick days—

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

Ms. Jasmine Ramze Rezae: —we offered 20 pandemic sick days to our employees to ensure that our staff is protected. We have also provided a 10% wage top-up to our front-line workers, but now that Bill 124 has come into effect, it's likely that we can no longer do so without contravening legislation.

Ultimately, as an organization, we're facing an enormous deficit because the well-being of our staff is so important to us. It shouldn't be this way. We shouldn't have to continuously fundraise to provide essential programs. We need the government now to show up for our sector, both the women we employ and the women we serve, because the labour of women in our society must be fairly compensated and respected.

We hope that the 2022 budget reflects deeper investments in the non-profit sector, as well as clear gender targets and investments in child care, housing, shelter and employment and training. We also hope that social assistance rates can be raised so that women accessing OW or ODSP and their children can live in dignity.

Thank you for your time and it would be my pleasure to answer any questions you may have.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation. That concludes the presenters. We will now start with the questioning. The first will be the independents. MPP Hunter.

Ms. Mitzie Hunter: Thank you to all the presenters for addressing the panel today and bringing forward your recommendations and really addressing areas that need to be addressed in the upcoming budget.

I would first like to start with Jasmine to talk more about the need for what you say is gender targets when funding programs are being announced and rolled out, and perhaps if we were to do reverse engineering and look at where most of the funding is going to, maybe we will see a gap that needs to be filled. I think I fully support that. Also, thank you for mentioning Scarborough and the work you do there. I'm wondering if you have a specific ask of the government in terms of this upcoming budget for programs that can invest in women's economic opportunity and equity.

Ms. Jasmine Ramze Rezae: Thank you for the question. It's a very good one. I guess two things: When it comes to our youth programs or our girls' programs, there isn't any dedicated funding stream at the provincial government for that. Maybe what you can appreciate is a lot of girls who come to access our programs are struggling with various challenges at home, at school and, especially now, with the added layer of the pandemic, struggling with mental health issues and other issues. It's really hard for us to create this safe, supportive, feminist, anti-oppressive space when we can't adequately secure funding for this work. We have to do a lot of fundraising etc. to try to recruit and retain talent and offer the programs that we do, and they're so needed. So in order to scale up that program and really offer that type of programming, there needs to be greater recognition for the need for that type of programming and then have that be reflected in the budget.

When it comes to employment and training programs, it is as you mentioned: We need gender targets. We need the funding to be tied to specific, measurable gender outcomes, and we need recognition that not all employment and training agencies are equally capable or able to address the needs of certain communities. We are subject-matter experts on women's issues, right? We are, I think, in a better position to address some of the realities of women wanting to upskill or reskill or receive additional training in order to access new job markets. It would be great if that funding would also go to women's employment training programs.

With the recent Employment Ontario systems transformation, there were a lot of categories that were included, but women were not considered a target priority, and I think there's a real missed opportunity here. The province has predicted that one out of five jobs in our economy will be in the skilled trades, but there are a lot of real gender barriers to accessing those opportunities. We need funding—sustained funding, multi-year funding—for these types of programs, so we can really tap into the market, meet staffing shortages that do exist, but also help narrow the gender disparities and gaps that exist in our economy and across sectors.

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

Ms. Mitzie Hunter: I think you're absolutely right. When we look at the impacts of the pandemic on the economy, it is many female-led jobs that have been most at risk and have seen higher unemployment rates, as well as a lag in women participating back into the economy, particularly in core age groups. You combine that with the child care issue—where we do call on the province to accept the federal government's offer of \$10-a-day child care for families in Ontario without delay, because that delay is also taking it out of the pockets of families and women, who are often burdened with the majority of the child care. So I do support what you've said, and we need to say it more often.

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

We will now go to the government. MPP Cuzzetto?

Mr. Rudy Cuzzetto: Thank you to all the presenters here today. My question is for Bayshore. I have a connection with Bayshore. For my mother, before her 90th birthday, we had called in Bayshore because she wanted to stay in her home, and I found it very important. I want to thank Bayshore for all their help during that period of time. I know it was only a month—she died six days after her 90th birthday—but I want to thank them for all their work that they did.

As well, I know that when I was property manager at the Mississauga Canoe Club, Bayshore had their own dragon boat team. Janet is laughing there, but great team out there, and I support you guys 100%.

I know keeping seniors in their home is the most important thing. My mother used to always say that she never wanted to go to a long-term care. She wanted to live in her home until the end, which she did. I notice that you are training a lot of our students to become graduates from

Bayshore, so I congratulate you on that. What other supports do you see important for the home care sector, moving forward?

Ms. Janet Daghish: First off, thank you very much for recognizing the work of the home care sector in this province. Bayshore is one of the providers who are able to help our seniors to be able to remain safely at home and be able to help them live out their later years by being still connected very much with their family and avoid hospitalization, avoid having to move to other residential-type solutions that—maybe they just want to stay in their home; they want to stay home in their own bed. So thank you for that.

Also, thank you for recognizing the investments that we've made in developing a community health worker program that helps to take the unemployed and underemployed, particularly women, in more rural regions, and we are able to provide them with virtual training by partnering with colleges, and then be able to put them into a clinical placement experience and then more of a buddy system follow-up over a three-month period that ends up having higher retention, better-trained staff who are really engaged in understanding the needs, the demands of providing quality home care in this province. So thank you also for recognizing that.

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There are a number of investments that this government can make that will help to leverage the existing investments that have been made by many of the providers, helping to provide a better patient and family experience. There have been a number of these tests of change. These tests of change are transitional models that help patients who are stuck in hospital to be able to discharge back to home as quickly as possible but with a real rehab component using these interdisciplinary teams. That means that people are able to recover faster at home rather than having an extended hospital stay that decreases their ability to discharge over time. These tests of change really need to have consistent investment in the expansion that will really make these better journeys possible for Ontarians.

Other investments: We really would agree with one of the other presenters, to embed that \$3 PSW wage enhancement funding right into the way that we're funded so that we can support those PSWs in the great work that they do by working in patients' homes, working with their family members to help them to remain safely at home and age in place. We do recommend the stabilization funding that will build capacity of the home care sector within the health system.

We also encourage further funding in the skills development funding programs that allow for these training programs for people who are underemployed to be employed in higher-paying opportunities and having rewarding careers.

We also would really encourage looking at the internationally trained nurses to build a home care laddering program. Many of these foreign-trained nurses already are working in our home care system as PSWs. Well, this would allow us to develop a career laddering so they can actually practise as clinicians in the home care sector.

We also encourage funding to support the expansion of home care infusion pharmacy services so that they can offer iron, IVIG and other treatments that would support patients, being able to be administered in community infusion clinics, thus reducing the need for patients to go to hospital just to access their treatment.

We think this whole vision of implementing a home-care-first strategy is critically important. We have to think about how to keep Ontarians safely at home and build those investments, and that includes reflecting on those international models such as in Denmark that were able to reduce the spend in long-term care over a few years and increase the spend in home care and has been a really politically successful strategy. So we would recommend a home-care-first strategy of investment for government to consider.

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

Mr. Rudy Cuzzetto: That was great. I agree that we should look at other systems around the world. I know that, as Canadians, we always look at the US, and we should never look at the US. We should look at other systems around the world that are much better in health care. We should take their best ideas and bring them here to Ontario or to Canada. I agree totally with that.

The government had introduced the Ontario health team model that will provide greater care integrated for Ontarians. What is your experience with that implementation of the Ontario health teams? Do you see a potential impact on better conditions of care? Could you provide any feedback on that?

Ms. Janet Daghish: Great question. Thank you very much. It's an important question to be asking, particularly at this time, as we look to the future transformation of the home care system and to be more aligned—

The Chair (Mr. Ernie Hardeman): Thank you. It's a very important question, and I believe we should leave it to answer until the next round, because we're out of time.

We'll now go to the opposition. MPP Fife.

Ms. Catherine Fife: Thanks to all presenters. I'm going to start with Chris Beesley of Community Living. I'm a huge fan, and thank you for the work that you're doing across the province on behalf of those who have intellectual disabilities.

As MPPs, we hear often from families who are very concerned about the level of care, the quality of care, the opportunity for care for those who live with intellectual disabilities, particularly from parents, especially as they're aging. The Passport funding has continued to be an issue, and you referenced it in your opening comments. I just wanted to give you an opportunity to tell the committee how important that Passport funding is, how we have to reduce barriers to it and how there should be, I believe, greater flexibility in what that funding is used for. Can you please go ahead, Chris?

Mr. Chris Beesley: Yes. Thanks for the question. Passport funding is one area or allowance for community supports funding. The intent is to provide funding that will allow people to access the things that you and I take for granted or do or participate in within our communities.

There is a minimum amount, so if you qualify, you will get \$5,000 a year, and it goes to a maximum of \$42,000 a year. For those who receive an adequate amount, it can be life-changing. It can be very supportive. For the \$5,000, not so much, or for those who have qualified but still don't receive—again, left out. So it's a matter of equity and access.

And it doesn't get into the supports for residential. I mean, I'm a parent and my son has support workers who come into our home, and then they go out and do stuff. He's supported for a little business that he has started. He's supported for his recreational piece. He's supported in the things he wants to do. Where one starts and one leaves off right now is very cut and dry: You can have it for this, but you can't have it for that. There needs to be an integration of the supports for living, as well as the supports for community access, and so I think a better integration is what we're looking for.

Ms. Catherine Fife: I'm really happy that you raised the residential piece, because that was actually where I was going. I'm working with a local group of parents that formed, three parents with three sons who are adults with high intellectual disabilities. They're worried, in the long run, what is going to happen with these young men, so they actually bought a house together when the past government had a plan around pooling Passport funding at the maximum of \$42,000, to actually coordinate care for those young men. But then the government never followed through, the Liberals never followed through, and this government doesn't have a long-term strategy for supportive housing for those with intellectual disability.

I just have to question you: There's a tipping point, right? We all agree that those with intellectual disabilities, through no fault of their own, should not end up in an institutional long-term-care home. There should be specific housing options. How well positioned is the not-for-profit sector to step in and deal with this, if the government came to the table with a plan and with funding?

Mr. Chris Beesley: Yes, excellent question. We are well positioned, as we have been for 70-plus years, to support families and support people to access, participate and contribute to their communities. But where you live often dictates how one lives. From Community Living's perspective, we've made all the mistakes around congregating people based on disability and sheltered workshops, and even today in group homes, where we know that that was so much better than institutional settings, but we know it's not the end game.

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I think the pressure for affordable housing is so great that it forces people into thinking, as you mentioned with that example, "How can we pool our money, what little we have, to support our loved ones, our kids, to live independently?" The default sometimes—because we're desperate; we don't know what else to do—is to put them all together, whether it's three, 13 or 130. We know that, like we see in long-term-care facilities where you congregate people based on age—in this case, for long-term care; in our case, intellectual disability—it's not the ultimate way forward.

It needs to be a personal-directed, personally planned solution, which involves municipal, provincial and federal governments.

So we believe that portable rent subsidies are a huge way to address some of these issues and allow people to live where they want, how they want, with whom they want, and connect with their communities on that basis.

Ms. Catherine Fife: That's excellent. Thank you so much for that, Chris.

Chair, how much time do I have left?

The Chair (Mr. Ernie Hardeman): One-four-seven.

Ms. Catherine Fife: Thank you.

Jasmine, I'm just going to go quickly to you. I remember your presentation prior to the pandemic. It was excellent, at the time, and also obviously still applies today, even more so.

I wanted to talk to you quickly about the push for skilled trades. We support skilled trades. Those are good jobs. We want to make sure that women have equal access to those jobs. A huge supporter of the YWCA, our entire party is, because you have a long-standing history of proven success and knowledge transfer.

Tell me more about how you've applied for some of this funding, and you've not accessed it, please.

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

Ms. Jasmine Ramze Rezaee: Yes, thank you for the question. I should let you know that the Ministry of Labour did launch a new funding stream that offers multi-year funding for skilled trades, and that we did submit an application, our MA, as well as, I think, one or two other MAs, so the deadline for that was January 5. It's for a pre-apprenticeship training program and we have yet to find out what the results of that are, probably in the next few weeks. Hopefully, it will be favourable to our organization.

But we applied last year to some funding and weren't successful in obtaining it.

We were told that some of our programs have received a one-year extension, but the problem is, with the rising cost of just supplies and operating expenses, there hasn't actually been an increased cost—it hasn't been an increase—

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

Ms. Catherine Fife: Thank you, Jasmine.

The Chair (Mr. Ernie Hardeman): We now will go to the second round for the independent. MPP Hunter?

Ms. Mitzie Hunter: Thank you. I'm going to direct my questions to Chris. Thank you so much for the work of Community Living, specifically in Scarborough. The work you do there is so, so very important and I miss the gatherings.

I'm wondering if you could expand on what you talked about, because I believe this as well, that society needs to actually shift and be more inclusive of people with disabilities of all kinds and for people with intellectual disabilities, specifically. Can you talk about some of the observations or challenges that your organization has faced as a result of the pandemic, because it has been over

two years now? So, if you could just share that, and hopefully, that ties in to the solutions as well. Please go ahead.

Mr. Chris Beesley: Sure. Thanks very much for the question. I'm Scarborough proud, so I appreciate that.

Challenges—boy. I think isolation is one of the biggest issues, which leads to mental health issues, depression, anxiety etc., and not just for people who have an intellectual disability, but for their family members as well.

Or, if they are in a congregate setting like a group home, the staff burnout is incredible. Like in other caregiving professions, we're seeing burnout and high turnover, which was one of—when I talk about a solution and Janet also talked about the \$3 wage incentive being made permanent, this is not recognition of just the pandemic, but on a go-forward basis, the value of care-providing professions that need to be recognized and valued on an equal basis with hospitals and education. We're just trying to play catch-up and trying to remain competitive, where we do compete with the hospitals and the education sector to recruit and retain properly qualified people—who love the sector, but sometimes can't afford to make a living in it.

Certainly, there's isolation on both sides of the equation. If you live on your own and you're on ODSP and you're living in poverty, and you're told you need to have PPE, getting a consistent way to get it without having to pay for it has been huge. Access to health care: Again, if you need health care, you can't get in with a support worker. You have to go in by yourself, but you have communication issues or anxiety issues that are heightened because you're alone and it's during the pandemic. How do you access health care on an equitable basis with others who are going in, for whatever reason?

In education, kids who have intellectual disabilities—again, they're at home, they're at school, they're at home. If you require support in class, what does that look like, virtually? Do you have the support at home that you're going to need to adequately access, again, on an equitable basis, the curriculum with everyone else?

So it permeates all aspects of life, and it's just heightened during the pandemic, for sure.

Ms. Mitzie Hunter: I totally agree, and I think, like we were saying with Jasmine, do we apply an accessibility lens to government policy as it relates to the response to the pandemic?

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

Ms. Mitzie Hunter: I was very surprised, for instance, with the rapid tests. They were being given out at the LCBO and people had to be willing to brave lines, and even know about the information. How does that affect people with intellectual disabilities who live in our communities who also need access to that rapid test? They're not going to be able to receive that.

I just wanted to say thank you to Janet. Home and community care is something that I have long supported. I fully support your presentation today, and having home care first, because it really is a patient-centred and a person-centred policy. So I really want to thank you. Hopefully

this budget will have more investments specifically in home care. We need to see that. So I appreciate that.

I want to thank all of the presenters. You know, I could certainly talk to each of you about your respective areas for hours, because I think it is so vital, and we don't spend enough time on it in this—

The Chair (Mr. Ernie Hardeman): Thank you. We'll now go to the government. MPP Cuzzetto.

Mr. Rudy Cuzzetto: I just want to finish off that question with Janet from Bayshore about the Ontario health team model. Can you continue on that?

Ms. Janet Daghish: Thank you for the question. I think it requires a lot of considerable thought on how we do this transfer and transform our home care sector to be more aligned with these Ontario health teams. I think we need to be very considerate about how do we not destabilize the care that people are already receiving and the care teams who are coming into patients' homes on a daily basis. We don't want to do this in a way that destabilizes the sector or, more importantly, the way that patients and families are receiving care.

But we also want to be able to support transformation in bringing in some new models of care, transitional types of models of care, that provide a better overall experience for patients. So what are some of the steps that we need to be considerate of? We need to bring a better way of aligning the providers to the OHT geographies. At the moment, there's no alignment, so we need to think about how we create that alignment. We need to be able to allow a culture of trust and partnership to flourish. That's incredibly important when we as home care providers are working directly with community support services, hospices.

But we need to focus as well on how we create a more connected relationship—a direct relationship, in fact—between primary care practitioners with the home care interdisciplinary care teams. Our professional services include nursing, therapy, infusion pharmacists, and those team members can work directly with primary care to support a patient to be able to provide the care that's needed that can keep them safely at home and avoid that hospitalization.

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I just wanted to call out, patient- and family-centred care is a concept that is well defined and has been implemented. It certainly is part of the vision of our sector, but we really need to put those investments and the mechanisms in place so that OHTs in the future can really support that patient- and family-centred experience. I hope that's helpful for explaining what needs to be in place to support that transition.

Mr. Rudy Cuzzetto: Thank you, Janet. I'm going to pass it on to my colleague Robin Martin to wrap it up here.

Mrs. Robin Martin: I just want to say thank you to all of the presenters. You're all working with some of the most vulnerable in our society and making sure that they get the kind of care they should get and the help they should get. So I want to say we really appreciate all the work you're doing, especially during these incredibly challenging times.

If I could just finish up with Janet: Because I work in the health care ministry with Minister Elliott, obviously I'm kind of obsessed about the importance of home care. But it does seem to be a sector that is often not thought of until later. I know we passed the connecting home and community care to our Connecting Care Act—we passed an act, after 25 years of no changes in this area, to try to bring home care and its important integrative function into our whole Ontario health teams and to make sure that home care is not an afterthought but is an important part of the integrated experience patients receive.

You mentioned a few of the examples and things. One of the things you mentioned was aligning the providers with the Ontario health teams geography, and I think you also mentioned the digital opportunities. Another thing you mentioned, which I didn't know about, was the home care infusion pharmacy services. I'm just wondering if you have any suggestions as to how this kind of integrated care might help us with our health human resource challenges now and in the future, because I'm thinking there are some benefits to the amount of time providers need if we do some of the other things better.

Ms. Janet Daghish: Thank you very much. First off, I would like to recognize the leadership of this government in working towards a more home-care-first approach in our health system. I just want to recognize the leadership that has happened to date. Home care needs to be more than just the add-on of, "Oh yes, we forgot that sector. Let's consider it."

I think it's really important, though, to understand that the way we create and combine services—and by enabling some of these digital solutions we've been testing—leads to better outcomes, and those outcomes are not just patient health outcomes. They're about patient experience. They're about system positive impacts that help us to be able to spend less elsewhere but create better overall outcomes, including even provider outcomes. We need to be very thoughtful in the way we implement and change these models of care that bring about a better experience but are done so in a way that creates scale.

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

Ms. Janet Daghish: Many of the OHTs are testing different digital solutions at this time, and we need to be more thoughtful about provincial architecture of these digital solutions that allow for scale, that allow for us to build these solutions into many of these care models and use consistent metrics to evaluate. Evaluation frameworks are so important, so that we're learning and we embed continuous quality improvement in everything we do.

Mrs. Robin Martin: Well, let's hope we get there. It sounds like a wonderful solution.

I think I'm going to get cut off, but I did have a question for Chris, if there's a minute.

The Chair (Mr. Ernie Hardeman): There are 21 seconds.

Mrs. Robin Martin: Oh, well, I'm not going to get to ask. I did have somebody from Community Living Toronto come and see me, and he was talking about the importance of the pandemic pay. They had managed to

reorient all of their contracts, so that people worked four days a week as opposed to five, and this was helping them with retaining their workforce. I just wondered if you had—

The Chair (Mr. Ernie Hardeman): Thank you very much. That uses it all up.

We will now go to the official opposition. MPP French.

Ms. Jennifer K. French: Thank you very much. Again, I would like to thank all of the folks for making the time to come before the committee and share important perspectives.

I'm glad to see you again, Chris. I'm pleased to be able to connect with local Community Living folks, but the work across the province really is important, and I'm pleased that I'm part of a caucus that has really been fighting for supports and rights. I found it really striking at the beginning of your presentation, when you said that the resilience of the folks and the families who you support comes from their many years of having to fight for their basic rights. It's an alarming point to reflect upon.

I'd like you, if you could, to just speak briefly about what it would mean for the community that you support to have the "more than a caregiver" act actually taken to heart. What would that look like, or what has it meant, or what would it mean in the face of the pandemic, going forward, as we're still in the thick of it?

Mr. Chris Beesley: Thanks very much for the question. We as family know our kids better than anyone. We have years of experience, and as caregivers are best positioned to support our kids in the life of their choosing and helping them create that vision for what a good life within the community can look like. And so, the idea to recognize caregivers for the role they play, which is integral to people's success in their lives and in the community, yes, is absolutely vital.

I think that, combined with economic supports in order to make some of those visions a reality, it's, "How do we work best with families, and how do we support them on a basis that will allow them to do the things they want to do and are able to do, with the proper supports within their communities?"

Ms. Jennifer K. French: Thank you. And some of the other pieces that you have raised, we've heard echoed by other presenters, about the need to make that \$3 wage increase permanent and to increase the rates for ODSP. We've been calling for that for a very long time, so of course we support you in those things. Thank you.

I'm going to turn my time to Jasmine from the YWCA. I want to say I've been meeting throughout the pandemic with our local YWCA folks. People have no idea what they do across communities, and we are immensely grateful for them.

I know that there is a pandemic within the pandemic of violence against women, and the fact that when this government took away that violence-against-women housing, it really has become terribly hard to house. Some folks will remember—before my time, frankly—the second-stage housing. But a lot of these programs, really looking at the best outcomes—walking with women and their families

through the second-stage or transitional housing, whatever it is that's needed. I guess I'd like you to say whatever it is that you would like to get on the record, to make that case again.

The government, while we're here, are doing stuff about housing, but I'm willing to bet that women were left out of that again. I say that; I could be corrected. But I would like to know how important it is, especially as we're seeing crisis levels: By the time women and their families are reaching for help to YWCAs, it's life or death. The levels of addiction, the level of need, we've never seen before. If you could speak to that, I know that the committee would appreciate it.

Ms. Jasmine Ramze Rezaee: Thank you for the question. It's an excellent question. There has been a rise in gender-based violence, as you've mentioned, and it's very concerning. On the front lines, we're seeing a lot of women and their children struggle, and it's a very bleak situation. Yet here we are, day in and day out, providing these essential services. We have received government funding and support, and it's not enough. There is so much more that needs to be done. Decades of chronic underinvestment in child care, in housing, in our shelter system have resulted in some really widening inequities.

We have always called for a range of housing programs, and specifically greater investment in supportive housing. For a long time, we were offering supportive housing at cost, because our positions, the supports, either weren't funded or weren't funded in the ways that are appropriate for the level of programs we have and the units in buildings. For example, while the provincial government did provide wage top-ups for violence-against-women shelters, they sunsetted after a few months, they were never reintroduced, and they were also never expanded to include child care workers.

I'm hoping that in budget 2022, we see the wage top-up being reinstated, being made permanent, a recognition of the essential labour of these feminized workforces in housing, in shelters, and greater investment in housing, absolutely. The city of Toronto has a HousingTO action plan. According to the plan, they are planning on building 40,000 new units by 2030, and it's contingent on a lot of provincial funding that hasn't been announced yet, so there are negotiations going on. The housing funding needs to have clear gender targets—this is what we're consistently saying—and it needs to be a range of deeply affordable and supportive housing options: as you mentioned, transitional housing, second stage housing. We need to meet folks where they're at.

There's a strong business case to make for this too, because when folks aren't properly housed, when they are stuck in our shelter system, waiting for housing—

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

Ms. Jasmine Ramze Rezaee: We did poverty reduction consultations in 2020, and one comment stuck with me when one of our shelter residents was like, "How can I be expected to get my life together on \$733?" The waitlists for subsidized housing in Toronto are 10 years long. There are folks receiving OW or ODSP stuck in our shelter

system with literally nowhere to go because they can't afford rental units.

Regardless of how many units we build—and we absolutely need to invest more and build more faster and partner with the community sector and the not-for-profit sector—it's still not enough to meet growing demands and the urgent, pressing needs today. We need further investment in housing. It needs to make sense, it needs to have a clear gender lens, and we absolutely need to pay front-line workers a fair wage.

The Chair (Mr. Ernie Hardeman): Thank you very much. Your time has expired. That concludes the time for this panel.

As a reminder to all presenters, the deadline for written submissions is 7 p.m. on Wednesday, January 26. For every one of the conversations that I cut off, you will be able to send it in, in writing, and we will be sure the committee will read it.

Thank you all very much again for your presentations. With that, the committee is recessed till 1 o'clock.

The committee recessed from 1204 to 1300.

The Chair (Mr. Ernie Hardeman): Good afternoon, everyone. We're back to continue the pre-budget consultations for the greater Toronto and Hamilton area for 2022.

A reminder: Each presenter will have seven minutes to make their presentation. After we have heard from the three parties, we will have the 39 minutes that are left divided among the committee: seven and a half minutes for the government and opposition members, and four and a half minutes for independents. We'll have two rounds of that.

CO-OPERATIVE HOUSING
FEDERATION OF CANADA
ADVANTAGE ONTARIO
ONTARIO COUNCIL OF AGENCIES
SERVING IMMIGRANTS

The Chair (Mr. Ernie Hardeman): With that, we will start the presenters for the afternoon. Let me start here, where we're starting, the Co-operative Housing Federation of Canada and Simone Swail, manager of government relations. Normally, I ask the delegations to introduce themselves, but Simone and us go back a long way in consultations for government projects. So good afternoon, Simone, and we'll ask you to again identify yourself for the Hansard and then make your presentation.

Ms. Simone Swail: Good afternoon, everyone. Thank you, Mr. Chair. I am Simone Swail, the manager of government relations for the Co-operative Housing Federation of Canada. It's so good to see so many of you again.

For over 50 years, CHF Canada has represented non-profit housing co-ops in Canada. In Ontario, we represent 550 co-ops, home to approximately 125,000 people. Co-ops are located in 104 of the 124 provincial ridings. Thank you again to the Chair and the members of this committee for the opportunity to speak to our recommendations for the 2022 budget.

As you know, across the province, many Ontarians are desperately looking for an affordable place to call home. This housing crisis is costly to the government, to our economy and to those who are struggling to get by. A recent Toronto Region Board of Trade report found that the current housing crisis costs the GTA economy and employers on average between \$5.88 billion and \$7.98 billion per year. In a normal year, the government spends a billion dollars more in the health and justice systems than it would need if all Ontarians had an affordable home. And in December, the Royal Bank of Canada reported that housing affordability in Canada had reached its worst level in 31 years.

For Ontarians who rent, the situation is even more bleak. Polling conducted this summer by Nanos found that one in three renters are worried about paying their housing costs next month. The latest CMHC data found that the 20% of lowest-income renter households in the GTA can afford only 0.2% of the purpose-built rental units in the region.

The current state of the housing market requires real and decisive action in order for people and local economies to thrive. For low- and moderate-income Ontarians most negatively impacted by the housing crisis, housing co-ops are an important part of the solution. Co-ops offer an alternative to renting or buying for young families, seniors, new immigrants and others caught in our housing crisis. They offer a chance to live affordably, have control of their housing and be part of a community.

The same Toronto Region Board of Trade report that calculated the cost of the housing crisis also included an interview with a member of a housing co-op who feels like she won the lottery on affordable housing in Toronto because she found a spot in a co-op. CHF Canada wants to work with the government to protect and increase the supply of co-operative housing to meet the needs of low- and moderate-income Ontarians. To that end, we have two main recommendations today.

Our first recommendation is to fix the funding formula for existing community housing, including co-ops. Over 260 Housing Services Act co-ops, home to 21,000 families, and many more non-profits are nearing the end of their mortgage. This would seem like a good thing, but an outdated funding formula means that this could put these co-ops and the members who live there in a worse position.

The current funding formula prescribed in provincial regulations means that without mortgage costs, co-ops may lose crucial municipal assistance that covers the cost of property taxes and offering rental assistance to low-income households. In these co-ops, on average, 75% of households have a low income and receive rental assistance. They come to the co-op through the municipal social housing wait-lists. Without the funding for rental assistance, these co-ops will have to make a choice between rental assistance or keeping the buildings in good working order.

This is because as mortgages mature, so do the buildings. While it's possible to fund basic maintenance and

repairs under the current formula, buildings that are over 30 years old require costly renovations to remain in operation. At 30 years old, building envelopes begin to fail, elevators and rooms may need replacements. That's just an example.

The government has recognized that the current situation doesn't work. A public consultation is under way on a new service agreement regulation that could solve this problem at the end of mortgage. CHF Canada is recommending that the province ensure that, as a baseline, municipalities continue funding for rental assistance for households that need it and property taxes in the service agreement regulation. This will allow co-ops and non-profits a unique opportunity to take advantage of the end of mortgage to address capital repair deficits without additional government grants, all the while continuing to provide rental assistance to those who need it.

For example, federal housing co-ops in Ontario are also reaching the end of their mortgages. But ongoing rental assistance for these co-ops has allowed them to secure private sector refinancing in order to undertake \$200 million in capital repairs to date. This has secured this housing for future generations while maintaining affordability. We believe that the government of Ontario should follow this model. Fixing the funding formula will not have an impact on the province's budget or increase municipal costs, but it will protect the homes of tens of thousands of families. With so many homes at risk, this must be the government's top priority for community housing.

Our second recommendation to the government is to increase the supply of community housing in Ontario. Safe, secure affordable housing is essential for health and well-being. While the housing crisis is now experienced in almost every corner of this province, not all Ontarians are experiencing it equally. We need new housing supply across the entire housing spectrum, including housing for low- and moderate-income Ontarians. This increasingly means more mixed-income community housing options, including co-ops. CHF Canada supports the government's efforts to increase market housing supply in order to improve affordability. However, without increasing community housing, those most negatively impacted by the current housing crisis may be the last to benefit from the new supply, if they benefit at all.

In our written submission, we have highlighted a number of actions the province should take to increase supply of community housing. Chief among them are to invest in building 69,000 units of new affordable co-op and non-profit housing over the next 10 years; to prioritize private provincial land for the development of new community housing, including co-ops; and to partner with existing co-ops and non-profits to build more affordable housing on land owned—

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

Ms. Simone Swail: Okay—by both the co-ops and non-profits.

Thank you so much. I look forward to answering any questions the committee may have.

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

The next presenter is AdvantAge Ontario. As you come forward, we would ask that you begin by introducing yourself, and then you'll have seven minutes to make your presentation. At six minutes, I will let you know that there is one minute left. With that, we'll turn it over. I see there are more faces on the screen. Maybe I'd better add that if more than one person speaks, the second person or third person must also include their name before they start speaking. With that, the floor is yours.

Ms. Connie Lacy: Thank you so much, Mr. Chair.

Good afternoon, everyone. My name is Connie Lacy, and I am the board chair of AdvantAge Ontario. I'm also the director of senior services for the region of Waterloo. Thank you so much for the opportunity to appear before this committee regarding the upcoming provincial budget for 2022-23.

I will be sharing my presentation time with Lisa Levin, our CEO, who will speak more to the details of our recommendations for the budget, but before we go into those details, I want to provide you with some background on the state of seniors' care today.

AdvantAge Ontario is a provincial association representing community-based not-for-profit providers of long-term care, community services and housing for seniors. Our members are only not-for-profit. They include municipal, charitable and non-profit long-term-care homes, seniors' housing, supportive housing and community service agencies serving seniors. Our member organizations serve over 36,000 long-term-care residents annually and operate over 8,000 seniors housing units across the province.

As everyone here knows, long-term care is at a critical juncture. After decades of neglect by government after government, we were struggling to hold on to staff, homes were showing the signs of their age, residents were crowded into ward rooms, cuts to services like pharmacy were neglecting resident care. Every year, another study or commissioner inquiry would tell government the same thing: Seniors were suffering; the system needed investment. But up until now, government's response was never to invest in long-term-care solutions, rather to resort to evermore regulatory burdens on the homes themselves. Then COVID happened, and is still happening, and we are all too familiar with the tragic consequences.

But we are not here today to reiterate what went wrong. Today, we want to look forward to delivering on this government's pledge to transform seniors' care. We want to be constructive partners in helping rebuild a system of seniors' care that we can all be proud of, a system that honours our seniors and gives them the best final years we can offer. But to do that, we want to be clear about some things.

Firstly, the vast majority of seniors—more than two thirds—prefer not-for-profit or municipal long-term-care homes over for-profit homes, and 70% of Ontarians of all ages think long-term care should only be run on a not-for-profit basis. Not-for-profit municipal homes have performed better during the pandemic. We provide more

hours of direct daily care. We have less staff turnover and more community involvement due to our community-based boards. We have achieved all of these superior outcomes because our modus operandi is care, not profit. We answer to our community, not our shareholders. Every dollar goes back into our operations and not into the pockets of investors.

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This government has indicated recently that it understands the value that not-for-profit care brings to the sector. In recent months, we've received a commitment that our homes will be able to access Infrastructure Ontario's loan program.

The four hours of daily care commitment is another positive step that is truly transformational, but these are only the first steps, however, on a path that we have just begun to walk. We need to continue down this path and build a system of seniors' care that Ontario families expect and deserve. To lay out that path for you, I am pleased to introduce our CEO, Lisa Levin.

Ms. Lisa Levin: Thanks so much, Connie. I'm Lisa Levin, CEO of AdvantAge Ontario. Thank you for the opportunity to be here today.

Our pre-budget was designed in consultation with our members and builds on the many reports we've submitted to government, including our response to Ontario's Long-Term Care COVID-19 Commission report and our recommendations on the new long-term-care legislation.

The first area I want to talk about is emotion-focused models of care, the gold standard and future of seniors' care. Right now, care in the homes is best described as "task-based." Staff have a checklist, more or less, of the kind of care they're to provide and the focus is on the physical tasks. But we all require more than physical needs being met to thrive, and this fact in seniors' care is common. But in some places, including in Ontario, some homes have discovered a better way: moving from a task-based checklist of physical needs to more holistic, wide-ranging, emotion-focused models of care. With this shift, resident outcomes improve, families are happier, and there is less staff turnover and absenteeism.

We're calling on government to create a special fund to which homes can apply for the one-time cost of transitioning to emotion-focused models of care, and for funding that covers the ongoing costs of maintaining this model. With the four-hours-of-care-a-day commitment, now is the perfect time to move in this direction.

Secondly, health care workers deserve a raise—not only PSWs who most definitely deserve it, but all health care workers. It is that simple. Bill 124 is crushing our sector. We cannot compete for staff when PSWs and nurses can earn more at a for-profit home or at a hospital. The pandemic has been very tough on all health care workers, and pre-existing human resource challenges have become a full-blown crisis. The only way out is with better pay for all health care workers and fairer pay for long-term-care staff so that similarly qualified health care workers earn the same wages regardless of setting.

Third, we need help building and redeveloping homes. Not-for-profit homes are where people want to live, but we don't have nearly the same access to capital as for-profits, and that's because we return every dollar to operations and care. We are calling for a new not-for-profit long-term-care accelerator program, including non-repayable seed funding, an increase in the development grant and an inflationary increase to the construction funding subsidy.

We also believe strongly that to keep people out of long-term care, the province should invest more in assisted living in seniors' supportive housing programs and should increase home care funding across the board.

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

Ms. Lisa Levin: Fourth, we need a level-of-care funding increase to address the inflationary pressures we're faced with and increasing funding for things like nutritious food, Internet and air conditioning. These are essential in 2022.

Finally, Ontario should extend COVID-19 prevention and containment funding into 2023, and we need every home to have a dedicated, permanent IPAC resource assigned and funded.

We have to learn the lessons of this pandemic. We have to transform seniors' care in our province and we have to do it now. I encourage you to read our full submission that has 31 detailed recommendations. I've just highlighted a few key recommendations. This is a once-in-a-generation opportunity. Let's get it right. Thank you.

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

Our next presenter would be from the Ontario Council of Agencies Serving Immigrants. As I mentioned for the previous presenters, if you can identify oneself as you start. You will have seven minutes. I will notify you when you are at six minutes in your presentation. Thank you very much, and the floor is yours.

Ms. Emily Kovacs: Thank you very much. Good afternoon, everyone. My name is Emily Kovacs. I am the Ontario policy chair for the Ontario Council of Agencies Serving Immigrants. I also serve as the executive director of the Niagara Folk Arts Multicultural Centre, but today, with you, I am representing the policy section of OCASI.

A quick introduction about OCASI: We are the umbrella organization for Ontario's immigrant- and refugee-serving sector. We have over 240 member agencies across Ontario and we play a critical role in facilitating the settlement and integration of immigrants and refugees.

Almost two years into the health pandemic, we have ample evidence that the COVID-19 pandemic has greatly increased the long-standing structural and societal inequalities. Indigenous, Black and racialized communities, including immigrants and refugees, were put at a higher risk of contracting the infection. They were more likely to experience bad health, economic and social impacts, and will take longer to recover and rebuild. Some may never regain lost ground.

Economic, social and health recovery is the priority, but as a society we cannot simply reinvest in and sustain sys-

temic inequalities based on race, ethnicity, gender, disability, immigration status, religion and faith. The Ontario budget must be developed using a gender equity framework that includes these factors, as well as paying attention to rural-urban divides and inequities that happen there. And of course, as the three esteemed presenters talked about, this inequity is not only race-based or BIPOC-based, but it's the inequity in housing, as eloquently stated before, as well as in long-term care and health care. Of course, all of them, in a nutshell, I would say define the social determinants of health. The Ontario budget has to be reflective of addressing the overall umbrella of the social determinants of health, and that includes all of the things I mentioned above.

OCASI also makes the following specific recommendations to support an equitable approach. We will send you a detailed list of recommendations ahead of the end-of-the-month deadline.

(1) We want you to invest in newcomer settlement. Ontario's Newcomer Settlement Program, the NSP, and the English- and French-language training programs are critically needed to support the settlement and integration of newcomers. They were especially important during the pandemic. NSP funding has stayed the same for several years. Meanwhile, the challenges of settling in Ontario have grown, in large part due to the housing crisis; difficulty in finding decent jobs; a lack of safe, affordable child care; and more. OCASI member agencies must do more work to support their clients to settle, and their workload has grown but on the same amount of funding. As you know, federally, we have been told that immigrants will be the response to lifting us out of the COVID pandemic. The province has to stay in pace with us and has to provide NSP funding. We recommend increased funding for the Newcomer Settlement Program.

(2) Invest in employment: Employment programs are an important resource for immigrants and refugees, both to connect them with a job and also to give them important information about employment standards and occupational health and safety. They are also necessary to support immigrants to get a job in their field at a level consistent with their experience and skills.

The underemployment of immigrants is a long-standing and well-documented issue. An effective remedy must activate employers, specifically small and medium-sized enterprises, to address the barriers immigrants face in accessing commensurate employment. Recruiting eligible internationally educated health professionals, which is a specific personal passion of mine, is an effective remedy to address the shortage in health care support in hospitals and long-term-care homes. We heard Minister Elliott's announcement last week, and we await more details with great interest.

We appreciate the fact that the minimum wage was increased this year to \$15, but that is still less than the lowest living wage in Ontario, which was calculated at \$16.20 in Sault Ste. Marie in November 2021. In general, wages in the non-profit sector are approximately 29% lower than the Canadian average, as reported by the Ontario Nonprofit Network.

Community groups have asked that community government non-profits such as OCASI member agencies be exempt from the wage-restraint legislation which is Bill 124. This will help our sector retain workers and keep pace with inflation.

1320

Our recommendations are that you:

—create a care economy labour force strategy;

—given the high numbers of immigrants employed in the sector, ensure that the new Employment Ontario service prototypes will address the unique barriers and systemic barriers to employment faced by immigrants, particularly women and Black and racialized immigrants;

—invest in services to remove systemic barriers and support licensure of internationally educated professionals and tradespeople; and

—repeal Bill 124.

(3) Invest in women's organizations and programs. Ontario has made important investments in the women's futures program and immigrant and refugee Canadians' newcomer friends and families programs. Violence against women and girls was already at frighteningly high levels and increased by up to 20% during the pandemic. To have a real impact, we also need stable and ongoing funding for women's organizations, especially those organizations providing services and supports to immigrants, refugees and Black and racialized women, and for—

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

Ms. Emily Kovacs: —shelters and mental health services for women. We would like you to increase funding for women's organizations, and sustain and expand funding for the Language Interpreter Services Program to support survivors of domestic sexual violence and trafficking who are deaf and hard of hearing and who have limited English and French skills.

Thank you very much for the opportunity, and I look forward to hearing more.

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

We'll now go to the questions, and we start with the government. MPP Roberts.

Mr. Jeremy Roberts: Thank you so much, Chair, and thank you to all of our presenters for starting us off this afternoon with three very engaging presentations.

Simone, I'm sure we're all eager to see how the affordable housing summit is going today, which launched today with the Premier and big city mayors. There are lots of interesting topics to be covered there, for sure.

But I'd like to start my questions with Connie and Lisa at AdvantAge. Thank you so much for your presentation and for the work that your organizations are doing. I know that AdvantAge has been an active partner with the Ministry of Long-Term Care, both throughout the pandemic, sitting on the response committee, and then also looking more proactively at the systematic challenges facing the sector, so I really appreciate that. We heard yesterday from Perley Health, which I imagine falls under

your umbrella. Of course, in my riding I have the pleasure of having the Peter D. Clark centre, which is also one of the municipal long-term-care homes.

I wanted to talk a little bit about staffing, because this is a challenge that we're hearing a lot about, health human resources being a key challenge. I had the chance earlier this year to go around—I've got eight long-term-care homes in my riding, and I visited each of them and talked them through what the four hours of care was going to mean from a financial perspective. There was a lot of positive feedback from those long-term-care homes, so my first question is: What is that announcement going to mean for your members?

And then, the second piece of the question is that, of course, a lot of these long-term-care homes said they're really excited about this funding, but the challenge right now is that there aren't enough staff to actually hire with it. And so, I'm curious what ideas you guys have in terms of incentivizing more folks to enter the PSW stream or the nursing stream—which, of course, I know is another passion of yours, Lisa. I'm curious as to any ideas you have there, so if we could talk about those two questions to start, that would be great.

Ms. Lisa Levin: Okay. Great. Thank you, MPP Roberts. Yes, the four hours of care is a really critical change that will help transform care, because there will be more people to care for seniors. As the needs of seniors in long-term care have increased over the years, because they are frailer and have more complex health conditions than ever before, the level of care didn't increase. Now they'll be able to have more time to help seniors get up, get dressed and get ready, help them at mealtimes etc.

In terms of what can be done to attract more staff into long-term care, what we have asked for is that wages be increased. Non-profit homes cannot raise wages more than 1% because of Bill 124, but for-profit homes can, and so that's putting them at a huge disadvantage.

The other thing is, raising the wages of the PSWs, which the government has done, is amazing, but other staff have not had coinciding wage increases except for pandemic pay in wave one, and this has resulted in demoralization of the other staff and other types of workers in the home, including management. It has also created a huge issue with registered practical nurses, who are now making less or the same as the PSWs who often report to them. That is why increasing the wages makes a difference.

And you might say to that, "Well, we can't afford it," but you're already paying for it, because the end result is homes are now hiring more and more agency staff, and that means prices that are sometimes triple of what they're paying otherwise. So it actually would save money to raise the wages.

Mr. Jeremy Roberts: Sure, I appreciate that and definitely agree in terms of the pandemic pay for PSWs. I'm pleased Premier Ford has made the commitment to figure out a way to make that permanent in the future, because I think that's so essential.

Another question kind of on that topic, and this was something I talked with Perley Health a little bit about

yesterday, is staff retention. Even before the pandemic, this was an issue, in terms of we had a lot of new graduates coming out of school, going into the system and then getting out shortly thereafter. I'm curious whether you guys have looked at what are some of the best practices across the sector and across your membership in terms of staff retention, because there definitely are homes and organizations that seem to have a much better track record. Again, Perley comes to mind, in Ottawa, as a place where they seem to have a very good record on staff retention. I'm curious whether there has been any research or studies done on your organizations and best practices that facilitate good staff retention.

Ms. Lisa Levin: I think Connie is going to take this one.

Ms. Connie Lacy: Thank you so much for this question, MPP Roberts. I think you raise a really good point. As you were saying before, we are getting a lot of new people into our sector through PSW training and RPN/RN training, which is wonderful, but the retention continues to be an issue. We see a large turnover.

I think I wanted to talk a little bit more about why not-for-profits do see less turnover than other homes, and one of the reasons is that often we are paying a slightly higher rate. Because we're paying higher salaries, we do have a better opportunity to keep people employed with us.

The other piece I wanted to talk about too was just to emphasize what Lisa was saying. If we don't pay equity—and the wage enhancement has unfortunately made the issue larger for our RPN group—we're seeing that we're losing those staff to agency staff, where they can get paid more, and then ironically, they come back and work in the system. So it has an increased cost for the system as a whole and also for the homes. I think salary is a key piece.

Mr. Jeremy Roberts: Sure. Sorry, Lisa, you wanted to jump in on that too?

Ms. Lisa Levin: I just wanted to add also that by investing in emotional models of care, which is in our submission, an unexpected consequence of that is there's much better worker retention and reduction in absenteeism.

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

Ms. Lisa Levin: So that investment can also, once again, save money for the system because worker retention increases.

Mr. Jeremy Roberts: For sure. I guess we're running out of time, but one last question just to touch on: We're operating, as a government, right now on the three pillars in terms of more beds, increasing staff and then increasing quality of care. We had Bill 37 on that last pillar. I'm wondering if you can elaborate on any other further steps you'd like to see on that last pillar in terms of accountability and making sure we're having the highest quality of care in our long-term-care homes.

Ms. Lisa Levin: What I would say to that is that it's really important that there's accountability and transparency so that the bad actors can be identified through regular inspections. But it's also critical that homes have

compliance support, and any other regulatory system, even in Ontario, has that.

The Chair (Mr. Ernie Hardeman): That concludes the time. We'll have to finish that answer in the next round.

We'll now go to the opposition. MPP Fife?

Ms. Catherine Fife: Thank you to all the presenters. I hope to get to all of you during this question set. I'm going to start off, just because MPP Roberts brought this up—Bill 124. Lisa, I need you to explain to the government why it's costing more money through those private agencies, instead of actually repealing Bill 124. All the opposition parties have said that we would go back to Queen's Park, we would repeal that piece of legislation and be supportive of increasing across the board instead of doubling down on this disparity in wages within the sector.

1330

Please, can you make this point as clear as possible, the role that private agencies are playing right now in our health care system?

Ms. Lisa Levin: Absolutely, MPP Fife. Temporary agencies have higher prices for staff than what a home would pay in wages. During the pandemic, some of them have been price-gouging—not all of them, but quite a number of them. So we need to repeal Bill 124 and/or we need to have some kind of restriction on price-gouging, which other provinces have done, because they're charging sometimes three times the amount for the same staff person. In fact, the staff are actually being attracted away from working in the homes and moving to working in agencies where they can make higher wages. That is a really important piece of it.

Then, they are also doing other things, like saying you need to keep the staff away from four to six weeks, and when people get Omicron, sometimes they can come back after a week, and they don't need to be off for four to six weeks. So there are a number of things that are being done by some agencies that we need to stop, one way or another.

Ms. Catherine Fife: And the government is footing the bill for those high wages of the private agencies anyway, right? They're bringing in those people—

Ms. Lisa Levin: Well, the homes are paying for it, and some homes pay for it through—Connie works for the region of Waterloo, so they kick in some of the tax base. Non-profit homes have fundraising. They'll kick in extra. Government is paying for a lot of it, though, because the homes need more and more prevention and containment funding to be able to support these high prices.

Ms. Catherine Fife: Okay. Thank you very much for making that point. We are just trying to keep the pressure on to repeal Bill 124, and that's part of the goal.

Thank you for actually explaining the turnover piece and, really, what the pandemic did with regard to exposing what was happening in long-term care. There was no evidence of any iron ring that we could find throughout that entire process.

I'm going to move over to Simone. Simone, you know that we're huge supporters of the co-operative housing movement, have been for many, many years. I think

you've raised some really good points about maintaining the current housing stock, because what a setback it would be for us to have invested and supported along the way—although it has been a long time since co-operative housing has been supported in Ontario. We can't afford to lose that current housing stock.

I wanted to give you an opportunity to address what happens when the mortgages are paid up. You gave a good example with the federal government. Please explain really clearly what the provincial government has to do in order to not lose any housing stock.

Ms. Simone Swail: Thank you so much for this opportunity, MPP Fife. As you mentioned, this existing housing stock—we're talking about 21,000 units of just co-op housing. The estimate for non-profits in co-op is over 60,000 units. Imagine if the province tried to build 60,000 new units of affordable housing today: It's impossible. It is so essential to maintain these homes for people and ensure that we actually have enough affordable housing options for people in Ontario.

What do we need to do to fix the funding formula for these co-op houses? It's quite simple. The government has started on the path. As I mentioned in my remarks, they initiated a public consultation on service agreement regulation. But what we need in that service agreement regulation is a baseline of funding for all non-profits and co-ops across the province. There will be individual cases where they may need a bit more funding—and they can work that out with their local municipality—but we need the rental assistance, the funding that makes up the gap between what a household can pay and a reasonable rent that we need to keep that unit working. And we need the property tax subsidy.

We need those because in these co-ops and these non-profits, on average, 75% of the households are on rental assistance. Many of those folks are on OW, ODSP. They can afford to pay about \$150 a month. We cannot keep our buildings in good repair earning that little on those units.

What it comes down to is maintaining the actual, physical building, so bricks and mortar—ensuring the bricks aren't falling down, like we've seen, unfortunately, at times in public housing. It's allowing us to remortgage those buildings by having reasonable rents and to make the long-term investments needed to keep these places that are habitable and in good condition for future generations.

Ms. Catherine Fife: Thank you. Were you invited to the provincial housing summit today that was happening behind closed doors?

Ms. Simone Swail: We were not invited to the housing summit. As I understand it, it was just municipalities and provincial members present, but we would love the opportunity to have a summit to talk about affordable housing in Ontario.

Ms. Catherine Fife: I just want to tell you that we see co-operative housing as a major player in rebuilding the affordable housing stock on a go-forward basis.

Chair, how much time do I have left?

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

Ms. Catherine Fife: Okay. Really quickly, Emily, I think your idea of having a care-economy wage and staff strategy is excellent. Can you just elaborate on that, please?

Ms. Emily Kovacs: Thank you very much for the opportunity, MPP Fife. As you could hear, under the pandemic, it was predominantly women and members of the BIPOC community who work in the care industry. The care industry is child care, it's being front-line at a grocery store, being a PSW, being a nurse—all are the care industry members who are predominantly occupied by women of colour, by marginalized newcomer women. They were disproportionately impacted not only under COVID, but COVID just highlighted the huge inequities they face. The framework that we're asking for is to say that those are the individuals you need to hold up, because if you don't, society will fall apart.

We often focus infrastructure as a very critical conversation—

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

I'm not sure we have an independent on the call at the present time. If not, we will now go to the second round for government. MPP Bouma.

Mr. Will Bouma: I appreciate the opportunity to interact this afternoon. And again, I would also like to just echo how much I've appreciated all the presentations this afternoon.

But I'd like to concentrate on Simone. It's very good to see you this afternoon. I'm curious, because I love some of your ideas, and, in fact, I was wondering if you could start by just commenting on how efficient co-op housing works. If you're talking about co-operative housing versus, say, fully owned municipal housing, what do you have to offer us that you just don't see if something is completely owned by a municipality or by the province?

Ms. Simone Swail: Absolutely. My pleasure. The great thing about co-operative housing is that it is halfway between rental and home ownership. Members of a housing co-op really feel a sense of ownership of their community and a sense of responsibility for it. What you see in a housing co-op is that people get together to make the long-term decisions for their community, they take care of their units and they are invested in their outcomes. So what we see is members really being willing to make tough decisions. All of the funding that the co-op has, the money goes right back into that specific co-op. There are no other levels that are getting funded. We really do find them as efficient communities.

Government studies done by CMHC—they haven't been done recently, because they got out of the business of these studies. But in 1998 and 2003, they found that co-ops were actually more efficient, and that's that self-responsibility that people feel for their building and their community. And they will want to be there for the long term, so they take care of their units.

Mr. Will Bouma: There you go. That's exactly what I was hoping you would say. Thank you very much. I appreciate that.

The numbers I have in front of me say that we are putting in about \$3 billion between the Ontario Social Services Relief Fund and the Community Housing Renewal Strategy across the province of Ontario. But we're putting that money under the control of local service managers. So I'm wondering how your sales pitch is going with the municipalities, with those service managers. I have two parts to that question.

1340

Number one is, what kind of support are you getting at the local level with the municipalities? Rolling into the housing summit that's going on right now with the municipalities, what's your sense, based on your feedback and working with municipalities, of—are they carrying that ball forward to the minister today, talking about how co-ops can be a vital part? Especially, how does that roll into your ask, which I think makes sense, on the continued relief of the property tax pieces and those things that you're asking for?

I guess I'm asking, what's your relationship like with municipalities? Are they right there with me in supporting where you want to be? How is that rolling forward in the asks for that \$3 billion and in the summit that's going on today, in your view?

Ms. Simone Swail: All right, there's lots to unpack there. But starting off with your first question, our relationship with these municipalities is good. We work with them very closely. They are offering co-op support. Particularly throughout the COVID crisis, we have worked very closely with our service manager partners, so they are right there.

The trick of the issue and why we need provincial regulation on this is these co-ops are going to reach the end of the mortgage over the next 10 years, each on a different day, on a different month. It's about consistency and being able to plan for the future to ensure that we have the supports we need. There are 47 different service managers in Ontario. We deal with 35, so trying to ensure that each and every one maintains that single baseline of support over the next 10 years is where things get complicated, and that's where we can streamline things by creating that surety in provincial regulation, that the rental assistance and the property taxes are supported.

But it is not because of a lack of trust of the service managers. It's that this is just far too complicated, with so many different players over such a long term, and with something so important, so vital to people's lives and to our communities, we need to ensure it's protected. So we are working closely with a number of them and we hope to make very good progress with them throughout this public consultation period.

As to the summit, I saw coming out—I wasn't there myself, but I saw that there was an ask for \$490 million for affordable housing. Those dollars are important. They're coming from the service managers, but we work very closely with them. Those dollars that are flowed to the service managers, we see them in the new affordable housing that we are helping to develop in different corners of this province.

So, we think it's vitally important and we strongly support those asks. But housing is a complex issue, and I think also the efforts to streamline are important. There's always more that we can all do to make the development, particularly of affordable housing, easier.

Mr. Will Bouma: You said there are 47 service managers across the province. How many of them would be supportive of your ask for the changes with the property tax situation, if you had to guess?

Ms. Simone Swail: Property tax and rental assistance? That would be very tricky for me to say, because most of them haven't actually come out with a public response yet.

Mr. Will Bouma: Okay. No, that's fine—

Ms. Simone Swail: So, quite honestly, I don't want to speak for others—

Mr. Will Bouma: That's totally fair. I don't think either of us likes to put words into other people's mouths. I know my colleagues in the opposition will say that we have to deal with provincial issues, but the fact of the matter is that we are, as a province, very dependent on the federal government and the National Housing Strategy. We have our thoughts on that. I won't put words into your mouth.

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

Mr. Will Bouma: But in the last minute—thank you, Chair—is the federal government putting the investments into the National Housing Strategy for the needs that we need here in Ontario?

Ms. Simone Swail: We need more investment from all levels of government to develop more affordable housing. The investments are a good starting point, but the need is so desperate out there. We massively need new supply of truly affordable housing in Ontario, and we need that support from the federal government, from the provincial government and from municipal governments.

Mr. Will Bouma: Amen to that. Thank you for being here today, and thanks again to all of our presenters—really enjoying the conversation today. Mr. Chair, I will turn it back over to you.

The Chair (Mr. Ernie Hardeman): We now go to the opposition. MPP Mamakwa.

Mr. Sol Mamakwa: Meegwetch. Thank you, Emily, Simone, Lisa and Connie for your presentations.

My name is Sol Mamakwa, and I'm the MPP for the riding of Kiiwetinoong. It's in northwestern Ontario. Thank you for your presentations. It's so important to listen to and to hear what's happening across the province, no matter what sector we're in. I know as a First Nations person, sometimes I see the partisan politics that happen here. I represent First Nations, mostly. I think around 67% of my riding is First Nations, and that's on-reserve. Why I share that is, jurisdiction is used as an excuse not to do anything as a province.

I have one community that has 27 years coming up—February 1 will be the anniversary of their long-term boil-water advisory, for 27 years. In this same community, half live in an urban setting, whether it's Sioux Lookout, whether it's Dryden, whether it's Thunder Bay. It's because of the lack of housing. When you live off-reserve,

there are things that happen down the road, down the street, whether it's addictions, mental health, homelessness. I think sometimes we don't work together enough to be able to address the issues, to try to address these issues.

Simone, maybe I'll direct this question to you, because I know some of the social services, some of the boards that are trying to work—sometimes, we don't work together enough federally, provincially, municipally to address the housing crisis that's happening in the north, without using jurisdiction as an excuse and also without any partisanship. I'm just wondering, Simone, what would you see happening? Is there a process from your organization, whereby you work with the feds, First Nations, municipalities and also the province to be able to address, with a holistic approach, the issue of homelessness?

Ms. Simone Swail: Thank you, MPP Mamakwa, for that very important question. The Co-Operative Housing Federation of Canada is a national organization. We partner with many organizations and we work in both federal and provincial and some municipal areas as well.

On the question, first and foremost, we have partnered, we have supported and we have echoed the national community housing renewal association's call for a “for Indigenous, by Indigenous” urban, rural and Indigenous housing strategy. We have echoed that call through our work and throughout the federal campaign. That was the number one ask of our Vote Housing campaign that we partnered with CHRA, the alliance to end homelessness and others on.

We strongly feel and acknowledge that the experience of homelessness is not equal across Canada. It is absolutely felt by the Indigenous peoples in Ontario and across Canada many, many more times than it is by other Canadians. We have echoed the call of the CHRA and others that the for Indigenous, by Indigenous national housing strategy should be released for urban and rural Indigenous peoples in the first 100 days of the government's mandate. If that were to be the case, we would like to see that follow through with the province of Ontario and for there to be a similar fulsome take to housing issues for Indigenous people.

At this time, I don't know how far we are into that 100 days. I apologize; I'm primarily in Ontario. But this is work we've been calling on for a very long time, and it has not been moving quickly. I will say that. Much more should be done and could be done on this issue.

1350

I'd also like to point to the work of our partner organization, the Ontario Non-Profit Housing Association. It recently also launched an urban and rural Indigenous housing plan in Ontario that really outlines what the issues are, what the problem is, and where we need to go to solve it. I apologize, I don't have that in front of me right now, but this could not be more of an important issue, and it should be the focus of this government to fix these inequalities that we experience.

Mr. Sol Mamakwa: How much time do I have, Chair?

The Chair (Mr. Ernie Hardeman): You have one-five-four.

Mr. Sol Mamakwa: Okay. Very quickly, Connie or Lisa, I know that in northwestern Ontario, in my riding of Kiiwetinoong, I have 20 long-term-care beds to serve approximately 34,000 people. I know a few years before, it was like a four-and-a-half-year wait. Before I became an MPP, I know it was a four-and-a-half-year wait to be able to wait for a bed at that facility, and they were using it as a hospital to be able to provide that service. If not, you would have to go far, far away from your First Nation home community, away from your family, from your community, from your culture—

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

Mr. Sol Mamakwa: —and they don't go home until they die. I'm just wondering if there's been any work within seniors care specifically for Indigenous people. Meegwetch.

Ms. Lisa Levin: Thank you so much, MPP Mamakwa. I'll be quick, because there's not a lot of time. I think you've raised a really, really important point. It's heart-breaking to see what is happening. We have asked for special strategies for the north, and also for different cultural groups, and our asks as well for EldCap beds—I think what you're talking about is long-term care in an EldCap bed.

Mr. Sol Mamakwa: Yes.

Ms. Lisa Levin: That has really fallen through the cracks. We do have asks in our pre-budget submission specifically for that, and also asking for more support for cultural care and allowing non-profits to be able to build, including First Nations groups. We have worked closely with Wiigwas and the Kenora chiefs to get a special model for them that respects their elders and their needs in their community. I think there's a lot of work—

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

Next—I'm not sure if we have an independent with us yet for their turn in the rotation. If not, that concludes this panel. We thank all the participants for being involved with it.

I do want to point out a reminder that the deadline for written submissions is 7 p.m. on Wednesday, January 26, so any information that was just ready to come out but I didn't allow time for, you can send that in on paper and we will assure it gets into the discussion for the upcoming budget. With that, thank you all again.

ONTARIO CRAFT BREWERS

ONTARIO PUBLIC SERVICE
EMPLOYEES UNION

CANADIAN MENTAL HEALTH
ASSOCIATION, ONTARIO DIVISION

The Chair (Mr. Ernie Hardeman): Our next round starts with the Ontario Craft Brewers association. You will have seven minutes to make your presentation. When you start, we ask that you identify yourself for the Hansard. At six minutes of your presentation, at the six-minute point, I

will say, "One minute left," and then we'll carry on from there. With that, the floor is yours.

Mr. Scott Simmons: Good afternoon. My name is Scott Simmons. I'm the president of the Ontario Craft Brewers association. I'm joined by Jeff Dornan, who is the owner of All or Nothing brewery in Oshawa and also the chair of our board. I will be the sole presenter today.

The OCB represents breweries in 110 communities throughout the province, many of them in rural and northern Ontario, including many in communities represented by members of this committee. These 332 small businesses and job creators are often one of the largest employers in their regions. In fact, prior to the pandemic, these small manufacturers employed over 4,600 workers. Despite producing just 12% of the beer sold in Ontario, craft brewers are responsible for over 80% of all brewery full-time jobs in the province. They, in turn, support over 9,000 indirect jobs in the agricultural, tourism, hospitality and manufacturing sectors. All told, Ontario's craft beer industry contributes over \$2 billion annually to Ontario's economy. In short, a growing craft beer industry means more good-paying jobs, more investment in regional economies and more tax revenue for the province. The pandemic, however, has stopped the growth our sector has enjoyed over the past decade in its tracks.

The government's efforts to support Ontario's craft beer sector throughout the pandemic by designating breweries as essential businesses have helped them keep the lights on through the darkest days. Additional supports such as patio extensions, the ability to sell at farmers' markets, waiving licensing fees and postponing beer tax increases were critical to the survival of the industry, and greatly appreciated by brewers. Thank you. Without these steps, the vast majority of our sector would have closed their doors forever.

Despite being essential businesses, however, brewers saw their sales decline by more than 60% as their own taprooms and bars and restaurants, their key customers, were forced to close. As a result, recent figures from the Trillium Network for Advanced Manufacturing found that the sector has lost over 10% of the jobs. In addition, craft breweries have been hit hard by supply chain disruptions, with rising costs on barley and aluminium, increasing wage costs and the decision by government to subsidize the wholesale price of import beer, giving foreign brewers an advantage over Ontario-made small businesses.

As the government looks at ways to continue supporting Ontario businesses to both survive the pandemic and rebuild following it, I'm here to recommend the government take three specific steps, which would have little to no fiscal impact on the province, but will have a huge impact on the survival and continued growth of our sector at this critical time.

Our first recommendation is to eliminate the punitive beer can tax. This unfair, unnecessary and outdated environmental levy has existed since the early 1990s, when the then NDP government introduced a tax on all aluminium beer cans. Today, Ontario is the only province in Canada that collects a beer can tax, where an 8.9-cent-

per-can fee is charged to manufacturers by the Ministry of Finance for every can sold in every retail channel across the province. It is also important to note that this is separate from the deposit paid by consumers, and separate from the recycling fees that are already paid by the brewers to the Beer Store to process their cans. The beer can tax is essentially a tax on small brewers. The tax does not apply to other canned beverages like soft drinks or energy drinks. It is also not collected on industry-standard beer bottles, which the foreign-owned multinational breweries use for most of their products.

The impact of this tax has been made worse by the pandemic, as brewers have been forced to ship their sales away from higher-margin draft beer to selling close to 100% of their product in cans. It's much more expensive, and as such, the tax burden on craft brewers has actually gone up during the pandemic. We recommend the government immediately eliminate this outdated tax on alcoholic aluminium cans for all Ontario craft brewers, to help us survive the pandemic, because it does nothing to improve recycling efforts and has a large negative impact on local producers.

Our second recommendation is to reorient existing government supports for the craft beer sector, to prioritize bricks-and-mortar breweries like All or Nothing in Oshawa. Bricks-and-mortar breweries are those who manufacture their own beer, create jobs, invest capital in physical facilities, purchase equipment, and pay much higher regulation and compliance costs. The government has rightly recognized the high start-up costs of building a brewery, and implemented the Small Beer Manufacturers' Tax Credit, which has been a key part of the sector's fast growth here in Ontario.

We have seen in recent years the practice of contract brewing, which has traditionally been a stepping stone to opening your own bricks-and-mortar brewery, instead becoming a permanent business model, which it was never intended to be. As a result, companies can own one or several beer brands and simply outsource the manufacturing of the beer they sell, often to contract brewing facilities, without facing the same upfront and ongoing costs of running their own facility. This results in an un-level playing field, and contract brewers are highly restricted in every other Canadian province for this reason.

Despite not producing their own beer, the Ontario contract brewers still receive the tax credit intended to incentivize building bricks-and-mortar breweries, which are the driving force behind the job growth and capital investment in the sector. We urge the government to take action to close the loophole and level the playing field by directing the Small Beer Manufacturers' Tax Credit to only bricks-and-mortar breweries, as it was originally intended. Doing so will ensure we continue to create good, well-paying jobs in communities across the province.

Our third and final recommendation relates to extending the caterers' endorsement currently offered to bars, restaurants and some breweries under the Liquor Licence and Control Act.

1400

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

Mr. Scott Simmons: Specifically, the catering endorsement allows a restaurant, bar, nightclub and even certain types of breweries to serve at community festivals or events with a simple 10-day notice to the AGCO. This opportunity, however, does not currently extend to breweries that only hold a by-the-glass licence—which is about 90% of the breweries. We therefore recommend that the government extend the existing caterers' endorsement to by-the-glass licence holders in order to provide additional retail opportunities for breweries at this critical time.

We believe that by enacting these additional recommendations in budget 2022, it will make the difference between Ontario's 332 craft breweries being able to remain open or having to shut their doors forever.

We appreciate your consideration of our recommendations and look forward to answering your questions. Thank you.

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

We now will go to the Ontario Public Service Employees Union. As with other delegations, you'll have seven minutes to make the presentation. At six minutes, I will say, "One minute left," and from there, we will carry on. We ask that you start with identifying yourself so we make sure we have the name in the Hansard.

With that, Smokey, it's your turn.

Mr. Smokey Thomas: Thanks, Ernie.

Hi, folks. My name is Smokey Thomas. I'm president of OPSEU/SEFPO, one of Ontario's largest public sector unions. We have more than 180,000 members proudly working on the front lines of the public sector and the COVID-19 pandemic.

During these difficult times, our members have been working hard to keep Ontario running. OPSEU/SEFPO members have proven that when the going gets tough, public sector workers hold it all together. We ensure health care, education and all other public services remain safe and dependable, and I think everyone in this room would agree that lives depend on that.

Because of our experience, our members have in-depth knowledge about where the fault lines are and what must be done to restore and strengthen public services and our province so that we're prepared for the road ahead and any future challenges coming our way.

As you gather feedback for the next budget, I'm here today to share some of our expertise and to highlight the five key actions that are needed to protect Ontarians and rebuild our province. They include building up our public sector capacity, improving workplace health and safety, repealing Bill 124, removing privatization from our public services, and strengthening long-term care. For today's presentation, I'm going to discuss these five actions, but you can find more details, including our union's full recommendations, in the written submission.

As I mentioned, the first key action is building capacity. We've been talking about this for so long that it's starting to feel like déjà vu. But if there ever was a time in history to heed our call for this, it's now. Public services are always first on the chopping block, and governments of all

stripes have tried to justify this as a way to balance the books. The pandemic has proven that that's a formula for failure, not success. These costs always catch up. Sometimes, unfortunately, the cost is human life. After decades of cuts and our warnings about them, the consequences hit hard when the pandemic started. Just look at our overstretched health care system. Now we must make up for lost time to make sure Ontario's public services are strong, reliable and well-equipped to meet increasing demand in our health care system, social services, education, corrections, public colleges, and across the OPS.

I'll give this government credit: They've listened to us and they've taken some steps to address the underfunding of public services. But Ontario still invests less per person than most other provinces. We can and must do better.

We must also ensure that health and safety continues to be a top priority. COVID-19 has threatened workplace health and safety for all front-line public service workers and, indeed, all front-line workers. In the wake of the Omicron surge, additional government support and resources are needed, and that includes expanding the provision of appropriate PPE, installing improved filtration, and increasing access to paid sick days permanently.

Like I said, public sector workers are doing everything in their power to keep Ontario running, ensuring that workers in the public who serve and support are safe. This should be the bare minimum. Paying them appropriately and allowing them to bargain freely is essential. It's time to repeal Bill 124. You can't call public sector workers heroes and then cap their compensation.

I have no doubt that this government's respect and admiration for front-line workers has grown these past two years. I know it's hard to reverse course, but it has been done before, and I think it's time to do it again—because Bill 124 isn't just wrong-headed, it's unconstitutional. It targets the very people who have given their all, including the majority-women workforce across the public sector. On top of that, we know better. Fairer wages are the best shot at addressing some of the ongoing staffing and recruitment issues our province is facing, especially in sectors where staff are overworked, burnt out and putting their own health and safety on the line. Wage caps are making staffing shortages worse.

Investing in public services and public sector workers isn't just a cost; it's a necessity for the health of our province, our people and our economy. Public sector spending, including public sector wages, helps to keep our economy healthy and growing. It makes up a significant portion of our GDP, which is one indication of our province's economic health. That's because public sector wages aren't lost; they're spent on goods and services, and the positive economic spinoffs keep going.

There really is a clear and simple way to cut costs and save money: by removing privatization from our public services. I've long said that privatization is the "pay more, get less" plan, and it's so true. In Ontario, successive governments have turned to the private sector to deliver public services. This overreliance on the private sector hasn't resulted in the improvements that were promised.

In fact, quite the opposite: There's less accountability, lower quality and less access to services in everything from liquor sales to long-term care.

Which brings me to my final point: Strengthening our long-term-care system must be a top priority in this year's budget. This is more than debate about dollars and cents. It's compassion and common sense, because we've got a humanitarian crisis on our hands.

While Bill 37 was a positive step forward for Ontario's long-term-care sector, there's still a long way to go on protecting workers and residents. There aren't enough homes, beds or staff to meet demand. Wages aren't high enough to retain and recruit new staff. And the pitfalls of privatization are all too clear: more outbreaks, more deaths. And we must remove the stigma of working in the sector.

There is no place for profits in long-term care. Instead, there should be more full-time jobs; better wages and benefits; better staff-to-resident ratios; a four-hour minimum care standard that's evaluated per home, not as a provincial average; updated building codes; more inspectors with even more power; and a complete freeze on the issuing of licences to private, for-profit organizations. It's time to build capacity by building new publicly funded and operated homes and beds so that we can improve affordability and quality and provide proper working conditions for staff.

It's time to stop selling off our valuable public lands to private equity funds, developers and corporations. The pandemic has exposed the gaps in our public services, and like all Ontarians, public sector workers and OPSEU/SEFPO members are yearning for a better, stronger and safer Ontario. During the pandemic, we worked hard together—

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

Mr. Smokey Thomas: Okay. During the pandemic, we've worked hard together to survive. Now I'm asking: Let's work together to thrive by building up our public sector capacity, improving workplace health and safety, repealing Bill 124, removing privatization from public services and strengthening long-term care. By working together, we can actually build a better future for all. Thank you very much for the opportunity.

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

We now will hear from the Canadian Mental Health Association, Ontario division. As with others, when you start off, we ask that you introduce yourself for the Hansard. You will have seven minutes to make your presentation. At the point of six minutes, I will say, "One minute to go." With that, thank you very much for being here. The floor is yours.

Ms. Camille Quenneville: Thank you. Hello, everyone. My name is Camille Quenneville. I'm CEO of the Canadian Mental Health Association, Ontario division. With nearly 30 branches province-wide, I'm pleased to speak with you today on behalf of my colleagues across Ontario.

During this pre-budget consultation process, you've already heard from two of my branch leaders. You'll hear from more before the week is through, and on behalf of all of us, thank you for granting CMHA the time to address this committee.

At the Canadian Mental Health Association, providing quality care to our clients is top priority, but the pandemic has magnified ongoing concerns for our branches delivering front-line services. I'm speaking about the impact of historical and inadequate funding, Bill 124 and health human resource challenges.

We all hope the latest wave of this pandemic passes quickly, but the one silver lining to COVID-19 is the increased public awareness of mental health and addictions. The subject is discussed publicly now more than ever. The increase in demand for service is further evidence.

We've conducted public opinion polling throughout the pandemic, which provides proof that Ontarians are struggling. But we're struggling too, after many years that have been absent base funding, which is why we're asking for an 8% increase for our branch base budgets this year. To put 8% into context, that's \$24 million, or 0.17% of the health budget.

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Without new and significant increases, it will be very challenging to address growing demand for service. Last year, for example, we experienced a more than 30% increase in crisis contacts at our branches. In some communities, it was upwards of 50%. Wait-lists are longer and branches are experiencing greater complexity of cases because the pandemic is hurting people already living with a mental health or addiction issue.

On top of this, our staff are stressed out, burnt-out and feeling that weight of supporting others. Without budget increases, it is growing impossible to retain our valued staff. Our colleagues are leaving for better-paying health care jobs or work outside the sector. We recruit talented people. We train them only to see them move on because we are not competitive when it comes to compensation. Throughout this pandemic, we've heard from branches who attribute 66% of resignations to salary. Some of our registered nurses are earning 30% less than their counterparts at other health providers.

Bill 124, the legislation that caps public sector salaries, will defeat any hope of meeting this challenge. Like other partners across health care and social services, we urge the government to repeal this legislation to support those front-line staff who have worked so diligently during the pandemic.

On a positive front, we have received funds to meet the needs of specific populations. The farming community, first responders, front-line health care workers, mainstream workplaces and campuses will all benefit from our new initiatives, and we're thankful for these opportunities.

We can't meet ongoing needs, however, without stability in our sector, and we must address salary inequity, increasing hydro rates and other costs of doing business. That's why we encourage the province to increase its overall investments to the mental health and addictions

sector to 9% of the health budget annually. That's what happens in other leading jurisdictions around the world that are taking greater financial action to address mental health and addictions.

My time today is limited and I would be remiss if I didn't mention other pre-budget requests which will be delivered to this committee and government in the coming days. We urgently require increased support to address substance use in Ontario, particularly the horrific opioid poisoning crisis that is happening across this province, and has been for many months throughout the pandemic.

There remains a dire need for supportive housing. Research and evidence has shown that providing a safe and stable place to live with supports is the anchor that can help people recover and thrive as they address their mental health and addictions challenges. Sadly, we have never had enough housing units.

Mr. Chair and committee members, this is a critical time for the community mental health and addictions system. The conditions of the pandemic have created a deep empathy and compassion for our work. With increased funding, we have an opportunity to finally address the mental health and addictions issues that Ontarians struggle with every single day. As we continue to work through this pandemic, CMHA Ontario and our branch network are eager partners with you.

This concludes my remarks and I'm happy to take questions. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation. That concludes the three presenters for this panel.

We will now start the questioning, and we start the questioning with the official opposition. MPP Fife?

Ms. Catherine Fife: Thank you to the presenters. Camille, I'd like to start with you. We have been hearing day after day of the devastating impact of Bill 124 on retaining staff, attracting staff, but also of the emotional labour, of how demoralizing it is to be a public servant, someone serving in really important sectors that have seen us through this pandemic, and then see other jurisdictions receive the funding. We actually just had a presentation from AdvantAge Ontario, a not-for-profit sector in long-term care. They pointed out the fact that some employees are being poached away, from private agencies, and those agencies, of course, are charging sometimes three times as much. So the value of human resources is obviously undermined by Bill 124.

I wanted to give you an opportunity to talk about how capping that 1% also limits the access to those employees to access an EAP or negotiate those other mental health supports they need, just to give the committee a better sense of why Bill 124 needs to be repealed immediately.

Ms. Camille Quenneville: Thank you so much for the question. I would concur with what you have described as a very difficult situation. Our branch colleagues across Ontario have told my colleagues and I at CMHA, Ontario division, about the difficulties they've been facing for some time. As I referenced in my remarks, the pandemic has really shone a light on how our folks are managing.

I've been in this business for a very long time and I've been in the non-profit world for a very long time, and the folks I've met and the people I've come to know who do this kind of work don't go into this because they're driven by a big paycheque; that's just the reality. I think they accept that this is work that they're drawn to because they believe in wanting to give back, they believe very much in having a strong mental health and addictions system—and sometimes it's personal. But what I can tell you is that there comes a time when the reality is that they have to make ends meet in their own personal lives, and they have given up an awful lot for a very long time.

One of the proudest times I've had in my career was in the early days of the pandemic, when there was a fear that we wouldn't be called an essential service, which would essentially mean we'd have to shut down. These folks who had been working around the clock without a minute of complaint since the days that we shut down, the early days in 2020, were the first to say, "We will fight tooth and nail to make sure that we can continue to provide these services." These are very dedicated people.

They don't leave their jobs because they are just chasing a bigger paycheque; that's not how they are. But they are being asked to sacrifice far too much and for far too long.

What I think Bill 124 does is smother any hope that they will be recognized and that they will be compensated fairly. To be told that you won't ever get, in the coming years, anything more than that 1% is kind of a final straw for a lot of them who have really given above and beyond.

Ms. Catherine Fife: Yes, it's a callous and cruel piece of legislation, and I think that the language we hear is not reflected in how Bill 124 is actually treating folks in those sectors.

I also want to thank you for referencing housing. Housing is health care and it's mental health.

You referenced that you're requesting 9% of the health care budget to be dedicated to mental health supports. What is it currently? That number does not figure prominently in my memory right now.

Ms. Camille Quenneville: It's about 7% or 7.2%. While that may not seem like a big difference, it's a dramatic difference. Jurisdictions like the United Kingdom and New Zealand are meeting a 9% threshold, which has been recognized by the Mental Health Commission of Canada as the rate which the federal government of Canada and provincial jurisdictions should be spending on this. But, again, we're faced with years and years of historically falling behind. A lot of the reason for that is stigma. At the end of the day, the reality is—and it's not deliberate; I don't think folks get in a backroom and say, "Let's cut these folks out of the budget." It's just that historically there has been stigma associated with our work and with people who struggle. So we have a lot of ground to make up, and as per your first question, Bill 124 won't help.

Ms. Catherine Fife: Chair, how much time do I have?

The Chair (Mr. Ernie Hardeman): Two minutes and 36 seconds.

Ms. Catherine Fife: Thanks. I wanted to also just touch on—because you did in your opening comments, around the opioid crisis. Yesterday, we heard about 44 deaths in Peterborough. Here in Kitchener-Waterloo, it has been devastating. We just lurch from crisis to crisis. The safe consumption sites have been proven to work. Can you put it on the record how valuable it is to save lives and also to build a support network around those sites to help people recover from addiction? These are our neighbours. There's a lot of stigma attached to the opioid crisis as well.

Ms. Camille Quenneville: You're exactly right. The simple truth of the matter is that safe consumption sites save lives, at the end of the day, and that's really what matters here. I'm glad you touched on the stigma. One of the hardest-hit sectors is the construction industry. We've been working with colleagues in the construction industry. To their great credit, they have stepped up. I won't name them, because it's early days and I want to be respectful of them, but I can tell you that the folks we're talking about are not people you would be afraid to meet at 3 a.m. in an alley, who look as though they're potentially violent. We're talking about people who hold down jobs that are high-paying jobs—

The Chair (Mr. Ernie Hardeman): One minute left.
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Ms. Camille Quenneville: Thank you—who are your neighbours, who are your friends, who have a workplace injury, who have pain relief to support that injury. When the pain relief runs out, they seek an illegal supply, and it's very often tainted and they become addicted, and so it goes.

What we're trying to do is shed light on what the actual reality of the problem is and present solutions to government—naloxone kits everywhere to be able to deal with overdose, many more safe consumption sites. There are lots of solutions. Rapid access addiction medicine, RAAM, clinics—highly successful and available.

I would just simply say that the pandemic has been twofold: the one that we've all been living in and we know about, and the other one that is the opioid crisis has been a pandemic as well.

Ms. Catherine Fife: Yes, I totally agree. Thank you so much for your presentation.

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

We'll now go to the government. Mr. Thanigasalam.

Mr. Vijay Thanigasalam: Thank you to all the presenters who came to present. We really appreciate your time and you being here.

My first question goes to OPSEU and Mr. Thomas. Thank you for highlighting the five action items that you highlighted today.

I want to focus on strengthening long-term care as a priority. I know OPSEU represents the inspectors who work in long-term care. As you represent OPSEU and those who inspect homes and ensure that they are the highest quality for those seniors living in these long-term-care facilities, can you please let us know how this government legislation will help OPSEU members, the

inspectors who go to long-term-care facilities to do their job, to make sure that they do their job well and, of course, protect the seniors living in long-term-care homes—if you can highlight how this will help the inspectors and also help to protect the seniors, and you can go back to strengthening the overall action item of strengthening long-term care as a priority.

Mr. Smokey Thomas: On the inspectors: They have been hiring up and training up and trying to get people with expertise and experience in health care, geriatrics and long-term care.

The surprise inspections, being able to drop in and inspect, are wonderful. That's long overdue. In fact, the minister dropped in and did inspections with some of our members. So they've been very helpful. The minister got a bird's eye view of the problems. I actually spoke to him after he went to one at 6 a.m. in the morning with his dad. His dad went through with him. So that has been really good.

There are a couple of wrinkles in that, Vijay. The rolling out of the action—the senior management and the bureaucrats above the rank and file have to support the inspectors when they file complaints or file recommendations or issue orders.

On the enforcement side, we're hoping that those members who will actually do investigations and enforce will have the same authority—and forgive me, I can't remember the name of the regulation it would fall under, but it would be like transportation enforcement officers, alcohol inspectors—so they can actually write orders. They would be trained investigators, as well as from health care backgrounds.

So the training has been great. Our members are a lot happier because they're now able to go out there and do their jobs. On the strengthening of the system, if I could just touch on that for a minute—that's, I think, the beginning point of strengthening the system so we make sure there is compliance. And the hours of care, some of these goals are, frankly, probably a generational goal. Working in long-term care has been so stigmatized by the media, by, actually, lots of politicians, even by some union leaders that they're having trouble getting people to enter the courses, even though you can get a PSW now and really get it quite cheaply, go to a community college and get really good training. But they're having trouble recruiting. They're having trouble recruiting the academic staff to do the training. So that's a longer-term goal, but that's why the last time I talked about long-term care to a parliamentary committee, I begged everybody to stop partisan politics with it and everybody work together to serve the people who built our province. It really is the shame of all of society for what's happened.

I'm part of a larger group that's actually meeting, and we talk about long-term care. I can say to this committee—I can't give any details except to say it's doing good work and there's good work coming from it. I am very, very encouraged as to the outcome, but it will take political will and it will take money from whoever is in government after the next election to make sure all these things get put

in place and make sure that people come out and support those changes, which would be for the better. I do applaud the government for taking it on.

Mr. Vijay Thanigasalam: Thank you, Mr. Thomas, for that answer. Now I want to switch gears to building capacity, the first action item you mentioned. Given that you've been strong representation for the public sector for well over 30 years, could you please share your knowledge and expertise on that first action item, on building capacity, and how you envision that, so that we can also hear from you on that point of view?

Mr. Smokey Thomas: Back in the Liberal days, and Harris before them, they started with this contracting out of public services. But what would happen internally is they started laying off front-line workers, and then when they realized they were short, they started hiring people from agencies. If you take long-term care—excuse me. IT is the best example I can give quickly. We have a member, say he's making \$30 an hour plus benefits and that, sitting there working. Well, because the Liberals cut so much and contracted out so much IT and laid off people, agencies would send people in at \$95 an hour. But that worker is making 20 bucks an hour sitting beside one of my members doing the exact same work. We came to an agreement with the government of the day that they would pay us a penalty for using—they called them consultants. Actually, some managers went out and created companies and did the consulting. That's just in IT.

If you were to bring that expertise back in-house, then you wouldn't have had all the fiascos, that SAMS computer system and all those—

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

Mr. Smokey Thomas: —that cost us so much money. So bring it back in-house, build your internal expertise in all the public services, and don't privatize, because it really is the pay-more-get-less plan.

Mr. Vijay Thanigasalam: Thank you, Mr. Thomas, for that answer. We really appreciate your continuous leadership in working with our government to make sure that we deliver the best output and results for public sector workers. We really appreciate your engagement in terms of long-term care and any other public sector workers that you're working with. We really appreciate you coming and presenting today.

Chair, how much time left?

The Chair (Mr. Ernie Hardeman): Ten seconds—nine seconds.

Mr. Vijay Thanigasalam: Ten seconds. Okay, I will leave it to my colleague in the next round for the next questions. Thank you. I'll turn it over to you, Chair.

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes the time for that presentation. We now go again to the independent member. Do we have MPP Hunter with us yet? There we are. MPP Hunter, the floor is yours.

Ms. Mitzie Hunter: Thank you, Chair, and my apologies for that.

The conversation we're having is really important, and I want to just ask the Canadian Mental Health Association

about the effects of the pandemic. Just from a prioritization perspective coming out of this, where do you see the best investments to be placed? Well-being is something that I hear about in many, many, different places, not just in the traditional way. There seems to be almost like a blanket that people are dealing with and trying to address issues of mental health, well-being and other concerns. Where would you start?

1430

Ms. Camille Quenneville: Thank you for the question. I think you're quite right. I don't ever recall a time when people have been as aware of mental health as they have been, certainly, through the pandemic. There has been a tremendous amount of public discourse, and that's a good thing, because it essentially means that people will reach out and seek support if they need it. Again, our polling shows that, in fact, they do need it. My priority would be on building capacity in the system so that we can meet that demand.

We are of the view that the pandemic may end at some point, but the after-effects will linger on, and we can expect we will have considerable pressure on the community-based system as people try to access support, because they will continue to struggle. There is a lot of evidence that we are all living with a lot of grief, and that grief is in the form of dealing with those things that we have missed out on during the pandemic. We haven't had the lives we're typically used to leading. We don't see our friends the way we once did or our family or go to our workplace and see our colleagues. There's a lot that will need to happen. I think people are resilient, but not everyone will come out of this and feel as though they can just carry on and not deal with all that they have lost through the pandemic, to say nothing of people who have lost loved ones to the virus or otherwise and how they might be struggling.

To answer your question, I would say let's put some capacity in the community-based mental health and addictions system. We all know—the pandemic has taught us—that we do not want people going to hospitals. That was true before the pandemic. It's really evident now, and people want to be served in communities. My view is, let's increase the capacity so we can meet that ongoing need and that challenge and ensure that we're providing the very best in well-being to all Ontarians seeking support.

Ms. Mitzie Hunter: That's great. I don't believe socialization is your specific area, but in terms of children and youth, I was speaking with someone just recently, and they really feel that the last two years are almost like a missing two years in that normal social development cycle, and ways that we need to pay attention so that there is no long-term scarring effect.

Ms. Camille Quenneville: I actually did used to work at Children's Mental Health Ontario for many, many years before assuming this role, so I have some familiarity with the folks who run those organizations across Ontario and the demand that they are going to have from kids who didn't have the normal experience of going to school and engaging with friends and socializing, and how important

that is for their development. As we all know, school is more than just learning, and a lot of kids have lost out on that. Some of them who are young enough have not yet had that at a time when they should have had a year or two of that already in their lives.

Again, I think there will be a lot that will have to be managed on the child and youth side, and again, when we talk about capacity in the system, my hope is that it goes into the actual mental health and addictions system. I will just put a plug here that there's a lot of talk about reinforcements in schools—

The Chair (Mr. Ernie Hardeman): Thank you. That concludes the time for that. We will now start the second round, with the official opposition. MPP French?

Ms. Jennifer K. French: I'm pleased to see everyone here. Thank you very much for your very thoughtful and important presentations to this committee. I'm going to start first and recognize Jeff Dornan—nice to see you. I'm not wearing the same hat. I thought I probably should keep it professional. But for those of you who don't know, the All or Nothing brewery, aptly named during a pandemic, I'll say, is a really popular and appreciated business in Oshawa.

Actually, Jeff, I'll start with you. As a customer, I have seen from the outside how you guys were very successful in pivoting and contributing to the pandemic effort with the hand sanitizer switch, using your facilities at that time. I've taken advantage of the curbside pickup and put it in the trunk and the various things, and I've seen you avail yourself as a business, and I know others are doing the same. But as the MPP, I want to make sure that—it appears you have done well as a business, but I'd like to know specifically, what the experience has been like, and how appropriate provincial government supports can support you as a local community business and others of your members, the craft breweries. So, Jeff, if you could answer that, I would appreciate it.

Mr. Jeff Dornan: Thank you for the support. We have enjoyed seeing you over the years.

Things have been tough in the business. Our business is hospitality. We have a few pillars to our business, one being the LCBO, which is a great partner of ours; the Beer Store; grocery stores; direct through our front door; and then, obviously, bars and restaurants. With them being closed and having our own taproom closed, for the majority of our members in our business, that's half of our business lost with the pandemic, and it has been very hard to get that business back. Bars and restaurants are hurting, and us as a by-product. As Scott alluded to—our beer can tax levy—with us being forced out of draft beer and into cans, the 8.93 cents per can adds up very, very quick on a monthly basis. And that's if we can get cans, even; there's a structural shortage in the industry of supplies, which makes our lives very difficult, to earn a living. So things are tough.

We're hopeful to have the market reopened. We're looking for the government to obviously allow our taproom to reopen, and we look forward to having people back at the brewery and seeing smiling faces in the future.

We're very aspirational for the future and have big hopes for it and are looking forward to warmer weather and not shovelling out of all the snow, like this week.

Ms. Jennifer K. French: Well, your patio is less appealing under the snow. I'm sure you, like many other craft breweries, are the local heartbeat of communities, and people are eager to come back to support you.

My office—and this is not a partisan comment—all MPPs' offices have been so busy supporting the small business with the OSBSG grants, with the tangle and the mess, frankly, of the administrative side of things. So if you have recommendations where that's concerned, please make sure to share them with the government for how that could be a smoother program.

You had mentioned the caterers' endorsement. Is there something you could expand on just to clarify that for me or for the committee?

Mr. Jeff Dornan: Yes. For breweries, there are two types of licences: One is a tied house licence—it has been renamed to liquor sales licence—and the other licence that breweries can have is a by-the-glass licence. Tied house is typically for breweries that have a bit of a restaurant, and by-the-glass is for more of a tasting bar. The majority of breweries in Ontario simply have a by-the-glass licence, which doesn't allow for them to get this caterers' endorsement. So now, being able to go to events, you have to get an SOP permit. There's a lot of red tape and timelines involved in getting that, versus if we had the tied house licence, or the liquor sales licence, it would be a faster process and allow us some more flexibility to react and support community events. People are not typically reaching out to us months in advance; it's a few weeks out. It becomes very hard for us to react and support the community. So having this change to the by-the-glass licence would be huge for us.

Ms. Jennifer K. French: Thank you. I know we'll look at any written submission more closely when we have time.

Camille, I'd like to thank you for the work that the CMHA does across the province. Where my constituency office is in Oshawa, we're neighbours. We know and see the value locally, and we share a lot of the same clients and people we care about as part of that network in the community. What you had raised about housing, I think, is so important, and I really hope that you are able to communicate to the government so that they really understand it's not about the housing alone; it really is that supportive housing and what that looks like to meet the needs. Addictions is not just something happening over here; it's something happening in our homes, in our communities and our neighbourhoods, so thank you for that work.

But you had said it's important to shed light on what's going on to the government. Are there a few things that you haven't had a chance to raise that you think are important to indeed shed a light on?

Ms. Camille Quenneville: Thank you for this opportunity, and I must say I'm immensely proud of CMHA Durham, which is your neighbour. They are a fantastic

organization and, I will tell you, so unique, as you likely know: a nurse practitioner-led clinic on site; there is a pharmacist on site who specializes in meds for people with mental illness; and they have a huge housing component. I'm just extremely proud of their work.

1440

To answer your question, I would need a whole lot of time. There is so much happening in our sector right now. As you can gather, I'm immensely proud of what's happening.

But I will say that the needs around housing, as you pointed out, are so significant. There is no recovery without housing. We have many models that are working very well.

I will tell you that there are crisis services where we have proven that we can ensure there is a safe and healthy response—

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

Ms. Camille Quenneville: —to people who are struggling with their mental illness. So if it is an issue of people finding the support they need, we have crisis services, different models around Ontario, that I would love to have the opportunity to explore.

One is in London, in our Middlesex branch, where there is a 24-hour crisis site that is associated with our branch so that police and paramedics can pull up and allow people who are struggling, who have called for support, to go there instead of an emergency department, which is so much better for that client and also so much better for that system, so that those individuals, be they paramedic or police, are able to go right back to their duty as opposed to sitting in an emergency department with somebody and stigmatizing them while they're waiting for care. So, we have models that I would very much love to showcase and talk about at great length.

We also have mobile crisis response teams. Our Peel branch is an excellent—

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

We'll now move to the independent member. MPP Hunter.

Ms. Mitzie Hunter: I do want to give Camille a chance to finish her sentence, because I know you've mentioned schools. I'm very keen to hear what you have to say about that. Please finish your sentence.

Ms. Camille Quenneville: It's a personal viewpoint, but it's one shared by my colleagues in the child and youth mental health sector, which is: Let's put the resources to support the mental health of children and youth in those organizations that do that work. I appreciate that schools are very often where these issues are recognized, but I think lots of teachers will tell you that is not their forte. I would dearly love to see those supports go to the community-based sector, with relationships as they currently exist, but expand on those relationships between those schools and those centres in communities so that those children and youth get the very best support that they need from the professionals who do that work.

Ms. Mitzie Hunter: Thank you—to reduce those wait-lists.

I, too, want to thank you for the work that CMHA has done, frankly, in Scarborough. I remember when we piloted the 140 Adanac initiative with Toronto Community Housing. What a difference it made to have wraparound on-site supports for people and helping with their well-being, as well as the mobile responses that have been put in place for high-needs buildings and locations, so thank you for that.

I do want to pick up on something that Jeff had said with regard to the supply chain issues and disruptions affecting supply in your industry. I'm wondering if you can talk a little bit about the concerns that you're seeing there for your sector in terms of craft breweries.

Mr. Jeff Dornan: Yes, our sector has been driven into beer cans. Not a lot of craft breweries nowadays use bottles; it's all cans. The trend has followed in the States as well. There has been a structural shortage of aluminum cans. It was caught up in the tariff wars a few years ago. There's an increased demand for them and therefore we just can't get them.

We have to order our cans, typically a year in advance, in much bigger quantities than we used to in the past. As an example, I'm actually getting a tractor-trailer next week that I ordered this past summer. So, we have to have much longer lead times.

With the uncertainty of the economy right now, it makes it very hard to commit to having large amounts of raw goods on hand or on order, because we can quickly sink ourselves if we over-order, with rising or sinking demand. Aluminum cans are our biggest challenge right now.

Ms. Mitzie Hunter: You talked about the adjacent sector, with the restaurants and takeout—and being able to have alcohol as part of that was something that emerged in the pandemic. I know that Steven Del Duca, the Ontario Liberal leader, called for that very early on, and it was subsequently allowed. Do you see that as something that should be permanent as we come out of this, in the post-pandemic recovery?

Mr. Jeff Dornan: We want to see our restaurant partners do the best they possibly can. We'd love to see them continue to thrive and grow. As an industry, we have tried to do everything we can to support them. We look forward to going back to the days when we can hang out for a beer at the bar in a restaurant.

Ms. Mitzie Hunter: Yes, that social side is really important. I'm sure Camille would agree with that—social interactions.

I want to, with the time remaining, thank you so much, Smokey. I've known you for many, many years.

The work of the people who work in Ontario's public sector is really unmatched. I know the FAO often says that in terms of our tax dollars and revenues we bring in, we deliver more services per capita—

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

Ms. Mitzie Hunter: —than any other province in Canada, and it's because of your members and their ability to do their work. The pandemic has been hard on them, as well. So I just want to recognize that and thank you and

your members in the Ontario public sector for the work that you do—and also in the broader public sector.

The Chair (Mr. Ernie Hardeman): We now will move to the government. MPP Kanapathi.

Mr. Logan Kanapathi: Thank you to all the presenters for the presentations, and thank you for all the great work you do each and every day.

Thank you for being here, Camille. I know that you mentioned the growing demand for services. It went up by 30% to 50%, depending on the neighbourhood. Also, you mentioned the dire need for mental health services during this difficult time. We all understand.

Could you elaborate a little bit on how the pandemic has affected the delivery of mental health and addiction services at the CMHA? How does this change across your different regional branches?

Ms. Camille Quenneville: Thank you so much for the question.

Like many organizations, we changed overnight in our service delivery, such that we went to a virtual platform wherever that was possible. As you might guess, our services are typically delivered in person, but for those counselling services and anything we offer that we could move so that it was more safely done remotely, we did that and we ensured that it was still viable for our clients to be able to access their service that way.

I'm really happy to tell you that over the course of the pandemic, we maintained 98% of our service delivery, so we didn't shut anything down.

In fact, my colleagues in Algoma, in Sault Ste. Marie, at our branch, managed to ensure that their food security program was in place despite the obvious challenges of trying to do that in person.

Remember, in the very early days of the pandemic—in March 2020, when PPE was very hard to come by and when there were extraordinary challenges that many of us have either forgotten or blocked out of our memory—they continued to go to work every day and ensure that the mental health needs and the addictions needs of their clients, and even their food security needs, were met. And needless to say, those who are in our supportive housing continued to have the assistance that they needed to stay safe and healthy. That was maintained as well.

So we did pivot. As I mentioned in a previous response, my colleagues, without a word of complaint, simply got on with it, managed as best they could and kept their services in place. We couldn't have been more proud of them.

1450

Mr. Logan Kanapathi: Thank you. I hear almost every day about this issue, either from the residents, from their loved ones or from the medical community in Markham and across the GTA.

You know that our government is investing over \$31 million to help improve specialized mental health treatment services and decrease the waiting list—the waiting list is a key issue, especially in pediatric psychiatrics; six months to one year—and our support of the mental health and well-being of the province's most vulnerable children

and youth by addressing their increased demand for services during COVID-19.

Tell me, how do you see this investment helping to expand access to services in your community? Do you have any specific feedback to this committee?

Ms. Camille Quenneville: Well, I would say that the vast majority of the increase in spending has gone directly to programs that are specific to populations, and we have had the honour, if you will, of being able to offer those programs.

One of them that I think might be of interest to this committee in particular is supporting the front-line health care workers, who, as we know, have struggled tremendously through the pandemic. We took a program that we have offered for a very long time around workplace mental health and we revamped the curriculum so that it's appropriate for a health care setting to support health care workers, whether they're nurses, PSWs or folks who work in any other institutional setting in health care. We're looking forward to rolling that out very shortly.

The government very generously funded that in late 2021. We went to them and said this is work we believe we can do, and we believe it's much needed. They agreed. I was immensely proud and happy that that happened, mostly because we are all going to benefit as Ontarians if we can ensure that our health care workers have some support for their mental health following the pandemic.

Mr. Logan Kanapathi: Thank you, Camille. My last question to you: I know there are lot of issues out there, especially the youth and seniors—all walks of life were affected by mental health, but mainly, youth and seniors are the ones facing many challenges, especially the culturally sensitive services to their community. How do we make mental health programs more accessible to Ontarians? We're funding lots of money, [*inaudible*] lots of money. When they come to the service, people may not be available. Tell me, how do we make mental health programs more accessible to day-to-day Ontarians?

Ms. Camille Quenneville: Well, it is a challenge for sure, because we have seen the demand skyrocket, and that goes back to our request to have more capacity in the system.

We do try to have programs that will have a wide reach, that are done efficiently. Through the pandemic, again, the province funded BounceBack, which is part of Ontario's structured psychotherapy program. People can access that by phone, and that's how the program is actually run: It's telephone-based coaching with cognitive behavioural therapy supports. It allows people to have the support they need at home, where they're safe, and to get a coach to assist them to manage their mental health.

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

Ms. Camille Quenneville: I agree with you around wait-lists. They are always difficult, particularly, as you point out, for youth and seniors. We are also looking at a variety of programs around loneliness for seniors in particular, although many youth, we've discovered in our research, struggle with loneliness. We're looking to work with community partners. We have a pilot running in York

region, which is CMHA York Region and South Simcoe. We are hoping that we can actually expand that across the province and scale it, because we think we'll have a template of how communities can come together and ensure that seniors can be relieved of loneliness, as well as others—new immigrants, young mothers and others who we know can struggle with loneliness can have their needs met with community partners and their local CMHA branches.

Mr. Logan Kanapathi: Thank you, Camille, for your wonderful leadership, and Canadian Mental Health Association for the great job you are doing not only in the York region—

The Chair (Mr. Ernie Hardeman): Thank you. That concludes the time for that question.

That does conclude this panel, so I'd like to thank all the panellists for presenting today.

A reminder for all the presenters: The deadline for written submissions is 7 p.m. on Wednesday, January 26. I would just suggest to everyone that the questions that I cut off, where the most important part was yet to be heard—get it on paper and get it in before the 26th, and it will still be part of the process.

Again, thank you all for being here.

CANADIAN AUTOMOTIVE MUSEUM
CANADIAN CANCER SOCIETY
INTERFAITH SOCIAL ASSISTANCE
REFORM COALITION

The Chair (Mr. Ernie Hardeman): For our next panel, we'll start off with the Canadian Automotive Museum. We'll ask them to come forward.

Please make sure you introduce yourself when you start your presentation for Hansard. You'll have seven minutes to make your presentation, and I will let you know at six minutes that your time is nearing an end.

With that, the floor is yours.

Mr. Alexander Gates: Good afternoon. Thank you, Minister Bethlenfalvy and members of the standing committee, for having me here today. My name is Alexander Gates. I'm the executive director and curator of the Canadian Automotive Museum in Oshawa, Ontario. We're located approximately an hour's drive east of downtown Toronto. The Canadian Automotive Museum opened to the public in 1963, and today we are dedicated to preserving and sharing Canada's automotive experience. We are home to the world's most significant collection of Canadian cars and the Glenn H. Baechler Canadian Automotive Research Library.

In my eight years working at the Canadian Automotive Museum, I have never seen visitors as engaged and appreciative as they have been over the past year.

Just before Christmas, a visitor named Mike came through the museum with his three sons between the ages of eight and 12. He learned about our Third Thursday Zoom talks on our website. His family were regular viewers for several months before coming down in person

to visit from Orillia. After a successful stop in the gift shop that included a family membership purchase, he expressed his appreciation for being able to connect with his sons during the pandemic through our museum.

Looking back at what Ontario's museums have accomplished last year, it's hard to believe they were closed for more than six months. This is largely thanks to the financial support received from the province of Ontario. The Ontario small business grant allowed us to redirect our resources from paying hydro bills and property tax instalments to developing online programs and engaging with our audience. This includes the hard work of the Ontario Trillium Foundation, which deserves a round of applause for their efforts. The Resilient Communities Fund and the building communities fund were both easy to access and directed at the immediate needs of Ontario's heritage sector. At the Canadian Automotive Museum, funding from the OTF allowed us to create professional bilingual audio tour content that anyone in Ontario can download for free from any major podcast site, including Apple Podcasts, Spotify, and Google Podcasts.

Looking ahead to 2022, I want this committee to know that investments in Ontario's museums are both low-risk and high-return. The extension of these short-term supports that have proven beneficial will allow for the stability of the sector in the short and long term.

Specifically, I'd like you to consider three recommendations today, the first being a change to the tax code that would make museums exempt from property taxes, as educational institutions. At this moment, Ontario is one of the only jurisdictions in North America that taxes museum properties.

The second is a short-term digital response fund valued at \$10 million over three years, which will allow museums to continue to adapt to providing programs online. The future of museums here in Ontario will be a mix of in-person and virtual experiences. Let's continue moving ahead with the necessary infrastructure to make this successful.

Finally, our sector needs increased support from the Ministry of Heritage, Sport, Tourism and Culture Industries. The Community Museum Operating Grant has been long underfunded, long before the first lockdown. An increase of \$10 million per year will reach 300 communities across the province and move away from emergency funding and towards stabilizing operations and local recovery.

I'm genuinely excited by the opportunities for heritage and tourism here in Ontario, despite the current challenges we face.

I look forward to seeing you all at the Canadian Automotive Museum later this year.

Thank you for your time. Of course, I'm happy to take any questions.

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

The next one is the Canadian Cancer Society. If you'll come forward, the rules apply the same: You'll have seven minutes to make your presentation. I hope that you would

start it with introducing yourself so your name would be properly recorded in Hansard. From there, the floor is yours. I will remind you at six minutes that you have one minute left. Thank you for being here. The floor is yours.

1500

Dr. Stuart Edmonds: Great. Thank you very much. Good afternoon. I'm Stuart Edmonds, the executive vice-president of mission, research and advocacy at the Canadian Cancer Society. I'm joined by Stephen Piazza, who is the director of advocacy, who will follow my initial presentation.

As you know, the Canadian Cancer Society is the only national charity that supports Canadians with all cancers in communities across the country. In 2017, we merged with the Canadian Breast Cancer Foundation, and followed that up in 2020 with an amalgamation with Prostate Cancer Canada. With joining forces, we were able to put a greater proportion of our donor dollars to our mission: cancer research, support and advocacy.

With the onset of the COVID-19 pandemic, the challenge continues to be that cancer doesn't stop being a life-challenging and life-threatening disease in the middle of a global health crisis. Those with cancer are among the most vulnerable in our communities right now and may be at greater risk of more serious outcomes from COVID-19. Our highest priority is to support people with cancer and their caregivers.

Now more than ever, during this pandemic, our digital and phone support programs are critical to the people we serve, providing information, reducing anxiety and easing feelings of isolation. Because of cancer screening, surgeries and interventions essential to cancer care being postponed last year and disruptions happening once again, we are concerned that there could be serious impacts as a result of delays for cancer diagnoses and treatments. We continue to call for cancer care to be prioritized through this difficult time and for disruptions and delays to be addressed as soon as possible. Data must be collected and publicly shared on the pandemic's impact on cancer care, and we need to start planning now for an anticipated surge in the need for care. Patient and caregiver perspectives through the pandemic must also be incorporated in the decision-making process.

While we need to address the urgent issues facing cancer care, we also currently fight for building out innovations in cancer care that will take discoveries from the lab to life faster, drive system change and help Ontarians take control of cancer. Once such action is for the Ontario government to add coverage of the prostate-specific antigen test to the Ontario Health Insurance Plan when ordered by a physician.

Prostate cancer is the most commonly diagnosed cancer among Canadian men, with one in eight expected to be diagnosed in their lifetime. In 2021, we estimate that 4,500 people will die from prostate cancer. Because prostate cancer is one of the least preventable cancers, early detection of the disease is critically important. A PSA test can help find prostate cancer early, before it grows large and spreads outside the prostate. But despite the import-

ance of early detection, Ontario is one of only two provinces requiring individuals with no symptoms to pay out of pocket for this test. Eight provinces and three territories cover the cost of the test by referral, without requiring symptoms or signs. New modelling shows that for less than \$3 million annually, Ontario could be brought in line with nearly every other Canadian province and cover the cost of the PSA test.

Now I'd like to pass things over to Stephen.

Mr. Stephen Piazza: Thank you, Stuart. As mentioned, I'm Stephen Piazza, director of advocacy for the Canadian Cancer Society. Along with expanding access and coverage of the PSA test, we continue to call for expanded access to take-home cancer drugs for people in Ontario. For a long time, cancer drugs were often administered in a hospital setting, usually intravenously. But now, through advancements in cancer care, half of oncology medications being developed are in oral formulations that can be taken at home. Not only do these medications reduce dependency on hospital infrastructure and minimize caregiver and patient disruptions, including travel times to clinics, but they are also proven to better target and treat some cancers.

Our patient and caregiver surveys through the COVID-19 pandemic found that access to cancer drugs and prescriptions was ranked by both patients and caregivers as one of the most important supports required to manage their care. But despite being identified as an important part of patient care, many uninsured or underinsured Ontarians are not able to take advantage because of the cost barrier. New modelling estimates that about 20% fewer uninsured patients are receiving take-home cancer medications in Ontario compared with patients with comprehensive public coverage. In contrast, Canadians living in western provinces have their cancer drugs paid for by the provincial government regardless of age, socio-economic status and the drug's route of administration. Our modelling finds that it would cost the Ontario government between \$12 million to \$31 million to fill the gap in coverage of take-home cancer drugs and act as a second pair.

Finally, in our presentation, given that this week is National Non-Smoking Week, we want to draw attention to the needed action to continue to address tobacco use and control in Ontario over the long term. Tobacco continues to be the leading preventable cause of cancer in Canada. It is the leading cause of disease and death in our country. According to 2019 data, there are still 4.7 million Canadians who smoke. This represents about 15% of the population aged 12 and older.

Ontario has historically spent \$44 million on tobacco control and cessation activities through the Smoke-Free Ontario Strategy. We strongly believe that these initiatives should be funded by the tobacco industry itself through a cost-recovery fee on the industry, based on market share.

In the last federal election, all three major parties—the Conservatives, the Liberals and NDP—included a federal cost-recovery fee in their costed platforms to recoup the money spent federally on tobacco control. This commitment was reconfirmed in the mandate letter to the federal Minister of Mental Health and Addictions and Associate

Minister of Health. Similarly, this approach is like what's used by the US in the US Food and Drug Administration tobacco strategy—

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

Mr. Stephen Piazza:—that's been in place since 2009 and the Canadian federal cannabis annual regulatory fee.

Funding tobacco control initiatives in Ontario through a cost-recovery fee on the industry will free up public dollars to be used elsewhere. This approach continues to receive widespread support, with past polling finding that 92% of Ontarians support making the tobacco industry pay for programs to reduce smoking.

We want to see a long-term commitment to tobacco control in Ontario's 2022 budget by implementing this cost-recovery fee on the tobacco industry. Thank you for your time today, and we're looking forward to any questions.

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

The third presentation for this panel is the Interfaith Social Assistance Reform Coalition. I believe I saw Reverend Eagle there. We also have a long, ongoing relationship with these consultations here with the province and the interfaith community, so we thank you again for joining us today.

As with other presenters, you'll have seven minutes for the presentation. We ask everyone, before they speak, to make sure they give us their name for the Hansard. At six minutes, I will let you know that there's one minute left. With that, Reverend Eagle, I will let you take the floor.

Rev. Dr. Susan Eagle: Thank you very much. Greetings to the committee, and our thanks for an opportunity to address you.

ISARC, the Interfaith Social Assistance Reform Coalition, is composed of many faiths: Christian, Jewish, Muslim and other communities across Ontario. Those are identified on the cover of the presentation that we provided to you. We have been active for more than 35 years as an organization doing analysis and presentations to government, but we're also composed of thousands of members who are on the front line, working with people in the community, supporting food banks, working on anti-poverty programs etc. So when we speak to you today, we are speaking not only from the point of view of analyzing legislation, but with lived experience of those we're speaking about as we support them.

I'm going to turn things over now to Greg deGroot-Maggetti and my other colleague Jack Panozzo.

Mr. Greg deGroot-Maggetti: Thank you, Susan. Thank you for having us. As Reverend Eagle said, my name is Greg deGroot-Maggetti. I'm a member of the ISARC steering committee, representing Mennonite Central Committee, Ontario.

ISARC has a long-standing commitment to making sure that Ontario's social assistance program and its income security system in general provide both a level of support to lift people out of poverty and that they're delivered in such a way as to respect the dignity of people.

Sadly, Ontario's social assistance programs still fall short, leaving many people forced to live in poverty.

Closely connected to direct income supports is access to truly affordable housing. Decades of underfunding for social and community housing have left many Ontario communities in a deep affordable housing deficit. With funding through the National Housing Strategy, this is beginning to change. However, a glaring gap in the Ontario Residential Tenancies Act, the absence of rent control for vacant apartments, has led to a loss of naturally occurring affordable rental units in older buildings.

1510

Income security for seniors rests largely with the federal government, yet the province of Ontario does have a key role to play in protecting the well-being and dignity of seniors needing care, either in long-term-care facilities or through community-based home care services. The pandemic has thrown into stark contrast the many weaknesses that plague Ontario's long-term-care system.

The brief which we have sent in to you has more information on each of those three subjects, but let me just briefly summarize the recommendations that are included in our brief.

For income security, in this budget, Ontario Works and ODSP rates should be indexed to inflation. Beyond that, the government should set a multi-year plan to raise social assistance incomes above the market basket measure of poverty through any combination of increases to social assistance rates above inflation and/or refundable tax credits available to all low- and modest-income households. We would also recommend that the government invest provincial funds and work with the federal government to build out the Canada-Ontario Housing Benefit so that it reaches more households in core housing need.

Further, on affordable housing, the province should extend rent control to vacant rental units and units built since 2018. The province should also provide municipalities right of first refusal on apartment buildings that come up for sale, and should provide funding to support municipalities, non-profit housing providers, and co-operatives to purchase existing apartment buildings that come up for sale. The province should also prioritize public investment in permanently affordable housing built and managed by municipalities, non-profit housing providers and housing co-operatives.

With respect to long-term care, we recommend that the province increase pay for employees in long-term-care homes, including nursing staff, personal support workers and all other support staff working in long-term-care homes. We also encourage the province to work with long-term-care providers to encourage the conversion of part-time and contract positions into full-time, permanent staff. The province should also improve legal rights, working conditions and pay for home care workers. We also recommend that the province make plans through the province's budget to go to the capital markets directly to secure funds to finance the cost of redeveloping and building new long-term-care facilities. The province must make those funds available to not-for-profit long-term-

care providers so that they can apply for a greater proportion of the new builds.

As I said, you can find more details on the recommendations and these policy areas in our full brief. We'll leave it there and invite any questions you might have. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much for that presentation. That concludes the three presentations in this panel.

We will start with the questions, starting with the independent member. MPP Hunter.

Ms. Mitzie Hunter: I really want to thank all of our three presenters today.

I'm going to start, perhaps, to pick up on the issue of our seniors needing care, and the link between income supports and housing. I think it's really important. We have a very important conversation happening right now with respect to housing. What I find is that seniors, even if they live independently, want to live in a community where they're socially connected to other seniors.

If you could just talk a little bit more about what you're seeing and experiencing, and maybe we could start first with Greg on that, just to really enlighten our panel on what you're seeing when it comes to that link between income security and housing for seniors, and the important role that income supports play for seniors.

I do have a follow-up question, as well. Go ahead.

Mr. Greg deGroot-Maggetti: Let me just start by saying that there's an urgent need in Ontario for us to preserve affordable housing. We have seniors living in rental housing, but the risk of that housing being sold to private real estate investment funds and then seeing those rents increase will make it really difficult for seniors to continue to live in the community.

But that's also why we need to invest more in home care services for seniors, and we really have to recognize that the conditions of work for care providers are the conditions of care that are available to Ontarians. This applies across the board, but would affect seniors living in the community.

In terms of the situation for seniors in long-term care, I think I want to turn it over to Reverend Eagle to speak. She has some very direct experience with that.

Ms. Mitzie Hunter: Go ahead, Reverend Eagle. You're on. Your mike is on.

Rev. Dr. Susan Eagle: Thank you. In terms of long-term care, in the last year, I've been an essential caregiver for two people, one of whom needed to be in long-term care. The other could have been cared for at home if there had been proper supports in place for her. It interrupted community, it took her away from relationships with family and friends, and it was an isolating experience. In addition, in the long-term-care home itself, there was not sufficient staffing. There wasn't support for programs. All of those areas need to be addressed.

My one response to the committee would be: Don't look at one little piece; look at the big picture, because just one part or another part isn't going to solve the problem. There need to be comprehensive supports in place.

Ms. Mitzie Hunter: Part of that big picture—and we heard it in this committee when we were doing our northern consultations—is around the transition from provincial support programs to federal support programs. Some of our seniors, at their most vulnerable point, lose some of their support, and I’m wondering if that’s something that you’re seeing with those who are in your ministries and those in your partner ministries. Do you hear that as a concern that seniors are raising?

Rev. Dr. Susan Eagle: I’m sorry; I’m not understanding. In terms of loss of supports?

Ms. Mitzie Hunter: Well, they have the income supports, but in terms of certain benefit coverages that they would have previously been eligible for and they are no longer eligible for—you haven’t heard that? Greg, I’m wondering if you could respond.

Mr. Greg deGroot-Maggetti: I have to admit, I can’t respond in great detail, but I can say anecdotally that one of the groups that the Mennonite Central Committee works with is an advisory group to the region of Waterloo. These are people who have experienced homelessness and have lived through that, and are now housed and, as I said, provide advice to the region on serving people who are homeless.

A number of people on that committee have recently transitioned to federal benefits—Old Age Security and the Guaranteed Income Supplement—and I would have to go back to them to get more detailed information, but they have talked about a loss of some of the extended health benefits that were available to them when they were on ODSP. So I do think this is an area—again, beyond income supports directly, if we’re going to build a really sustainable—

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

Mr. Greg deGroot-Maggetti: —income security system, we also have to make sure that we have in place things like public dental care, public vision care and pharmacare, to make that transition smooth and make sure everybody is covered.

Ms. Mitzie Hunter: Wonderful. If you do have any subsequent information that can help this committee, please pass it along. Thank you so much for the work you do. I fully, fully support the recommendations you’ve put forward and the importance of looking at it, as Reverend Eagle has said, as a continuum and as a whole picture. Throughout people’s lifetimes, frankly, they need to have that support that they can count—

The Chair (Mr. Ernie Hardeman): We’ll have to wait with that answer until the next round.

We now go to the government. Mr. Cuzzetto. There you go.

Mr. Rudy Cuzzetto: Thank you to all three of the presenters here. All three of you have touched me personally, in my own family.

1520

But I want to touch on the Canadian Automotive Museum. As most of you know, I worked for Ford Motor Co. for 30 years in Oakville, and I was just going through all the vehicles. In my time there, I built 10 different vehicles:

the Escort, the Tempo, the Topaz, the Windstar, the Freestar, the Edge, the MKX, the Flex, the MKT and the F-150 as well. So that’s a lot of history just out of the Oakville plant.

The other day, I was speaking with my staff here, and we were talking about the Jeep. They go, “Oh, it’s owned by Chrysler.” I go, “Well, to be honest, it was owned by American Motors.” And probably none of us remember American Motors was a manufacturer of vehicles here in Canada at one time. So this is a great history that we have here in Ontario, even in Quebec. We had the Camaro being built in Quebec for many years—and Oshawa built many vehicles, and Brampton, as well as Oakville. Those are the three main hubs of vehicles being built in the province of Ontario.

But unfortunately, during the pandemic, I know it has been hard for the automotive museum. We have seen many organizations shift to providing digital and online content. Has the Canadian Automotive Museum been able to provide these types of services during this pandemic?

Mr. Alexander Gates: We have a number of—not only our museum but museums across Ontario have done a really great job of pivoting to virtual programming. For example, last year, we started up a Third Thursday Zoom lecture series, which has proven incredibly popular. One of the great things about this new Zoom platform, this new online platform, is we can reach out to a lot more people, a lot more visitors, across not only the province but across the world who can tune in to our program. And it has actually increased our capacity tenfold, I would say, in terms of what we can handle for these talks.

It’s also something in terms of digital content like audio tours. I mentioned we received a grant from the OTF to create new audio tours. Traditionally, not that many years ago, you would show up to a museum, and you would ask for the audio tour, and they would give you a big clunky handset that you would tour around the museum with. Now, these days, we don’t need these handsets; we don’t need that physicality anymore. Visitors can show up or be anywhere in the world, and they can download our audio tour. We actually got the idea from the Toronto Zoo. They did an absolutely wonderful drive-through audio tour early during the pandemic, which is a great example of re-thinking how people are going to interpret these locations.

Then school field trips, as well: Both ourselves and colleagues across Ontario have done a fantastic job of pivoting with online field trips and virtual field trips. So there are many great examples of that as well, of being able to take these programs to schools, to seniors’ centres. We’re talking about senior isolation. That’s something we’ve worked with local seniors’ centres on: connecting seniors at seniors’ centres, at their homes through programming as well. There’s a lot going on, and we want to keep building this as well.

Right now, I’d say we’re sort of in an experimental phase still, with different institutions doing different things, but it’s something I can see a great future for in the next few years, with, of course, a little bit more funding from the province.

Mr. Rudy Cuzzetto: Okay. I would like to touch, even right now, on the Canadian Cancer Society here. To be honest, my father died of asbestosis, but he was a smoker as well, and he worked right here in my own riding of Mississauga–Lakeshore at the old Texaco refinery. What can the province do to further support Smoke-Free Ontario areas and programs?

Mr. Stephen Piazza: Absolutely, and thank you so much for the question and for sharing that story. Certainly there are so many who have been touched by cancer in the province of Ontario.

I just want to re-emphasize that one of the single greatest things the province could do is to continue to commit to long-term funding for the Smoke-Free Ontario Strategy. As I said in the presentation, this is \$44 million a year that is right now funded through public dollars. It doesn't have to be. We could ask or force the tobacco industry to do this, based on their market share, and it will allow us to continue to essentially fund tobacco cessation programs and controls through the Smoke-Free Ontario Strategy, things like nicotine replacement therapies and programs that allow free access to those therapies. These are the things that that program funds, which is why sustainable long-term funding is needed. So that's certainly the first thing.

I do have to mention, when it comes to tobacco, one of the biggest things we could do in tobacco prevention is increase tobacco taxes. The World Health Organization and a number of organizations have long recognized the literature on increasing tobacco taxes as it leads to a disincentive to smoke. Supporting those initiatives and helping achieve the federal commitment of less than 5% smoking by 2035 would really be some of the ideal pieces we'd like to see in tobacco control.

Mr. Rudy Cuzzetto: How much time do I have left?

The Chair (Mr. Ernie Hardeman): One minute and 45 seconds.

Mr. Rudy Cuzzetto: What is the percentage of Ontarians that do smoke now? Do we have that?

Mr. Stephen Piazza: Smoking prevalence in Ontario in 2019 is about 13.9%. Approximately 16,000 Ontarians die each year of smoking and 45,000 people across Canada.

Mr. Rudy Cuzzetto: So 16,000 Ontarians die from smoking and 45,000 across Canada, correct?

Mr. Stephen Piazza: Correct.

Mr. Rudy Cuzzetto: Of the 16,000 that do die of smoking in Ontario, are there any other issues? My father, as an example, died of asbestosis, but he was a smoker. Anything like that?

Mr. Stephen Piazza: In that modelling—I believe that's from the Conference Board of Canada—it would have isolated for smoking-related deaths as a primary cause.

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

Mr. Rudy Cuzzetto: Thank you very much.

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

Now we'll move on to the opposition. MPP Fife.

Ms. Catherine Fife: Hello. Hi, Chair. Thanks to all the presenters. I know my colleague MPP French will be addressing the Canadian Automotive Museum, so I'm going to focus on the Interfaith Social Assistance Reform Coalition, ISARC. I want to thank all of you for the work that you do. We do miss that provincial focus when you used to have your lobby breakfast and lobby day. Hopefully, we can get back to that at some point. Listen, we need all the prayers we can get, obviously, these days, but it is good to see you by Zoom.

Greg, you touched on a lot of good points, but I really do want to focus on your last statement where you referenced that on a go-forward basis, for senior care in particular, our long-term-care system should be not-for-profit. We share that view, especially after the stats have come out during the first, second, third wave, and they continue today, where quality of care became a very big issue in the for-profit versus the not-for-profit model. So I wanted to give you an opportunity to put it on the record why you think Ontario should be focused on not-for-profit care, and its connection to the quality and the integrity of that care. Please go ahead.

Mr. Greg deGroot-Maggetti: Thank you very much. It's really quite simple. For not-for-profit care providers, they have a single goal, and that is to provide quality care. All the money that is invested goes towards providing the care, whereas in a for-profit setting there's always the tension between providing care and having to drain away money for profits.

Now, the not-for-profit sector, though, does need additional support from the province, especially when it comes to new builds and accessing the capital to be able to build more long-term-care facilities and upgrade them. That's where our recommendation for the province directly raising those funds at lower interest rates and making them available to more not-for-profit providers can make a big difference.

Ms. Catherine Fife: Yes, and it's absolutely doable, right? The government—it's political will. That's a key part. Also, the not-for-profit sector has come to this committee on several occasions now, year after year, and they have said that they want to be part of the solution, because we do need different models of care for seniors. Not everybody wants to be in an institutional long-term-care situation. You can build community everywhere. I believe that strongly. But the not-for-profit sector actually has community-based smaller models of care where they'd love to be a part of the solution. They just need a partner in the government, so I wanted to pull that out from your delegation. I really do appreciate that.

1530

I'm going to just move over quickly to the Canadian Cancer Society. You know, we did bring forward an opposition day motion on take-home cancer drugs. The evidence, the research, is there. It's more compassionate. It is more equitable to ensure that these drugs can be taken home. I know that our critic France Gélinas from Nickel Belt has been a long-standing advocate for this model, and so I really do appreciate you making the point that—I

believe you said that 20% of Ontarians are still uninsured for that kind of care. Hopefully you can correct me if I'm wrong, but the \$12 million to \$31 million for folks who can't access take-home cancer drugs is of concern to us.

The update on who was smoking in Ontario is valuable. But I also was hoping to hear something about vaping, because the flavoured vaping is really targeting younger people in Ontario. France Gélinas was able to remove the menthol and the flavoured cigarettes, and I feel like we took one step forward and then several steps back on the vaping.

Anybody can take those questions around the take-home cancer drugs and the vaping. Please go ahead.

Mr. Stephen Piazza: Sure. Thank you so much, MPP Fife, for the questions. On the first two points, there is 20% underutilization of take-home cancer drugs in Ontario, compared to folks with comprehensive public coverage. It's \$12 million to \$31 million as the estimated cost to fill the gaps in take-home cancer drugs and have the province act as a second payer.

To the vaping question, it's certainly appreciated. We did see some momentum in Ontario around this with some restrictions on flavours, particularly at convenience stores and gas stations, and a maximum nicotine concentration of 20 milligrams per millilitre at those locations as well.

One of the things we'd like to see in Ontario moving forward has already been adopted in a number of provinces, and that's a tax on e-cigarettes. The federal government will be introducing a tax on e-cigarettes at the federal level on the per-liquid volume, and there is an option for the province to sign onto that taxation as well. Perhaps one of the easiest options in Ontario is simply to adopt that federal tax and have an Ontario portion of that.

Ms. Catherine Fife: Okay. So it's a very similar model to the polluter-pay model that we have here in Ontario. If you are creating the waste, then you have to take some ownership and responsibility for that. Is that correct?

Mr. Stephen Piazza: Exactly. And particularly when we talk about vaping, we're talking about reducing youth vaping. Young people are considerably more price-sensitive than adults when it comes to things like pricing tobacco and cigarettes. We know that from experience. The same thing could be reasonably said to apply to vaping.

Ms. Catherine Fife: Okay. That's excellent. That's good feedback for us to have.

Is the Canadian Cancer Society tracking vaping? Because I see there's been a huge uptake in vaping.

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

Ms. Catherine Fife: There's less stigma than actually smoking a regular cigarette. Are you tracking that? Is that something we should be monitoring as a province?

Mr. Stephen Piazza: Absolutely. There are a number of surveys and data sets tracking this, but e-cigarette use in Canada has doubled over a two-year period and tripled over a four-year period since first becoming legal for use in Canada in 2018. We've really seen that skyrocket of young people taking up these products and really become addicted to nicotine for the first time through e-cigarettes,

which is considerably troubling. There are a number of measures that have been in place in Ontario or were announced in February 2020, and we'd like to see even more work being done in this province.

Ms. Catherine Fife: Thank you so much for your presentation today.

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

We'll now go to round two, independent: MPP Hunter.

Ms. Mitzie Hunter: I must say, Alexander, your setting is the most interesting I have seen on this committee. I've been trying to identify the vehicles behind you. Thank you for sharing that with us today, keeping it very interesting. I do share the comments that you've made around just the importance of supporting the museum sector.

The panel that was here before you came on was talking about the importance of social engagement. Coming out of this pandemic, that is something that we need for people's mental health and well-being.

I'm just wondering, in terms of the cultural supports in the province, if you feel that that is sufficient, or do you have a specific ask for us in the upcoming budget?

Mr. Alexander Gates: Well, our main ask—and the Ontario Museum Association is going to reiterate this ask as well—is specifically to add additional funding to the Community Museum Operating Grant through the ministry. That's the main framework right now for community and heritage museums here in Ontario. Unfortunately, the amount that has been put into it has been the same for, I believe, 15 years now, since before my tenure here. So that's really one of the places that immediate funding would really help. Since that program has stagnated, new museums have opened. There are different types of museums. We have lots of different organizations that are beyond walls. All sorts of different things have developed in the last 10 years, and that program needs to be looked at again to make sure it's really addressing the needs of Ontario museums.

Of course, the Ontario Trillium Foundation is a wonderful partner, as we've seen over the last two years. The adjustments that have happened, how funds have been distributed, have been very helpful for museums, arts and heritage organizations. That's something we hope will continue on, moving forward—particularly with allowing funds from the OTF to go towards operating costs; specifically, for keeping our facilities open, paying staff, continuing on what we're doing in the long term, which is really what we need to do. In the museum world, like government, we have very long horizons that we're thinking of. We're hoping to keep our museum around for over 100 years from now. We want to have these programs in place so we can do long-term funding and not go from year to year, scraping together whatever grants are available.

Ms. Mitzie Hunter: I will take back to Dolf DeJong your compliments from innovations that they did in their first—I remember they were doing those tours through the zoo. I didn't realize that they had developed an app process that has now been adopted and shared. I think that's

wonderful innovation. So I'll make sure to share that with him the next time I run into him.

I do want to thank the Canadian Cancer Society for the work that you do. It's so important and so critical. I'm wondering if you're seeing any trends as a result of the pandemic in terms of the work that you're doing.

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

Dr. Stuart Edmonds: We are seeing some trends, particularly over the first waves of the pandemic, when we saw a significant reduction in the number of cancer screenings that were taking place across the province for breast, colorectal and cervical cancer, and the number of surgeries that were actually taking place as well. That created a number of backlogs, and those backlogs have continued. And there are even further delays to surgery and screening programs that are impacting patients right now, in terms of not being able to get the treatment they need, when they need it, and also not being able to get the diagnosis that they're looking for that allows them to get treatment. There's not going to be more significant treatment in the future if they're not diagnosed early enough. So yes, we're starting to see many trends—

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

We'll now go to the government. Logan, you're on.

Mr. Logan Kanapathi: Thank you to the presenters for your wonderful presentations.

I'll start with the Canadian Automotive Museum presenter, Alexander. You have very good pictures out there. I'm a car lover, and so is my son. My son is a third-year automotive engineering student. He's a car fanatic. The Canadian Automotive Museum is a fantastic establishment that was created to promote the history of the automotive industry and to promote tourism in the area. You mentioned it's not only in Ontario and not only in Canada, it's global. That was a great concept to have.

1540

Unfortunately, the museum, like many other industries, has been heavily impacted by the COVID-19 pandemic. We are seeing that many organizations seem to provide more digital and online content to the audiences. You had mentioned about—I know that MPP Cuzzetto asked a great question; he's also a car lover. Could you explain: Has the Canadian Automotive Museum been able to provide this type of tool and service to car lovers, especially for the younger generation, reaching out to younger people such as school students, automotive engineering students, who have always wanted to know about the industry?

Mr. Alexander Gates: A great question—thank you so much.

One of the things we've been surprised about is the number of young people who are interested in some of our presentations. I used the example of a family earlier that was watching our programs, and he had young children. The traditional audience of, obviously, car owners are typically going to be over 16 years old. What we discovered is that we have families who are tuning in together and learning about this. One of the great things about the topic matter we have is that it really brings together

everyone from young children to their grandparents or great-grandparents, and they're able to participate in our programming.

That said, we have developed specific youth programming. That's one of the things we're really trying hard to reach more into. One of the great things with the Internet is we're able to send out activity books, activity kits and send out materials.

Last summer, for example, we had a wonderful collaboration. We actually had 21 different partners—21—in Oshawa, including health and social service organizations, the Robert McLaughlin Gallery, different museums, dance, film, all sorts of organizations. We actually did take-home camp-in-a-boxes. So you could get a camp-in-a-box and you could pick it up from several different locations. I believe Feed the Need in Durham was one of the distributors, so they knew the families who were most in need of these. We were able to work together in a way that our diverse partners never were before. So having these online, in-person, socially distanced programs have been working really well.

But, of course, these things do cost money. We're looking for more support from the province to continue with these organizations. We have a number of great partners here on the call today from health and social services as well, so I thank them for being here.

Mr. Logan Kanapathi: Thanks, Alexander. One day I'll be visiting your place and—

Mr. Alexander Gates: Excellent.

Mr. Logan Kanapathi: [*Inaudible*]. Thank you.

Now, I'll move to a question to the Canadian Cancer Society. Thank you, Dr. Stuart and Stephen. I do want to thank you and the Canadian Cancer Society for the great work you do each and every day.

The Canadian Cancer Society's Smokers' Helpline and the partner program help thousands of Canadians per year in their journey to stop smoking. The province is committed to helping all individuals in need of support to reach their smoking-cessation goal by providing funding to community leaders and organizations such as the Canadian Cancer Society.

Provincial funding currently supports thousands of Ontarians by providing province-wide counselling and coaching sessions available to all in need of support. Tell me, how has the pandemic affected the smoking rate across the province? What can the province do to further support Smoke-Free Ontario priorities and smoking-cessation programs? Thank you.

Mr. Stephen Piazza: Excellent, and thank you so much for the question, and for talking about some of our support programs and practical support programs. The Smokers' Helpline has sort of moved to a digital component, to smokershelpline.ca, where we would have those products digitally for people.

But we also have things like the Talk Tobacco program, which is an Indigenous-specific smoking-cessation program we run throughout Canada, really looking to specific populations and working toward their specific needs.

Again, so many tobacco-control and smoking-cessation programs in the province of Ontario have historically been

funded by the Smoke-Free Ontario Strategy—historically, \$44 million throughout Ontario. Ensuring that there's long-term funding and long-term support for that strategy is immensely helpful. I digress back to the presentation we made: One of the ways to do this is certainly to make the industry pay, based on market share. There is large centralization in the tobacco industry in Ontario. We're only talking about a handful of companies, so we could do something like this, where they pay, basically, for people to get off the products that they've addicted us to. This has been committed to federally for the \$66 million spent federally on tobacco control.

Just ensuring that we maintain this \$44 million in Smoke-Free Ontario funding for Ontario would be immensely helpful. As I said to the previous round of questions as well, a tobacco tax increase is always a sure way to ensure more people move away from tobacco products.

Mr. Logan Kanapathi: Thank you. My final question—

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

Mr. Logan Kanapathi: Thank you. How do you reach out, especially to new Canadian immigrants coming to Canada? They don't have that much awareness, because in developing countries there is no big awareness group to convince the government to bring smoking—smoking is not good for the people, and for the generations, tobacco has had a big voice in developing countries compared to Western countries. How are you reaching out? How do you commit engagement through the Canadian Cancer Society to that community?

Mr. Stephen Piazza: Yes, for sure. I could start, and maybe, Dr. Edmonds, if you wanted to jump in as well.

I will say the Canadian Cancer Society, as an organization, maintains a number of partnerships with other organizations working in the tobacco-control space—

The Chair (Mr. Ernie Hardeman): That concludes the time for that question. Always when it gets interesting, we have to shut it off.

We now go to the opposition. MPP French.

Ms. Jennifer K. French: I really appreciate everyone's time this afternoon and your important and thoughtful presentations. We also look forward to taking the time and looking at your written submissions. I know there's so much more to say.

My colleague MPP Fife took the opportunity to speak with ISARC. I want to also thank you for the invaluable input you've shared. I certainly hope that the government was hearing your important perspective on not-for-profits. We certainly have been hearing from the for-profit home care folks, who have seemingly quite enthusiastic supporters on the government benches. I'm hoping for that balance of opinion, so thank you for that today.

I'm going to take a moment to welcome Alex Gates to the Zoom committee. Folks, I am a very fortunate MPP. As you heard, the Canadian Automotive Museum is in my riding, and many of the innovative youth incentives or things that draw youth and families in, like Lightning McQueen and a small, child-sized version of Herbie—

there are many pictures of me with them. So it appeals, Alex, to everyone.

I've been very impressed with the Canadian Automotive Museum and how, as you have highlighted, you've not just pivoted, but you've really been quite innovative and, I would say, experimental. The Toronto Zoo's drive-through—I'm disappointed that we don't have a drive-through of the Canadian Automotive Museum. However, we have many floors of parked cars, so it may not be a possibility. But a girl can dream.

I would like to say congratulations, though, because you guys have been unbelievable about applying for just about every grant and every financial opportunity that you come across, and you've been successful. The last time I had an in-person event, I think, was at the museum, to appreciate OTF funding.

What would it mean, though, to other museums like yourself to have that committed government funding? It's wonderful to hear the government members say that they are car enthusiasts and that they love automotive history, but I would love for them to also love the future of that automotive history. What would it look like to have that committed, plannable, so to speak, funding?

Mr. Alexander Gates: Thank you, Jennifer. It's always great to have you at the museum. Sorry, my head is blocking Lightning McQueen right now, so I'm trying to move around so that you get the full view of our gallery.

1550

Having committed funding is really important in terms of long-term planning. In the museum realm and basically anything these days, it seems like it takes a long time. So we put into place multi-year plans for exhibitions, for program development, for renovations, that sort of thing. Unfortunately, with a lot of the funding that comes for staffing from the federal government for summer students, for interns, these are often very short-term contracts. It's great to have a 14-week summer student, for example, but in terms of long-term projects at the museum, it's definitely something we need to solidify staffing, and that needs to come a little bit more from the provincial government.

Right now, with the Community Museum Operating Grant, generally speaking, across Ontario museums usually receive around \$20,000 to \$35,000 from that, depending on which institution. That's generally not enough to keep a full-time curator employed. That's really less than part-time of a year-round position now. One of the reasons this program started back in the early 1990s was to ensure that you could have full-time staff for a lot of institutions. Sadly, a lot of museums across Ontario actually have not even reopened a lot of seasonal sites, a lot of volunteer sites, so the longer these lockdowns and the longer these closures go on, the more difficult it becomes for them to reopen.

Ms. Jennifer K. French: Thank you. I know that sheer commitment to the museum has really gotten us through, you and the board, and a supportive community. I'm very pleased to hear that folks from across Ontario are able to virtually visit. That's great, and that will be able to

continue. I'm going to be a proud MPP for a second, and since you didn't mention it, congratulations again on your award, the Ontario Museum Association's Award of Excellence in Exhibitions.

Mr. Alexander Gates: Thank you.

Ms. Jennifer K. French: For the rest of you folks, it's an exhibition about Oshawa's automotive community, and they had to stop. They finished the exhibit. But now, fortunately, it gets to keep going. So this is a living museum, folks. Thank you for your work.

I want to turn for a moment to the Canadian Cancer Society. I recently met with the cancer survivors, and they have highlighted some of their numbers about how many cancer patients have been having difficulties booking vaccination appointments, with the change in government rules under vulnerability and who gets to get vaccinated, the priority, and that cancer survivors and cancer patients find themselves in limbo, that they don't really know where they fit.

Could you maybe speak a bit to the experience of the folks you are advocating for? Because this pandemic isn't—we're not through to the other side yet. What are some of the other lessons that we've learned that would yield themselves as recommendations to the government?

Dr. Stuart Edmonds: Well, I'll start, and Stephen can add. What we've heard from patients: They're concerned about being forgotten in the pandemic, and anxiety, obviously, about their treatment, their cancer care plans being disrupted during the many waves of the pandemic, and reassurances that things are going to get back on track as quickly as possible. Cancer doesn't cease to be life-changing or life-threatening, even during the pandemic. We appreciate that the health care system is dealing with a massive issue right now, but again, cancer doesn't cease to be a significant disease. Stephen mentioned the number of people we're going to lose to cancer in the province this year, and we're concerned that that's going to increase.

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

Dr. Stuart Edmonds: Stephen, do you want to add?

Mr. Stephen Piazza: Sure. Thank you so much for the question. Just to add, when we've surveyed people facing cancer in our community throughout the pandemic, in our first survey, which was in August 2021, 97% of the respondents, people facing cancer and caregivers, had received at least two doses of the vaccine at that time. This is a population that is ready and willing to get the vaccine and would certainly appreciate any barriers from achieving that being removed from them.

Ms. Jennifer K. French: Okay. Do you have specific barriers that you would highlight for the government? And if you do, maybe a written submission to help shape government ideas.

Mr. Stephen Piazza: Sure, we could add that to the written submission. Absolutely.

Ms. Jennifer K. French: It looks like I'm out of time. Again, thank you to everyone for the important work you're doing across communities.

The Chair (Mr. Ernie Hardeman): That's right. We are at the end of the time. We want to thank all the presenters on this panel for taking the time this afternoon to

contact us. As a reminder, the deadline for written submissions is 7 p.m. on Wednesday, January 26, which is the opportunity to finish all the answers that were cut short by my enthusiasm this afternoon. You can get them in by the 26th, and the committee can read them and use them at their discretion.

Thank you very much again, everybody, for participating.

GOLF CANADA

INNOVATE CITIES

ONTARIO CRAFT WINERIES

The Chair (Mr. Ernie Hardeman): Our next panel: The first presenter is Golf Canada. As with others, thank you very much for being here. We have seven minutes for your presentation. At the six-minute mark, I will say that you have one minute left. When you start, I hope that you will introduce yourself for Hansard, and if there's more than one speaker that they both be introduced before they speak. With that, the floor is yours.

Mr. Garrett Ball: Good afternoon, Chair and members of the committee. I'll be representing Golf Canada on my own today. My name is Garrett Ball and I'm the chief operating officer of Golf Canada. It was actually refreshing to see our friends from the Canadian Cancer Society, one of the callers just previously. The Canadian Cancer Society is our primary beneficiary of our Golf Fore the Cure program.

Golf Canada is a not-for-profit organization and registered Canadian amateur athletic association designated by Sport Canada as the national governing body for golf in Canada. The organization currently represents 305,000 golfers and 1,430 member clubs and businesses across the country, and we're a proud member of the Canadian Olympic Committee. Our mission is to increase Canadian participation and excellence in golf by investing in the growth of the sport and introducing more participants of all ages to the game.

This is an exciting moment for Canadian golf. Our sport has emerged incredibly well through the pandemic as a safe recreational escape that supports the physical, mental, social and family health of so many Canadians. We often say that this sport can be played from the age of six to 86, and beyond.

Course operators have experienced double-digit growth in rounds played over the past two years; 2020 reflected an 18% lift versus 2019, and 2021 saw an additional 10% increase. These numbers represent a 24% growth versus the past five years' average. At the highest levels of the game, Canadian stars and 2020 Olympians Brooke Henderson of Smiths Falls, Ontario; Alena Sharp of Hamilton, Ontario; Mackenzie Hughes, also of Hamilton, Ontario; and Corey Connors of Listowel, Ontario, are having continued success on leaderboards around the world.

With golf incredibly well positioned for continued growth moving forward, I'm here to speak to you about

Golf Canada's home of Canadian golf project, slated for Caledon, Ontario, in the region of Peel. In addition to the co-location of several collaborative industry associations and the reinvigoration of the Canadian Golf Hall of Fame and Museum, the project will enhance golf participation among underrepresented and equity-deserving groups. Grassroots golf as well as high-performance training will also be supported through the building of a 30,000-square-foot public outdoor putting green along with a world-class high-performance centre.

Inspired by the historic Himalayas putting course in St. Andrews, Scotland, the signature element of the home of Canadian golf will be an 18-hole putting course which will serve as a meaningful entry point to golf for thousands of young Canadians. This is the part I am personally most excited about. In addition to being a free-to-use, accessible outdoor recreational facility for the community of Caledon and the region of Peel, the putting green will also serve as the Canadian headquarters for the recently-launched First Tee – Canada program. First Tee is designed to increase access for golf for youth from diverse racial and socio-economic backgrounds. It uses golf as a vehicle to build character, confidence and resiliency.

The program features both in-school and after-school activities through our partnerships with community groups such as the YMCA and the Boys and Girls Clubs. First Tee provides youth with an opportunity to experience golf and develop character, with a goal of transitioning to a green grass facility and enjoying it for a lifetime—the six to 86. In just our second year of operating the program, we're expecting 24,000 children to participate on a national basis, with Ontario acting as the headquarters and first subchapter. This figure will grow into six figures in the coming years.

Designed to develop the next generation of Canadian high-potential athletes, the golf performance centre will identify the next generation of talent, enhance coaching and support science infrastructure. Inclusive of an indoor short-game complex, a strength and conditioning centre, and a swing technique and technology area, the world-class facility will be the first of its kind in Canada and a key component of the Canadian high-performance player development pathway.

With your support, the home of Canadian golf will inspire continued growth and participation, while helping to identify and develop the next Brooke Henderson, Corey Connors or Mack Hughes.

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These are two components of a larger development being privately funded by TPC Toronto and Golf Canada, with a shared goal for Caledon to emerge as a premium tourist destination for Canadian golf, both domestically and internationally. Once all the projects are completed, the region of Peel and TPC Toronto will garner strong consideration to host Canada's most prestigious national championships, as well as innovative events and conferences. Based on our preliminary calendar of events, it is anticipated that those events could generate over \$16 million in economic impact for the region, without even

considering the larger, globally broadcast events conducted by Golf Canada.

Over the past year, Golf Canada has worked with all levels of government to identify a program that could help fund this program. While government agencies and the ministers I have met have been complimentary and supportive, unfortunately, we understand that the funding avenues that would support a project of this significance are either oversubscribed or fully spent.

This is why I'm here today. Our total project requires a \$7.5-million investment, with a provincial request of \$2.5 million. I'm hopeful that the committee will see the positive impacts of the project and recommend its inclusion in the 2022 Ontario budget. The home of Canadian golf will be one of the most transformative moments in Canadian golf: a multifaceted world-class tourist facility that will support community recreational benefits, drive inclusivity and diversity among equity-deserving youth, and become a foundational pillar that supports grassroots participation in high-performance golf. I'm hopeful that with your support, we can make this a reality.

I'd like to thank the Chair and the members of your committee for your time today.

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

We will now go on to Innovate Cities.

Mr. Hugh O'Reilly: Good afternoon, Mr. Chair.

The Chair (Mr. Ernie Hardeman): Thank you very much for being here this afternoon. We will ask, if there's more than one speaker—first of all, you introduce yourself as you start your presentation, and secondly, if there are any more, that they all introduce themselves as they start to speak. You'll have seven minutes for the presentation. I'll let you know when you're getting close to the end. Thank you very much for that.

Mr. Hugh O'Reilly: Thank you very much, Mr. Chair, and thank you, members of the committee, for giving me this opportunity to speak today. My name is Hugh O'Reilly. I'm the executive director of Innovate Cities, and I will be the only speaker today. I assume that your busy meetings commence with a land acknowledgement; I would like to echo that land acknowledgement and note that I have the privilege of making this presentation on lands that have been used traditionally by First Nations, Inuit and Métis peoples.

Innovate Cities is a not-for-profit that has been established to support scaling up companies in Ontario, and in particular southern Ontario. Canada is one of the most successful countries in the world when it comes to start-ups—indeed, it ranks only behind Israel. Where we need to do better is in scaling up companies, and that's actually the focus of Innovate Cities.

What I'd like to talk to committee members about today are two of our fundamental projects that we're working on, which are intended to assist in building the innovation infrastructure that is necessary for Ontario and Canada to succeed in the new world and the new economy, and to continue to be one of the best places in the world to live, work and play.

The two things I want to talk about today are our data trust, which we call CityShield, and the innovation marketplace that we are building. We would like, ultimately, the co-operation of the province of Ontario, both in terms of acting as a participant in our data trust, but as well we would like Ontario to take a leadership role when it comes to innovation in purchasing the products of our innovators.

CityShield is a data trust. Fundamentally, what a data trust is is a means by which data is shared, but the other important aspect of a data trust is that it gives access to innovators to data that they need to innovate. It's almost always talked about, how data is the raw material of the innovation ecosystem. We need to take steps as a province—and, indeed, as a country—to ensure that this data will be available to innovators, to communities and to citizens.

In the absence of taking proactive steps to regulate data access and to promote not-for-profits like Innovate Cities, a concern arises that large private commercial companies, which gather data now, will use that data for their own purposes, may restrict access, or may charge high prices for it. That's why there is an imperative to have a data trust in place.

There's a lot of controversy in Ontario around the concept of a data trust. We have looked at that controversy, looked at those issues, and we have a strong focus on privacy. Ann Cavoukian, the former chief privacy officer of the province of Ontario, is our chief privacy officer. We have an advisory board that keeps us apprised of privacy developments. We're going to comply with the general privacy and data regulation of the European Union, because that's the highest standard. Our data trust will not hold any personally identifiable information, nor will it permit personally identifiable information to be transmitted. Lastly, we'll give organizations that provide data into our data trust control over their data.

In terms of the fiscal challenges being faced by the province and municipalities, I also think that if data is properly handled, it is an asset that the financial value may be derived from. This will give the province and municipalities access to another stream of revenues and allow the province and municipalities to meet certain financial challenges they're now facing while developing a strong economic ecosystem.

The last point I'd like to make—and I'm mindful of the time; I think I have a couple of minutes to go here—is around the issue of our building and innovation marketplace, which we call CityScape. What we want to do in this marketplace is to bring innovators and customers together. We intend to qualify the innovations that make it onto our marketplace, with a view towards levelling the playing field between multinational large tech companies and Canadian innovators. Canadian innovators may indeed have better products, but it's a big risk to buy something from a company you haven't heard of or you're not sure about. That's why we want to qualify the innovation that reaches our marketplace—to make those decisions easier and to help de-risk the decision.

The last point I'd like to make is, I think the province could play a stronger role in promoting innovation if it were to look creatively at its procurement practices. We are advocating for the creation of pilot projects or test examples, where the province would be amongst the first purchasers of new technology. They would use the technology. It would expressly be a pilot project, such that when the Auditor General, in fulfilling her very important role, looks at the way that the purchases have been made and how things have been done, it will be assessed against the pilot project. If the province becomes the first purchaser, if it promotes innovation through becoming a customer, this will make it easier for our innovators to raise funds. It will make it easier for our innovators—

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

Mr. Hugh O'Reilly:—and it will allow innovation to play an even stronger role in Ontario's economy.

I appreciate that in the context of seven minutes it's difficult to present all of these issues. We will be filing a written submission on these topics. I look forward to answering any questions you may have.

Again, I really appreciate the opportunity to speak to you, Mr. Chair, and your colleagues today. I thank you very much for the time you've taken to listen to me.

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

Our next presentation is from Ontario Craft Wineries. I see a number of faces on the screen, so it seems like we're here and ready to go.

You will have seven minutes to make your presentation. I will let you know at six minutes, when you've reached there. If there's more than one speaker—even if it's only one speaker, please introduce yourself before you speak so the Hansard can have that recorded.

With that, we'll turn it over to Debbie Zimmerman.

Ms. Debbie Zimmerman: Thank you very much, Mr. Chair. It's wonderful to see you again. I'm going to be sharing my time today with Richard Linley from the Ontario Craft Wineries and Aaron Dobbin from Wine Growers Ontario, but let me begin by expressing our gratitude for the invitation to appear today as part of your pre-budget consultations.

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We are here because we are aligned on key recommendations as part of this year's pre-budget consultations, and your government's budget theme about building tomorrow. As a made-in- and grown-in-Ontario industry, our grape and wine sector supports 18,000 jobs in the province and contributes over \$4.4 billion annually to the Ontario economy. Pre-COVID, the wine and grape industry also developed a very loyal tourist following, welcoming over 2.4 million visitors annually to our wine regions across Ontario. We remain committed to working with the Ontario government to ensure the viability and the growth of our sector so we can continue to be part of strengthening and growing Ontario's economy and recovery from the pandemic. To this end, we are pleased to submit a summary of our recommendations as part of the 2022 pre-budget consultations.

But first, some context: Today, a large portion of Ontario growers and wineries are unsustainable. Even before the COVID-19 pandemic, a majority of Ontario's grape growers captured in the OMAFRA farm financial analysis summary and small wineries surveyed in both the Ontario Wine and Grape Industry Performance Study are operating at a loss every year. While the industry appreciates the government's much-needed COVID-related financial supports from the past year, the industry has long faced structural and legacy issues that have hindered the growth of the industry and threatened its long-term success.

I'll now pass it over to my colleague Aaron Dobbin to discuss solutions and our industry recommendations.

Mr. Aaron Dobbin: Thanks, Debbie. My name is Aaron Dobbin. I'm the president of Wine Growers Ontario.

To ensure our sustainability and grow to our potential, Ontario grape growers and wineries need stable, predictable policies that maximize our business operations and promote growth. Furthermore, we are recommending Ontario take a page from other Canadian jurisdictions that have created the necessary conditions for their grape growers and wineries to thrive and compete on the world stage. In short, we are asking for more stability, more income security and more peace of mind as the foundation we need to stabilize, thrive and continue to grow and contribute to Ontario's economy.

To achieve these conditions, our industry needs to be able to sell more wine at improved margins. The best way to do that is to stop hindering us in two of our most important retail channels. We are calling on the Ontario government to adopt the following recommendations in the coming budget. One, eliminate the 6.1% basic wine tax charged on VQA 100% Ontario-grown wines. This is a punitive tax measure imposed only on Ontario wineries that sell their own wine from their cellar doors. None of our competitors pay this type of tax either in their province, their country or, more importantly, in Ontario. This is a tax on Ontario jobs, Ontario small business, the Ontario family farm and agri-tourism. Secondly, we are asking to uncap the VQA wine support program to bring industry supports in line with British Columbia. This could be done through a fully funded, revamped and permanent VQA wine support program. This will encourage investment in the local Ontario industry, similar to what we have experienced in BC.

Lastly, building on these two critical foundation supports, we recommend that the government reconvene the wine and grape secretariat with measurable targets, with a view for long-term growth for both grape growers and wineries. Of note, the current VQA wine support program at OMAFRA expires in April 2022 and without a new program, an estimated 75% of Ontario wineries and 30% of Ontario wine will exit the LCBO. We also compete against highly subsidized imports in our own backyard. The EU alone provides over \$2 billion annually to their wine industry to compete around the world, including in the LCBO. Our highly competitive import market equates

to a David versus Goliath scenario on our home turf, while we continue to be the underdog.

I'll now pass it to Richard to talk about investment and job creation.

Mr. Richard Linley: Thanks, Aaron. My name is Richard Linley. I'm the president of Ontario Craft Wineries.

The key recommendations outlined by Aaron today will lead to a number of key outcomes that will be beneficial to the industry and government, including increased investment in marketing, labour, capital and grape purchases. The VQA support program will also drive domestic investment in promotion and marketing at the LCBO, leading to improved market share for our domestic industry, which has been stagnant for many decades. To capture this, and all in, the combined benefit of these recommendations is an estimated 3% market share gain for our sector, \$75 million in new LCBO VQA wine sales, 1,200 new jobs in rural Ontario and increased demand for premium local-grown grapes. I should also mention that every 1% increase in market share for VQA wines sold through the LCBO represents 1.97 million bottles of additional sales, 2,000 tonnes of additional Ontario grapes, 400 new jobs, with an economic benefit of \$85 per bottle sold or \$168 million of new activity in the Ontario economy.

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

Mr. Richard Linley: To close, the GGO, the OCW and WGO are proud to be at the forefront of the Ontario grape and wine industry's evolution into a world-class wine region. We are grateful for the Ontario government's ongoing industry support and look forward to our continued collaboration with all the parties on our budget recommendations. On behalf of all of us, Debbie, Aaron and myself, thank you again, Mr. Chair and the committee, for your time and attention today.

The Chair (Mr. Ernie Hardeman): Thank you. With that, we will start the questions. We start the first round with the government first. MPP Roberts.

Mr. Jeremy Roberts: Thank you to our three groups who were presenting this afternoon. All very informative presentations covering a wide variety of topics—much appreciated.

I'm going to start my questions with Hugh, if I can. Hugh, thank you for the presentation. Very interesting. I'll admit, this is the first time I've heard of your organization, so I've been doing a little bit of googling in the meantime, learning a little bit more. In Ottawa, where I'm from, we have Invest Ottawa, which is helping a number of start-ups. I'm just curious if you can paint me and my colleagues a bit of a picture on what some of the start-ups are that you're supporting. What do some of them look like? And how does your organization fit in with other organizations like Invest Ottawa? What's your unique selling point or mission?

Mr. Hugh O'Reilly: Thank you very much for your comments and your question, MPP Roberts. Here's how I would answer the question. We are more focused on scale-ups, as opposed to start-ups. We are working with a

number of incredible Ontario companies, and I will give you some examples. If you'll forgive me, I'm going to start with an Ottawa one first: Relogix. Relogix has an incredible sensor system. They're literally peel-and-stick sensors. When they're combined with the platform that is provided by Fogwire, which is a smart-building, high-IQ technology, when those two products work together—it's a different offering of ours, which we call CityStack—you can actually help achieve real gains in terms of retrofits and more efficient use of utilities. We also have an ability to help workplaces return to work safely, from a COVID perspective. Those are a couple of examples.

Our data trust is provided by Sightline Innovation. Our data storage partner is an entity called ThinkOn. We work collaboratively with all the players in the innovation ecosystem, but what our objective is—and I think it's something that we do that is unique: We are in the process of building the innovation infrastructure. We are building the data trust, and this data trust is going to put Ontario, I think, in a very advantageous position in terms of the role it can play with respect to innovation and economic development.

We're also in the process of building a marketplace. We will do more work around outreach across southern Ontario to get other players involved in our marketplace. The data we're using is—we do have a relationship with the Toronto Region Board of Trade, but we also have relationships with a number of organizations.

I'm hopeful I've answered your question, but I'd be happy to keep in touch and answer anything more you might have.

Mr. Jeremy Roberts: For sure. So is one criteria, then, that some of the companies you're supporting to scale up—do they have to have a social impact metric attached to them? Is that a part of it?

Mr. Hugh O'Reilly: No. Well, social impact metrics are, of course, important, but we want to work with any innovation company in the province of Ontario.

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Mr. Jeremy Roberts: Sure, that makes sense. A follow-up question for you—two other things that are bouncing around in my head. The first one: Are there any jurisdictions on the marketplace piece, any jurisdictions worldwide that are leading on this right now that are good examples for Ontario to look at? You mentioned the EU when you were talking about data and I know, for example, that the UK has done a lot to foster a good sandbox for fintech, for example. But I'm curious: Are there any other jurisdictions that are good models for us to be looking at?

Mr. Hugh O'Reilly: We recently attended the Smart City Expo in Barcelona. There are two things we're doing that I believe to be unique. I understand the risk I'm taking in making that statement, but the two things we're doing that are unique is the way we want to structure this marketplace, because we're going to use the expertise of venture capitalists to tell us, to qualify the innovations that reach the marketplace, to help make the decision whether or not you're going to purchase, to innovate, to make that different.

Second is the way we've established our data trust, where we will act as a not-for-profit public utility, respecting privacy and all these other standards. While Europe is a good deal further ahead of North America in terms of data-sharing, this was thought to be a unique offering on our part.

Lastly, when it comes to promoting local innovators, I think other jurisdictions do a better job at it. I think we, as Canadians, need to get a good deal more bloody-minded about it. And I think we need to use—when we think about the power of government, its spending and its procurement decisions could play a fundamental and important role here. I know the province of Ontario is doing a lot of work in terms of digitizing the government, the intellectual property agency. But I'm arguing in favour of explicit experimentation and being open with the public, being open with the Auditor General, being open with members of the Legislature. This is really important if we're going to move forward and if we're going to continue to be one of the leading countries in the world.

Mr. Jeremy Roberts: Absolutely. I'm sure my colleague from Waterloo and I are both smiling here, thinking about opportunities we have, because west-end Ottawa and Waterloo are such competitive centres for tech to begin with. So, I appreciate that. I think that's a good message for the committee to be considering, how we can further that competitive advantage.

You already mentioned what was going to be my last question, and that's on some of our existing work in government on digital government and digitizing government services.

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

Mr. Jeremy Roberts: Of course, last year we brought in our first ever Minister of Digital Government, Minister Rasheed, and he's been going through the process of trying to figure out how we do a better job at streamlining government services for the 21st century. In our last minute, can you talk to me a little bit about how your organization could potentially work with this new ministry to help get things for Ontarian constituents that would, as I say, be in the 21st century for services?

Mr. Hugh O'Reilly: Well, I think there are a few things there: one, if the province participated in the data trust. I think the province could also use the data it holds—if it decided to realize on the financial value, I think that that could help fund all sorts of programs and could do it in a way that's helpful. I think that digitizing government is important—

The Chair (Mr. Ernie Hardeman): Thank you very much. Your time is up. We'll have to save the rest of that for the next round.

We now go to the official opposition. MPP Fife.

Ms. Catherine Fife: Thanks to all the presenters. I have some questions for Hugh. Hugh, I don't think you've ever presented to the finance committee before. Is that correct?

Mr. Hugh O'Reilly: I presented when I was the president and CEO of a major Ontario pension fund, but I haven't done it in my capacity with Innovate Cities.

Ms. Catherine Fife: Okay. Well, it's good to see you again. We've crossed paths in different contexts. On the website, you call yourself a non-profit ecosystem, which is language that is often used here in Waterloo region, and you're trying to make the case, I think, for the government to become a customer of purchasing innovator products. Give us an example of what some of those products would be, please.

Mr. Hugh O'Reilly: Sure. The products range from, for example, the ThoughtWire product, which could help government in terms of meeting its climate goals, in terms of retrofitting buildings, doing it quickly and doing it easily. The ThoughtWire platform also, in fact, originates in the health care sector. It could help in terms of managing health care, COVID outbreaks and these sorts of issues. Relogix sensors are another example.

The data trust itself that we're building is something that I think is a critical, foundational piece where we can have municipalities put their existing open-portal capabilities into the system, in different innovation areas. When we talk about building an ecosystem, we're building it both in terms of having participation in our data trust, having innovators and others participate in it, and also in building our marketplace. We have other activities as well.

But we think it's really important, if you'll forgive me for torturing this metaphor, to make the digital concrete, to make it real, to make it something where—you know, people love talking about ecosystems; we actually want to do it.

Ms. Catherine Fife: Okay. There are obviously some cautionary tales here around collecting data: who owns the data, who protects the data, how you acquire the data. This became a huge issue with Waterfront Toronto and with who was actually going to own the data, because it has value. The commercialization of research is definitely connected to that data, and how you use that data can come into question. People are obviously very worried about how data can be manipulated, as well.

Talk to me a little bit about how Ann Cavoukian works within your organization, if you would. I mean, she's very well respected, and she has been critical of some of the privacy breach at the federal level; for good reason, she called them out on that. Can you talk to us a little bit about that first?

Mr. Hugh O'Reilly: Sure. We're conscious of all of these issues. Ann Cavoukian is our chief privacy officer. She has the ability, if someone were to complain, to investigate that. She has the ability to go directly to our board that will be in charge of the data trust. We have an advisory board that keeps us apprised of community concerns and privacy legislation. We will do annual privacy audits. We will disclose those privacy audits to the public.

And then we have a bunch of technological protections. First of all, you don't have to deposit your data into our data trust; you just have to give us access to it. The organization itself will control who gets to see their data. We will not have any personally identifiable information in the data trust, and it's a zero-copy system.

We looked at those issues. We understand the importance of privacy and that's why we're going to abide by GDPR. We know the province and others have initiatives under way, but GDPR is a good deal stronger than any Canadian standard that's currently out there.

Ms. Catherine Fife: And your selling point is de-risking the decision-making?

Mr. Hugh O'Reilly: A couple things on the data trust: Our selling point, and you identified this, is twofold. One is our governance and our privacy. The second is that you don't have to give us your data; you just have to give us access to it, and then you can decide who gets to see it.

Our selling point around our marketplace is that we can de-risk the innovation decision for private companies that are looking to buy products.

Ms. Catherine Fife: Is this your initial outreach to the government, or are you already in discussion as to how to address this, first of all from an innovation perspective, but also procurement?

Mr. Hugh O'Reilly: We have had some conversations with the province. We haven't had a lot. We want to have more. Remember, we had to change our strategy. We were going to bring smart building tech to the built environment. The pandemic rather upended that approach. The conversations we've had with the province have been good conversations. They've been helpful. But the province at the moment, particularly at the moments we were speaking to them and the people we were speaking to—they were at the pointy end of the pandemic. They were quite overwhelmed, and legitimately so.

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Ms. Catherine Fife: And that's understandable.

The procurement piece is interesting, because the government is trying to modernize procurement, with Supply Ontario as the one-stop portal.

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

Ms. Catherine Fife: I did try to bring forward a private member's bill to diversify the procurement chain and also create better local systems whereby we would be supporting more local economies—and also, especially, to become more resilient and independent as a province by securing and procuring local products. I think there's definitely value in that. The government chose not to support diversifying the procurement chain, but I may get another opportunity to try to convince them otherwise.

I wish you well, Hugh. It's good to see you again. Thanks for bringing such an interesting concept to finance committee. That's all my questions, Chair.

Mr. Hugh O'Reilly: Thank you.

The Chair (Mr. Ernie Hardeman): Thank you very much. We'll go on, now, to the independent. MPP Hunter.

Ms. Mitzie Hunter: I want to thank all of the presenters today for doing an excellent job.

I'm going to start with Hugh O'Reilly. It's very good to see you. I want you to expand on the comment that you made in your presentation around Ontario and Canadian innovation being "better," actually—that's what you said—than what we see in other markets, such as the

United States, where the struggle is moving from the concept and the idea to scale and market. That is something that has been a known challenge, but you're proposing a solution that looks at helping to de-risk.

As I was listening to you, it's almost as if there's a certified seal that will boost the brand of these Canadian innovations—Ontario-made—which we know are coming out of a fabulous innovation ecosystem that is naturally occurring here with our universities and our various institutions. There's a lot of brain power going into them, but what we need is the marketing power. What you're saying is, let's help them get to scale here, rather than having to be scooped up and expanded elsewhere. And it's not just in the United States; there are other countries that are now coming in and mining what we're developing here in Ontario.

Can you, for the benefit of the committee, just expand on that a little bit? Because there's huge opportunity there to create jobs and to flourish.

Mr. Hugh O'Reilly: Thank you very much. I guess we're both a long way removed from pension reform, which was, I think, when I initially met you, when you were playing that role.

What I would say is this: Canada has incredible innovation talent. Some years ago, I worked on the Toronto Stock Exchange's Advancing Innovation Roundtable. What our study demonstrated conclusively was Canada is the second-most successful country on planet Earth when it comes to start-ups. Only Israel ranks ahead of us.

Where we don't do as well—in fact, we do quite poorly, relatively speaking—is on the scaling up. I think we need to take some policy initiatives that, viewed a certain way, could be seen to be bold, but they're necessary, they're important, and they're going to help us continue where we are as one of the best and most prosperous countries in the world.

The marketplace we're building will fall a little bit short of a certification, but we will say we've had these partner venture capitalists look at this tech, evaluate it, and it does what it says it does—because that's a big risk. If you're making a decision and you're the person buying the product to make the elevators work the right way, boy, you don't want to mess that up. If it's a choice between some Canadian innovator you've never heard of and a brand-name tech company, that's where we have a disadvantage, so we're trying—

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

Mr. Hugh O'Reilly: And then the second point I would make is this: We think that pilot projects, described as such—this can play an important role that the province can play. Supervising the public purse, which, of course, all of you are actively involved in—that's the fundamental function of the Legislature—is important; same with the Auditor General. If we design a program that says, "This is what it does. This is its purpose"—and look, some of them are going to fail. Even the ones that fail we're going to learn from, and we're going to build Canadian jobs, Canadian businesses.

The innovators I work with, when we think about smart buildings, that keeps people employed across the value

chain, from the people who install to the people who invent—in member Fife's riding. This is critical. We can do this. We can win this.

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

We now will move on to the second round. We'll start with the government. MPP Crawford.

Mr. Stephen Crawford: Thank you to all of our presenters here today. I hope to get to all three of you, but given the little bit of time, that may not be possible.

Let me start with the Ontario Craft Wineries. I can speak for the members of the Legislature—we have an annual wine tasting of Ontario wines every year here, and I'm sure to get a couple cases every year to hand out to people. I certainly appreciate the great wineries we have here in Ontario.

I have a number of questions and I certainly want to get your thoughts on them, starting with—in more general terms, I just want to get a sense as to how the wineries have fared and how they foresee faring with greater access to consumers buying wine. Is that something that your particular group of wineries is supportive of? What's your take on that?

Mr. Richard Linley: Thanks for the question. I'm sure Aaron and Debbie will also have some perspective on it.

Retail distribution is a challenging discussion because the two most important things in our industry are distribution but also competitive margins in terms of us being able to compete in those channels. As we alluded to in our presentation, we're happy to compete in our home market against imports as long as we have the proper margins to compete against imports which are heavily subsidized. There have been a number of retail iterations—ideas and proposals have been put forward. There was some expansion into grocery, which has been net positive for medium- to big-size wineries, I would argue, in the marketplace. There have been some changes with bottle shops, which were in response to COVID-19, which certainly changed the way restaurants do business and how we get our product to market, but we haven't necessarily seen an uptick in terms of getting our wine into restaurants as part of the bottle shop opportunity. And then our main distribution channel has been, of course, the LCBO during the pandemic.

Even though we saw consumption increase through the pandemic because people were staying home and had more money to spend, we're starting to see that slow down over the last six to eight months.

The Master Framework Agreement with the Beer Store is set to run out in 2026. If we did have a request to the government and all parties, it's that they properly engage with the industry through OCW, Wine Growers Ontario and Grape Growers of Ontario to make sure that if there is an expansion or changes to retailing in the province, that we're properly consulted to make sure that—what those retail distribution opportunities are, that they're beneficial for the sector.

I'll leave it to Aaron and Debbie to jump on that.

Mr. Aaron Dobbin: I think one of the things that—not necessarily under the radar—but the government expansion of alcohol retail has been quite substantial in the last couple of years, and I think one of the biggest ones was with the assistance that the restaurants needed and the creation of the bottle shops. The restaurant sector was very, very hard-hit by COVID-19, and a number of restaurants moved to creating bottle shops to diversify their revenue stream. There are thousands of bottle shops now, and the challenge we have is—we made reference to the over \$2 billion in subsidies that the EU gives their wineries. Well, that money ends up getting spent by imports, working deals with the restaurants so that they have primary or exclusive access to those bottle shops. In a number of instances, we have seen that we've essentially created private wine stores for imports.

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It's very, very difficult for our industry and our members to compete when the agents for those import wines are bankrolled by the EU government and Spain and Italy and France. They bring millions of dollars to our shores to spend on merchandising and promotion, and we simply can't compete with that kind of money when their governments are giving them, in Europe alone, over \$2 billion annually.

Mr. Stephen Crawford: Okay. And one of you mentioned about the—

Ms. Debbie Zimmerman: Can I just add to that?

Mr. Stephen Crawford: Yes, sure.

Ms. Debbie Zimmerman: Sorry. I know there are three of us, so it takes a little more time, but I just wanted to mention that we represent the Grape Growers of Ontario, so we're the 500 farm families that manage the greenbelt in three different viticultures across the province.

The interesting point, to your question, is that we only own 6% of our market share here in Ontario. Even though we're the largest wine region in Canada, BC outpaces us by doubling that. It's a sad situation when we as growers, in an agriculture-based and, I would say, a vertically integrated business in this province, won't have access for our grapes to the LCBO because the imports own it. It's a really great question you ask, but the solutions we put forward, we think, will move that needle for us.

Mr. Stephen Crawford: Yes, actually, that sort of ties into my next question, which was about the wine support program you mentioned in BC. So I wanted to ask about that, but secondly, I think you touched on a point which I was going to ask about, which was the percentage of wines sold in Ontario that are from Ontario. Did you say it was 6%, and then 12% for BC?

Ms. Debbie Zimmerman: Six per cent at the LCBO, yes.

Mr. Stephen Crawford: At the LCBO. And for BC it's 12%, so they have double the market share?

Ms. Debbie Zimmerman: Yes.

Mr. Stephen Crawford: Okay.

Ms. Debbie Zimmerman: And I think the point that was made earlier—and my colleagues can jump in—is that

1% growth at the LCBO is \$168 million in economic benefit to the province. The program we're asking for, just the 6.1%, is \$5 million. We're not asking to take a lot out of the system. We're saying we want to and we can put more back into the system—

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

Ms. Debbie Zimmerman:—with a business that is actually completely rooted in Ontario, from the land that we grow grapes on to the wine that is produced and sold in Ontario. It's an opportunity.

Mr. Stephen Crawford: Okay. I know that with some of the beers going into grocery stores, some of the craft brewers have talked about how they've actually gotten more market share being—I guess there was worry that the big companies would dominate. How would you foresee that in the wine sector? Would you see that some of the smaller Ontario wineries would get that shelf space, or is that perhaps a concern, that you will be left out?

Mr. Richard Linley: I can jump on that, Debbie, if you want. There is a shelf space allocation for small wineries right now in grocery, which has been helpful. The industry's market share in grocery has hovered above 30%, but it has slowly declined over the last couple of years—

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

We'll move on to the opposition. MPP Arthur?

Mr. Ian Arthur: I'm going to start with the wine growers, briefly, because I have a couple follow-up questions from what you were saying. The bottle shop issue, or the monopolies: Would there be a non-revenue way of requiring a percentage of those bottle shop sales to be Ontario, or at least for the offerings to be Ontario? Is there a legislative way around that, to give you more access?

Mr. Aaron Dobbin: It's very, very challenging, because it's such a large number. They're operating under their restaurant licence; not every restaurant that has a restaurant licence that sells alcohol—they're not all bottle shops. For some of them, in the spirit of what was proposed, it's an add-on to their revenue stream, whereas some—you can go to a number of bottle shops in Toronto where you can buy three bottles of wine, and as long as you buy a cookie, you're abiding by the rules. They're so pervasive now that I think it's a challenge.

Mr. Ian Arthur: It would be hard to regulate that. Okay. Now, the 6.1%, you set a \$5-million price tag on that, but then there was a stat given about what that decrease in government revenue would actually create in terms of economic activity. Where has that been modelled?

Ms. Debbie Zimmerman: Where has that been modelled?

Mr. Ian Arthur: Yes.

Ms. Debbie Zimmerman: Well, there's a report called Rimmerman, which in fact is going to be updated—Aaron, I think not in too much longer? But there's an economic impact. There are studies that—we work with the government on the VQA support program; they call it the Deloitte

performance study. It was done in-house last year and it will be done again in-house this year. But it's those collections of information, where we know the impact of the sales we have, right through to the retail sector, from growing grapes right through to a bottle of wine and the impact. A lot of our wineries are not just wineries; they're wineries and restaurants, and the economic impact from tourism, particularly in the Niagara region, is significant.

Mr. Ian Arthur: And is the tax revenue modelled out in that—so, increases in Ontario tax revenue as an offset?

Ms. Debbie Zimmerman: Yes, exactly. We've modelled in many which ways to Sunday, as they say, to quantify the economic impact—

Mr. Ian Arthur: Okay. I don't have a lot of time, so thank you for that.

I'm just going to switch over to Hugh, because I have a couple of questions. I'm really interested in what you spoke about, Hugh: the need for investment, that some will fail, the comment that you made. That's the DARPA method, and it's led to incredible innovation in the States, that sort of access to funding, and then the subsequent funding to grow the business. I fully appreciate what you say, that we have tons of start-ups, and then they either sell to foreign companies or they don't grow anymore, because you hit that roadblock where the growth investment is simply not there.

I don't know if you've heard of Round 13 Capital and a couple of other groups that are trying to address this very issue of the growth phase for these companies. We create technology, and then we lose it to an American company that's willing to put the money up to get that company through its growth phase.

Mr. Hugh O'Reilly: Yes, Round 13, Yaletown ventures out of Vancouver, and Kensington all focus on this part. I think the tricky part will be to—I hope all members will forgive me for this: There's a need to depoliticize the conversation around pilot projects so that it's not presented as wasting money. Even if something fails, as long as there's commitment from the innovator and from the government organization or agency to document the failure so that people can learn from it, it's a win. We really need to win as Canadians. We're going to be talking about owning the podium shortly. This is an owning-the-podium methodology for innovation companies.

Mr. Ian Arthur: Yes, absolutely. I like the idea of the certification, if that can provide some sort of—not security, but I guess additional incentive to provide that investment to those growth companies.

I don't have a lot of other questions other than I probably am going to give you a call and talk about this stuff. I don't know if you've read a lot of Mariana Mazzucato's work on innovative state and the ability to kick-start huge growth sectors with targeted government investment and the willingness to allow certain projects to fail, because the ones that succeed can surpass your wildest dreams in terms of what they contribute to an economy and the country.

Mr. Hugh O'Reilly: Yes, I would welcome contact with any of the members on the committee and, of course, we'd be delighted to talk to you, sir.

Mr. Ian Arthur: Yes, and I would also say I agree with depoliticizing the conversations around pilot projects and that sort of thing, because we need to invest in this growth all across Canada: in Ontario and everywhere. It's a no-brainer, and I think it is something where you would find alignment, I would hope, between all the parties on these projects.

I have no further questions, Chair. Thank you.

1650

The Chair (Mr. Ernie Hardeman): Any more, with a minute and three left for the opposition?

We'll now go to the independent: MPP Hunter.

Ms. Mitzi Hunter: I can't help but come back to Hugh to talk about the other side of this, which is the province as the first-purchaser concept and a first customer, because you have so much experience in the broader public sector and an understanding of that. And so, I'm wondering how it works in practice. I know you're out there in the ecosystem; there are other spaces that might do this in different ways. Can you speak a little bit more about that?

Many years ago, when I was in the private sector working for the information and communications technology sector, the province created a new media fund, and that was really designed to make those investments in those new media companies that were growing very, very rapidly. This was at the beginning of the e-space in all of its forms. So, can you talk about how we action this, in terms of the province as the first customer? Do we do it by sector? Is there one area that you believe would be better suited?

Mr. Hugh O'Reilly: Totally. There are a few things I would say. One is I think if time and energy and resources were devoted toward this notion of pilot projects and if a real effort was made—and we've seen this, sure, in the course of the pandemic. There have, of course, been legitimate political disagreements, but also during the pandemic, we saw incredible unity politically. I think we need a similar unity around these pilot projects and loosening some of the rules for municipalities as well, because the pandemic demonstrated concretely the need for us to invest in innovation and to bring our economy forward and return to a world where if you graduate high school, you can get a good job. I think the province has a capability to kick-start it. So that's the first place I would start.

Funds are important and useful, but I would target them around things like the data trust we're seeking to build. The reason why I would do that is we could continue to add to the ecosystem. We could also put the province in a place where municipalities and other organizations could gain financial value for their data, and there's also a real need to overcome the digital divide, and a data trust can play that role. The technology we use means if someone logs into the system to gain access to the computing power of our cloud provider, which is important—and we can

also look at expanding the Internet in community housing projects, rural areas. But we need to overcome this digital divide, because there's too much that breaks us apart as a society. We've got to start bringing things back together, and I think the data trust can help with that. The vendor of record is another thing—

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

Mr. Hugh O'Reilly: I apologize, Mr. Chair.

Ms. Mitzie Hunter: That's okay. Hugh, thank you. This is to be continued, for sure.

I want to thank all of our presenters: Golf Canada and Debbie Zimmerman and the team at Grape Growers of Ontario for your work. Debbie, having noted your comments around those 500 families that are producers, and it's almost on a technicality that they can't fulfill their full potential in this province. I certainly think you guys have done the work on branding Ontario wines, so we should be exploiting that as much as we can.

The Chair (Mr. Ernie Hardeman): I thank all the presenters on this panel for your presentation and the time you took to be here with us this afternoon. We also want to remind all the presenters: The deadline for written submissions is 7 p.m. on Wednesday, January 26, 2022. So all the good stuff that you have not yet told us, put it in writing, get it in the mail, and we'll be reading it before the budget comes out. Thank you again for doing that.

Before we move on to the next presenter, we have to have an attendance check-in. We have MPP Stiles joining us for the next presentation—if she would introduce herself and tell us where she is this afternoon.

Ms. Marit Stiles: I'm Marit Stiles, MPP for Davenport, and I'm here in Toronto.

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

INTERNATIONAL ALLIANCE
OF THEATRICAL STAGE EMPLOYEES,
LOCAL 58
TORONTO SYMPHONY ORCHESTRA
ELEMENTARY TEACHERS'
FEDERATION OF ONTARIO

The Chair (Mr. Ernie Hardeman): Now we'll go to the panel that we've been waiting for all day. The first presenter on that panel is the International Alliance of Theatrical Stage Employees, Local 58.

As you get ready to introduce yourselves, I would just suggest that as you start your presentation, give your name for Hansard. If there's more than one speaker, each speaker should identify themselves for Hansard too. The presentation is seven minutes. I'll give you a warning shot when there's one minute left.

With that, the floor is all yours.

Mr. Justin Antheunis: Thank you very much. I know we're the most anticipated because we are the last of the day, so I will keep this as brief as possible.

Thank you for the opportunity to speak today. I'm Justin Antheunis, president of the International Alliance of

Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts, Local 58, in Toronto.

The International Alliance of Theatrical Stage Employees, better known as IATSE, represents 7,500 workers in the entertainment sector in Ontario. IATSE Local 58 has proudly represented stagecraft technicians in Toronto for more than 120 years, providing skilled labour to employers such as TIFF, Mirvish Productions, the National Ballet of Canada, and Soulpepper.

We are proud to say that the work IATSE members do behind the scenes as carpenters, electricians, wardrobe attendants, box office personnel and more creates the magic that has made Ontario one of the top three live performance destinations in North America. From Toronto to Stratford, Niagara-on-the-Lake to Ottawa, live performance and live events drive the local economies. The arts and culture sector employs more than 250,000 workers in the province and contributes more than \$25 billion to the Ontario economy. This \$25 billion represents a larger portion of the GDP than the agricultural, forestry, fishing and hunting and utilities industries combined.

But this sector is struggling because of the effects of COVID-19 on audience capacities and tourism. The unknowns of where the audiences have gone and when they will come back mean that we need to find ways to ensure that the economic driver that is live performance in this province can both bounce back quickly and expand further to reclaim the mantle of one of the top theatre centres in the English-speaking world.

The Stratford Festival generates more than \$140 million in economic activity for the surrounding community. It also supports over 3,000 jobs in the area—1,000 directly with the festival and 2,000 indirectly through tourism and hospitality activity.

The production of *Come From Away* in Toronto, over its 855 performances, generated \$920 million for the economy and created 9,000 employment weeks for the cast, stage managers, musicians, crew members and front-of-house workers. But *Come From Away* is the warning sign that this sector is in dire need of continual support. This show should never have closed. It is the Canadian story of hope during adversity that is the perfect antidote to how we have been feeling. It closed, however, because the producers couldn't afford to keep investing in this show without support.

We need to see short-term government-backed insurance plans for events that need to temporarily close due to either audience restrictions or due to COVID-19 outbreaks. This will allow for an event to cover the lost potential ticket revenue during these shutdowns.

The long-term support, however, is right before our eyes. We need to look no further than the film and television sector to see what has made that sector boom in this province—and that's the film and television tax credits. We also need to look at our competing markets in the United States and the performing arts tax credits in New York state, Louisiana and Illinois, just to name a few, to see the impact that these tax credits have had. Why did productions of *Wicked* and *Hamilton* choose to have long-

running productions in Chicago instead of Toronto? Tax credits. Why did these shows do their pre-Broadway tryouts in Chicago or mount touring productions in New Orleans? Tax credits.

1700

Coming out of this pandemic, we need to incentivize producers to spend money on creating productions to draw the audience back. By running two parallel programs—a tax credit for commercial producers and a rebate program for not-for-profits—that are tied to development work and directly linked to employment, like the tax credits found in film and in New York and Illinois, we can not only provide support coming out of this pandemic, but also increase the amount of productions in this province, which will then in turn contribute even more to the Ontario economy.

The economic development principles of the tax credit/rebate system are simple. Unlike the previous support rolled out through the arts council, it doesn't cost the province a dime if no one is producing work and employing actors, musicians and technicians. We know, however, that every dollar invested by government in live entertainment feeds between \$7 and \$9 back into the economy. A show like the new production of *Harry Potter and the Cursed Child* will employ technicians for tens of thousands of hours even before a single audience member steps into the theatre. Once the show opens, over 100 actors, technicians, ushers and other staff will be employed, generating tax revenue for the province, not to mention the 2,000 audience members eight times a week, buying tickets, going to restaurants, paying for parking and staying in hotels. Multiply this by the dozens of theatres across Toronto, the three Shaw Festival theatres, four Stratford Festival theatres, seven Drayton Entertainment theatres and all the stages in London, Sudbury and Ottawa, and the economic impact is massive.

By investing in a tax credit/rebate system, the next *Hamilton* or *Wicked* or *Come From Away* could open up in the provincially owned Elgin and Winter Garden theatres and run for years. The next *Les Misérables* could try out at the Princess of Wales before moving to Broadway. The Canadian Opera Company could mount shows through the summer instead of keeping their theatres dark, and the Stratford Festival could open—

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

Mr. Justin Antheunis: —and program their theatres year-round.

We saw that, when *Come From Away* reopened for that short week, audiences returned in droves, jumping to their feet even before the first word was said, and that there's this thirst for entertainment that is not being fully satisfied. The rate of return on this investment into the Ontario economy is incredible, and the risk level has proven to be none. We can ensure that not only every stage in this province is alive with the sound of music and applause, but that the restaurants and hotels will be full to the brim as well.

The Ontario economy needs a robust live performance sector, and this is the best way to ensure it. Thank you very much.

The Chair (Mr. Ernie Hardeman): Thank you very much for your presentation. Our next presenter is the Toronto Symphony Orchestra. As they get ready to chime in, we have the same instructions. There will be seven minutes to make the presentation, and I'll let you know when you've reached six. And everyone that speaks should introduce themselves for Hansard.

The floor is now yours.

Ms. Roberta Smith: Thank you very much for inviting us to speak today. I will be sharing my presentation with Ben Coleman, the manager of government relations from the Toronto symphony. I am Roberta Smith, the acting chief executive officer. In addition to our two roles at the Toronto symphony, both of us are very active with our national association, *Orchestras Canada*, which has 77 member orchestras across the province, ranging from youth orchestras and small community ensembles to larger institutions like the TSO.

Before I talk about the impact of the current shutdown and our recommendations for the 2022 budget, I want to thank Minister MacLeod and their team for their great efforts at keeping our sector updated and proactively seeking our input. I also want to share our appreciation for the Ontario Arts Council, which has played an essential role during this pandemic, delivering both ongoing and emergency funding, and, critically, sponsoring an incredibly helpful series of province-wide audience surveys which we've relied upon for our planning.

As you all know, the current shutdown has had an immense impact on the performing arts sector. For the TSO, this has meant losses and deferrals of around \$570,000 in gross revenue, which reverberates, of course, well beyond our own organization. Cancelled shows affect artists, venues and venue staff—like IATSE, which we've just heard about—and, ultimately, local economies. In addition to lost ticket revenue, our ability to attract and retain donors is negatively impacted without those in-person concert events where we can establish and build face-to-face relationships.

We are proceeding with livestream performances, but the reality for performing arts organizations is that while this does allow us to keep performing, it does require an additional investment, which ultimately results in a financial loss. Each livestream that the TSO has performed this season represents a net loss of around \$15,000 in variable costs alone, before adding in the costs of the hall, musicians, production and staff.

That said, after a 2021 season where we were unable to do any activity for over half of our scheduled weeks, it was absolutely incredible to be able to perform again for a live audience this past fall, opening our concerts by welcoming 2,300 health care workers to our first concerts in our opening week.

We look forward to performing again in person when it is safe to do so.

Mr. Ben Coleman: Before we turn to our recommendations for the 2022 budget, we want to share some brief comments on the emergency supports already announced for the current shutdown.

In addition to the property and energy tax rebates that have already been announced, there need to be clear supports for charities and non-profits, as Justin touched on, because charities and non-profits represent a large number of Ontario's performing arts organizations.

However, we understand that the \$10,000 small business relief grant will help a large number of small and medium-sized performing arts organizations. The automatic payment to earlier recipients is a good way to cut red tape, and with adequate support for organizations that have challenges applying and clear communication that this program is not exclusive to for-profit businesses, we think this program will provide effective relief.

Our ongoing challenges, to the TSO and as a sector, include rising insurance costs—for example, our general liability coverage went up by 45% this year—more proactive communication from programs that provide supplies like rapid tests to businesses, and travel challenges with international guest artists.

Finally, turning to the 2022 budget, our first recommendation is for the government to continue its track record in providing additional over-and-above pandemic support via the Ontario Trillium Foundation. Many grateful orchestras across the province have received nearly \$2.5 million in emergency support from the OTF to date to help them continue and adapt their operations.

Ms. Roberta Smith: Our second recommendation for the 2022 budget, and our most important, is to invest in the recovery of arts and culture by increasing operating funding provided by the province. In our case, the ongoing support we've received from the Ontario Arts Council helps us to provide good jobs to our musicians and our staff, produce and market incredible performances, and secure donor confidence. We recommend that the OAC's base budget be increased by at least \$15 million. This is not an unreasonable ask. It simply reflects the amount needed for the OAC's budget to have kept up with inflation for the last decade. Similar attention is needed for other vehicles through which the government provides stable investment to the arts and culture sectors, such as Ontario Creates and the Ontario Music Investment Fund.

Mr. Ben Coleman: Our third recommendation for the 2022 budget is to echo the Canadian Live Music Association's request for the government to continue its leading support for the Unison fund. The TSO works with a large number of gigging musicians in addition to our 88 core orchestra members, and the pandemic has been particularly challenging for musicians who would usually make a living through multiple engagements.

Our fourth recommendation is for the government to ensure culture and recreation facilities, broadly defined, are properly prioritized in future plans for infrastructure investments and operational support. Many Ontario orchestras rehearse and perform at churches, schools, municipal-run concert halls and, unfortunately, in many facilities that are in dire need of renovation. In fact, many of you will know the 2021 Financial Accountability Office report on municipal infrastructure—

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

Mr. Ben Coleman: Thank you—found that tourism, culture and sport facilities have the highest needs of any infrastructure category, with over two thirds not in a state of good repair. The accessibility, environmental sustainability and airborne safety of the spaces we work in depend on this investment.

Ms. Roberta Smith: Finally, after the immediate challenges are over, there needs to be a strong plan to address a generation of students who have now lost out on an opportunity for lots of hands-on learning. This has affected our sector due to the significant restrictions on extra-curricular music like school bands and orchestras, but it also affects Ontario's next generation of athletes, trades workers and others.

1710

Thank you again to all the committee members for inviting us here today. We appreciate you taking our recommendations into consideration, and we look forward to answering any questions.

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

We now will go to the next presentation, the Elementary Teachers' Federation of Ontario. I believe we're all there. While we're getting them on the screen, again the instructions are the same. There will be a seven-minute presentation. I will notify you when you're at six minutes. We ask each person speaking to introduce themselves just prior to speaking.

With that, the floor is over to the Elementary Teachers' Federation of Ontario.

Ms. Karen Brown: Good afternoon, everyone. My name is Karen Brown and I'm the president of the Elementary Teachers' Federation of Ontario. I would like to start by thanking the committee for the opportunity to speak to you on behalf of 83,000 ETFO members who work in Ontario's public elementary schools. In addition to my presentation today, ETFO will follow up with a written submission to the committee.

The COVID-19 pandemic has exacerbated concerns about large class sizes, the poor physical conditions of schools, the lack of access to technology and the government's failure to provide appropriate funding to meet the needs of all students. These concerns were evident even before the pandemic, due to devastating cuts to public education.

Despite these challenges, educators have shown incredible resilience and commitment. They have consistently done their very best to provide for their students with high-quality public education, but have too often felt abandoned by the provincial government.

Under the current government, public education funding has fallen significantly. Education, as a percentage of total government expenditures, fell from 18.3% in 2019-20 to a projected 16.6% in 2023-24. In its most recent fall economic statement, the government further cut public education funding by \$457 million for 2021-22.

According to the FAO, in order to maintain current levels of service, education spending needs to grow by 2% per year. Based on the government's projections, future

funding for the sector will grow by only 1.2%. In 2021, the FAO projected that the cumulative funding gap over nine years would be a staggering \$12.3 billion. Once the recent funding cut of \$467 million is considered, this gap grows to \$15.8 billion.

The government must close this funding gap and provide a plan for future increases to public education funding that not only meets the benchmarks established by the FAO, but provides a path for improvements in Ontario's public education system: smaller classes, improved student behaviour and peer relationships, and increased student engagement and achievement in the early grades. Smaller classes mean that educators have more opportunity to give students individual attention. These factors contribute to increased graduation rates and savings from fewer students staying beyond the required four years of secondary school.

Grade 4 to 8 classes do not have class size caps, and have the highest class sizes in the kindergarten-to-grade-12 system. The government should allocate funding to reduce class size and establish a class size cap of 24 students for grades 4 to 8.

Last year, the government revealed that it had been working on a plan to fundamentally change our public education system by outsourcing and potentially privatizing online learning. This proposal would negatively impact students' health, well-being and learning outcomes. ETFO believes that daily in-person learning best meets students' educational, development and social needs. It provides the best learning experience and is the most equitable learning model.

The use of hybrid learning models by some school boards has students and educators facing unprecedented challenges and pressures, further compounding the ongoing mental health crisis. The use of hybrid learning by school boards in Ontario must end, and the government should abandon its plan for permanent virtual learning in elementary schools.

Students with special education needs are not getting the front-line supports and services they need. Inadequate supports have a bigger impact on students who face additional barriers, such as Black, Indigenous and racialized students, students of lower-income families and English language learners. Students need access to educational assistants, behavioural counsellors, child and youth workers, psychologists and speech and language pathologists to help them learn and thrive.

The proportion of students accessing special education programs or services has increased from 16.3% of all students in 2013-14 to 17.7% in 2019-20. Special education funding has simply not kept up either with the inflationary costs or with students' increasing needs for special education supports. The government must increase special education funding and ensure that special education grants are based on the actual needs of students.

The COVID-19 pandemic has highlighted the deep-rooted socio-economic disparity that exists in communities across the province, the country and the world. Ontario's recovery plan must address the disproportionate

impact felt during the pandemic by already marginalized communities.

ETFO calls on the government to provide additional funding to school boards to hire additional counsellors, social workers and school nurses who would specifically assist families and students from Black, racialized and Indigenous communities, as well as students living in low-income communities.

The mental health of teachers, education workers and students requires the provincial government's urgent attention. In May of 2021, ETFO shared research that showed many members experienced burnout and other negative mental health impacts.

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

Ms. Karen Brown: The government must fund the supports in schools and the community that ensure students' developmental, emotional and behavioural needs are met so that each ETFO member can focus on supporting student learning needs.

Several surveys and studies suggest student well-being has been negatively impacted by the COVID-19 pandemic. Many students are feeling the impact of the government's failure to ensure schools remain safely open to in-person learning. The government must develop and deliver long-term, fully funded, comprehensive, culturally responsive mental health supports for students.

The current learning model for Ontario's kindergarten program, with a certified teacher and a designated early childhood educator working together, gives children and their families the start to schools that they need. The partnership between a certified teacher and an ECE provides lasting benefits in reading, writing, numeracy, self-regulation and social skills—

The Chair (Mr. Ernie Hardeman): That concludes time for the presentation. We'll now have to start with the questions. Hopefully, we can get the rest of the presentation in the question period.

We'll start with the official opposition.

Ms. Catherine Fife: Thank you to all presenters. I'm—

The Chair (Mr. Ernie Hardeman): Who's speaking? MPP Fife?

Ms. Catherine Fife: Yes. Thank you, Chair.

I just want to say, on behalf of our arts critic, Jill Andrews, she really wanted to be here. She's a strong advocate for the arts and she is constantly making the case for the economic-driver impact that the arts have on our local communities. When she knew she wasn't able to be here, she actually wanted to mention that, in the 2021 budget, the government did allocate \$10 million. It wasn't a lot of money but it was an important amount of money. Only half of that money actually flowed to the communities. We're still trying to get the money out the door, and we know that your members at IATSE and Toronto symphony are waiting for that funding still.

Justin, I just wanted to thank you for raising the two-pronged approach to supporting the arts. The tax credits obviously work, so we should be accelerating those tax credits, as well as the rebates for the not-for-profits.

I wondered if you could quickly address, because I don't think that this has come up too much, the investment in the health and safety of the physical structures. Can you give us some sense as to if you have an estimate of what a cost would be? If you have a figure, that would be helpful for us.

Mr. Justin Antheunis: For the investment in the health and safety aspect of it? No, I don't have a figure on that. If you're talking about the insurance-backed system that I was talking about—or are you talking directly about health and safety investments to make a safer working place?

1720

Ms. Catherine Fife: A safer working place.

Mr. Justin Antheunis: I don't have those numbers, but—

Ms. Catherine Fife: But to date, has any funding flowed to upgrade or modernize those facilities?

Mr. Justin Antheunis: To the best of my knowledge, we have not seen any large upgrades to health and safety, except for specific COVID relief that we've seen to deal with short-term health and safety aspects, as opposed to long-term making the actual workplace safer.

Ms. Catherine Fife: Okay. But you're making the case that this would be an investment in the long term for a more sustainable approach to the arts, right? I mean, people want to feel safe when they go out, and that would be a good investment on the part of the government.

Mr. Justin Antheunis: That's correct, yes, 100%. The safer people are, the more chances that they will actually attend live performance.

Ms. Catherine Fife: Yes, absolutely. As well, the competitive edge that you referenced that other jurisdictions are giving: I think that's good information for the government members to hear on this committee. As I said, we will try to make the case for the return on investments around the rebate for the not-for-profits and the tax credits on a go-forward basis.

I'm going to be sharing my time here with MPP French, and she's going to address the ETFO issue. Please go ahead.

Ms. Jennifer K. French: Thank you. Actually, I'm going leave most of my questions for ETFO for my colleague Marit Stiles. I'm a little jealous that she'll have as much time, but I did want to say hello to the folks from ETFO. Thank you and your members for the unbelievable work that's being done across communities right now.

My office just put out a survey to community members on issues facing children and families, and overwhelmingly, support for strong and funded, safe public education is at the foremost of everyone's energies right now. So whatever we can do to support a safe transition to schools and to learning for everyone in education, whether it's education workers or students—again, thank you for your advocacy.

I'll take this time and say to the folks from IATSE and to the Toronto Symphony Orchestra to please give our best to all of your members and workers. We miss them. I'm a Mirvish subscriber, and I didn't get to go see *Come From Away*. I had to cancel my tickets—or they were cancelled.

We're all desperately looking forward to the time we can get back together.

One of the museums came and spoke to us earlier—and I'll direct this, I think, to the TSO—about the important money from the OTF that can be used for operations. Can you tell us what kind of a difference that makes for you, specific to you?

Ms. Roberta Smith: Ben?

Mr. Ben Coleman: A lot of it flows especially to medium-sized or smaller-sized orchestras in Ontario. Normally for an orchestra in Ontario, it would be somewhat like 40% fundraising, maybe 40% ticket sales and then 20% from government, and the government support can sometimes be a bit higher.

Without the ticket sales element, like we mentioned, trying to pivot to doing digital performances so you're still reaching your audience—for example, like with Mirvish pivoting to digital, still having things so that you still feel connected as a subscriber, and when they return, you still have that connection—takes additional investment and doesn't necessarily generate its own revenue for its own. These are the kinds of things that Trillium has helped with for a lot of medium- and small-sized orchestras in Ontario: re-pivoting to digital, making more temporary adjustments to make space safer, that kind of thing.

Ms. Jennifer K. French: Thank you. And we have the Ontario Philharmonic in Oshawa as our local connection to music, but we all recognize the need. The critic, Jill Andrew, has reminded all of us of the importance of arts and culture.

And then also the information—I'm going to be running out of time, I know—for Justin about the tax credits: Of course, I'm in Durham region, and it has been a sore point through the years that we don't have the same access to those tax credits as our friends in Toronto and other places. But some of the specific details of what those would look like—if you make sure that that's in the written submission, I know that we'll be very glad to have a better understanding and have a clearer direction to push. I'm still pushing for everyone to come and film in Durham region. You're all welcome. Please join, when it's safe. Anything else that you would like to add?

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

Mr. Ben Coleman: No. In the written submissions, I will add more information about the tax credit, but the return on investment that we see from film and television that can be easily transferred into live performance would be of great benefit for all regions and for all theatre companies, large and small.

The Chair (Mr. Ernie Hardeman): Thank you. Thirty seconds left.

Ms. Jennifer K. French: Well, many MPPs tend towards the dramatic and the theatrical, so hopefully this government will find some funds and find it in themselves to best support our industries. Thank you.

The Chair (Mr. Ernie Hardeman): Thank you. We'll now move on to the independent member. MPP Hunter.

Ms. Mitzie Hunter: Thank you so much to all of the presenters. I'm intensely interested in everything that

everyone had to say. I do want to start with ETFO. I accept all of your presentation and look forward to your written submission.

I wondered if we could have a conversation around what we've learned from the pandemic. There are other jurisdictions, such as Finland, that really took a very different approach, really valued in-person learning as a place where learning happens and deep learning happens and did a lot to invest. I continue to see that we don't invest and put students at the centre of our decision-making. I look at some of the posts I'm seeing on these masks; they're falling off of little kids' faces. I saw people who are highly skilled educators breaking open test kits to sort of parcel them off two by two. I'm wondering about your learnings and about how we do better. We have to see these risks as something that we have to plan for and learn from. If you could just address that to the panel. Thank you.

Ms. Karen Brown: Thank you, Ms. Hunter. Yes, it's a great opportunity to have a conversation. I think what the pandemic has exposed are the inequities in the system, the lack of investment that's years within the system and this government actually not having a long-term plan. Since the onset of the pandemic, many of the measures that were being asked for by ETFO and other groups in regard to the investment in superior masks and HEPA filters—those were decisions that should have taken place at that time. That would have shown a priority and would have allowed a consistency and a sustainability of in-person learning, which parents want, and having that confidence in the system. We didn't see that. We didn't see that upfront, "We value this. This is important. We want to keep our kids safe. We want to preserve their mental health and we want to be able to put the measures in place in the beginning," not this pivoting back and forth. That's what we've learned. We're almost two years into the pandemic. If some of these things were put in the beginning, we wouldn't be dealing with some of these issues.

Class size is not a new issue. When you're looking at capacity limits in restaurants and grocery stores, class size continues to be a huge issue with classrooms. The physical distancing: The pandemic only revealed what's happening in the classroom and the level of crowdedness within the classroom. It's really shown us that there has been a lack of commitment from this government to really put the necessary funds. Like you said, other areas had long-term commitments, not just at the beginning of the pandemic. Once they entered to take over office, what we saw was a government moving towards investing into online learning, taking money from the public system.

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

Ms. Karen Brown: What we saw were school boards not able to provide [*inaudible*] in a time of crisis that the teachers—we have hybrid learning, a fractured model, which is not good education, as opposed to let's have smaller class sizes, let's keep everyone in in-person learning. If you really value that, that's another thing that you need to be able to do.

With this pandemic, we need to see a long-term plan to support some of the staffing issues that we're going to

have to deal with. Part of that is education has not been attractive. Our graduates are not seeing it as an attractive field to go into. They didn't step up in the pandemic because of the safety mechanisms. They didn't feel secure. **1730**

Our retirees are still hesitant. The average age of a retiree is 72. I don't want my 72-year-old mom entering the schools at the height of the pandemic.

So there are things that could have been done: shorten the teacher education program—two years to invest—

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

We now go to the government. Mr. Thanigasalam.

Mr. Vijay Thanigasalam: Thank you to all the presenters for your presentations. We really appreciate your time and you being here.

My question is to the International Alliance of Theatrical Stage Employees, Local 58.

As you mentioned, you've been providing professional staging services to entertainment, conventions, trade shows, industries etc. for more than a hundred years.

We know, during this pandemic, across all sectors, they have seen a labour shortage throughout. Has your sector seen the same issue? If so, what can be done to mitigate or to help this issue?

Mr. Jason Antheunis: We have started to see it. Because we haven't seen a full return of work, we haven't been able to fully gauge exactly the effect that we're going to see.

The skills of stagehands are very transferable. Many of them have pivoted to the highly successful film and television industry in this province; others have pivoted to construction. So we have seen a large drain on the workforce in the live entertainment, live event sector.

We have a lot of schools that are coming through—we have a lot of technical programs throughout the high schools that can introduce these skills.

We like to say that being a stagehand, working behind the scenes, is a hidden career. Not many people understand how many people it takes to put on a show. When we talk about a production of the Nutcracker alone, we're talking about 60 technicians working behind the scenes supporting the 60 dancers who are on the stage and supporting the 60 musicians who are in the orchestra pit.

So what we can really do is to start reaching out—and working with all levels—to these students who are learning these trades, to understand that it's not just a trade; you can also apply those trades to the entertainment industry as well.

Mr. Vijay Thanigasalam: Thank you for that answer.

In your presentation, you mentioned more so about the tax credit system—the method that you talked about—and you mentioned that that would be a centrepiece in order to mitigate the current situation during COVID-19. Could you please elaborate and show us the road map on how this tax credit system, which you also mentioned worked in other jurisdictions, would help your sector in Ontario?

Mr. Justin Antheunis: We can look at the examples in Chicago, Illinois, like you said, as we talk about competition. They have a tax credit that is between 20% and

35%, depending on labour and depending on budget. Those tax credits—again, it's money that has to be invested first by the producer to actually start doing the work. Once they take that work and once they start employing people to do that work, then they're eligible to receive those tax credits in return. That's why I say that it's an easy investment—because the risk first still needs to be taken by those producers.

And then, as we look at it, many of these tax credits in other jurisdictions have caps of up to \$3 million per production—that's allowed to access. Some of them have a floor, where you have to have a minimum spend. But they all relate back to spending in the jurisdiction and spending on the workforce. That's where those tax credits are based. Like I said, depending on the jurisdiction, it varies as to what percentage they are.

Mr. Vijay Thanigasalam: Chair, how much time do I have left?

The Chair (Mr. Ernie Hardeman): You have 2.3 minutes.

Mr. Vijay Thanigasalam: Perfect. I would go on to the Elementary Teachers' Federation of Ontario and Karen Brown.

You mentioned mental health impacts on students, staff and teachers. I want to understand how the government can work with the Elementary Teachers' Federation of Ontario to combat this issue moving forward, in terms of combatting mental health, both for students and also for teachers and staff, but specifically in terms of the road map and how we can get that done, in terms of implementation of this program. If you can maybe elaborate on the implementation, either in the school or outside, and if you can talk about that and can give more detail? Thank you.

Ms. Karen Brown: I won't go into full details around implementation, but I will talk about the resources and supports that are needed, and that's the key thing. Through this pandemic, we're hearing about children's mental health, the importance of socialization and connecting with their peers, and the ability for them to engage with the other adults within the building, the other educators who work with them and are integral toward their learning. But what we have seen is that those supports are not there. They weren't there before the pandemic, they're not there now, and they're not going to be there after unless there are investments.

So you need your child and youth care workers, you need your educational assistants, you need the psychologists and you need the social workers to help students, to help support them during this time in the pandemic, where they've lost loved ones to COVID, or perhaps they have caught COVID and a grandparent or someone else caught it, and they're feeling guilty or responsible for that. Those are issues that need the supports. When teachers and educators have returned to the classroom today and yesterday, those resources didn't magically appear. We have seen cuts in that system. It has not been prioritized in regard to that, so that's a key thing.

When you're talking about children's mental health, class size comes back once again. If you're in a crowded

classroom with 30 to 40 kids, you're not getting the attention you need. For the teacher to be trying to interact with you to meet your needs, it's an issue. You need to look at the 1-to-1 ratios for what students need to succeed. There really is a gap right now.

What do educators need? They need to be listened to. They need to be part of the solution. They need to be able to use their skills, talents and expertise. They're in the system to say, "Hey, this is what we think assessment should look like. This is what we think would be helpful," and that's not happening. Their voice and their expertise, their professional judgment, to feel valued: Those are key things that are needed for the mental health of our educators, who have been working tirelessly through this pandemic to support student learning, to support families and communities, and they need to be respected by this government and everyone else in their commitment and what they've been doing.

Mr. Vijay Thanigasalam: Thank you. Karen, I just want to bounce back on the same question I asked Justin for the theatrical stage sector, but the same applies for almost all sectors—

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

We'll do round two, and we will be with the official opposition. MPP Stiles?

Ms. Marit Stiles: Good afternoon, everyone, and thank you so much for your presentations. I want to just start very quickly—I don't have very much time, but I wanted to thank folks from the Toronto symphony and IATSE Local 58 for being here.

Just to reflect back on some of the things you spoke about, Justin, in terms of the need for that tax credit and the competitive advantage: I worked for many years with ACTRA, on the recorded media side of things, and I know very well what it took for us to push government to get to that place, providing those tax incentives, those tax credits, and how essential it is. I wonder if you wouldn't mind just briefly speaking on the economic spinoffs—you mentioned it briefly—of this industry and what it means in terms of our economic recovery in this province.

Mr. Justin Antheunis: Thank you very much for that question. Like I said, every dollar we see invested by the provincial government already is a \$7 to \$9 return on investment on those local industries.

Like I said, if we use the example of either the symphony or the Nutcracker or a Mirvish Productions show, for all of them, we're bringing 2,000 people into the downtown core of Toronto. We're bringing 2,000 people into Niagara-on-the-Lake to see shows at the Shaw Festival, and they're all going to spend money going out for dinner. They're all going to eat at those restaurants. And so, the economic spinoff of just a small investment into the arts creates such a large economic impact for all of those other sectors. We're so intertwined with so many of the other sectors—the restaurants and tourism—in this province that, just like I said, that little investment would go a long way to support many, many sectors in this province.

1740

Ms. Marit Stiles: Thank you very much for that; I appreciate it. I've got to say, a lot of my constituents are artists, performers, members of your union, and we really appreciate all the work you do.

I did want to just turn to the elementary teachers now. Thank you so much for appearing here today. I wanted to, first of all, just mention—please, take some of the time here if there's anything you didn't get a chance to mention in your presentation and you would like to mention. I'd appreciate hearing that.

But I did want to just quickly mention, I know that so many of your members went back into schools again—it's not like they weren't teaching until now, but in person today. We are hearing so many reports, unfortunately, of folks without the masks, rooms without the HEPA filters—really inadequate, just atrocious; masks being provided for the students that are much too large, don't fit. It's just a real dog's breakfast out there from what I'm hearing and seeing.

I wanted to give you a chance as well to speak, please, about the government's handling of this pandemic in our schools. I know for us, we want, just like all of those teachers out there, for our students to stay in school now until June 30. We want to stop this in and out and this online piece. I wonder if you could comment on what it's been like for your members getting back into class today.

Ms. Karen Brown: Thank you, Ms. Stiles. I am going to just finish up to mention a few things about kindergarten. As I mentioned before, ETFO calls on the government to commit to maintaining a current staffing model for kindergarten with a teacher and an ECE. That's so important. We've seen the importance of that during this pandemic with kindergarten, our youngest, little ones. They're not masked; there's not a mandate for masking. We know of 40% of kids in the ages between five to 11 aren't vaccinated. Those are key concerns for us when we have our educators, our ECEs and our teachers working in those rooms.

Reducing class size would significantly improve kindergarten learning and working conditions—ample supports implementing a class size cap of 26 students.

And to optimize the potential of full-day kindergarten, the government must also address outstanding issues including: adequate physical space, as I mentioned; deployment of dedicated early childhood educators in every kindergarten classroom; professional learning to support teachers and ECEs; and preparation time for the ECEs. It's so important for them to work together as a collaborative team to make that a success, to make it continue to be the world-class program that we have. That's so key.

I want to also mention that my son is a member of ACTRA; he's an actor. When I was teaching grade 3, I took my kids to the symphony with the music teacher, so I really want to say these are the parents we're working with, the ACTRA/IATSE members. Our kids go to the symphony. This is all part of the government needing to invest in that.

I am hearing on social media—I've been checking my messages—yes, the masks are not fitting. I'm hearing that in greater Essex they didn't arrive for the kids at all.

We're hearing also that there's a 60% staff shortage in certain areas because of isolation and illness related to COVID. So we're seeing that, the fail to fill happening. What it's showing is the government has not made the long-term commitment and does not have a long-term plan in place. We were hearing about these HEPA filters. I heard in one school four arrived for the entire school, and when I finish here, there will be more.

Those are the things that we were anticipating because we know it takes time to procure to get these things out, to get the expertise and the staff. You just don't plunk it in a building and all of a sudden it works. There are a lot of factors.

The contact tracing: Our members are still concerned. Parents are concerned. We're hearing lots of parents are removing their kids from in-person learning because they don't feel safe. We're hearing calls coming in. They want to shift to online and now that's creating an inequity and a burden, and that shouldn't be, right?

We're talking about mental health issues. We need to put the resources in place so that kids can be in school, feel confident—our members feel confident going and parents feel confident going. And having their kids there until June, not in and out, in and out, and that's what we need.

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

Ms. Karen Brown: That's not what's in place. It's very short-term.

And the downloading on school boards is absolutely appalling. This government had the opportunity to take the leadership, to develop a plan. They just said, "I'm going to wipe my hands. We're going to just let the school boards scramble two days before and come up with a plan." That's not fair for them. If they care about the system, they want it to work. And if we have those who are in leadership who are exhausted and scrambling, and those who are on the front line are sick, it's not going to be something that we all want it to be.

I think what we've learned is that there has been a lot of misleading of the public, and that's unfortunate. As the week unfolds, our members will continue to do their best to support their colleagues, support students, but it's not going to be consistent learning. It will be interrupted. There will be children getting sick, our members getting sick, and we'll have to be pivoting. Some schools will close. Classrooms will close—

The Chair (Mr. Ernie Hardeman): Thank you very much. That concludes that time. We now go to the independent member. MPP Hunter.

Ms. Mitzi Hunter: In listening to Karen Brown, president of the Elementary Teachers' Federation of Ontario, just describing what you are seeing and what your members are experiencing, it really does underscore that this government has failed students when it comes to prioritizing them during the pandemic, and this could have long-term effects. We have to think about how to address that.

I want to say that your members and the work that our educators do—schools, staff, the whole system—are valued and appreciated. I know that despite the very challenging circumstances that have been compounded by the failure of the government, you continue to do your best and your members continue to do their best on behalf of our students, who are the future of this province. So thank you, and please thank them on our behalf.

I would like to just ask our arts sector who are here a question about—and I really appreciate the Toronto symphony. Your first performance was to the essential and front-line health care workers, to thank them. I know the live performance sector is never going to pick up itself and go anywhere else except to perform within Ontario, so I really definitely value the work and the creativity.

When we look to recovering from COVID and to a pandemic recovery, what do you believe the role of culture will be? I'd like to start maybe with Justin, and if we can have a bit of time for our symphony folks as well. Go ahead, Justin.

Mr. Justin Antheunis: I think the importance of culture has never been as prevalent as it is now. I think the role of the cultural industries throughout this province can lead us back through this recovery period, and I think that is something we need to focus on.

What brings people together? You just look at the joy a snowfall brought a lot of people yesterday, when you'd see kids smiling and laughing. Now imagine being able to take that joy that those people had because of the snowfall, because they were actually getting out to go play, to actually go out and take in culture, to take in events. That is what's going to bring us back, because that is what's been missing for the last two years. It's that joy, and culture brings joy.

I think we're at that point now where we don't need to just bring it back; we need to build it back better. We could have this cultural revolution. We've compared everything to the Spanish flu thousands and thousands of times. But what came out of the Spanish flu? We saw a cultural revolution in the Roaring Twenties, right? I think that through government support and government investment, we can build that back quickly, but without that support and investment, we're going to see what happened after the first COVID that happened: People were scared to start programming again—

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

Mr. Justin Antheunis: —and people were scared to start investing in the arts again. I think we need to get rid of that fear.

Ms. Mitzie Hunter: I'm going to ask our symphony folks to jump in as well here.

Ms. Roberta Smith: Thank you, MPP Hunter. I think the only thing I would do is add to what Justin is saying. I think joy is definitely a key part of what we can all bring collectively, but I go back to Karen's comments about mental health. I think when you look at the arts and culture sector, what we see is a pathway forward, with some help, to addressing the mental health issues that are actually not just in the schools, but we're seeing them increasingly in

our population. I think that arts and culture probably has a role to play to that.

1750

I'll just pass it over briefly to my colleague, Ben, for any additional comments.

The Chair (Mr. Ernie Hardeman): Well, thank you very much, but that concludes the time for that presentation. We'll now go to the government and MPP Bouma.

Mr. Will Bouma: Thank you, Chair. I appreciate that. I really appreciate this last little bit of conversation here. Thank you, MPP Hunter, for starting that off. I think Justin hit the nail on the head when—as a result of the Spanish flu, that it presaged this time that we now call the Roaring Twenties.

I thought before, with all the changes that were happening, that I would love to go back and be able to have a conversation with someone about what the mood was by 1920. What was going on in people's minds? How tired were they of everything? And the same things that we're going through right now.

I think the message comes through loud and clear, and that's why it's so nice to end the day with cultural generators, because we have to have a message of hope. I think that's really the key.

That also gives me some optimism about what is going to happen as we come out of COVID, that opportunity for everyone to get out, and for growth and everything else. Without getting into that, I think that's one of the key things our government has been working on, and especially in my role in the Ministry of Finance: having the stage set for that post-COVID stuff. But here we are, still in the middle of COVID.

To Justin: I was wondering if I could just start by asking you what kind of production is still going on? I mean, I live in the little village of St. George, Ontario, and we've had multiple movies filmed here. I'm assuming some of the people you work with and represent were here doing that. The Handmaid's Tale is filmed here. My neighbour, the mayor, his house has been used for that, and my garage was used for that production. He told me the other day—because I have a regular round-up with my mayors at different times—that production was coming back.

What sort of activity is happening with film and television production right now in the province of Ontario? If you could give us a quick update on that.

Mr. Justin Antheunis: Film and television in 2021 saw a boom. We had a lot of productions that actually moved from places in the United States to film up here in Ontario because of the qualities of our crews, because of the tax credits that are available to them, as well as the health and safety protocols that were put in place on those sets to make sure everyone was safe. Currently, because of the Omicron variant, a lot of productions are kind of pausing and waiting to ramp back up into production because they don't want people to get sick. Again, we see that people gathering in larger groups is where we're seeing the outbreaks happen, and they're hesitant for doing that.

But one thing that has also helped—I touched on it before—is that in the film and television sector, there is an insurance backstop if they have to shut down a production because of COVID, and that insurance backstop is not available to people in live performance. Live performance would benefit from those kinds of backstops, so that if the Toronto Symphony Orchestra has to cancel a production, they can have the insurance backstop. For us in live entertainment, there's no money to be generated by the productions that are going on right now. The production of *Madama Butterfly* at the Canadian Opera Company was supposed to start this last month and have 10 performances; they're now going to go and record one performance for a live stream and make it free. The amount of work we would see has reduced from a month's worth of work to a couple of weeks, and that's the kind of thing that we need to protect and build from so that we don't have those kinds of delays again.

Mr. Will Bouma: And I think that's the key, too. We need to protect what we have so that you're ready to pull the trigger on those things. If I could—I don't know; I know I'm running out of time very quickly. But if you could just very quickly answer, Justin: How has that back and forth relationship been with Minister MacLeod's office, as far as those conversations go?

Mr. Justin Antheunis: The conversations have been good; they've been positive. I'm going to be honest: The problem is she has such a large, overreaching portfolio that sometimes we feel that we get lost. The live entertainment industry has been getting lost in that large portfolio, and we need to have these conversations here with finance, as well, because they have so many asks coming from that ministry that we now need to have our own voice, and not just on that. But when I've asked to speak with the ministry, though, they have answered my call, I will say.

Mr. Will Bouma: Okay. I really appreciate hearing that. That's really good to know.

We had the opportunity to watch *Come From Away*, and I didn't realize how much stuff I still carried with me about 9/11. I watched that with my wife, and I cried the whole entire time. I'm like, "I'm such an idiot. I don't know why I'm bawling my head off the whole entire production," but I did. It just came out of me. It was almost a cathartic experience to be able to let go of some of those things of witnessing that.

Very quickly, I want to finish with the symphony. I really appreciate you guys coming forward, Roberta and Ben. The symphonies are, again, such an incredible generator. I know that you do so much more than just play music for people. There's also a huge educational piece that you provide for the people of Ontario. I was wondering if one of you or both could speak to the educational piece. I know you did a little bit in your presentation, but expand on that a little bit more—it came up during the

conversation, too, with MPP Stiles—about the educational piece that the symphony plays in the province of Ontario.

Ben is open, and Roberta—good. Your mikes are on.

Ms. Roberta Smith: Hi. Thanks very much for the question. Yes, we do have a huge part to play in education. We typically would reach 40,000 students every year. That was alluded to by Karen. What we've had to do during the pandemic is we have offered some digital content. Of course, that's been well received, because I think teachers—

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

Ms. Roberta Smith: —have been desperate for materials that they can use while they're in the classroom and going digital. But it's also been beyond the student population. For example, we've made a lot of phone calls to isolated seniors. We have a very strong partnership with the Alzheimer Society of Canada, the Alzheimer Society of Peel to make sure that we are offering some kind of connection with those who need it most.

I'll just defer briefly to Ben for any final comments.

Mr. Ben Coleman: Yes, we talked about how digital doesn't make money in the normal performance sense, but there are interesting opportunities in education. We've found that we've been able to reach schools in Ontario that are nowhere near busing distance to come to the TSO like they would regularly. In fact, there's one program we had in the fall that reached schools from across Canada. So I think there's a lot of opportunity for that.

The challenge for us as an arts organization is having the investment to make those programs, like a short film that we did, *Zoophony*, at the Toronto Zoo, and for schools to be able to have the budgets to then—

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

With that, that concludes the panel. I would just like to conclude by thanking all the presenters of this panel.

I also want to make sure to remind you that the deadline for the written submissions is 7 p.m. on Wednesday, January 26, so any of the questions that didn't quite get out in time for the bell to go, you can blame me, but you can also recoup by doing a written submission. Get it in before the 26th and it will become part of the record as though it was said here. So thank you all for doing that.

This concludes the business of today. I thank all the presenters—not just this panel, but all the presenters all day. The committee is now adjourned until 9 a.m. on Thursday, January 20, 2022, when we will continue with pre-budget consultations 2022, for the greater Toronto—oops, it will be for somebody else, I expect. But anyway, we will be continuing with the consultations tomorrow.

Interjection.

The Chair (Mr. Ernie Hardeman): Oh, we have two days of the greater Toronto area, so it's still right.

The committee adjourned at 1800.

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