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of Ontario



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Jeudi
23 novembre 2023

Speaker: Honourable Ted Arnott
Clerk: Trevor Day

Président : L'honorable Ted Arnott
Greffier : Trevor Day

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LEGISLATIVE ASSEMBLY OF ONTARIO

Thursday 23 November 2023

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Jeudi 23 novembre 2023

*Report continued from volume A.
The House recessed from 1200 to 1300.*

REPORTS BY COMMITTEES

STANDING COMMITTEE ON HERITAGE, INFRASTRUCTURE AND CULTURAL POLICY

Ms. Teresa J. Armstrong: Speaker, I beg leave to present a report from the Standing Committee on Heritage, Infrastructure and Cultural Policy and move its adoption.

The Clerk-at-the-Table (Ms. Julia Douglas): Your committee begs to report the following bill, without amendment:

Bill 134, An Act to amend the Development Charges Act, 1997 and the St. Thomas-Central Elgin Boundary Adjustment Act, 2023 / Loi modifiant la Loi de 1997 sur les redevances d'aménagement et la Loi de 2023 sur la modification des limites territoriales entre St. Thomas et Central Elgin.

The Speaker (Hon. Ted Arnott): Shall the report be received and adopted? Agreed? Agreed.

Report adopted.

The Speaker (Hon. Ted Arnott): The bill is therefore ordered for third reading.

PETITIONS

SOCIAL ASSISTANCE

MPP Kristyn Wong-Tam: “To the Legislative Assembly of Ontario:

“Whereas Ontario’s social assistance rates are well below Canada’s official Market Basket Measure poverty line and far from adequate to cover the rising costs of food and rent: \$733 for individuals on OW and soon \$1,227 for” people on “ODSP;

“Whereas an open letter to the Premier and two cabinet ministers, signed by over 230 organizations, recommends that social assistance rates be doubled for both Ontario Works (OW) and the Ontario Disability Support Program (ODSP);

“Whereas the recent small budget increase of 5% for ODSP still leaves these citizens well below the poverty line, both they and those receiving the frozen OW rates are struggling to live in this time of alarming inflation;

“Whereas the government of Canada recognized in its CERB program that a ‘basic income’ of \$2,000 per month was the standard support required by individuals who lost their employment during the pandemic;

“We, the undersigned citizens of Ontario, petition the Legislative Assembly to double social assistance rates for OW and ODSP.”

I want to thank Dr. Sally Palmer from McMaster University for collecting these signatures. I’ll be proudly affixing my own signature to this petition and returning it to the table with page Eoife.

SOCIAL ASSISTANCE

Miss Monique Taylor: I also have a petition to raise social assistance rates. It’s appropriate, with ISARC here in the Legislature with us today. It reads:

“To the Legislative Assembly of Ontario:

“Whereas Ontario’s social assistance rates are well below Canada’s official Market Basket Measure poverty line and far from adequate to cover the rising costs of food and rent: \$733 for individuals on” Ontario Works “and \$1,308 for ODSP;

“Whereas an open letter to the Premier and two cabinet ministers, signed by over 230 organizations, recommends that social assistance rates be doubled for both Ontario Works (OW) and the Ontario Disability Support Program (ODSP);

“Whereas small increases to ODSP have still left these citizens below the poverty line. Both they and those receiving the frozen” Ontario Works “rates are struggling to survive at this time of alarming inflation;

“Whereas the government of Canada recognized in its CERB program that a ‘basic income’ of \$2,000 per month was the standard support required by individuals who lost their employment during the pandemic;

“We, the undersigned citizens of Ontario, petition the Legislative Assembly to double social assistance rates for” Ontario Works “and ODSP” rates.

I fully support this petition, will affix my signature to it and give it to page Emma to bring to the Clerk.

ONTARIO PLACE

MPP Kristyn Wong-Tam: This petition reads:

“Save Ontario Place.

“To the Legislative Assembly of Ontario:

“Whereas Ontario Place has been a cherished public space for over 50 years, providing joy, recreation and cultural experiences for Ontarians and tourists alike and holds cul-

tural and historical significance as a landmark that symbolizes Ontario's commitment to innovation, sustainability and public engagement;

"Whereas redevelopment that includes a private, profit-driven venture by an Austrian spa company prioritizes commercial interests over the needs and desires of the people of Ontario, and it is estimated that the cost to prepare the grounds for redevelopment and build a 2,000-car underground garage will cost approximately \$650 million;

"Whereas there are concerns of cronyism by Mark Lawson, Therme Group Canada's vice-president of comms and external relations, who was previously Ford's deputy chief of staff;

"Whereas meaningful public consultations with diverse stakeholders have not been adequately conducted and the Ontario NDP has sent a letter of support for a public request to begin an investigation into a value-for-money and compliance audit with respect to proposed redevelopment of Ontario Place;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario to halt any further development plans for Ontario Place, engage in meaningful and transparent public consultations to gather input and ideas for the future of Ontario Place, develop a comprehensive and sustainable plan for the revitalization of Ontario Place that prioritizes environmental sustainability, accessibility and inclusivity, and ensure that any future development of Ontario Place is carried out in a transparent and accountable manner, with proper oversight, public input and adherence to democratic processes."

I'm proudly affixing my signature to this petition and returning it to the centre table with page Peter.

ACCESS TO HEALTH CARE

MPP Kristyn Wong-Tam: This petition reads:

"To the Legislative Assembly of Ontario:

"Support Gender-Affirming Health Care.

"Whereas two-spirit, transgender, non-binary, gender-diverse, and intersex communities face significant challenges to accessing health care services that are friendly, competent, and affirming in Ontario;

"Whereas everyone deserves access to health care, and they shouldn't have to fight for it, shouldn't have to wait for it, and should never receive less care or support because of who they are;

"Whereas gender-affirming care is" life-affirming "care;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario to support the reintroduction of a private member's bill to create an inclusive and representative committee to advise the Ministry of Health on how to realize accessible and equitable access to and coverage for gender-affirming health care in Ontario."

I will be happy to sign this petition and return it to the centre table with page Angela.

AMBULANCE SERVICES

MPP Kristyn Wong-Tam: This petition reads:

"Stop Billing Recipients of OW and ODSP for Ambulance Transportation.

"To the Legislative Assembly of Ontario:

"Whereas ambulance fees for OW, ODSP and GAINS recipients are waived under the Ontario Works Act, Ontario Disability Support Program Act and Family Benefits Act;

"Whereas these recipients are still initially billed every time they are transported to the hospital and must have the fee waived after they receive care;

"Whereas this mechanism causes anxiety for those who are entitled to have their bill covered and additional work for caseworkers and health care workers;

"We, the undersigned, petition the Legislative Assembly of Ontario to direct the government of Ontario to:

"—immediately eliminate billing recipients of OW, ODSP and GAINS for their essential use of ambulance transportation to the hospital;

"—implement a program, like the easy-to-use Fair Pass Transit Discount Program, where OW, ODSP and GAINS recipients may upload proof of income and make it subject to renewal annually;

"—to not include hidden fees or mechanisms that take from initiatives or programs that are specifically designed for recipients of OW, ODSP and GAINS who have high health care needs."

I will be very proud to affix my signature to this petition and return it to the centre table with page Alina.

ORDERS OF THE DAY

CONVENIENT CARE AT HOME ACT, 2023

LOI DE 2023 SUR LA PRESTATION COMMUNE DE SOINS À DOMICILE

Resuming the debate adjourned on November 23, 2023, on the motion for third reading of the following bill:

Bill 135, An Act to amend the Connecting Care Act, 2019 with respect to home and community care services and health governance and to make related amendments to other Acts / Projet de loi 135, Loi modifiant la Loi de 2019 pour des soins interconnectés en ce qui concerne les services de soins à domicile et en milieu communautaire et la gouvernance de la santé et apportant des modifications connexes à d'autres lois.

1310

The Speaker (Hon. Ted Arnott): Further debate?

Mr. Wayne Gates: It's always a pleasure to stand and talk on Bill 135, and over the course of the next number of minutes, I'm going to talk about a number of things under Bill 135. I'm going to talk about the health care shortage crisis. I'm going to talk about the fact that we need to make sure that PSWs have jobs that are a career—good jobs with real wages, benefits, unionized and pensions. I'm going to talk about the privatization, and we all know that that was started under Premier Mike Harris, going back now almost 12, 13 years. We saw what's happened to home care, and

here we are 12 years later trying to put another bill in place that's even going to further privatize it. So we've got lots of concerns around that.

Care coordinators will be in conflict of interest within for-profit; that's another big issue. We're going to talk about the amendments. I think we can talk about the amendments for the whole hour, quite frankly. I see that some of my colleagues that were there for amendments are here again today. But one thing that I don't think a lot of people realize, if they're listening at home, is that the amendments are an opportunity to strengthen the bill. When the Conservatives were on this side, they used to bring amendments forward, and I remember their leader Patrick Brown at that time saying, "You know what? If it's a good idea, whether you're a Liberal, a Conservative, an NDPer or an independent"—

Interjection.

Mr. Wayne Gates: Okay, so I just got a note. What do you want me to do here? Oh, I'm sorry. Can I have unanimous consent to stand down the lead?

The Speaker (Hon. Ted Arnott): The member for Niagara Falls is seeking the unanimous consent of the House to stand down the lead speech by the official opposition. Agreed? Agreed.

The member for Niagara Falls still has the floor, but less time.

Mr. Wayne Gates: Okay, so you're going to fix the clock. Sorry about that, colleagues, but as you can see, I just got my note. It's how we kind of fly around here.

We do appreciate you standing down the lead. I know that my colleague, our health critic, France, has had a death in the family and she's rushed back to her riding to go to a funeral today. So I want to say, on behalf of the NDP, the rest of our caucus, these things come up and we appreciate you standing down her lead. She's one of the most respected people in here, and I think we all offer her condolences and to her family members. I do appreciate you doing that.

I'm going to start over. Is that okay? Or just continue? I'm not really sure what we're doing here. But I'll go to the accountability of the companies and then I'll get to the amendments again.

There are no measures in the bill—and this is concerning—to hold the companies accountable for their missed appointments. That came up a lot, not only from the NDP but a lot from presenters, that they show up for an appointment, they stay for 15 minutes. The issue is sometimes they're being billed—so there's no accountability. There should be some strong language in there. I can tell you, as I move on to the amendments, we brought forward some amendments to change that. And this is the problem with amendments, and I'll get back on to where I was before I asked to stand down the lead.

Amendments are an opportunity in committee, when we're doing clause-by-clause, to make sure that we can strengthen a bill. Because there isn't anybody in the House—and I'll be surprised, whether you're an independent, a Liberal, an NDPer or a Conservative—who doesn't want to make sure that home care is a place where we can keep our families: our moms, our dads, our grandparents. There's

nobody, I believe, who doesn't agree that the best place for us as we age is to stay in our homes. So that's why you have amendments.

We brought forward a number of amendments—I'll go through them in my speech—but surprising to me, not just on this bill but on every other health care bill—Mr. Speaker, you look so excited over there. I just want to look at you and make sure I'm not going through the party; I'm looking at the Speaker. But every other bill, you turn down amendments. You say no to them.

I'm going to use Patrick Brown again, not that he's a buddy of mine or anything like that, but he is the mayor of Brampton. He's been around for a while. He led your party for a while. He always said, and I give him credit for this, "If it's a good idea, whether it comes from the Liberals or the Conservatives"—at that time, because you were in opposition—"a good idea is a good idea. Let's strengthen the bill."

Since you guys have been elected for the last five years, I've sat on a lot of committees. I know your party doesn't want me to sit on any committee; I understand that. But at the end of the day, I've sat on a lot of committees, including this one. We had some really good amendments that were brought forward by organizations, not necessarily by just the NDP, that could strengthen a bill. Here's what happened: Every single amendment was turned down. Nobody can tell me that organizations that are facing home care don't have good ideas. They read the bill. They had their lawyers look at the bill, yet you turned down all the amendments. That's a mistake.

We're here. We understand you have a majority government. We understand that you're bringing bills forward, but all your ideas aren't exactly right all the time. There are ways to strengthen the bill, because that's all it's about, quite frankly. When you do the bill, you're going to have a majority. The bills get passed; we know that. No matter what we say, bills get passed here. But really seriously consider what other people bring to the table. We had the doctor from the Liberals. I don't know his riding, so I'm not going to say his name. Listen, he's faced health care. That's what he does: He's a doctor. He knows some of the issues. They made presentations and brought forward—very thoughtful. They turned it down.

Do you know what we agreed on at the end of the day, Mr. Speaker? I know you're excited to hear this. You know what we agreed upon? The name of the bill. Let's congratulate ourselves. We spent that time in committee. We brought people to come make presentations to the committee. At the end of the day, what we agreed upon was the name of the bill. It's absolutely embarrassing, quite frankly. It's embarrassing to all of us that we can't come together and strengthen a bill as important as home care.

So the amendments are our problem. I wanted to make sure I got that out around the amendments.

The other one is the lack of consultation. Think about this—and today, I think it was the labour minister that was bragging about how they consult with unions and how unions support you. Mr. Speaker, do you know what happened at committee, what we found out? They never

consulted with the majority of the unions. But this week, in Toronto, just up the road at the Sheraton, do you know who's having their convention? Anybody know? Help me over on that side. Anybody know over there? Show me you're working for workers. Yes, we've got one person out of 20. Do you know what it is? It's the Ontario Federation of Labour convention. Guess who they didn't consult with on the home care bill that represents thousands and thousands of workers in the home care sector? Guess who you didn't consult? The Ontario Federation of Labour.

I'm sure, Mr. Speaker, because I know you've been here—well, you've been here longer than I have, but not as Speaker—I know you've heard this: They represent 1.2 million people in the province of Ontario. And congratulations to them and congratulations to their new leadership. But think about that: You didn't even consult with them. Why would you not consult with the Ontario Federation of Labour on an important bill? So a lack of consultation.

I'm going to get into some of the written notes, just so my staff won't be extremely upset with me, seeing as, we all know, that some of our staff help write some of our speeches. There is probably nothing worse than doing all the notes and then never getting to them. Nothing gets them more upset at me than that, so I'm going to read a little bit. I'll start from the beginning of my speech, but these are some of the issues that have been raised with me and I thought I'd get them out right away.

You can talk about the boards that we're going to have. They're not open, and we should have a mixture of the boards so they work right. We need to have everything open to the public. There are so many things that we could do that could have been better if you just would have done some of the amendments. I'm not saying do all of them, because maybe some of the ideas in the amendments weren't good ideas. But there were some really good, thoughtful amendments to this bill to make it stronger so we can take care of our moms, our dads and our grandparents in their homes.

1320

Because I'm getting older. There are a few guys on that side here I see who are older. We've got the super senior—he's a little older. I'm sure they want to stay in their homes as long as they can. I think we're in agreement on that. It's how we get there that's important. So I'll start on my speech. I've only got 10 minutes left. I'll try and get through some of it.

Before we begin discussing this legislation—which I've already done, by the way—I think we need to address the speed at which the government has introduced and pushed this bill forward. It's a significant change in the structure of how home care is delivered in the province. It's a large consolidation of services. Yet this government has just rushed this forward. And it's true, you have rushed this forward. Nobody can deny that, even on the Conservative side.

I already mentioned that they didn't consult, they didn't support any amendments and they barely even listened during the committee presentations. And I'll be honest with you: Some did listen. I will say that some did listen,

and I can say as honest as I can, the Chair was listening all the time, because he ruled me out of order a couple of times. So I know he was listening for sure.

Mr. Speaker, this isn't the first time. It's a pattern of this government. They do not care about the feedback from the very people they hope to impact with their legislation. Quite frankly, I think it's undemocratic. They think because they have a majority, they don't have to listen to the people of Ontario. It's no way to make policy. You don't make important policy decisions without consulting with people and you don't force through policy so fast that the opposition barely has time to debate or analyze it. This is not typical behaviour of a provincial government. It's only typical of the Conservative government—I can tell you it wasn't like that prior to the last five years—a government that has no respect for the people of this province.

Mr. Speaker, I know you agree with me on this one: Home care is extremely important in this province. I think we can all agree to that. It's a system that allows people to stay in their homes. It's a system that allows family members to know that their loved one is receiving the appropriate care they need. Think about that. We saw what happened with COVID and long-term care. It's just not a nice-to-have; it's a must-have for the well-being of our people and our family members—and, like I said, our moms, our dads, our grandparents.

Let me tell you, it all starts with a robust system that is properly funded. We need a home care system that's not just hanging by a thread. It needs support and it needs funding. Proper funding ensures that our home care providers have the resources they need to give the best possible care. It's not about cutting corners, it's about investing in the health and dignity of our fellow Ontarians.

Now, I'm going to address the elephant in the room: our long-term-care system. It's strained, it's overworked and it's in desperate need of relief. And I know I've said this, I stand up here and I say this all the time, and I know some people don't like to hear it: We've lost 6,000 people in long-term care during COVID. I'll say this, and I'll keep saying this until we understand that a public system is better than a private system: 78% of our moms, our dads, our aunts, our uncles—in some cases our brothers and sisters—died in these homes that were privately run.

And why do I stand up and say it's a mistake to have a private system in long-term care? Because it's about profit; it's not about care. Every single tax dollar—you guys talk about tax dollars; six or seven of your questions this morning were on tax dollars that the federal government is doing. Why not make sure that every single dollar—our precious dollars, because we only have so many dollars to go around for everything that we need—is going for not-for-profit, instead of to the CEOs and to the corporations that quite frankly are making billions of dollars in the health care sector in the long-term-care system? It's strained, it's overworked and in desperate need of relief, Mr. Speaker.

Good-quality home care can be the lifeline that eases the burden on long-term-care facilities. When people have access to the care they need in the comfort of their own

homes—I'm going to read that again: When people have access to the care they need in the comfort of their own homes—nothing is better than being at home—it reduces the strain on long-term care, allowing those who truly need it to get the attention they deserve.

You know what it is—to the Conservatives that are here and to my colleague from the Liberal government up in the corner. It's a win-win situation for everybody. Think about that. You bring in legislation. You listen to all the presenters; you listen to the official opposition, the independents and the Liberals. How do we get to a win-win situation? You guys can yell; you yell at me quite regularly. How do we get there? We listen to each other. We take a look at the amendments and make the bill stronger. Because the idea here is that when we bring a bill forward, even though this one is rushed, where we should take it around the province of Ontario, something as valuable as home care—take it to Niagara. I would have loved had you come to Niagara and had meetings in Niagara. We heard that up north, some of the people up north couldn't get down here because of time frames and how quick it was. We need to get to win-win situations, particularly in home care, and there's a way to do it so when you come to pass the bill, we can stand up and say, "You listened to us. You put these amendments in. You made the bill stronger. We can support that bill."

But it's tough to stand up here and say we can support bills when you don't even listen to us. And not me in particular. I mean the caucus; I mean the Liberals; I mean the independents, the Greens. I can't forget Mr. Green. I think that's his new name; I think Mr. Green is what he gets called.

Why not work together and make sure the bill is good? Do you know who's going to benefit? Never mind the Legislature. You know who's going to benefit? Yell it out if you can think of it. Maybe the Chair can help me; he was helping me yesterday. We're going to help—it's going to be better for our moms and dads and our grandparents. They're relying on us to do it better; they really are.

I'm going to continue with this. The benefits don't stop here, Mr. Speaker. There's something special about being able to stay in your home, surrounded by familiar faces, and cherish those memories. It's not about convenience; it's about better health outcomes. Because I firmly believe, if you're surrounded by love at home, there's a good chance you're going to live longer too, instead of being in a long-term-care facility or a retirement home. I know some retirement homes are a little different, unregulated in a lot of cases.

Studies show—and this isn't me saying it, okay? I say a lot, but this isn't me saying this. Studies show that people tend to recover faster and live healthier lives when they're in the comfort of their own home. I'll ask my Conservative mates and maybe my Liberal in the corner and my colleagues over here: How many agree with that statement? Put your hands up. Two on that side. You should all put your hands up. Because you know what? That's what it's about.

I know, I should go through the Speaker—

The Speaker (Hon. Ted Arnott): I'll remind the member to make his comments through the Chair.

Mr. Wayne Gates: I should go through the Chair. I know. I should learn that from question period. I apologize.

But I think it's important to say that this is how we can make it better for our family members. I already mentioned I'm getting a little older. The man who just walked in here, he's getting a little older. He probably wants to stay in his home as well. It's a simple truth that we should all get behind.

Imagine a system where seniors, our loved ones, can age gracefully in their own homes, receiving the care they need without being moved out of their facilities. It's not just a dream; it's a possibility with a properly funded, robust home care system. It's about dignity. It's about respect. It's about giving our people the choice to stay where their hearts are.

Let me be clear, this isn't about cutting corners, compromising quality or expanding the private model in home care. It's about making sure our home care providers have the support they need to deliver top-notch care. I think that's a fair and balanced statement. It's an investment in the well-being of our communities. It's an investment we can't afford to overlook. But I'm concerned that this legislation doesn't help create a system that delivers all the benefits that I just outlined. Today, I think we need to discuss why it doesn't do that.

Mr. Speaker, I've only got about a minute left. I'm going to tell a story. I've told this story before. My wife—both her parents ended up in long-term-care retirement homes. My wife quit her job to take care of her family because when we had home care with a private provider, they weren't showing up. Her mother got disease in her foot. Luckily, we found a doctor in Hamilton, and she didn't have to have her foot cut off. Why would we not want to keep our family members at home? Mr. De Luca, my father-in-law, passed away. Grandma passed as well, but they died in a long-term-care facility. They never wanted to go to a long-term-care facility; they wanted to stay at home. But they weren't getting the care. They didn't have the staffing in these facilities. They ended up passing away.

1330

We can all fix that collectively, together. That's why I'm saying that you should take another look at the amendments, strengthen the bill, and make sure it works for all our moms, our dads and our grandparents. We can do it collectively, together. You can do that by listening to the ideas of the opposition, the Liberals, the independents and the Greens, because it's about our moms and dads and our grandparents. That's what this bill should be about.

I want to say to the Speaker, thank you very much for listening to me. I did do a speech for an hour. I'm sure that's not going to happen, but thank you very much. I appreciate it.

The Speaker (Hon. Ted Arnott): I thank the member for Niagara Falls.

Now we'll see if there are questions for the member for Niagara Falls related to his remarks.

Mrs. Daisy Wai: Thank you very much to the member from—

Mr. Wayne Gates: Niagara Falls.

Mrs. Daisy Wai: Niagara Falls, that's right.

I hear you. That's why the whole House here introduced this bill. We care about our seniors. We care about home care as well. We were serving on the same committee, and we've been listening intensely to all the public hearings and all the comments from the different parties. We will continue to work with each one of you.

You heard this morning from the Deputy Premier and the Minister of Health that she explained the reason why we had not been able to take some of the recommendations, which is why we did have meetings to go through each one of them, and we came to those conclusions. But we are all working together for better health care and better community care.

The question I have for you right now is: While the government is investing \$1 billion over three years to expand and improve home care services across the province and \$100 million for community services in budget 2023—accelerated investments to bring home care funding in 2023-24 up to \$569 million. Can you see how making the delivery system more streamlined will assist in delivering these programs?

Mr. Wayne Gates: Well, first, I appreciate the fact that you were listening. But when I talked about the amendments quickly, it wasn't brought forward by just the NDP. It was brought forward by caregivers. It was brought forward by workers that are in those facilities. It was brought forward by unions. It was brought forward by the privacy commissioner, who is an independent body outside here. Every single amendment from you guys were turned down.

When you're talking about the investment, I'm agreeing with the investment. I think \$1 billion would be great. But when 30% of that money is going to a private company, what are we doing? That's a mistake. I've said this, whether it was long-term care—when we know they made billions of dollars in long-term care as people died in long-term care. Why do we not take that \$1 billion—because the investment is a great idea into home care. We have to invest in home care. But why not have it for not-for-profit? I know it was brought in under the Conservative government. It was brought in under the Harris government. The same thing happened: It was never about care. They were supposed to get faster—

The Deputy Speaker (Ms. Donna Skelly): Response?

Mr. Wayne Gates: I got a couple of seconds left—

The Deputy Speaker (Ms. Donna Skelly): Further questions?

MPP Kristyn Wong-Tam: Thank you to my colleague from Niagara for his great presentation.

We know that the system of home care was originally privatized by then-Premier Mike Harris, who at that point in time said that the private delivery of home care would make the care better, faster and cheaper. Given your insight into the sector and all the work that you're doing in long-term-care homes, has any of that come true?

Mr. Wayne Gates: The quick answer is no, and that's why, here, we have another bill 10 years later trying to fix the home care from the mess that happened—it was probably

12, 13 years ago; it was longer than that, maybe 17 years, since Mike Harris was in office. So the answer is no.

My position is, why do we not keep it publicly funded, publicly delivered, for home care, and every single tax dollar—we're all trying to stretch our dollars, and tax dollars in particular, as far as we can—make sure it goes for care?

It was never cheaper, it was never faster, and the outcomes were never better. All of those three things are a lie, a lie, a lie—never happened.

The Deputy Speaker (Ms. Donna Skelly): Questions?

M^{me} Dawn Gallagher Murphy: To the member from Niagara Falls: This is all about moving, integrating the home and community services in with the Ontario health teams. There is a targeted approach. We are starting with 12 Ontario health teams to begin, but it will be extended out to 57 Ontario health teams. We have seen great successes and wins for both patients and providers.

For example, in my community of Newmarket–Aurora, Southlake Regional Health Centre in my community, which is a member of the Southlake Community Ontario Health Team, has a wonderful program that my constituents are benefiting from, and it's called the Geriatric Alternate Level of Care Reduction Program. I would have to think you would want some program like this in your community so they can share that with your Ontario health team.

Mr. Wayne Gates: I do appreciate the question.

I don't know what's going on in your riding; I do know what's going on in mine. And what I know is that when we brought this bill forward, what we should be doing—we should have learned from Tarion, on how that board is stacked with people who aren't taking care of homeowners.

What we need to do is make sure the board of directors of the new agency, Ontario Health atHome, reflects diversity, regional representation, health experts, home care patients and clients, caregivers, and French-speaking members, and that any payments made to the members of the board would be made public.

So what I'm saying is, we need to have openness and transparency on this bill, and this bill doesn't get that to us. That's what we need so we can have that open dialogue with the teams. If you stack the boards with people who are—like I raised this morning, quite frankly, on Niagara parks—past candidates or friends or donors, it's never going to work. We have to make sure that if you're—

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Adil Shamji: My question for the member from Niagara Falls—if I could ask you to reflect a little bit on the proceedings of our public hearings and one or two of the most common concerns that were expressed about Bill 135. Would you share what those were and whether the government allowed any of those concerns to improve the bill in the final version that it is?

Mr. Wayne Gates: I appreciate the question. You sat on the same committee as I did. They brought forward some very good amendments. They were all turned down.

We heard that people from the north, because of how quick the timeline is, couldn't get here to committee, couldn't make presentations. For bills that are important like this, we should do what we used to do; we used to take the committees—to go around the province and go to communities like Niagara.

Niagara, I've said this before—I know you guys are listening, and I really appreciate that. In Niagara, we have the highest concentration of seniors in the province of Ontario. So you would think that if you're talking about home care—our seniors want to stay in their homes. Why would you not bring this committee to Niagara so we could have consultation with people from Niagara—from Sudbury; from Toronto, by the way; and maybe even in your own riding, up in Hamilton; up in—

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Miss Monique Taylor: Thank you to the member from Niagara Falls for his debate this afternoon.

My question is around what I think is one of the biggest crises of home care: the staffing and the lack of staffing available. We know, through COVID, we lost many members who were PSWs, nurses, who just left the field altogether. Bill 124 compounded that problem, creating more people leaving the field.

1340

As I move through this bill, I don't see any resolve to that problem. Temp agencies are another problem that just siphon money out of our home care system. Would the member care to comment on how he feels about no staffing issues being regarded within this bill?

The Deputy Speaker (Ms. Donna Skelly): Back to the member for final response.

Mr. Wayne Gates: I appreciate that, Madam Speaker. What a great question, because that's really the elephant in the room. The bill does absolutely nothing to ensure workers are paid a fair wage.

So what we need to do with PSWs, very clearly, and Bill 124—one, we should repeal Bill 124. We've been saying that all along. Why fight them in the courts? Why spend millions of dollars fighting Bill 124 in the courts? What we need PSWs to be career jobs, something that they're proud of doing; that they're good jobs, that they're paid real wages, real benefits—including easy to unionize, because we know if you belong to a union, you're going to have better benefits, you're going to make better pay and, in some cases, even pensions. Make it a job that you're proud to say, "I'm a PSW," and not that it's part-time. Make sure they're full-time jobs. That's how we can fix not only home care, but long-term care and get rid of the privatization of these companies as well.

The Deputy Speaker (Ms. Donna Skelly): Further debate? I recognize the member for Don Valley East.

Mr. Adil Shamji: Thank you, Madam Speaker, and I do want to say thank you very much for taking the special attention to find me over here.

It's an honour to rise in the chamber today to discuss Bill 135, a bill that hopes to improve the status of home care in Ontario, something of paramount importance to my

constituents in Don Valley East and, of course, all of our constituents, recognizing that there are well over 600,000 people who need access to this kind of care so that they can age with dignity in the comfort of their own homes, as opposed to being forced to go to long-term care.

Over the course of my time for these remarks, I'd like to touch on a few things, specifically the current state of home care, how this came about, the recommendations that we've heard over the last few days during public hearings, and then clarifying what the final version of the bill actually looks like.

As we speak, our home care system is in disarray, and the state of that home care system has plummeted in the past five years. We see profound staffing shortages. We see that there aren't enough PSWs who are able to go on a regular basis to treat patients at home. There's a massive shortage of nurses, but it's not just about nurses. More broadly across the health care system, we have a shortage of paramedics; we have a shortage of respiratory therapists and medical lab technologists, much of which is a consequence of the inaction by the current government.

For those staff that we do have, we have profound staff turnover. We have, for as many nurses or PSWs that are coming in—and I acknowledge some meagre efforts on the part of the government to increase recruitment of health care workers. There is no attempt to actually retain them, which manifests itself in PSWs and nurses coming for a short time, and then choosing other professions or being forced to retire too early.

Beyond a shadow of a doubt, the consequence of all of this is that there is profound rationing of care. My own constituency assistant has a bedbound parent, and despite the fact that his boss is a family and emergency doctor and a member of provincial Parliament, we cannot get consistent home care for him—a crisis of this government's own creation.

We have a home care system with staff who are profoundly demoralized. They're burnt-out from the pandemic. They have moral injuries from rationing care in the manner that I just described.

We also see profound for-profit exploitation rampant throughout the home care sector. We have wage suppression that squeezes out more profits and piggybacks on the unconstitutional Bill 124, which this government persists in appealing. We have for-profit operators prioritizing hiring workers on a part-time basis, so that they don't get sick days, so that they don't get benefits, even though we know that full-time would not just provide a more humane work environment, but would also guarantee continuity of care between providers and the patients who they're serving. We have that rationing of care and we have public pain for private gain, because all these extra dollars are getting pocketed by these for-profit operators.

The ultimate consequence of this is lower quality, rushed care. We have systemic underfunding. We have the government not accepting money on the table, for example, to raise the wages of PSWs. The federal government has offered \$1.7 billion across the country; I think something like \$600 million for Ontario that this government can

choose to accept in order to further raise PSW wages, which is simply being left on the table.

Then, of course, we have over-promising and under-delivering. We have a government that continues to promise \$1 billion to home care, but then repeatedly, year after year, doesn't actually deliver on that. The latest iteration of is that is \$569 million that has apparently been committed, and we're all waiting with bated breath to see whether that actually gets paid out to any of the home care operators.

As a result of our health care system getting eviscerated and our home care system plummeting in terms of its performance, we're seeing increased wait times, we're seeing increased staff turnover and we're seeing a growing number of people who could age with dignity, heal with dignity at home being forced to turn to things like long-term care, which ultimately costs more to all of us.

Bill 135 is supposed to be the solution to that. It is supposed to consolidate 14 local health integration networks into a single monolithic super-agency that purports to provide better-integrated care. I had the opportunity to participate in a briefing by the Minister of Health by some very well-intentioned people in the ministry, but when I posed to them a single, concrete way in which this bill would actually increase integration, beyond just saying the word—when I asked how it would concretely do that, they were unable to provide a concrete example.

In short, what we are seeing is a half-baked, poorly conceived monolithic alternative that simply hasn't been fully thought out, and the danger of these half-baked ideas we have already seen before under this government. The last time that we saw enabling legislation such as Bill 135 was when the Ontario health teams were introduced. I will say, because I've had an opportunity to work with many different Ontario health teams, some work very well, but others are extremely immature. Others aren't functioning well at all. And there are still Ontario health teams that have yet to be formed.

Mrs. Robin Martin: One.

Mr. Adil Shamji: That's fine. One of the members across is pointing out that there's just one Ontario team health that has to be formed, but the rest have been just rushed through and are still struggling to come together, many of whom don't actually know how they're going to function altogether.

What's particularly worrisome in Bill 135 is that Ontario Health atHome will not assume all of the responsibilities that the local health integration networks previously had. That is, of course, worrisome because whatever responsibilities are left over are supposed to be assumed by Ontario health teams, one of which hasn't been formed and the rest of which are immature. When that is not an option, it will ultimately go to the hospitals, and as we heard during public hearings, the hospitals are not ready to assume all of those responsibilities. So what's going to happen?

I had an opportunity to introduce an amendment during clause-by-clause that said, "Okay, if an Ontario health team cannot assume that responsibility, if a hospital cannot assume

that responsibility, then Ontario Health atHome will assume that responsibility." Of course, that was voted down.

In fact, during review in the Standing Committee on Social Policy, despite the myriad concerns expressed by many different witnesses, every single concern was ignored. Every single amendment was ignored. And then the government members actually had the audacity to say that we didn't give them enough time to review the amendments, despite the fact that the amendments deadline was actually before the end of public hearings.

If I were to very briefly summarize a number of the concerns that were expressed during public hearings, it would go like this:

The Information and Privacy Commissioner of Ontario: I will remind everyone that the IPC is independent and non-partisan. The commissioner expressed a number of concerns related to confidentiality. All of his recommendations were ignored. We put them forward as amendments. Evidently, this government does not care about patient confidentiality. The minister's remarks earlier that the government had worked with the Information and Privacy Commissioner sadly falls on deaf ears, because if they had indeed worked, the IPC wouldn't have had anything additional to say or to recommend in our public hearings.

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Another concern that was expressed was around accountability and transparency. For example, there isn't enough input, particularly from the public, particularly from regions across the province to appoint a board of directors that is actually responsive to the public, that can't be commandeered by for-profit private interests. Again, multiple different iterations of an amendment were proposed that would increase that accountability, increase that transparency and, sadly, all of them were shot down.

We looked for evidence of geographic, ethnic or occupational representation in the rollout of Bill 135—that was shot down as well. And we saw, for something as basic as a formal and transparent pathway in which patients who are struggling to access home care, there is no way and no interest in creating a way for there to be a formal and public complaints process. This is deeply problematic. Fundamentally, if we are genuinely interested in building a home care system that works for all of us, we can accept the fact that there may be honest and well-intentioned reasons that it may not work properly, but patients and providers should have a transparent and public process in order to point that out—in other words, to complain. This government isn't interested, and when given an opportunity to accept an amendment on that, they shot that down.

If there is one thing that came up over and over again over the course of public hearings, it was the fact that this bill misses the main reasons that home care in Ontario is struggling. Over and over again we heard about the challenge with staffing wages. We heard the challenge of burnout and low morale amongst our health human resource workforce. Given the opportunity to fix that, given the opportunity to acknowledge that, there was no interest in doing so on the part of the government, and

amendment after amendment after amendment was shot down.

One could also imagine, after having observed the stumbling, half-baked implementation of Ontario health teams—which continues to stumble along—that the government would require just a little bit of extra time, a little bit of extra assistance in order to give Ontario health teams the time to assume responsibility, to even learn about the actual functions of Ontario Health atHome, because they are very clearly not delineated in Bill 135. I introduced an amendment that said that there can be a two-year rollout of Ontario Health atHome to give time for that transition, to give time for that clarification of the roles and time for Ontario health teams to prepare, time for Ontario health teams to be formed, because they're not even all formed yet—shot down.

I think that we can come together and unite around the fact that we do want seniors in Ontario to age peacefully and with dignity in the comfort of their own homes. I don't believe that there's a single person who would disagree with that statement. Many of those seniors are watching us today from home. They want to see a government that works for them. That is actually interested in implementing a bill or legislation and ultimately, a home care structure and framework that responds to their needs at home. What they don't want is to see something just pushed through and rushed through, without listening to the people that matter.

If there is one thing that the public hearings process demonstrated, it is that this government is not willing to listen. Every single suggestion, every single idea that was put forward by the people that matter was shut down. That is why taking in sum, in totality, I cannot help but conclude that this bill entirely misses the mark, is full of holes, and while there were ways in which this potentially could have been salvaged, those protections, those ideas were not put in place and unfortunately, we have legislation before us that can only harm home care in Ontario and cannot be supported.

The Deputy Speaker (Ms. Donna Skelly): It's now time for questions.

Mrs. Robin Martin: Thank you to the member opposite. I'm always very interested to hear what the member from Don Valley East has to say about these things. He should know that this problem in home care was created over many years, and certainly the 15 years of Liberal government did nothing to fix it. They didn't address it. They didn't open up the legislation, but we did. He accused these ideas of being half-baked, but of course, the Liberals had no ideas to fix home care, so these are better.

In fact, Sue VanderBent, who came to committee and was a witness there, the head of Home Care Ontario, said, "This legislation is pivotal to the future. Minister Jones is a strong advocate for home care. Reforms are under way to create more capacity. This act is so important because it creates a structure for home care organizations to interact effectively and efficiently with Ontario health teams."

Could the member opposite not support these provisions, like Sue VanderBent of Home Care Ontario?

Mr. Adil Shamji: I thank the member from Eglinton–Lawrence for her passionate remarks. Certainly, after five years of Conservative mismanagement, I agree with the need for urgent attention to our home care system in Ontario.

The problem is, I'm still waiting for that urgent attention. I mean, we hear no shortage of words. We hear no shortage of commitments, like a billion dollars to go to home care. We're still waiting to see those dollars get spent. We're still waiting for the calls of all the other witnesses during public hearings to address staffing shortages, to address wages, to implement protections, to fight for accountability and transparency, to ensure enough time to actually implement this, to ensure that there are all of the functions of home care to be addressed. We're still waiting for all of those things. I'm waiting for those things. I would be proud to support legislation that considers any of that, but this does not.

The Deputy Speaker (Ms. Donna Skelly): Questions?

MPP Kristyn Wong-Tam: Thank you to the member for his excellent presentation. I'm just very curious: Because you were in the committee, you heard a number of the deputants coming forward, and they provided a number of, I believe, very helpful recommendations. What I understand now is that none of them were adopted.

What I want to know is, the bill, as it stands right now, doesn't really say a lot about requiring evidence-based and culturally specific care. There is no language in the bill that talks about making sure that the communities are deeply engaged, as well as the residents are consulted around the type of care that they're provided. What can be done to further strengthen this bill?

Mr. Adil Shamji: Thank you for the question. Certainly, one of the concerns when you consolidate regional partners into a single, faceless, monolithic institution is that it ceases to be responsive to the regional and local needs of patients. We have certainly become aware of many concerns by many different groups across gender-diverse groups, across Indigenous communities and northern communities as well, that worry that their unique concerns and the unique challenges that they face on the ground cannot be reflected or represented in this monolithic Ontario Health atHome.

How can this be addressed? A number of suggestions were put forward. It was suggested, for example, that the board of directors could have representation from different communities, different ethnicities, different regions. It was suggested that the board of directors could travel around the province. There are many more things that can be done. But for a government that loves to say they get things done, they refuse to do any of them.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mme Dawn Gallagher Murphy: To the member from Don Valley East: This bill proposes to amend the Connecting Care Act, 2019, and establish the Ontario Health atHome and amalgamate the current local health integration networks, there being 14 of them, into one organiza-

tion. This is going to make delivery easier for home care—navigate it, access it for our patients.

It will also give a care coordinator. The Ontario Health atHome care coordinators would be assigned to the Ontario health teams. They'll work alongside doctors and nurses and all primary care to ensure that we have a seamless transition to home care from the hospital or primary care.

So, given the seamless transition that we are building towards, I have to think the member could speak to something in this bill that he does support.

1400

Mr. Adil Shamji: Thank you very much to the member from Newmarket–Aurora. I want to take a moment to respond to some of the things.

The seamless integration or transitions within care: Contemplate how you are supposed to have seamless transition in care from Ontario Health atHome to primary care when 2.2 million people don't have a family doctor, and when that number is projected to increase to three million by 2025. How are you supposed to have seamless integration in care when we don't even have Ontario health teams fully formed, some of which haven't been formed at all, and many of which are just trying to come together?

It's really difficult to accept at face value that this will accomplish what I believe you genuinely believe and hope that it will. But the architecture is not in place and every step that this government has taken only makes that challenge more difficult by ignoring primary care, by ignoring staff.

The Deputy Speaker (Ms. Donna Skelly): Questions?

Miss Monique Taylor: It's always interesting to be able to stand in the Legislature and listen to the Liberals talk about health care. I've been here for 12 years, and I can tell you that when I got here, one of the major issues was hallway health care and not enough care in our home care system. We've seen COVID, and the effects of COVID had a lot to do with the current government, but a lot of it was also from the 15 years of Liberals before them—the lack of inspections, the lack of care, the lack of funding that we've seen just bring our home care system to its knees.

Does the member not think that admitting to their own faults first is the step in the right direction to fixing the problems of the future?

Mr. Adil Shamji: It's always interesting to hear the member across talk about the Liberal record on health care, when she doesn't have a record on health care.

But I will say that I look forward to working in this Legislature with all individuals who are willing to work with us to improve health care to the very best of our ability. When it comes down to it, the only way that I will say that this government has done anything to get patients out of hallways has been to close the hallways in which health care is delivered. We've got something like 900 ER closures in 2022, more than 500 by August 2023 of this year, so there is an urgent need for attention.

I welcome anyone in this House to work with me, to work with all of us—including the member over there—to

contribute constructively. Instead of just shooting people down for the sake of doing so, let's actually work together collaboratively. If you're willing to do that, I'm willing to do it too.

The Deputy Speaker (Ms. Donna Skelly): Questions?

Ms. Laura Smith: Thank you for the submissions of the member from Don Valley East. I listened very intently to what he proposed, and I appreciate the fact that we all know there are things to be done and to work with, and I think our government is there to collaborate.

Given we're seeing innovation, such as the North Toronto Ontario Health Team—they've established a neighbourhood care team within seniors' housing buildings. They're offering low-income senior tenants a range of health care services, including regular blood checks, foot care—which is so important for seniors—access to social workers and wellness checks.

I'm just wondering what the member from Don Valley East thought about what this new model of care in Ontario will bring to the province and how he would like to work collaboratively on that.

Mr. Adil Shamji: Thank you very much to the member from Thornhill for that thoughtful question.

I've had an opportunity to work with many Ontario health teams. One that I'm particularly familiar with is the east Toronto Ontario health team, which I think is actually a health care system leader.

I want to take a moment to acknowledge all of the incredible work that health care workers across the province are doing in order to make Ontario health teams work. I think, if executed well, there is potential in Ontario health teams. I think many of the Ontario-health-team success stories are in spite of the structure for Ontario health teams, not because of that structure.

When I reflect on the east Toronto Ontario health team, the one that I have the most experience with, there are some absolutely outstanding health care leaders and health care workers that make that possible. But what I do see is profound inconsistency as you look across the province, which invites many, many opportunities to improve the structure that we have. The member from Thornhill asked about opportunities for collaboration; I would welcome the opportunity to contribute suggestions to make the Ontario health team network better.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. John Jordan: First of all, before I start I'd like to remind the member from Don Valley East that the committee did receive up to 30 amendments, 29 of those were given to us at 1:30, before a 3 o'clock clause-by-clause. Six were ruled out of order and 12 were withdrawn by the members opposite. So I'm not sure if that's a good use of the committee's time either. But I would like to get that cleared up.

The other thing I wanted to speak to is the privacy commissioner's recommendation. It was not an amendment; it was a recommendation that was later found to be included already in FIPPA. So that was the meeting that the minister spoke to this morning.

So starting off with my prepared comments—

Interjection: Now that you got that off your chest.

Mr. John Jordan: Now that I got that off my chest. It's therapeutic. I feel better.

So this government has placed health care, and we all know this, as one of our top priorities. Increasing health care staff through many, many innovative initiatives: streamlining the certification of the internationally trained, the Learn and Stay program, the Enhanced Extern Program, hospital preceptors—many initiatives have taken place; \$4.9 billion in long-term care to increase staffing by 27,000 health care staff. That's huge. That's historical.

Capital projects: There are currently, over 50 hospital projects building new and expanding existing hospitals. There are hundreds of projects across the province to build 58,000 new and reconditioned long-term-care beds. We have implemented the highest health standards in this country. It's backed by a robust inspection system to keep our hospitals, patients, and long-term-care residents safe.

We are all aware of how important home care is to our health care system: It's important to end hallway medicine. It's important to take pressure off the long-term-care homes. It's important to allow people to stay in their homes as they age. It's important to their families to know that their loved ones are safe and getting the care they need. It's important to our practitioners, our physicians and nurse practitioners so, when they send somebody home, they know they're going to get the care they need.

This legislation has been a long time coming, and it's wonderful to see this important work coming to fruition.

Speaker, I think we all know someone—be it a family member, friend, or a neighbour—who has benefited from home care. We know that to meet the demands on our hospitals and address the waiting lists for our long-term-care homes, home care is important. We are all likely to know someone who faced challenges when trying to access the home care system. This was a common problem when I worked in home care that we would have to deal with. Home care providers—especially in the rural area where I worked, I heard many times of people not receiving the care they need in a timely manner or in some cases not receiving it at all. There is skilled and dedicated staff working in home and community care, but the system has failed them, failed the staff and the people and the families that they serve.

For many seniors who live in my riding of Lanark–Frontenac–Kingston, independent living is critical to maintaining a rural lifestyle. Often, family members must relocate to pursue their employment in other markets, leaving no one close at hand to assist with the aging parents or family members who have had a crisis. If patients are released from hospital without a comprehensive, collaborative care plan in place, isolation can elevate the risk factor and in many cases make it too difficult to successfully recover at home. That's why the Convenient Care at Home Act is so important.

This bill to me is properly focused on better coordination and communication of needs and services. It builds on the work already done to create Ontario health teams. In

the early days of Ontario health teams, when I was directly involved, they showed great promise for bringing health service providers together to identify priorities and work collaboratively towards a solution, learning more about each other's programs, services and resources, and sharing those resources. Boundaries and territory issues were originally the fear—those quickly disappeared as we worked together towards initiatives and making life better for our community.

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Home and community care is a priority, and I want to thank the Minister of Health for bringing this bill forward to set the stage for a new home and community care system. I also want to thank the PAs here in front of me for all their work on this.

This bill, if passed, will take a major step towards ensuring people have access to the home care services they need for years to come, taking into consideration their individual needs and the challenges of serving our rural and northern communities. The role of Ontario health teams includes tailoring services to the communities they serve: a bottom-up approach to identifying not only challenges but, more importantly, solutions, and a top-down approach to ensure standards, quality and accountability are in place.

We are improving the way people connect to home and community care services by breaking down long-standing barriers between home care and other parts of the health care system. Through these changes, home care will be easier to find and to navigate.

Transitions from hospital to home will be more convenient with easy-to-understand home care plans for patients. An innovative example is the transformative approach adopted by the Children's Hospital of Eastern Ontario, which serves my riding. In an effort to forge stronger connections between home care services and the dedicated professionals caring for children within the hospital, the Children's Hospital of Eastern Ontario has taken on the responsibility of home care delivery. This strategic move aims to create a seamless and integrated continuum of care for young people and their families, ensuring a more holistic and patient-centric experience. And there are so many more opportunities to explore through the collaboration, co-operation and better communication between our health service providers.

We all know that it takes resources to increase services, and even to make positive change to how these resources are used. Our government has been clear that we will continue to invest in our home care system. In budget 2022, we announced an investment of \$1 billion over three years to get more people connected to care in the comfort of their own home and community. Our government is now accelerating investments as part of budget 2023 to bring funding up to \$569 million, including nearly \$300 million to support contract rate increases to stabilize the home and community care workforce. I know from working in a rural community, the travel for our home care workers was a major barrier to people getting service. This funding will hopefully help with that challenge that we all share.

This funding will also expand home care services and improve the quality of care, making it easier and faster for people to connect to care. This includes funding to help service providers manage rising costs, including the price of fuel, and provide additional services—recruitment and retention can be included in that. The fall economic statement funded additional volumes in 2022-23, including thousands of additional hours of personal support services, 400,000 nursing visits and 125,000 nursing shifts, 71,000 therapy visits and 150,000 other types of home care visits. Also part of this \$300 million investment is \$117 million for contract rate increases for home care.

In addition, starting in 2022-23, Ontario is investing nearly \$100 million in additional funding over the next three years to expand community care services, such as adult day programs, meal services, transportation, caregiver supports and assisted living services, supporting the independence of over 600,000 people. These services work hand in hand with home care.

The Convenient Care at Home Act will facilitate innovative solutions to local challenges and better connect and coordinate people's care through Ontario health teams. Ontario health teams will be responsible for connecting people to home care services starting in 2025. The act will also establish a new single organization called Ontario Health atHome that would take on responsibility for coordinating all home care services across the province through Ontario health teams, thereby eliminating the boundary issues that plagued the LHINs.

This was a big issue in my riding. One side of the street would be in Champlain; the other side of the street would be in South East. One side of the street got this basket of services; the other side of the street got another basket of services. The physician didn't know what form to fill out. It was not working, and that's why we have this act today.

These changes will make it easier for Ontarians to connect to the home care services they need and assist our practitioners in ensuring their patients have the care they need and go home safely. Instead of navigating a complex system and waiting for a call at home, through Ontario Health atHome, Ontario health teams will be a one-stop shop that provides people with easy-to-understand home care plans that let them know the care they're going to receive and when they're going to receive it before going home from the hospital.

This will be done with the help of Ontario Health atHome care coordinators, who will work within Ontario health teams and other front-line care settings, something primary care has been advocating for, bringing home and community care into the circle of care, working alongside care providers like doctors and nurses and directly with patients while in the hospital and other care settings to facilitate a seamless transition for people from hospital or primary care to home care services. So often, currently, someone would go home from the hospital and be told that they would get home care services, and they wait.

Ontario health teams are already transforming how people access care in their communities. Since the approval of the first cohort of Ontario health teams in 2019, there

have been many examples of community providers coming together to provide coordinated and connected patient-centred care, such as the example I provided of the Children's Hospital of Eastern Ontario.

We are already seeing teams design and implement new integrated models that are responsive to the unique needs of the communities they serve. This is happening across the province, in Algoma, north Toronto, mid-west Toronto, Ottawa east, Middlesex-London and more.

We know Ontario health teams can work. Working with the Ontario health team model, there are already many examples of improved collaboration and co-operation as a result of Ontario health teams.

Ontario health teams are also exploring new partnerships with home care providers, such as in Guelph, Wellington and Durham. And in east Toronto, we've seen how an Ontario health team can embed home care and primary care services so that patients and families can better access care in their home or community.

We have heard a lot of discussion lately about home care, and I think we all agree on the importance of this sector in our community and the importance of bringing them into our circle of care with all providers. No one wants to be in the hospital for longer than necessary, nor do they want to have to leave their home for long-term care needlessly. Remaining at home and in the community means better outcomes, whether that is mental health, social support or overall health and well-being.

It's a win for providers; it's a win for hospitals; it's a win for patients, for families and caregivers; and it's a win for communities and our province. It means that Ontarians can rest assured knowing that when the time comes, convenient and connected care in their home is available where and when they need it. Because—I know I'm not the first person to say this—the only thing better than receiving care close to home is receiving care in your home. The minister said that earlier this morning as well.

There were a number of quotes, and I want to repeat the one from Matt Anderson, the president and CEO of Ontario Health, relative to this legislation: "This 'connected care' approach, and the provincial investments to support it, will help transform health care delivery and support the vision of all Ontarians having full access to the care they need, across the spectrum of health care—all working together to deliver integrated care, through their Ontario health team."

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Speaker, home care is a cornerstone of support for approximately 600,000 people in our province annually, offering a vital lifeline for those seeking personalized and accessible care and recognizing the preference for receiving care in one's home. This bill is being brought forward to improve and expedite access to home care services. This bill is about building a system—a system of integration, collaboration and co-operation. The current system of having 14 LHINs going 14 different directions with 14 different models of delivery of service is not working.

Through strategic investments, we aim to empower individuals with a broader array of choices, enabling them

to connect with convenient care directly in their homes and local communities, bypassing the need for hospital or long-term-care-facility interventions. Re-admissions to hospitals will decline as a result of this bill. Deconditioning of patients in hospitals will decline because of this bill, because people will be able to go home sooner with the care they need safely.

The scope of home care encompasses diverse needs across all age groups, catering to individuals with medically complex conditions, physical disabilities, chronic diseases, frail seniors and others requiring services and support for secure and independent living within the community or their homes. Speaker, to this end, community care—a pivotal component—spans services such as personal support, home making, meal provisions, transportation assistance, caregiver and respite support and a spectrum of other essential services collectively impacting the lives, again, of approximately 600,000 people each and every year.

Home and community care plays an integral role in promoting the health and safety of individuals, forming a crucial thread in the fabric of a connected, convenient and integrated health care system. Moreover, home care facilitates swifter transitions from hospital settings to one's residence, contributing to a reduction in avoidable hospital admissions, emergency department visits and unnecessary long-term-care placements. Supporting access to home and community care services is not merely a health care imperative; it is a commitment to ensuring that Ontarians receive the care they require in settings that align with their preferences, fostering an environment where home truly becomes the preferred locus of care.

The use of Ontario health teams will ensure that the community needs and the people within that community's needs will be addressed. At the forefront of enhancing the patient care journey is Ontario health teams, which play a pivotal role in connecting various facets of health care seamlessly. I was impressed in early days with Ontario health teams, going back to 2019, about how all the health service providers in our geography were participating in one way or another, including our family physicians, who are very busy and very stretched for time. They made the effort to be there. They had the need. It was a priority for them as well to get services for their patients when they leave their care in hospitals.

By bringing together these diverse health care providers from primary care hospitals, home and community care, long-term care, mental health and addictions, there's a greater awareness of the services out there and, therefore, a greater awareness of what services their patient can benefit from when they send them home. And that can all be arranged before they go home.

The Deputy Speaker (Ms. Donna Skelly): It's now time for questions.

Mr. Sol Mamakwa: I want to thank the member for the presentation. Sometimes when I listen to government talk about how they're improving things, I think about Kiiwetinoong. We have 20 long-term-care beds in Kiiwetinoong that serve about 35,000 people. And the wait time to get a

long-term-care bed is seven years. I'm just asking the member how this bill will help the people in Kiiwetinoong that require long-term-care beds.

Mr. John Jordan: I think one of the biggest priorities that this government has been dealing with is the shortage in long-term-care beds, as the member opposite knows. We have made a significant commitment of 58,000 new and reconditioned long-term-care beds. I think that commitment was really affirmed when we saw the rising cost of long-term-care builds and the interest rate costs rise and this government immediately stepped up with the supplemental fund. So there's no doubt a commitment there.

Better access to home and community care will assist your constituents greatly as they wait—and unfortunately, people across Ontario have to wait to get into long-term care because of this huge demand and this shortage of beds. But I can assure you that the government is addressing this.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Adil Shamji: Thank you very much to the member from Lanark–Frontenac–Kingston for your remarks and for your experience in home care that you bring to the chamber. My question is, how does Ontario Health atHome address the unique needs of francophones in our province?

Mr. John Jordan: The main reason for Ontario health teams being formed is so they represent and respond to the needs in their communities. So a francophone community, like my friends in Cornwall, will have an involvement with the Ontario health team and participation and can fine-tune how those services are delivered—by working with Ontario Health and Ontario home and community care, by feeding up the information from a ground-up approach and having all the service providers involved in the Ontario health team, and now bringing home and community care into that fold and embracing them into the circle of care within those francophone communities.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

M^{me} Dawn Gallagher Murphy: Thank you very much to the member from—

Mrs. Robin Martin: Lanark–Frontenac–Kingston.

M^{me} Dawn Gallagher Murphy: Yes, thank you. I'm wasting all my seconds here.

I know I often hear from my constituents how they have struggled to navigate the home care system and, obviously, get access to the care that they need, and you made mention of this in your speech based on the current LHIN system. Can you talk to how this legislation that we're proposing, the Ontario Health atHome, is going to make it easier for people in your riding, as well as my riding, to be able to access the home care services that they need and deserve?

Mr. John Jordan: I think a great example was the one that I presented with CHEO, where the home care providers are working with and coming into where the hospital services are being given and where the patients are, and knowing those patients and the services they need and developing a care plan before they leave the hospital,

so that when they leave, there's confidence from the physician, their care providers, and there's confidence from their family that the services are in place and, in this case, that the child is going to receive those services when they leave the hospital.

It's really having the home care involved in the development of the care plans and how the services are delivered, particularly in our rural and Indigenous communities as well—how those services roll out.

The Deputy Speaker (Ms. Donna Skelly): Question?

Mrs. Jennifer (Jennie) Stevens: To the member: We all know what a vital role health care workers provide in home care services. I know because my mother was just recently tended to by a PSW, several of them that were jumping from job to job.

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But within this, what specific measures does this bill include to ensure recruitment and retention of a skilled and stable workforce in the home care sector? As I said, the PSW who cared for my mother—there were three of them. She often said that it was hard to make a living, because it's often women in the workforce and it was hard for her to make a living because she was going from job to job.

So I'm just wondering—and legislation like Bill 124 actually didn't help with recruitment. Particularly in terms of unionization and full-time employment with benefits, where is that in this bill? I haven't been able to see where you're—

The Deputy Speaker (Ms. Donna Skelly): Back to the member for Lanark–Frontenac–Kingston for a response.

Mr. John Jordan: There have been a number of bills presented in this House, and they're all part of improving health care, and they're not omnibus bills. So no, this bill doesn't specifically state anything about compensation for our health care workers, but certainly all of our initiatives have worked towards that. We all know this. A good example is the one in long-term care, with \$4.9 billion going into health care workers in long-term care—the education programs.

I spoke in my presentation about the economic statement and the dollars that are going to home and community care providers, for them to deal with the challenges they have with both staffing and travel, and operations in general.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Rick Byers: I thank the member from Lanark–Frontenac–Kingston so much for his remarks. I greatly admire the direct experience in the health care industry that he brings to his role here, particularly in the model of home care and community health centres that he has direct experience in. I was, in my community, able to sit on the board of the community health centre and came to understand that model in the last few years, and I respect it, particularly for rural health care.

This is my question to the member; perhaps you can relate it a little to the questions asked: How does this bill help the delivery of health care, particularly in rural

communities throughout Ontario that need that support so much?

Mr. John Jordan: Thanks very much. I'm very optimistic about Ontario health teams, and Ontario health teams representing the community which they represent. I think there are 57 now across the province. Those special circumstances within a community, whether it's urban or rural, will be addressed through that collaboration of health care providers.

And now we have Ontario Health, and home and community care coming under the umbrella of Ontario Health, so those directives—and that's the top-down approach. Every person, regardless of their geography, deserves the same level of services when it comes to home and community care and access to those services, and that will be coming down with the standards that come out of Ontario Health.

The Deputy Speaker (Ms. Donna Skelly): We have time for one quick question and response.

Miss Monique Taylor: As I said earlier, one of my greatest concerns when looking through this bill is the lack of resources going into the staffing sector when it comes to our home care system. Could the member please speak about what he's hearing in his community and why he doesn't think it's important that staffing is recognized within this home care bill?

Mr. John Jordan: I can say that we're making great progress on staffing. I know that from visiting long-term-care homes. That dial is moving. Agencies are not being used to the same extent. So all those initiatives that I spoke to earlier are having an effect. When we go into long-term-care homes, for example, we're very well received because of that fact. So yes, we are making investments. Yes, we do have new programs. And yes, they are effective.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

MPP Kristyn Wong-Tam: It is always a distinct honour to rise in this House to speak on behalf of the community I represent, the residents of Toronto Centre. This is a very important issue, home care. We all have people in our lives that we desperately love, and we want them to have adequate care, and at some point in time, they will require some additional support and assistance. So this bill is actually deeply, deeply personal.

Home and community care is about much more than just nursing. I think we can all recognize this. It's also about personal support services. And at the end of the day, home and community care is about taking care of our elderly and our sick. I want to make sure that we can provide the care that they deserve and the dignity that they deserve because they sure have worked hard to build this country, and it's now time for us to take care of them.

Our home care system was privatized by then-Premier Mike Harris, who set about setting up the privatization of home care delivery. He did so under the premise that it would make the home care system better, faster and cheaper. Of course, we all recognize, with the challenges that are in the home care system right now, the Mike Harris

legacy is that none of that came true. Ontarians were sold a bill of goods. That was just wrong.

The home care system is broken, so absolutely, it needs our attention and we need to address it. It has failed more people regularly every day, and we see this because of the complaints that each and every single one of us in our constituency offices get. We hear about the stories from PSWs and how hard they're working trying to piece it together. But the quality of care, the coordination and the level of service is simply not there.

This bill creates an arm's-length agency to oversee home care, with a board of directors that can be appointed by the government. These members can easily make decisions that can further privatize home care. It doesn't guarantee better wages. It doesn't guarantee better service. It doesn't guarantee better delivery.

The bill says that home care is going to be part of the Ontario health teams. Interestingly enough, this has already happened and is already happening right now. We don't need this bill to enable that. And I think that is rather tiresome and somewhat dishonest, because you have an entire schedule in a bill that seems to gesture that it's making some sort of big, significant change and some type of enhancement, but it's not even required.

I'm really interested in understanding how we can do more to support our seniors and our most vulnerable, and this bill, right now, doesn't come close to doing that. It doesn't improve the pay or the working conditions of PSWs, nurses and other home care workers, even though their working conditions, as we know, are not satisfactory. Their satisfaction level around their job is also not very good. It also contributes directly to the quality of home care that our loved ones deserve and that they should receive. Hard-working Ontario PSWs are being exploited, underpaid and overworked. Many of these workers are immigrants and racialized women. Many of them worked on the front lines during the pandemic, putting their lives at risk by making sure that the seniors had the care that they needed in their homes during the pandemic.

I recently spoke with Connie, a PSW in Toronto Centre. She worked throughout the pandemic caring for seniors in their homes. Her hours would fluctuate significantly and she didn't have benefits. Sometimes, she would be scheduled to work as few as three hours a day, but she would be travelling back and forth to different clients. Those hours of travel were not clocked.

PSWs are essential. They deserve to be treated with respect. Connie told me that the seniors that she visited also desperately depended on her. She would pay each one of them an hour's visit. That's what she was allotted. She had one hour to visit each client. And, during that one hour, she would provide this basic level of care: assistance to go to the washroom, bathing her clients and preparing food. It's almost impossible to do that volume of work in one hour without rushing and compromising the level of care. Ultimately, she ended up volunteering her time outside of the hour of pay because she didn't want to leave her clients uncared for.

Our seniors deserve the highest quality of care, and the workers who care for them deserve a decent wage and a full-time career. The work is very hard. This government needs to step up and pay PSWs what is commensurate with hard work. This should also require payment that allows compensation for the physical and emotional requirement of this work.

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I heard from another PSW in my riding, Sue, who had completed her training during the height of the pandemic. She told me that she felt it was her calling and she wasn't doing it because of the money, because of the number, the actual quantum on her paycheque. Certainly, it didn't tell her she was valued. But she knew she was valued because her clients told her she was valued. She would take care of these families, and she made sure that she would give them the quality and time that they deserve. She would listen to the stories, and she would be able to share stories back with them. We know that work is hard, Speaker; that's emotional labour as well. Sue has said that half of her clients have now passed away. She began her work during the pandemic. It was incredibly emotional, Speaker. She brought those heavy feelings home every day. She was saddened by it.

PSWs are truly health care heroes; we heard about this during the pandemic. And how do we treat our heroes? We don't pay them well, we don't treat them well and we don't respect them. This bill could fix that, and yet it doesn't.

I've also been in contact with local organizations in my community in anticipation of the bill—these non-profit organizations who really know how to stretch a dime into a dollar, who provide essential care for people in our community in ways that government never can, because they have the relationships that we don't, that this House does not. And what did they tell me, especially the organizations that provide care for people living with disabilities? What they've shared is that 20% to 25% of their PSWs have been turned over every single year. Can you imagine losing your entire workforce, a quarter of them, every single year? They're leaving the sector because they can't live paycheque to paycheque anymore, because they're also lined up at the food bank after providing care for our most vulnerable. The staffing shortages are the agencies' biggest, biggest challenge. They've also shared with me that they met with government but, in their own words, the government doesn't seem to recognize this gap or perhaps is choosing to ignore it.

Another organization had similar stories to share—identical issues, in some ways. They highlighted how PSWs are racialized women and how they are undervalued for this important work. But it's also rooted, they noted, in misogyny and racism, and there are structural fixes that can be advanced right here in this House. This bill is an opportunity to do that, and yet again, it misses the mark. That, Speaker, is unacceptable.

This government has made it clear, by spending millions of taxpayer public dollars on fighting Bill 124, that poverty, wage-suppression bill that would punish the workers—

overwhelmingly, the number of them are women and racialized—instead of compensating them properly. That is also a big problem, because it's not addressed in this bill. If you really want to compensate our workers, our heroes, you would revoke Bill 124. You would stop taking them to court.

This organization—and I'm not going to share their name, Speaker, because they don't want to necessarily be punished in case their name is read out here, but they're very frustrated. They tell me that the government is just simply re-arranging the deckchairs on the ship, and that this legislation is not making the changes that they need to see in order for patients to be cared for first and foremost. They identified—this independent organization—that this is not patient-centred legislation. They say that the changes are confusing and it's unclear how it actually improves the day-to-day quality of life of patients or workers. They don't think that Bill 135 is actually fulfilling the mandate that it sets out to do.

The organization also says that the current procurement model for home care is out of date—that, we all agree to; that home care, in their words, for older adults is currently built on widgets—units of care. So they're discreet units of service that we purchase, such as a unit of care like a shower, a unit of care like physiotherapy or foot care. They comment that that is not how you provide the dignity of care for the most vulnerable, and especially not for our seniors, and that it doesn't factor in that sometimes a client doesn't want a particular unit of care. Perhaps that day they need something different—but there isn't the flexibility in the system that allows them to do that. They recognize that PSWs are incentivized to force the unit of care that they will be paid for onto the clients even if they don't want it. So for whatever reason, if a client wants a different type of care that day, they're just not going to get it. That is very upsetting to the client and it's very upsetting to the PSW, the home care worker, because it's setting everyone up for failure. It's very difficult to capture actual care if you're simply just checking the box as opposed to treating the entire individual.

My constituent Sue expressed to me that while she works hard as a PSW to check those unit boxes, she feels that the most important piece of care that she provides is emotional care, something that's entirely not on the checklist—there's no unit that talks about emotional care, that emotional labour. Listening to clients is emotional care—encouraging them to go for a walk around their home, reading to them, spending time holding their hand, breaking through the social isolation we know many seniors are trapped in.

Contracts are not based on outcomes but on widgets, so it's very transactional, which leaves the client and the family who is desperately trying to provide support for their elderly family member living with a disability not feeling very well supported.

PSWs should be compensated for their driving and commute time; I know that members of this House are. We all get to submit our invoices if we take a taxi; we get to submit our invoices for gas, but somehow PSWs don't, and they are paid significantly worse than each and every

one of us, and I might even argue that their work is harder than ours.

Imagine working those full-time hours, Speaker, and only being paid for a part of that time because you're driving between locations and it's taking you a while to get through traffic—you park your vehicle, you have to carry your equipment. None of that is covered, even though you're technically on the clock. You can't go anywhere else; you've got to get to the work appointment. There's nothing in this bill that addresses that gross inequity.

This non-profit organization I met with is operating in a really innovative model of integration, and they want the government to learn from them. They want the government to ensure that PSWs can work directly with the hospital floor, with the care team and the patient—then, transition to home is much, much smoother—and that the definition of “home” should be broader and it should also include shelters, supportive housing, long-term-care homes, and not necessarily a conventional definition of “home.”

These seamless transitional programs are small, but they have the capacity to expand. These organizations have already proven some innovative success, and I like that, because it allows us to be nimble. Things that work—let's scale it up, and let's export it. At-home programs, transitional care, surgical bundles—these programs are all different for different patient populations, but the programs are very similar. It centres the patient in the middle of the care and then you build the service around them.

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We have forgotten what happened in 2020. Home care was largely forgotten then, despite having very, very low infections because people were able to sort of isolate and stay at home. As we know, we're now being faced with some undiagnosed pneumonia that is circling about and the latest version of COVID-19, and the next wave and the next wave. The higher quality the home care service, the better we will be at protecting the integrity of our health care system.

Canadians want to stay at home; 90% of Canadians surveyed want to stay at home. That's where they want to be, but there are no resources, Speaker, in this bill that will enable that. They don't want to go to the hospital, and they certainly don't want to go to long-term-care facilities. They want to see home care expanded, so it's actually very politically popular, if that motivates anybody here. It's cost-effective. It's better for families. It's better for our health care system.

I now want to share a few stories from constituents who are home care recipients, and namely one, Sarah. She is receiving palliative home care but is suffering due to the lack of PSWs to staff her care needs. Recently, she was sent a PSW at 2 p.m. to get her up for the day—2 p.m., because there was no staff to help her before then. During the height of the pandemic, her partner, who was a teacher, had to go on leave to provide care for her because the staffing level was so low. She believes that we should pay our PSWs more—a fair, living wage, one that actually reflects the cost of living in this great city and this province.

She believes that more government investments should be made in the profession and that a college of PSWs should be established to professionalize the service and the role so they can never be treated so poorly again.

I want to share this story of Beth, a health care administrator. This is someone who actually has a bird's-eye view, which sees the entire system. She manages staff that come and go. She talks to the clients as they call in. Health care workers are overworked, underpaid, and Doug Ford made it clear that they are underappreciated. Now he's trying to "save" health care by introducing more health care privatization. This is so wrong. He exacerbated this health care worker shortage exponentially and is now trying to paint himself as a hero for pushing privatization.

Health care privatization is a ploy to make Doug Ford and his buddies richer. Canada is internationally celebrated for having public health care and having it operate relatively well. It is a key benefit of Canada and a large reason why people choose to live here. It is celebrated because it allows Canadians to have a great quality of life without the worry of crazy health care expenses. Look at the States: They have private health care and the public generally hates it. Having to pay for medical expenses and/or health insurance is expensive and puts people in difficult situations where they have to decide if their health is worth paying for.

Why are we paying taxes for health care if we are underspending our health care budget by \$1.6 billion? The solution to our health care system collapsing is to properly fund it, have Doug Ford stop giving his friend raises and fund our health care system for the public good. Give our—

The Deputy Speaker (Ms. Donna Skelly): If I can I stop the clock—and I apologize to the member for one moment. Even as we are mentioning or reading a quote, we cannot name a member. We have to reference their title or their riding. You can continue.

MPP Kristyn Wong-Tam: I'll just finish on this: Have the Premier stop giving his friends raises, fund our health care system for the public good, give our health care workers appropriate wages and give them the resources they need. Privatization is the Premier's selfish scapegoat.

Speaker, there's all sorts of reasons why we want to see the home care system improved. And I desperately want to see more amendments and to see this bill improved, but without that, it's very hard to support. It's impossible to support.

The Deputy Speaker (Ms. Donna Skelly): It is now time for questions.

Mrs. Robin Martin: Thank you to the member from Toronto Centre for her comments. There was a number of things in there—you weren't here for the last four years we were in government and maybe that's why, but we did do a college for PSWs. It's the advanced oversight model. It isn't a full college because it costs too much money for PSWs, so we've made it a different, light-touch regulation and we're working on that, but we passed legislation to allow it.

Most of what you said about transactional care, like units of care and foot care and a shower and unconvencion-

al definitions of home—that is what we are doing here by having this kind of a bill, allowing home care to be in different kinds of settings. You're seeing some of it yourself already. The at-home model is a direct result of Ontario health teams and the initiatives this government has taken.

So can you please agree to support what I think you said you find a much better kind of care, non-transactional, like in an apartment building, on the first floor, for seniors? They can all come down and get the services they need. That's a great suggestion.

MPP Kristyn Wong-Tam: I would love to be able to support a bill that I believe is going to get us to the outcome that we desperately need in Ontario, but right now, as you speak, we are specifically driving those units of transaction. There's nothing in this bill that actually talks about deep engagement with the residents or the community members. There's nothing in this bill that requires evidence-based, culturally appropriate, specific care for the clients where they need it.

Until we engage the sector and until we engage with the communities, and even the people that I referenced in my remarks who feel like the government has not been listening, this bill is not going to be improved.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mrs. Jennifer (Jennie) Stevens: I want to thank the member from Toronto Centre. Her words were very passionate, and I could feel the emotion coming from you. It's quite right; you just said it. The opposition is committed to working towards a more inclusive, affordable and accessible health care system in Ontario.

But in this bill, considering the absence of the provision for community-driven governance and culturally specific programs in the bill, what alternatives or amendments would you propose to ensure that home care services are tailored to meet the diverse needs of Ontario's communities, especially those with unique culture and health care requirements?

MPP Kristyn Wong-Tam: I think that every health care bill—every bill, to be quite honest—that we table should start with the person that we're trying to support. And from there, we build the web of services and legislative requirements to make sure that they are supported in the way that we want them to be supported. That's how we drive outcome, by designing the service for the people that we intend to serve. Unfortunately, there isn't any of that in this bill. What this bill does is it actually allows the government to create a new bureaucracy that then allows them to appoint members, and from there it's delegated authority, almost. That simply is not good enough, because that is not human-centred care.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Ms. Laura Smith: I agree, PSWs do make all the difference. Personal support workers play an absolutely key critical role in helping people. I know this on a personal level. But I'm not sure if the member is aware that the Ontario government is investing \$300 million over three years to help thousands of people launch careers as

personal support workers in long-term-care homes and in the home and community care sector.

Right now, they're offering up to \$25,000-plus to students and recent graduates of personal support worker and education programs, including \$10,000 for current students and recent graduates, up to \$5,400 to students while they complete their clinical placement for long-term care and \$10,000 to help with relocation when there's a rural and remote situation. So basically, if this bill is passed, it will take a major step towards ensuring that people have access to the home care services and the people that they need. Simply put, will the member opposite be voting in favour to help your constituents access home care in their community?

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MPP Kristyn Wong-Tam: I think that, as you outline numbers—what I'm interested in are the results. The result that we're seeing right now is that, number one, there aren't enough health care workers and PSWs out there. They're not necessarily compensated well; we can all agree on that. They're living with poverty wages. We're seeing an incredible turnover of staffing, which is what is one of the biggest problems.

So, if the solutions were there because the numbers were listed, then we should be able to see that in the outcome, but the outcomes are very, very poor. That's why we want to be able to make those amendments, as provided by a number of subject-matter experts that came forward, but, as I understand it, they were all rejected.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Terence Kernaghan: I'd like to thank the member for her excellent presentation today. I think the member has touched on the key issue that is facing our home care sector within Ontario, and that is the issue of wage parity. A nurse is a nurse is a nurse. However, this government would like to keep that terrible pay rate in place.

I'd like to quote a community nurse who says, "We are struggling to find people who want to work in the community because their pay is so much lower than bedside nurses', yet they are expected to do the exact same work. Our patients in the community are sicker than before."

With Bill 135, we see no care or attention to address wage parity issues within the health care sector. To the member: What improvements would you like to see within Bill 135?

MPP Kristyn Wong-Tam: Thank you very much. I would say that this government can start by not taking workers to court over Bill 124.

Do you want to know why people are leaving this sector? Bill 124.

Do you want to know why there is such an incredible staffing turnover? It's because of Bill 124.

These are things that are within their power, Speaker, entirely doable. Instead, they're taking the workers to court.

You're spending public dollars to defend really bad policy and legislation, and then you're putting forward something else that doesn't even solve the problem.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

M^{me} Dawn Gallagher Murphy: I would like to just further some of the comments that my colleague from Thornhill was speaking to in the announcement this afternoon, because recruiting more personal support workers is part of our province's Your Health: A Plan for Connected and Convenient Care. This bill is truly part of that plan, and recruiting more PSWs is all part of that plan, because part of that plan is to ensure that we have a seamless health care system where we can transition people from the hospital, from primary care, into their homes with the appropriate care, and making it seamless.

My question to the member opposite is, can you really speak to any part of the bill that you can get behind, because all the pieces of this great puzzle are coming together to have a seamless transition of which we know our constituents need? I would hope that the member opposite would be able to support this bill.

MPP Kristyn Wong-Tam: Recruitment is one piece of the puzzle, as we talk about puzzles. The other piece of the puzzle is retention. How can you possibly retain workers when you're recruiting them for a part-time poverty-wage job that's very difficult, without benefits? You're basically throwing money away, because they're not going to stay.

We want to professionalize this position and give these workers the dignity that they deserve and the respect that they deserve. That would be something worth supporting, but it's not in the bill.

The Deputy Speaker (Ms. Donna Skelly): We do not have time for further questions.

It's now further debate.

L'hon. Michael S. Kerzner: Comme je l'ai déjà dit, rien pour moi, en tant que solliciteur général, n'est plus important que la sécurité de notre province.

As I've said before, as Solicitor General, there's nothing more important than the safety and security of our province, and I'm delighted to talk to this bill today because it talks to the safety and security of our loved ones, and that's what's important for me.

The bill, as we know—and we're debating it today, and I want to thank the members opposite, because I've listened to their remarks. The changes that we'll make in this bill, we've talked about. We want to have care that's easy to find and to navigate. We want to see transitions from hospitals to settings that meet the patients' needs, and this is simple. Patients know what care is available to them—that's important—and patient care must be reliable and of high quality. Patient care must respond quickly when needs change.

I want to also acknowledge my colleague from Thornhill, who also just read a very important fact into the record, and that is that the Ontario government is investing more than \$300 million over the next three years to help thousands of people launch careers as personal support workers in long-term-care homes and in the home and community care sector. This will address what we've

heard opposite: recruiting, and other supports that they need to be there.

I really want to compliment the Deputy Premier, the Premier and the parliamentary assistants for making this announcement today, because I think \$25,400 to students and recent graduates of personal support worker education programs is very important. This will start to help address things that the members opposite have talked about.

I want to give a little retrospective of why we're here, and then talk specifically about why I think this bill is so important and why I will be supporting it.

This is one of many steps to improve health care. That's the first thing that's very important. The second thing is that we are structuring a standardization, which is very important, and we're creating the standardization for delivery of home care. I think removing, transforming and getting rid of the 14 LHINs, these local health integration networks, will ensure that everyone who leaves the hospital will have a standardized level of clinical care that meets their needs.

This is innovative. For me, just before I ran for public office—which, as I always say, is the greatest honour, to be the 1,947th member of the Legislature. That's something that's important to me. I transformed my own career, and I show my children every day—I know one of them is watching right now—that it's never too late to reinvent yourself. For me, I chose that I wanted to reinvent myself in life sciences. I wanted to see how we could make things better. I wanted to look for creative, innovative and imaginative ways to do it. When you're one person against the entire world, you are small. You can get things done, but you don't have the ability as we have now as legislators to really pass laws and a bill that can make that change.

The member from Niagara Falls said it: Parents are important. This is about our moms and dads, and I'm blessed to have both my mom and dad alive. I can tell you that when I look at their stages of life now, and thank goodness they are reasonably well for their advanced ages, I look back on how they cared for their parents—those were my grandparents—when their parents were of that age. We really look at it on a generational basis. We compare ourselves today to what we remember of how our parents cared for their parents, and before that, how their parents cared for their parents prior.

We've come a long way. I just want to mention that we've come a long way from the Victorian Order of Nurses. I remember that as a young kid, because they were there to help people at the homes, although I was young and I don't know what service they provided. More recently we had the CCAC and then the LHINs, and that's where we've been.

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Now, we have something that this bill will bring to life, this new Ontario Health atHome, which is rooted in something that is very important: that our parents and our loved ones deserve to be cared for at home. And the 57 health teams will work together with Ontario Health atHome. So I wanted to say that.

We love our parents. The member opposite from Niagara Falls doesn't have an exclusiveness of loving his late parents or his loved ones who may still be with him, and I feel the same. For me, this is personal, because as I've said, I am dealing with the aging of my own parents who very much like their parents have one request: to stay at home. "Leave me at home for as long as I can. As long as I'm feasibly able, bring the care to me," just like they cared for their parents. And I think this whole concept of standardization is, as I said before, one of many steps that the member from Eglinton–Lawrence and the other parliamentary assistant, in support of our great Minister of Health, have taken.

We look at the innovations we've made just in this past year, and they've been quite unbelievable, taking the stressors of our hospitals. You see, Madam Speaker, in York Centre, we have the Humber River Hospital—one of the first digital hospitals ever built. And, I have to tell you, it is phenomenal. And just since our government has made such important steps to make health care so much more efficient and accessible, we've seen the wait times go down.

I said to the Premier and the Deputy Premier just a couple of days ago that my father, just two weeks ago, was a beneficiary of the shorter wait-list on cataract surgery. That is something new. My mother is on a wait-list to get her knee replaced, and as we reduce the wait time for seniors who need hip or knee replacements, that will happen. And we've seen these small things. When we can go to our pharmacist, as a further example and proof point, to see that we can now get our COVID shots and our flu shots and, for the seniors, other shots that they would be entitled to, this is something that wasn't so commonplace. It wasn't commonplace to have a pharmacist prescribe certain medication for you. Instead, you'd have to wait—you'd have to book an appointment and then you'd have to wait for your doctor to see you on something that is now being done elsewhere.

And what else I'm really proud of in York Centre is that we've piloted a program with one of our local long-term-care homes. Instead of sending people in the long-term-care homes to wait in the emergency rooms for a long time to get an X-ray, we've streamlined that process, too. So, for me, there's so many things that I have seen just in my one year here.

This legislation, Madam Speaker, goes a long way to see the next steps. And the simple fact is, the majority of Ontarians would much prefer the comfort of their own home. Again, the member from Niagara Falls touched on that, and I agree—that's where parents belong and loved ones belong, to the extent that it is feasible. This bill addresses the availability and access to quality home health care that might be limited in certain areas or might not be readily available for everyone.

The cost of home care can be prohibitive for many individuals and families. Insurance coverage is, in many cases, very limited and leads to financial strain. Finding qualified caregivers, as the member opposite identified, is challenging. It requires thorough research and background

checks and many, many other things. There's also this emotional and personal adjustment for individuals receiving care, adapting to having someone in their home aiding them, and this is emotionally challenging.

It's not perfect, but I remember what the Premier said when we talked about why this government was going to look at not only health care but long-term-care homes. It was because, for 12 years, the Liberals came up with a number—I think it was 611 beds. We're at almost 30,000, and we are growing. That was a generational gap in time that we now have to triple down on to make sure that we can take care of them.

The Premier also said something else, Madam Speaker. He said, "What loved one would not want to have the quality of being with other people, to have programs, to have social interaction?" That's why we had to find a way to free up the beds in the hospital. Not to the detriment of a person who no longer needed to be there—we wanted to give them an opportunity have the programming and everything else that they deserve. I know this from my own parents: When a senior is active, when they have things do, when there are programs to go to, when there's something to do, they will age differently.

Madam Speaker, in the budget of last year, in the 2022 budget, we announced an investment of over \$1 billion over three years to get more people connected to care and comfort in their own homes and communities. Our government is now accelerating this investment as part of our current budget of 2023 to bring funding up to \$569 million, including \$300 million to support contract rate increases to stabilize the home and community care workforce. The funding will also expand home care services and improve quality of care, making it easier and faster for people to connect with care.

When we look just recently at the FES, the fall economic statement, we have gone even further. It's very important because as part of these investments, we're addressing a few things that have changed. The general cost of living has increased—which, by the way, is exacerbated by that carbon tax. That carbon tax roots itself everywhere. We can't get off it. People asked me today how come I answered a question on the carbon tax on public safety, and I said, "Because it adds to every budget for public safety." This is the same thing when caring for our seniors. Everything adds up.

Starting in 2022-23, Ontario is investing another \$100 million to expand, over three years, community care services such as adult day programs and meal services and transportation and caregiver supports and assisted living supports. While this may sound just factual and just figures, it will affect hundreds of thousands of Ontarians, and it's a lifeline. As the Minister of Long-Term Care said—and I wish he was here because I'd like to repeat his words exactly the case—"They helped build Ontario, they were there for us, we will never forget them and we will always do whatever we can to care for them."

I have to tell you something: To be blessed to have parents that—it's not perfect, especially when you're in a family with different siblings and relatives, but that's

where what we're talking about today makes so much sense. It standardizes the care. Many of us even in this chamber have parents and loved ones who live in other communities not near ourselves. I hear it every day. I asked the Associate Minister of Housing, "Where does your mother live?" He talks about his mom and dad, who ironically happen to be the same age as my parents. We have to look at the seamlessness of making care standardized all over the province.

Our province is big. It's an incredible place to see. And one of the privileges of being elected to this place is getting an opportunity, no matter who you are—if you're a minister, if you're in opposition, if you're a parliamentary assistant or you're a committee Chair—just to travel and see Ontario.

When I recently had the privilege of going up to Sioux Lookout, I saw the investments our government has made to that community in a facility that is quite unbelievable. It's the hub for that area of the north. I look forward to going farther northwest to see for myself.

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I've been to Thunder Bay; I've been up to Cochrane. In fact, when I was in Cochrane, I had a nice chance to spend some time with the member from Timiskaming-Cochrane so that I could ask more questions about that community. I was in Timmins and I was with our great Minister of Mines to understand health care in his community.

Wherever we go, all we want is to have a degree of uniformity, of standardization, of fairness, of concern. And it may seem a little bit odd that we, ourselves, today may not be the beneficiaries—please God, we should all be well and we should all be here and in this place. But we're thinking of our loved ones; we're thinking of our parents; we're thinking of our spouses' parents. The member from Toronto-St. Paul's has shared with us a story on how the member from Toronto-St. Paul's and her partner are caring for the member's mother. This is real. People have to worry about who's going to take somebody to a doctor and how we are going to bring care to them. It's unbelievable until you have to go through it. On the last sitting day in June, when we welcomed back the member opposite, I remember from all sides of the House how happy we were to see her back, to listen to the story about how she had to care for her mother, and that was the absence.

I guess the opposite with this, which will be a long time away, is looking at what is the standardization of health care for a generation that is not ours. It is perhaps our friend in Niagara, who just became a father for the second time, and to understand that one day, his young daughter Florence and his son Sullivan will have to care for the member and his wife. May it not be—based on the member's age, it's not going to be for a long time, but the seeds that we plant today—and I'm looking at the Associate Minister of Housing, who has had a tremendous career in agri-foods. Every day I learn something new about something that I wish I knew a long time ago. We've talked about our own parents as well and what we want for

them. He showed me a picture of his mother, still active in her late eighties. That's what we want.

It's not always possible and it's not always practical, but the duty of care is. And when we, as children and loved ones and nephews and nieces, can't always care for our loved ones ourselves because we are not health practitioners—I'm not; I was just lucky enough to get elected to this place and to serve my riding of York Centre, an honour of a lifetime. But when I go to see on Fridays, when I can, the Italian seniors' club, I see a group of individuals who are so amazing. I know they cared for their loved ones in another generation. What we're doing today and why we need to support this is so that Ontarians can rest assured that when the time comes, whenever that is, convenient and connected care will be available where they live.

Health care is one of our rights. When I became an entrepreneur, in my last life's chapter before this, I said, "We have an equal right to do what we can to care for our loved ones." It's not greater or lesser, one to another. And because of this, I am so pleased to support this bill, to congratulate the Deputy Premier, the Premier and the parliamentary assistants.

For all those who spoke today, what this bill is is a bill of respect, when we need it now.

The Deputy Speaker (Ms. Donna Skelly): It's now time for questions.

Mr. Terence Kernaghan: Thank you to the Solicitor General, the member from York Centre, for his presentation today.

This bill does need to be about respect, but as we see it right now, I'm not convinced that Bill 135 is indeed about respect. The concern for us—and what I would like to know from the member is, why did the government reject recommendations from health care workers? Why did the government not follow recommendations from advocates? Why did the government not follow recommendations from the Information and Privacy Commissioner when it came to crafting this bill?

Hon. Michael S. Kerzner: I want to thank my colleague opposite. What I can tell you is that the government has been so progressive and, I would say, forthright in bringing measures in place that improve our health care. Some of them look so trivial. I mean, just going to a pharmacist instead of waiting in a doctor's office is not so trivial. But the opposition had a chance to go before the committee, which was their right, and they did. And the committee had an opportunity to consider the changes and amendments that were brought to the committee, and they did. And that's what brings us here now at this time.

We have all an equal right to debate this piece of legislation, and I think it's a good piece.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Hon. Rob Flack: I very much enjoyed the Solicitor General's remarks. I would say that we do share parents of the same age, and as my father is watching—it's from home, which is great to know. My mother is there as well. He's going to be 92. As he always says to me, "You know,

Robbie"—is what I grew up as. "Robbie," he says, "I'm getting old." I say, "No, Dad, you are old."

But it's great that he is old and it's great that he's enjoying his life with my mother at home. I can say, lots of memories of VON throughout my life and what home care means, and being elected, I've learned more about home care and believe in it passionately.

I'm going to change topics a little bit, tied into home care. With our parents, with our loved ones staying at home more in their home communities where they should be, I would ask the Solicitor General, what are we going to do in terms of protecting these people, in terms of policing in the communities that they want to live and stay in, so they can continue to be active and safe in the homes that they live?

Hon. Michael S. Kerzner: I started my remarks in French by saying that, to me, it is a privilege to make sure we have safe communities. Seniors need safe communities more than ever. And as I've said many times, we've never had a government, ever, in my generation or ever that I have been able to find, that cares more about public safety. And when you tie it back to the fact that the changes we're making to the bill that's being debated—and we talk about public safety; they go hand in hand.

If you're having health care at home, if you're bringing standardized care all across the province, you want to make sure that those communities are safe. I want to thank the associate minister for highlighting this. It's a valid point.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Ms. Sandy Shaw: To the Solicitor General: I appreciate your words. I do agree that none of us have a monopoly on loving our parents and our grandparents. But with all due respect—and I hear how you're saying that we will do everything for our seniors, but I still have never received an adequate response as to why during COVID, when 6,000 seniors died in long-term care, there was not one single autopsy done on any of those people because they were considered expected deaths. That's not acceptable to me. You can't tell me that—6,000 seniors in that case—everyone died of COVID, and that we didn't expect there to be autopsies in certain cases to make sure that families understood how their family members died, especially when they weren't there when they died during COVID.

Hon. Michael S. Kerzner: I want to again thank my colleague. I have a lot of respect for my colleague and her love of her community. I want to say that again, in the here and the now, I look at the progressive steps that we've made just in the last year. We have to care for our parents, perhaps better than they cared for theirs, with the science and the technology and the innovation and with the fact that we know a lot more now that we didn't know before.

The member highlights a point in time that was a very dark time for the entire world, and we all owe ourselves an opportunity to learn from that time. God forbid that time ever happen and there was another pandemic or an epidemic—the lessons that we learned will help us make the best decisions we can tomorrow.

1530

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Andrew Dowie: I want to thank the Solicitor General for his remarks. I really found them fascinating and always substantial. He does a phenomenal job here in the House.

I was thinking about this delivery model, because my uncle was actually one of the first care coordinators in the local CCAC, back when it was created. I know that health care in Ontario is a truly massive entity to manage with all the services that the Ontario government provides, so when we make a change in service delivery, the rolling out of that process is something that needs to be managed pretty carefully, with consideration for the patients, putting them at the forefront.

I'm hoping that the Solicitor General may be able to explain how our government plans to roll out the changes that have been identified in this bill.

Hon. Michael S. Kerzner: I want to thank my colleague. It was great that we were both elected in the class of 2022. He's a great friend.

As we look at the initial group of 12 Ontario health teams that have been chosen to accelerate the work in their community, we will have them supported by the Ministry of Health and Ontario Health. These teams will start focusing on seamlessly transitioning people experiencing chronic disease through primary care, through hospitals and community care needs. So we're taking that first step, and the first step, by the way, is all over Ontario. Why I'm so passionate about this bill is because it allows us to have standardized care all over the province.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

MPP Kristyn Wong-Tam: Thank you to the Solicitor General for the presentation. I'm also a member of the class of 2022, so I'm very proud to ask this question now.

Minister, obviously, we recognize that staffing shortages are part of the problem of why we're not able to adequately get people the level of care they need right now—and I hear that the government is saying that there are requirements in here to make that improvement. Because of low wages, because of precarity of work and because of the lack of health benefits, we're seeing significant staff turnover and we're seeing a hard time in recruitment.

Will the new workers be unionized? Will they be full-time? Will they have health care benefits, or at least the equivalent of that?

Hon. Michael S. Kerzner: No, the legislation doesn't change anything.

By the way, she mentioned something that I forgot, and that is—I want to give a special mention to a group of community residents who are unbelievable, and that's the Filipino community in York Centre. We have the largest diaspora of Filipino communities anywhere, in York Centre, and a lot of them came to our country as personal support workers. When I see them and when I see what

they have done to be part of the fabric of who our community is, it's very important.

To my colleague opposite: I think the announcement today says it all. The government is investing more than \$300 million over three years to help thousands of people launch careers as personal support workers, and this is transformational.

The Deputy Speaker (Ms. Donna Skelly): We have time for one quick question.

Mrs. Robin Martin: Thank you to the Solicitor General for his great comments here today.

You talked about the importance of home care, and I wanted to ask if you could elaborate in the few seconds you have about how important that is for people in your community, including, perhaps, your own parents.

Hon. Michael S. Kerzner: Well, the importance of home care is everything. It allows a person who has done everything for us, for their children, for our province, for our country, to be treated with dignity and respect. And to me and, say, to everyone, there is nothing more important than treating our parents and loved ones with dignity and respect.

MPP Kristyn Wong-Tam: On a point of order, Madam Speaker.

The Deputy Speaker (Ms. Donna Skelly): I recognize the member for Toronto Centre.

MPP Kristyn Wong-Tam: Yesterday during question period, I asked a question, and I misspoke about the address to a particular property. I said it was 200 Wellesley Street East; it's actually 280 Wellesley Street East. I would like that corrected on the record.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. John Fraser: It's a pleasure to rise and speak to Bill 135. I'm going to say three things about Bill 135 that concern me, and that is with regard to staffing, the ability of the bill to allow more for-profit participation in our home care system and a little bit about the OHTs.

I have a lot of experience with the Ontario home care system on a personal basis—four parents: my parents; my in-laws—been doing that for about 10 years. So I do know that the biggest challenge in our home care system is staffing.

I heard the minister talk about public safety. There is no safety in your home if the PSW who is supposed to be there at 8 o'clock in the morning to get you breakfast or help you get out of bed because you're a frail, elderly senior doesn't show up. That sometimes happens more often than not. It's not very safe for them. It's not very secure for them. If we can't make sure that inside their home is safe and secure for them, we're not doing a good enough job.

Now, this past June, my mom passed away, and at the time, she wanted to be at home. She wanted to stay in her home. That required overnight nursing. We were lucky. We had hired some people privately to give us a hand. We had some PSWs that came in regularly. They were organized by the LHIN, regularly, to come in for a number of

months—actually, longer than that. There was some consistency.

But we had to add overnight nursing through home care, and here's how it worked, all right? This is the last two, three weeks of my mom's life, where she's in bed, she's at the end, she needs somebody there overnight. The way it works is they put out a call for nurses for four days and they wait to see which agency picks it up. Maybe an agency doesn't pick it up. More often than not, they don't have a person. What's even likely, if you do get somebody, is it's going to be somebody different every night. The only way we could help my mother stay at home is—we were lucky enough to be able to say, "We need to know someone's going to be here. We need that support so we can be her family." So we had to hire a nurse. We could do that. She could do that. But if my mom was a person who didn't have four children who were able to help her do that, or she didn't have some means to do that, she would have been on her own. There wouldn't have been a person there that night.

I've spent 10 years watching the home care system, and gradually, year after year after year, our staffing levels have not even come close to meeting the need that's there. That's for a couple of reasons. Number one is, if you want good people, then you pay them. If you want good people, you give them benefits. If you want good people, you give them gas mileage and time. It's a really tough job. This bill does nothing to address that. You're building a new engine here. We'll talk a bit more about the other pieces of the engine, but you've got a new engine; you don't have enough gas.

I think the smart thing to do would be to establish enough gas or enough fuel to run this home care engine. And that's going to begin by paying a fair wage and giving benefits for positions like RPNs—to actually pay them a decent wage, \$35 an hour. You can build all the structures you want. If you don't have the people, it doesn't work for anyone. It might look like a grand edifice and a wonderful organizational structure, but if you don't have the people, just like if half of us weren't here—I know how you feel about that, guys. If half of us weren't here, it wouldn't work, but it's even worse when it comes to people's care.

1540

My suggestion to the government is you need to work harder on this, on staffing, on making sure that Mrs. Smith gets her PSW at 8 o'clock on Monday morning. I've also gone on home care visits with a number of the providers in my community, and that's the number one thing I hear, not from the people who hire or distribute these personnel, but from the people who receive the care. Those are the complaints that we get at the office. And why is that? Because we don't have enough people, and they're not being treated well. Some of them have to work two or three jobs. What you're building is not going to work if you don't have the people.

Number two: I don't understand why, as a government, we can't actually build an agency that staffs people, PSWs, RPNs, therapists. That's what we do in hospitals. That's what we do in the children's hospital in my riding. So how

is it that we can't get somehow build something ourselves, employ people, treat them right, manage them right, make sure that people get care? Because it's like, "We're going to hand it over to these folks over here, and you know what? They're going to manage it, but they're going to take a cut." Then, the problem becomes that cut competes with the care that people need. It's just the way it works. The need for a shareholder dividend or profits starts to infringe on the level and type of care that people get. It's just the way it works, folks. You can't serve two masters. This bill does nothing, actually, to build the publicly managed, publicly funded health care system in our home care system.

I think the government should have at least made some sort of attempt, especially since our problem is we don't have enough people. So how come we can't as a government—probably the biggest HMO in the whole of North America—actually figure this out?

M^{me} Dawn Gallagher Murphy: We are figuring it out.

Mr. John Fraser: No, you're not figuring it out. I wish you were, and I'd be a lot happier if you were.

Now, the third thing is the Ontario health teams. You've got this beautiful edifice; you don't have enough gas in the engine; then, the part that's going to deliver it, the part that's going to distribute it, maybe 12 of them have governance. They're not fully formed.

I know the minister said, "You know what? The hospitals will take care of it." Well, you may want to tell the hospitals to take care of it. You may want to give them the funds. You may want to give them the resources, because not all of them are ready. Not all of them know. The problem with this is, if you transition to something that's not fully formed or is not fully organized, or people don't know exactly what their responsibilities are, because it's not clear—

Mrs. Robin Martin: It's called responsibility. You wouldn't understand it.

Mr. John Fraser: I understand it very, very clearly. Thank you very much—I was going to say associate minister—parliamentary secretary. I understand it very, very, very well, and I appreciate your interjection.

Sorry, Speaker. I'll speak through you.

The OHTs are not fully formed. They don't have governance. If you start to transition to a structure that doesn't have the ability to deliver the care the way that you want it to, you know who it's going to hurt? It's going to hurt the people who work in it, and it's going to hurt the people who get the care.

Now, it's not saying that OHTs are a bad idea. The problem is, it's five years later, and what do we have? Twelve that have governance—12, maybe a dozen. How can an organization function without proper governance that's delivering care to people? Literally every organization that we have—hospitals, urgent care centres, schools—have governance. They have somebody there to make sure that you're delivering the care, that there's some oversight over the administration, that there's some understanding of what people's responsibilities are inside the organization.

So I am concerned with this bill—and you’ll have a chance to ask me questions later, because I still have four minutes left; I can get a lot done in four minutes.

Anyhow, I’m just concerned that when you move to this bill, as we transition to this change, what will happen is we’re not going to have enough people, it’s not going to be well organized, and people are going to fall between the cracks. In our rush to change things, we have to be careful—all of us here—that we don’t actually hurt people who need our help. I’m genuinely concerned when I look at this bill, and I think of my experiences with home care over 10 years—and that’s just in my family—and over 24 years working in a community office that’s been mine for the last 10. That’s the concern that I have here, that we don’t have enough people, we still think it’s okay that shareholders get a cut of our health care system, and that the OHTs—which aren’t a bad idea—just aren’t fully formed or ready. I think those are fair and legitimate concerns, and I look forward to your questions.

The Acting Speaker (Mr. Deepak Anand): It’s time for questions.

Mrs. Robin Martin: Thank you to the member from Ottawa South for his presentation today.

You know, it’s interesting. Obviously we have health human resource challenges across the system. We’ve had those for years and, unfortunately, the member was in power, was the parliamentary assistant to the Minister of Health for some years, and they did nothing to address those staffing challenges. Now this government has taken all kinds of steps to address staffing challenges, but that isn’t what this bill is about. This bill is about fixing Ontario Health at Home to make sure that we can provide the care under those auspices so Ontario health teams can develop these new models of care, which we talked about in our speeches; I don’t know if you heard those. But we’re also doing other things to make sure we recruit, retain and train staff. It’s going to be challenging, obviously, to have enough staff, but that’s why we’re doing all the things we have been doing. I think every jurisdiction in the world is facing staffing challenges.

Would the member opposite like to tell us what they did to address staffing challenges over the last 15 years when they were in government?

Mr. John Fraser: Raise the PSW wage \$4 an hour over a period of time—we did that.

Mrs. Robin Martin: So did we.

Mr. John Fraser: Actually, this government raised PSW wages during the pandemic—only a month later than everybody else, only doing so screaming, kicking. When we needed to actually raise their wages at the beginning of April, we didn’t do it. You waited a month. So don’t wag your finger at us over here.

Mrs. Robin Martin: I’m not wagging.

Mr. John Fraser: Yes, you were.

Mrs. Robin Martin: No, I’m not.

Mr. John Fraser: What did you do? All I’m saying is the staffing situation in Ontario in home care is extremely acute. I have never seen it this acute, and the problem is

this isn’t going to work if you’ve got no gas to put in the engine.

The Acting Speaker (Mr. Deepak Anand): Question?

Mr. Chris Glover: Actually, I’m going to wag my finger at the member from Ottawa South as well. The Liberal government was in power for 15 years, and the Conservatives before the Liberals started to convert our long-term-care homes from not-for-profit to for-profit homes. We saw a horrific report from the armed services when they were in there.

I’ll just read a quote from the headline of the Toronto Star in May 2020: “In homes with an outbreak, residents in for-profit facilities are about twice as likely to catch COVID-19 and die than residents in non-profits....”

So was it a mistake for the Liberal government to support for-profit long-term-care homes? Should you have been converting those back to not-for-profit homes where people actually had a greater chance of surviving the pandemic?

Mr. John Fraser: Look, I have two large not-for-profit homes in my riding, so that’s been my experience expanding St. Pat’s Home.

1550

And I agree: I think we invested in long-term care privately because it was a way to keep debt off the books. It wasn’t about the quality of care. I don’t think that was the right way to go. I’ve said that before. I’ve always believed in investing in not-for-profit care.

But we’re at where we’re at right now, and I think the government needs to try to go in a different direction, and whether that’s establishing their own agency that employs home care workers or—

Mrs. Robin Martin: Oh, good, more government doing things.

Mr. John Fraser: Hey, government’s not a bad thing, folks. It’s what got us here. It’s what built us an education system. It’s what built us a hospital system. It’s what has built us a society, because we had a government.

Mme Dawn Gallagher Murphy: Too much government.

Mr. John Fraser: Well, the government pays you. The government pays you and you and me. It’s not a bad—

Interjections.

The Acting Speaker (Mr. Deepak Anand): Thank you. I’ll request all the members to direct your answers and questions through the Speaker.

The member from Newmarket–Aurora.

Mme Dawn Gallagher Murphy: To the member opposite: I do find it extremely interesting, as he noted, about the PSWs—that they made an increase to their wage. Well, we made it permanent when we actually increased it.

I did want to take note that this act will consolidate 14 home and community care support service organizations into one single organization, so it’s going to provide a strong, centralized foundation to support the stability of home care services now and into the future as it rolls out into the 57—soon 58—Ontario health teams.

You talked further about the PSWs. I’m not sure if you heard the announcement today, which is all part of Your

Health, of \$300 million over three years to help thousands of people we're recruiting into the PSW positions. These are all parts of Your Health.

My question to the member opposite: Can you get behind this massively modernized change for our home care community—

The Acting Speaker (Mr. Deepak Anand): Thank you. The member from Ottawa South for the response.

Mr. John Fraser: I will reiterate: Government is a good thing. That's why we're here. That's why we have a great province. I just want to establish that because I heard somebody say "more government" over there. I think we do some things pretty well when we put our mind to it.

Our PSW wage enhancement was permanent. You added on to that. My point here is, you're highly centralizing something that needs to be delivered in people's living rooms and bedrooms and kitchens and in their homes. That's exceptionally local, and the organizations that you want to deliver that are not fully formed. They are not ready.

So I don't see this working for people. Maybe it will work for you, and on the org chart on the wall, it's going to look great. But it's not going to work for people unless the OHTs are ready and we somehow get enough people there to ensure that people get care.

The Acting Speaker (Mr. Deepak Anand): Further questions?

Ms. Sandy Shaw: Thank you very much to the member. I know that you and I shared stories. I also lost my mother just a few short months ago and we had the same exact situation. If we didn't have a nurse in the family and weren't able to pay for private care, my mom wouldn't get her final wish, which was to die at home, and so we were happy we were able to provide her that last dignity of care.

But I have to say, when I hear this government—who says they're against big government, but all they do is centralize and grab power in the Premier's office—when I hear them say "modernize," I think "privatize." Every time they say "centralize" or "modernize," we're talking about privatization. This bill does absolutely nothing to ensure that advisory boards aren't fully representative of big companies, just like the Retirement Homes Regulatory Authority board is people like Chartwell and Indwell. What in this bill frightens you when it comes to making sure that private, for-profit operators aren't running the show?

Mr. John Fraser: Thank you very much for that question. It's interesting that you bring that up because we've seen in the last six months that if you're accessing primary care in this province, don't forget your OHIP card, but always remember your gold card too, because that's what's happening in Ontario right now. People are being asked to be paid membership fees, to pay extra fees. People are going to have their cataracts done and somebody says, "Well, if I do you in the hospital, I can do you next February, but I can do you next week if you come for \$3,000." It's happening all over the province.

I hope that this doesn't happen in home care. I hope that we're not going to get to this point where people have to pull out their credit card to get the services that they need.

The Acting Speaker (Mr. Deepak Anand): I see the member from Eglinton–Lawrence.

Mrs. Robin Martin: Thank you again to the member opposite for his contributions. I was sorry to hear about your mom's passing and certainly all of us have experienced, I think—well, all of us; maybe the older ones, who are of a certain age. I have personal experience with home care for my parents as well.

We're all agreeing, I think, that the current system is not providing the home care that our seniors deserve and that is why we're going about making the changes we're making. We did take the service maximums off. It used to be under the former home care legislation that you could only have four hours of home care. We recognize that people want to stay in their home, and we want them to stay in their home as long as possible. It's better for everybody.

So would the member opposite support making changes and allowing some of our Ontario health teams to deliver integrated models of care, delivering home care differently? We gave a few examples. Did you like those?

Mr. John Fraser: I think local agencies are best to deliver home care. If they're ready and they're able to do it—I know they were doing bundled care at St. Joseph's hospital. They had a pilot that has been going on—it's probably not a pilot anymore—six or seven years, which is part of addressing home care as part of the continuum of hip replacements.

Look, the system needs to be better. My point is I don't think what we're doing here is going to deliver the results that you think it's going to deliver as fast as you think it's going to deliver it. The people who you want to deliver this aren't ready. That's my biggest concern.

The Acting Speaker (Mr. Deepak Anand): That's all the time we have allocated for questions and answers.

Further debate?

Ms. Doly Begum: I'm pleased to rise and speak to this bill, specifically because, recently, I had a constituent who—I had a chance to learn about her difficulty. She is a 76-year-old constituent who reached out to my office. She currently has two PSWs who visit her weekly and that are scheduled to visit at home. Unfortunately, her health has deteriorated significantly, specifically her skin on both her legs. She started having rashes, progressing into wounds. She now needs dressings on a regular basis, which have to be changed two days a week to heal. So for her this is very difficult, because if this continues then she gets infected. Then, obviously, for a 76-year-old, this means that her health will deteriorate significantly overall. She's also pre-diabetic, this complicates everything, including the wound healing as well.

Home and community care support services conducted an assessment and established that a nurse is actually needed for dressing management but, unfortunately, won't be available to come and help her because she lacks that funding, so she'll have to go to the clinic. The constituent

has no funds to even afford to use a taxi and she can't use public transit due to her leg conditions, so she's stuck. She's actually stuck without a nurse, and without the ability to go and get the dressing changed and for her wounds to heal. This is a 76-year-old and just one example of many seniors who are feeling abandoned and feeling helpless in our province and in our city with home and community care support services. I know our health care workers, our home care workers, the PSWs, and the nurses—the limited number that we have, they're working very hard. They're trying their best to do the work that they can, and they're working long hours to provide the care and support to all the seniors that they are able to, in the amount of hours that they can give.

Our seniors, they need a lot more support. They need a lot more care. In order for us to actually save cost within our system for this 76-year-old senior from Scarborough Southwest, for her to end up in the hospital—if you want to hear an economic argument, it actually costs the province more money for someone to end up in the hospital. It's better for us to fund home care, to fund our seniors, to make sure that they have enough nurses and PSWs available so they can get the care they need at home so they do not end up in the hospital.

1600

Honestly, that is the best economical argument that you can make to get out of the amount of money that you're spending, because when you actually look at the amount of service that we need across the board in the province, the need is dire. We need to be able to provide more, but you've got to be careful in how you invest.

The reason I start by using this example, by sharing this example, is because I think it really highlights the heart of the issue and what we're facing across the board with long-term care, with home care and with our seniors across the province, who really need the support that they truly deserve, with respect and dignity. When I look at this legislation, there are a lot of issues that are highlighted without actually solving a problem for this constituent of mine and many other seniors.

The first thing that I'm really concerned about is the privatization and the centralization, and I know some of my colleagues talked about this, as well. Section 27.8 outlines that OH atHome must be a non-profit organization, which is great, but it does not require the provider organization to be non-profit, and when we raised that concern, that was not something that the government wanted to address.

There is no requirement for the ministry to set prices for services through OH atHome to prevent overcharging from companies either. Those are some of the things that are red flags for me and for a lot of my colleagues.

It also opens the door for more privatization, for more outsourcing of our health care system. We know what that impact was during COVID, specifically when a lot of the health care workers and a lot of the PSWs had to go from one home to another to provide the care. Guess what happened? A lot of the seniors were infected. A lot of the seniors caught COVID because some of the workers were

working in multiple homes. They had no choice. And then, if they caught COVID, they were stuck at home; they weren't getting paid. And it was outsourced. They were working through different private agencies, which were the middlemen making the profit, as well, when the workers were not getting enough pay and when our seniors were not getting the amount of hours that they truly needed in order to be healthy and to be able to get out there and to be able to enjoy life to their fullest.

We have seen this again with Bill 175 in 2020, where services can be administered by Ontario Health instead of the Ministry of Health, and it allows for for-profit companies to take over the home and community care sector as well. Honestly, we have seen examples of this kind of centralization of health care services in other provinces.

Let me just take a moment to tell you, Speaker, what happened in Alberta, which is very similar to this. And I've talked about this in the past. Alberta followed the same route and they're regretting it right now. Now they have some of the highest per capita health care spending in the country and they're walking it back because they're struggling. Because, when you centralize like that and when you privatize like that, it actually does not serve the people of the province.

We know long-term-care centralization means less flexibility in adapting to the long-term-care setting based on regions and the type of care that we need across the province, as well. Ontario New Democrats have repeatedly called on this government to provide quality care that is also culturally sensitive, that is sensitive to the regions, that caters to the needs of our regions. When we talk about northern Ontario, when we talk about suburban areas in our province, they have different needs. We also have different needs for seniors who are from different backgrounds.

I've shared stories in this House—horrific stories of one senior from my community, and I feel emotional every time I share some of these stories. I remember a daughter who reached out to me—actually, I was door-knocking and I met this neighbour of mine, and she told me about her mom who was just frightened when she had a PSW who was a male PSW who came to give her a shower. And she just said no. She's an over-90-year-old senior who wanted that respect, that dignity. She wanted a female PSW. It's not fair. Doesn't she deserve to get the basic right to be able to get that care, where she can take a shower and she can be bathed in the most respectful and dignified way that she feels comfortable? Are we that inhumane?

We should be able to provide that care where if a senior says, "I need a female PSW," then they should be able to get a female PSW. If a male senior says, "I need a male PSW," they should be able to get that. Right? These are really small, basic things they should be able to get, Speaker, in our province. It's the basic respect, basic dignity that our seniors deserve—the seniors who built this province, who fought for this country. They deserve so much respect and dignity. When we have legislation, we

need to be very careful of how we are making this legislation, making these policies, and what impact they will have on these people, who are our parents, our grandparents, and who deserve so much better.

The reason why I'm sharing these stories is because the way we are going about it, the way we're following Alberta's route, for example, is going to have a detrimental impact. Privatization, for-profit care, is not the way to go for seniors' care, because it needs to be focused on care. It needs to be focused on the quality of care for seniors rather than profit. When you have something for profit, it's for profit; it's not for care. It's not about the seniors; it becomes for profit.

Speaker, I want to move on to another part of this legislation that I'm very worried about, which is the lack of consultation in this legislation. This bill spent very little time in committee as well, so when we had committee hearings there was no chance for presentations or input to be provided. We had people from different regions who wanted to speak to it, but they were farther away—specifically for northern Ontario, for example, who would have to fly in. They could not do that, as well, and provide their valuable feedback. We had stakeholders from the health care industry, health care workers who also had no chance to provide input.

We even made amendments—actually, let me tell you a little bit about some of the amendments that we proposed to this legislation, Speaker. The government failed to pass any of the amendments to the LTC legislation when it comes to ensuring seniors living in affected long-term-care homes—so that it's not allocated to homes that separate them from our communities and loved ones. And we have talked about the need for seniors to stay at home, to stay within their communities.

This was something that actually has been very concerning, with much of the legislation that's been brought forward with this government specifically focused on just kind of warehousing—and I've said this in this House before—which is kind of just allocating seniors in a room, in a bed. It does not provide the care and the support that they need. Not only that, it takes them away from their communities, which means that you're actually isolating them. You're taking away their mental support. You're taking away their social support. And do you know what happens, Speaker, when they're isolated? We saw that during COVID. So many seniors died not from COVID but from loneliness. A lot of seniors were isolated. They lost the willingness to live. They could not see family.

And now, if you actually have legislation that removes them from their community, that removes them from the places they want to be or takes them really far away—which makes it really difficult for their children, for their family members to go and visit them on a regular basis. That's extremely difficult as well because you're isolating that senior from their family.

A lot of kids, a lot of adult children, actually, tell me about this. They want to visit their mom or dad or their grandparents, but they have long hours of work. After they finish their long hours, they just can't. So then you're

allocating a specific day of the week or sometimes just two, three days a month to be able to go do that. But if they were closer by, they would be able to do that. They would be able to visit them on a regular basis. It makes it really, really difficult. I have quite a few cases right now that I could share with the ministry, Speaker, if they would like. I can send you the exact files where the people are asking to be moved closer to their family members' homes.

1610

The other thing that concerns me with this legislation is—actually, we proposed an amendment on this, which was engaging in partnership with “municipal and non-profit providers to assess the feasibility of their taking over these private care homes”—so talking to the municipalities, because we know how important that is, and making sure that you consult with non-profit providers. We've had meetings with quite a few non-profit providers who understand the issue and want to be able to provide the service that they need. The government voted that down.

We also asked the government to stop issuing more licences to for-profit owners who have a proven track record of putting private profits ahead of the well-being of Ontario seniors. We know Orchard Villa is a prime example of that. It is a prime example of—there are so many homes, Speaker, where we had multiple deaths. We had countless deaths, actually, and guess what's happening right now? This government is issuing licences to those homes that failed to protect our seniors during the worst of times—these vulnerable people who were left abandoned, and we're issuing licences to those homes now. On what grounds? Why?

Orchard Villa is one of the long-term-care homes, for example, that was forced to call the Canadian Armed Forces at the height of COVID-19, and the military's report into the conditions inside this long-term-care home in Ontario was a landmark moment in this province's history, looking at the conditions of how horrible it is, from someone being bedridden, to the type of food, the fact that it has cockroaches, soiled diapers, rotten food that—just really, really, really inhumane conditions. And here we are giving licences to homes that have these kinds of conditions, Speaker.

So those are some of the amendments that the Ontario New Democrats called on the government for. We asked the government to make sure that we don't issue licences to for-profit owners. We wanted the government to engage in partnership with municipal and non-profit providers, and we wanted the government to make sure that they ensure seniors living in affected long-term-care homes are not relocated to homes that separate them from their community. But the government voted all of them down.

I'm also alarmed by another aspect in this bill, which is the lack of protection for workers. I know a few of my colleagues highlighted this already, so I'll briefly talk about this. In this bill, we don't see any guarantee that OH atHome workers will be unionized and have full-time jobs or full-time equivalent positions. There is nothing in this bill that will prevent OH atHome from contracting out services out to a temporary nursing agency.

Home care workers are the lowest-paid health care workers in the health care sector, who are being driven away because of legislation like Bill 124, and here we are, moving it further into that privatization, moving further into legislations that actually drive workers away from this sector. And we know that we don't have enough health care workers to be able to keep up with the demand. Bill 124, which this government is now fighting the overturning of with an appeal—actually, I should say, is now appealing health care workers—made it impossible for non-profit and public home care agencies to recruit and retain staff.

I know the government members—you'll have your chance to ask me questions—will talk about, "Well, aren't we recruiting? Aren't we retaining staff? We're doing thousands of recruitments." But if you don't have enough staff right now—who are being driven away from the sector; you don't have someone to supervise internationally trained professionals to come on board and do things like practise for the assessments—I've talked about that as well; and if you also don't have these jobs as good jobs where they are paid well, they are respected, have good hours, have full-time hours, they won't last long. And you know this. You know this very well.

If you give someone a job but you don't treat them with respect, you don't pay them well, they will leave that profession. It's very hard. It's hard for them mentally and physically as well. I don't even know why this government is battling health care workers in court when we're in a health care crisis—and you're using taxpayers' money to do that as well.

We need to have PSWs, personal support workers, with full-time hours. We need to make sure that we respect them, and we need to make sure that we respect our seniors. In order to do both of those things, we need to focus on the type of care that we provide. We heard from a Liberal member, who talked about how they privatized and made a lot of care private and the impact that it had and how a lot of—I think that the Liberal members are honest when they talk about regretting that decision. It has completely shifted the way home care was provided.

Actually, the credit for home care privatization goes to the Conservatives. It goes to the Conservatives because the then Premier Mike Harris and his Conservative government made home care private. The result of that is I have a 75-year-old constituent of mine who is dreading her next day, because she does not have the ability to pay for a taxi ride to go to a clinic to get her dressing changed and she does not have the ability to get a nurse to come home and to be able to give her the dressing change because she doesn't have enough money.

Everything has become about the profit. If it was focused on the care, if it was focused on the dignity and respect of our seniors, and if it was focused on the respect and dignity of health care workers, we would not be in this place.

So I ask this government to really think about the people of this province, think about the seniors who built this province. They're our parents, our grandparents. They

deserve so much better. Let's do the right thing and focus on passing legislation that actually helps these people who are—

The Acting Speaker (Mr. Deepak Anand): Thank you to the member from Scarborough Southwest. That's the time allocated for the debate.

It's time for questions.

Mrs. Robin Martin: The government is committed to strengthening our public health care system and certainly home care. That's what we're here about. The preamble to the Connecting Care Act includes a commitment to publicly funded health care services, something our government believes in. There's nothing in this bill, Bill 135, about privatization.

Ontario Health atHome would be a crown agency, just like home and community care support service organizations. Nothing in Bill 135 would change the rule for not-for-profit and for-profit providers of home and community care services. The Connecting Care Act already requires that an organization be not-for-profit or a designated Ontario health team to be eligible for funding from Ontario Health to provide home and community care support services. That would not change in any way with Bill 135.

Can I just ask the member from Scarborough Southwest, what legislation are you referring to, because there's nothing in this bill about privatization, or are you just weaponizing that word to try to scare vulnerable Ontarians?

Ms. Doly Begum: I don't weaponize any term to talk about seniors, Speaker. I know I hit a nerve by pointing out some of the hidden loopholes in this bill for the parliamentary assistant to the Ministry of Health. This bill opens up room for privatization when you do not commit to the providers and what kind of providers they will be—when OH atHome can hire a provider that is not not-for-profit, that is a private provider.

But let me ask you one thing—Speaker, let me ask the member: Can she do something about the 75-year-old that I'm talking about? Can she commit today to helping this senior, who is devastated, who might actually die from the wounds that she has because she does not have enough health care providers to be able to come to her home and just change a simple dressing? We might actually lose an individual like this, and there are so many people across the province—

The Acting Speaker (Mr. Deepak Anand): Thank you. Further questions?

Mr. Chris Glover: I want to thank the member from Scarborough Southwest for her comments today and her passion for her community and for the seniors in the community, to make sure that they get the care that they deserve.

I quoted this in the last part of this debate. In 2020, the Toronto Star reported that in homes with an outbreak of COVID-19, residents in for-profit facilities are about twice as likely to catch COVID-19 and die than those in not-for-profits, and four times as likely as those in municipally run homes. So the previous Conservative and Liberal governments privatized our long-term-care

system, and it led to this absolute catastrophe in for-profit homes.

1620

What does it say about the values of this Conservative government that in spite of this report, in spite of the Armed Forces report on the horrific conditions that seniors are suffering in those for-profit homes, instead of changing those to not-for-profit homes, they actually gave them 30-year contracts on the public dollar?

Ms. Doly Begum: It's shameful that you have countless deaths of seniors who were treated inhumanely in these homes, in these private homes. I talked about some of the descriptions of the report. When the Canadian Armed Forces came, the report—you should take a reading. Don't nod. You should really read it. They found soiled diapers, cockroaches. People were not even given proper meals.

Mrs. Robin Martin: It's a good thing we're fixing it.

Ms. Doly Begum: You're not fixing it. The private homes that you are giving 30-year licences to are the homes that were the problems. Do you hire someone who has failed to do their job? Clearly, this government does, and that's what they're doing. You have shown over and over how you have failed to take care of seniors across the board.

The Acting Speaker (Mr. Deepak Anand): Further questions?

Mr. John Jordan: I take a great comfort, and I think all members in this House should take great comfort that the long-term-care homes today are not the long-term-care homes that this government inherited in 2018. All you have to do is go and visit a long-term-care home. The standards are the same. The inspections are doubled. The buildings are new or reconditioned. There are 58,000 beds being built; 18,000 currently have their doors open or shovels in the ground. So quit going back to 2018 and what you left this government with.

The question is, do you recognize that this bill gives a voice to the health service providers and the health care providers, relative to home and community care?

Ms. Doly Begum: Speaker, do you know what I don't take comfort in? It's knowing that seniors now have lost their right to be able to stay within—and let me just take you back to Bill 7, which allowed for health care decisions to be made without the consent of seniors, without the consent of the patients, where they lost trust not only in this government but in their health care. A lot of these seniors, without their consent, were removed from their health care facility. Bill 7 put in place a process to assess ALC patients for the eligibility to be discharged from hospitals and placed back home to receive services which were underfunded by this government—by your government. So you're telling people to go home, go to a care home, without providing the support and the services and the people, the human—

M^{me} Dawn Gallagher Murphy: Point of order.

The Acting Speaker (Mr. Deepak Anand): I have a point of order. The member from Scarborough Southwest, please take a seat.

The member from Newmarket–Aurora.

M^{me} Dawn Gallagher Murphy: I find that, pursuant to standing order 25(b)(i)—I ask, through you, Speaker, that the member from Scarborough Southwest return to the subject matter of this bill. The member's remarks are not germane to the item currently being debated by this House.

The Acting Speaker (Mr. Deepak Anand): Further questions?

Ms. Jennifer K. French: Point of order.

The Acting Speaker (Mr. Deepak Anand): Point of order: the member from Oshawa.

Ms. Jennifer K. French: On the same point of order, which we have the opportunity to raise, the member was answering a question pursuant to her discussion.

The Acting Speaker (Mr. Deepak Anand): The member will take her seat and let the Speaker make that decision. Thank you.

Further questions?

Interjections.

The Acting Speaker (Mr. Deepak Anand): The member from London North Centre has the floor.

Mr. Terence Kernaghan: I'd like to thank the member from Scarborough Southwest for an incredibly impassioned presentation on Bill 135. Ontario Health atHome is going to be able to subcontract home and community care provider agencies. It's going to allow them to privatize care functions. It sets up the structure and it specifically enables the contracting of this work to provider companies.

Does the member have faith that these will be publicly delivered and that this is not an example of privatization?

Ms. Doly Begum: Thank you to the member from London North Centre for this question because that really highlights the core problem of this legislation. I hope the government members will go back and actually take a look at the impact this legislation will have, because let's be honest, seniors want to stay at home. They want to stay in the best possible condition that feels like home within their communities. In fact, 90% of seniors want to live independently and receive care at home, but service providers and the organizations are worried that they cannot provide that service. When we have a private agency or a private provider hired to do this work, we know that the focus is on profit.

There are a few things that become problematic with this, Speaker. One, you do not have an agency that's focused on the care and the quality of care for seniors. And the other part of it is this government has underfunded care and underfunded these homes so badly and underfunded the need for home care so badly that we do not have enough people providing the care at home.

The Deputy Speaker (Ms. Donna Skelly): Question?

Mrs. Robin Martin: In my speech, I talked about the Central East multidisciplinary mobile emergency diversion team, which has been established, made up of rapid response nurses, occupational therapists, physiotherapists, nurse practitioners and community paramedicine providers, and it assists patients with immediate needs, like

administering medication and wound care. You mentioned that you have a constituent who needs that.

Would the member support this? Because this is the kind of example of integrated care that we are promoting through this bill.

Ms. Doly Begum: I thank the member from Eglinton–Lawrence for her question. I would love to work with the member to provide the support that this constituent of mine needs, whether to be able to afford a taxi ride to go to the clinic and get the health care needs that she has, or to have a nurse come in and have the dressings changed.

So if the member from Eglinton–Lawrence, who is the parliamentary assistant, is willing to provide that support, I would be happy to work with her and the ministry to get that—

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. Anthony Leardi: I'm going to be speaking tonight on Bill 135. I was here at last night's debate. Part of me, Madam Speaker, wants to bore the opposition as much as they bored me last night, but I don't think I'm going to be able to succeed in doing that.

I'm going to start by reading from the explanatory note in this bill, all right? Here is what I will call the essential line of the explanatory note: "The existing local health integration networks are amalgamated to become the service organization."

I can tell I'm already losing members of the opposition. I might succeed where they had—

Interjections.

Mr. Anthony Leardi: Yes.

Here's another one: "The objects and corporate governance of the service organization are provided for." That's the essence of the bill before us tonight.

Now, some local health integration networks are being amalgamated. Here they are:

- Central East Local Health Integration Network;
 - Central Local Health Integration Network;
 - Central West Local Health Integration Network;
 - Champlain Local Health Integration Network;
 - Erie St. Clair Local Health Integration Network;
 - Hamilton Niagara Haldimand Brant Local Health Integration Network;
 - Mississauga Halton Local Health Integration Network;
 - North East Local Health Integration Network;
 - North Simcoe Muskoka Local Health Integration Network;
 - North West Local Health Integration Network;
 - South East Local Health Integration Network;
 - South West Local Health Integration Network;
 - Toronto Central Local Health Integration Network;
- and
- Waterloo Wellington Local Health Integration Network.

They're being amalgamated.

1630

Then a part of the bill goes on to say, "The following are the objects of the service organization." Okay. Now,

"objects" are essentially the goals of the service organization. It sets out to do these things.

Then we go to page 5. Now, we're already at page 5; we're one third of the way through the bill. The "board of directors, chief executive officer"—here it is: "The service organization shall have a board of directors consisting of members appointed in accordance with this section." Then it says, "A director, officer or employee of the agency is not eligible to be appointed to, or to remain a member of, the ... board of directors." What we're doing is setting up a structure here and taking these local health integration networks and putting them under an umbrella organization.

Then it says, on page 6, "The board of directors may make bylaws and pass resolutions regulating its proceedings and generally for the conduct and management of the affairs of the service organization, including establishing committees." Now, all of this is very perfunctory.

I'm going to go to page 8; now we're halfway through the bill. Fiscal year and audits: "The fiscal year of the service organization commences on April 1 in each year and ends on March 31 of the following year."

Now, people like myself—that is, people who have been familiar in the past with how corporations get set up—will see all this language and they'll say, "Ah. This is very familiar language." What they're doing is they are taking some smaller organizations and they're putting it under an umbrella organization and then setting up a board of directors and setting up the rules for the board of directors. This is all very, very—as I said—perfunctory, not very exciting, and I'm on my way to perhaps achieving the goal that I set out at the beginning of this speech, which was to bore the opposition.

Now, here's where I'm not going to reach that goal. This is where I talk about all of the amendments that the opposition got excited about. They were saying, "Oh, we have all these terrific amendments and amendments, amendments, amendments, and the amendments were wonderful and they could have done all these wonderful things etc." I've dispatched this bill in five minutes; it's 15 pages long. The amendments put by the opposition were 76 pages long, and they were pretty impressive when you stack them high, one on top of the other. There were so many stacks of paper—I was at the committee meeting when we discussed this bill—in that committee meeting, I was pretty amazed at how much paper had been produced. I think that there were several, maybe hundreds of trees killed in the process. I think that every time the NDP make an amendment, a tree dies in Ontario. That's what was happening at the committee meeting. There were so many amendments put, but they had nothing whatsoever to do with the bill. It was amendment after amendment.

I just want to outline how—if you don't like the bill, vote against it. Vote against it. That's how you treat a bill; you vote against it if you don't like it. If you want to amend it, you can try to amend it, but you have to stay within the context of the bill. You can't try to write a brand new bill at committee.

Now, in here we have wide-ranging debates. People talk about stuff that's in the slightest way related to bills that we discuss in this chamber, and I put up with that. I don't mind that in this chamber. But when you go to committee, that's more businesslike. You've got to be more businesslike at committee. Committee is like that. You can't try to rewrite the bill at committee and write a bill that you would have preferred to vote on—

Mrs. Robin Martin: It would be out of order.

Mr. Anthony Leardi: It would be out of order.

This is the bill that's in front of you. If you want to try to change a couple of sentences in the bill, you can certainly try to do that at committee, but you can't try to rewrite the entire bill.

There are 15 pages in this bill. The opposition put 76 pages of amendments. There are 31 sections in this bill. The opposition put more than 40 amendments—more amendments than are actually sections in the bill. So if you don't like the bill, vote against it, by all means. That's why we're here: to debate the bill and then vote. But when you go to committee, don't put so many amendments that half of your amendments get ruled out of order, and some of them are so bad you don't even move them, because you know even after reading the first sentence that it's out of order. That's just out of order.

So let's deal with some of the amendments that the NDP proposed. Let's deal with some of my favourites here. This is one of the amendments that was proposed: "a health care staffing agency shall not pay its workers assigned to a home care provider more than 10% above the existing rate for the relevant profession." Do you want to hear that one again? That was an NDP amendment: "a health care staffing agency shall not pay its workers assigned to a home care provider more than 10% above the existing rate for the relevant profession." Now, do you know what that sounds like to me? It sounds like wage-capping. That sounds like wage-capping.

Let's read that one more time, because I want to make sure everybody knows that was an NDP amendment put at the committee considering this bill. It was totally out of order. It was ruled out of order and thrown out by the committee chairman, but that's what the NDP moved: "a health care staffing agency shall not pay its workers assigned to a home care provider more than 10% above the existing rate for the relevant profession."

Now, let's consider that. They wanted to impose a wage cap on the workers. Let's take a look at that, for example. Let's imagine for a moment that there's a worker with a lot of experience. Maybe that worker has 30 years of experience. Maybe that worker is way better than the other workers. Maybe that worker deserves to be paid a little bit more than the other workers, maybe even 10% more than the others. The NDP said, "No, if you're a worker—it doesn't matter if you deserve it, you're not going to get it." The NDP sought to impose wage-capping. Regardless of your qualifications, regardless of your experience, regardless of whether you deliver a fantastic service, it doesn't matter, your wages are capped. This from the party that imagines themselves to speak for working people.

They don't speak for working people. Working people who do a great job deserve to get paid if they can command a better wage. We are the ones working for workers, not the opposition.

Here's another one—remember, this was proposed by the NDP. This was their amendment at committee. This is a great one: You can't hire a person if that person works for what they described as the "public health care system." The public health care system wasn't defined, but that's okay, because you can leave that up to judges in courtrooms to define it the way they want. But you can't hire a person—the prohibition was if this person works over here, and they walk across the street and say, "I want to work for you," you can't hire them. Do you know what that is? It's a restraint on trade.

It's another thing, too: You see, there's something in this country that we have, and it allows workers to go wherever they want in Canada. You can go wherever you want in Canada, work for whoever you want to work for—especially if that person says, "I'm going to give you a promotion. I'm going to treat you better than your other employer." It doesn't matter how much they get paid. Maybe somebody wants to leave one place and go work at another place simply because they like that place better, even if their pay isn't going to change. But this particular amendment moved by the NDP said, "No, you shouldn't be allowed to go work for who you want to work for."

And do you know what that is? Every lawyer in the PC caucus knows what that is. It's an infringement on mobility rights, protected under the Constitution. That's right: The NDP moved an amendment to infringe the Constitution and restrict workers' mobility rights. That's what they moved, but we didn't entertain it because it was out of order. It was properly thrown out by the chairperson, but that's what we were dealing with last night at the committee.

1640

First, the NDP wanted to impose wage-capping. Secondly, they wanted to impose a restraint on mobility, contrary to the Constitution. Now, we can have a long debate about that. I don't intend to get into a long debate about that one, because it's not in the bill.

Now, my friends—the very few I have in this chamber—we have heard the NDP and the opposition stand up time and time and time again and say, over there when we say something, they say, "It's not in the bill." Sometimes, they've been right. Now, it's my turn to say it, "It's not in the bill." It's not in the bill. If you don't like the bill, vote against the bill, but don't drag me into a three-hour committee where you kill 800 trees and massacre the great forests of the province of Ontario by putting amendments after amendments, which are totally out of order and have nothing to do with the bill that's before this Legislature.

I'm going to tell you. I have been to a lot of committee meetings in my life, and that one that I went to yesterday was not related to this bill when we're talking about the amendments that were put by the opposition. You want to talk about that, by all means—we're in the chamber today.

You can ramble all around and talk about all sorts of things. I don't mind, that's what this chamber is for. I'm going to talk about the bill that's before me.

Here are the objects. Here are the objects set out by this bill, the purpose of which is to amalgamate other service organizations. The objects of the bill are as follows: To provide home and community care services to the patients of the service organization and providing operational supports, administrative assistance support, enabling technology platforms etc. All that's very, very dry stuff; I'm sorry. I have to apologize in this House: It is very dry. I'm sure it was boring. Probably, almost as boring—no, I'm going to say it; last night was way more boring than what I just spoke about. Those are the objects of this bill.

It's a very dry bill, very organizational bill, has virtually absolutely nothing to do with what the opposition is talking about.

The Deputy Speaker (Ms. Donna Skelly): Questions?

Miss Monique Taylor: That was definitely an interesting debate, to have to sit and listen to the member go on and on about how they're friends of labour. They talk about health care workers, yet health care workers are in court with the government right now. They have strangled their wages under Bill 124—not just taken to court once, but appealed it at the cost of the taxpayers of Ontario.

If the member really wants to know what the NDP was talking about when we talked about wages, we were talking about stopping temp agencies from paying three or four times the rate of a regular PSW, and all of that going into profit that's coming out of our precious health care dollars. He's just too much to take.

Will the member rescind his comments, come back to earth and like find his way back into proper debate in this Legislature?

Mr. Anthony Leardi: I'm happy to respond, first of all, by pointing out that everything the member just talked about has absolutely nothing to do with this bill, but I'm going to answer her anyway.

The NDP amendments specifically attempts to cap wages. Now, what she's saying is "Oh, it only caps wages here, not over there." Yes, it caps wages here, not over there—here, where people want to work if they choose to do so and not over there. If they want to work over there, they can choose to do so.

I ask the NDP again: Why would they cap wages if what they really want to do is attract people into the industry? Why would you do that? You wouldn't do that. You're motivated by ideology, and it's going to fail.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

M^{me} Dawn Gallagher Murphy: To the member from Essex, thank you so much for your remarks today. As we know, what this bill is about—Ontario health teams are embedding home care and primary care services so that patients and their families will have access to care in their home and in their community.

Now, I want to give you an example, and my question will be if you would like to see something like this in Essex: Together with its primary care network, the East

Toronto Health Partners Ontario Health Team has developed primary and community care response teams to support primary care providers in providing care to homebound and vulnerable seniors with unmet health and social needs. Would you like that in your community?

Mr. Anthony Leardi: I think that's wonderful. A response team that has, perhaps, special training and maybe special experience in that particular field—and because they have special training and special experience, maybe they get paid a little bit more, perhaps, which would be completely justifiable; not in the NDP world, but in our world it would be. It's completely justifiable. I would love to see that kind of response team in Essex county, and I'm going to have a discussion with that member afterwards to see how we might implement one of those in Essex county, because I'm here to speak for my constituents.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Ms. Doly Begum: Speaker, I find it fascinating that this member talked about talking about the bill when he completely ignored the bill and was so interested in talking about our amendments, only, during his speech—only our amendments and actually did not even highlight anything in the bill. There is nothing to actually highlight in the bill, because he doesn't want to talk about the privatization and the loopholes that are added for centralization. That is what he's afraid of—because do you know what the facts are, Speaker? The facts are about 5,000 people died in long-term care, in private homes, under this government's watch. Under this member and his government's watch, over 5,000 people died, and there's a mass exodus happening of health care workers. Health care workers are leaving this province under this government because this government has taken them to court. You're fighting them in court—

The Deputy Speaker (Ms. Donna Skelly): Question.

Ms. Doly Begum: —so how dare you come and tell us about privatization—

The Deputy Speaker (Ms. Donna Skelly): The question.

Ms. Doly Begum: —because that's what your government is doing, driving people out of this province—

The Deputy Speaker (Ms. Donna Skelly): Back to the member from Essex for a response.

Mr. Anthony Leardi: And none of that's in the bill, because this is a very dry bill, which does one thing: It places a bunch of organizations under one umbrella organization for the purpose of establishing standardization—standardization which, hopefully, can be better implemented across the province of Ontario.

Now, you know what? I'll tell you one thing: That's very hard to do. Standardization across the entire province of Ontario is a high goal. It's very difficult to do. But, you know what, I think it's a goal worth pursuing. We're never going to get perfection. We're never going to get perfect standardization across the province of Ontario, but we should try to get that. At least if we can't get perfect standardization, at least we can make the services deliv-

ered in one area similar and as close to as possible to get the services in another area. That's perhaps—if you wanted to really stretch the goals of this bill. That might be one of the goals that you could fairly talk about, but that's it. That's what this bill does.

The Deputy Speaker (Ms. Donna Skelly): Question?

Ms. Laura Smith: Since we're talking about things that are not necessarily in this bill, but actually related to the health care system in Ontario, let's talk about Thornhill, let's talk about Ontario and let's talk about what they recently did.

So Ontario is continuing to increase the amount of direct care provided in long-term-care homes to ensure that each resident receives four hours of direct care per day by 2025. This is something that I personally dealt with. This is really important legislation: more personal support workers needed to meet the goals and the needs of our communities—direct care, hands-on.

1650

But, you know what, I hear from my constituents about the need for a better care system and they tell me about how they struggle to navigate the home care system and access the care that they need. I'm going to ask the member: How does he think the proposed legislation and Ontario Health atHome make it easier for the people in my riding and across Ontario to access the home care services they need? And they do get that extra four hours now, because after 2025, we're going to make it happen.

Mr. Anthony Leardi: First of all, to deal with the question that is unrelated to the bill: Yes, the services that this government has undertaken to deliver exceed the services that were available prior to 2018, when a different government ran the province of Ontario. So, yes, we are delivering better services—that's the answer to your first question.

To answer the second question, it does make it possible—not automatic, but possible—under this proposed bill, to deliver the services that you talked about, because under this bill, you have an umbrella organization that is now going to have all those disparate organizations that I listed as quickly as I could. All those different health integration networks are now going to be under an umbrella organization, and the umbrella organization—remember, I talked about objects of the organization—can establish the objects and say, “Listen, you've got to comply with this rule. This is the goal you need to work towards.” So it makes what that member suggested much more likely.

The Deputy Speaker (Ms. Donna Skelly): Question?

Ms. Jennifer K. French: I'm glad to ask the member from Essex a question about this home care bill. For so many people, their experiences, as we've heard around the chamber, are that people have a real need for quality home care. But we do see that, with home care, the system is broken right now. The PSW job is not appropriately compensated or supported. People are leaving the field for various reasons. But we see in this bill that care coordinators are going to be transferring to for-profit agencies, which is a change, that there's nothing in the

board to ensure transparency, as we see in this bill. So those are things in this bill.

What isn't in the bill, keeping with the theme of the debate, is support for the PSWs doing the job. How come that's missing from the bill?

Mr. Anthony Leardi: Because it's an organizational bill. Now, if you want to deal with other issues, that's perfectly legitimate. Absolutely, it's perfectly legitimate for this Legislature to consider other issues.

But you did ask about transparency, and there's a whole section in this act that says, “Fiscal year and audits,” and then of course there's the governance section that says, “Affairs of the service organization,” and there's another section that talks about the board of directors and the chief executive officer. If you read those sections the way a lawyer would read them, those are the transparency sections in this bill. They provide for all sorts of standard disclosure methods that are standard in this type of organization, which is all very boring and dry and unfantastic. And that's why, in my opinion, this is a very boring bill.

Third reading debate deemed adjourned.

The Deputy Speaker (Ms. Donna Skelly): I recognize the Deputy House leader.

Mr. Trevor Jones: On a point of order, please: Speaker, if you seek it, you'll find unanimous consent to see the clock at 6.

The Deputy Speaker (Ms. Donna Skelly): Mr. Jones, Chatham-Kent-Leamington, has moved to see the clock at 6 o'clock. Agreed? Agreed.

PRIVATE MEMBERS' PUBLIC BUSINESS

ANTI-SCAB LABOUR ACT, 2023

LOI DE 2023

SUR LES BRISEURS DE GRÈVE

MPP West moved second reading of the following bill:

Bill 90, An Act to amend the Labour Relations Act, 1995 with respect to replacement workers / Projet de loi 90, Loi modifiant la Loi de 1995 sur les relations de travail en ce qui concerne les travailleurs suppléants.

The Deputy Speaker (Ms. Donna Skelly): Pursuant to standing order 100, the member has 12 minutes for his presentation.

MPP Jamie West: I'm proud to rise in the House to talk today about the importance of anti-scab labour legislation in the province of Ontario.

I want to begin by thanking the co-sponsors of this bill—I'm just going to say their names, and then apologize after—MPP Jennifer French, MPP Wayne Gates, MPP Lisa Gretzky, MPP France Gélinas. I know I'm supposed to use their riding names. I apologize, Speaker.

I also want to thank MPP France Gélinas from Nickel Belt and MPP Peter Kormos, who I can name because he is no longer a sitting MPP, for tabling this bill 16 times in

this House. It is long past time to restore this important law to protect workers.

New Democrats will always fight for workers. New Democrats banned the use of scab replacement workers back in 1992, and then in 1995 the Conservative government repealed that law. The Liberal government ran on a platform of changing this and bringing it back, promising unionized workers to bring in anti-scab legislation, but in the 15 years that they held the seat of power, they refused to move it forward. In fact, I was in this chamber for the first time—I was sitting over here, in these seats in the members' gallery. I didn't know the terms for anything. It was difficult, actually, to see the whole chamber from the corner. But I remember sitting here when the member from Nickel Belt brought the bill forward for a vote. I was surprised, when they rang the bells, when I saw the Liberal Party count the number of Conservatives who voted against it and then count the number of members they had on the floor—and they hid in the back. My MPP—I was on strike, in a mining plant, and my MPP, who was at the time the minister for mining and northern development, was one of the members who hid from the vote.

All parties talk a good game when it comes to workers. In the best of times, all parties are always there—in election season, there's no better ad than an ad with a politician with a bunch of people with hard hats and workboots, or with people at a grocery store. They love to pose with workers in the best of times. But in the worst of times, I generally only see New Democrats.

When Bill 124 was passed, I only saw New Democrats standing with the workers—with nurses on the bridge in Sudbury. New Democrats were there while they were protesting Bill 124.

And with Bill 28, members of my caucus were kicked out of here while standing up for the lowest-paid education workers.

It is time to stand with workers, as all parties, when it comes to this bill, on anti-scab legislation. You cannot continue to turn your backs on workers, especially unionized workers. You can't, as a Conservative government, talk about the positive relationships you're making with unionized workers but ignore the fact that anti-scab legislation is not part of your core values. This is non-partisan. We should be coming together to stand up for these workers and speaking about it.

I want you to know, my journey, 13 years ago, from that seat to this seat, from a smelter worker working on a flash furnace to an MPP and the labour critic for the Ontario NDP, the official opposition—is a commitment our party has that we will always have workers' backs.

Speaker, we have to ban the use of replacement workers the way that they have done it in British Columbia. And their economy is strong. We need to ban replacement workers the way they have done it in Quebec. And their economy is strong. We have to ban replacement workers the same way they've done it federally in this country and are working towards that—and like they've done in many countries around the world. And in those countries, their

economy remains strong. It's a fallacy that it's going to hurt the economy.

I talked about my personal journey here and how anti-scab legislation, when I was a worker on a picket line and people were crossing my picket line and doing my job, taking food literally out of the mouths of my children, for a year straight—but this isn't about me. It took a while for me to wrap my head around it. It's not about the workers on the picket line. Absolutely, it affects them. But this is about how this law allows families and communities to be heard, how it leads to longer strikes and lockouts. This use of scab labour allows management to be put in a difficult position. In my community—and Sudbury is basically a small town disguised as a city—supervisors and employers live side by side with workers, and that conflict, that scar in the community, 13 years later, still hasn't gone away. People won't sit with each other or talk to each other. Friendships are broken. Marriages have failed. It's also exploitative of the workers who are crossing the picket line.

On my picket line, you had an opportunity to speak for about five minutes to each person coming in. I still remember two conversations with people crossing the picket line. One was a young man—and I don't want to say the company name because there's enough strife in the community already. He's a young man driving a company truck, and he begged me to stop him from crossing the line. He said, "I have to try to test the line or my boss will fire me."

1700

Now, his boss is getting paid a lot of money to cross the picket line, but this worker is making his normal wages. And he knows what will happen. In a community where you're friends with the supervisor, when you're friends with workers, when everyone knows somebody, where it's intergenerational like mine in a mining company, where our parents and grandparents also work there, everyone knows somebody. You're allowing the company to destroy the fabric of the community. People are making a lot of money over this, but not that worker who's being forced across the picket line.

The second conversation I had was with a woman in the back, and I talked to her about how difficult it was and how hard it was on my family and asked her not to cross the line. She was working as a chef for people who were embedded and staying inside the workplace, and she began crying and said, "I have no other work. I have no other work."

Members of my union were offered up to \$7,000 to cross the picket line. Eight months into a strike, nine months into a strike, 10 months into a strike when you start to realize you're going to lose your house, when your kids don't have a Christmas, when you see everything you worked for falling apart, thousands of dollars to cross the picket line becomes very attractive. But that doesn't mean that we should be allowing this.

What we should be eliminating is the exploitation of workers. It's what we stand for as parliamentarians. We wouldn't allow child labour because that's exploitative.

We have to stand for the community and what's best for the community. What I'm telling you is that when you have anti-scab labour legislation, when people are not allowed to cross the picket line, it allows the employees to withdraw their labour. That's the point of a work stoppage. On one side, you have the company. If you think back to the general store, you have the company and they're trying to be profitable and pay their workers and find fair wages. On the other side, you have the workers, and when they can't reach a deal, what happens is the workers basically wait and starve and the company waits and starves, and at a certain point they're motivated to go back to the table and find a good deal, find a fair spot in there.

But when the government tells the employer—and especially now when we have large multinational employers with incredibly deep pockets around the world—“Your employees have a right to strike, but you can hire as many people as you want to cross them. And if you want, we'll have the police escort them across the picket lines. We'll encourage them to come across the picket lines”—and there are people who are desperate for work in this province, as we know, because affordability is so important.

And so, workers who can't afford to make ends meet, the workers at Metro who couldn't afford to shop at Metro who were on strike this summer, if there were scab labour willing to cross the line because they can't afford to eat either, as government, we shouldn't be allowing that with legislation. We need to remove this legislation and restore the bargaining power.

I know there's a boogeyman about unions. I've been involved with the labour movement for a long time. I remember I was in Nunavut and I made a comment about management. I was on a team with people from unions and management, and one of the management members—her workplace wasn't unionized—and they said something about trying to work with this company. I made a small joke, Speaker, and she was offended because she didn't have the same relationship that I have as a union member with my member with my company, because we've been unionized for a long time and we get along. We have great conversations.

So I know there's a boogeyman when it comes to unions, that unions cannot wait to destroy companies or that union members are greedy. It is not true. It is not true. The only difference between regular workers and unionized workers is they collectively can withdraw their power where one worker non-unionized can collectively withdraw their labour. There is not a union in the world that wants the company where they work to not be successful, because that fails their workers. There is not a worker in the world who wants to be on strike or locked out. It is never about money; it's always about fairness or what is fair.

You as the employer in negotiations can determine if there's going to be a strike or lockout. You know specifically what your employees will accept or not accept. But when people are going on strike because they can't feed their kids, when there's a sense of a lack of fairness or

when they are locked out by the employer—I spoke earlier today about ACTRA. The ACTRA workers are locked out by an incredibly lucrative employer who has locked them out because they won't accept a 60% cut in their wages—60% in this economic environment, when those companies are doing incredibly well? Those workers stand up and fight for their children, and the government says, “It's okay. You can use scabs to replace them.”

Three times in question period I've asked the government: “If you want to sit on the fence, it's fine, but can you stop using the advertising agencies that are hiring scab replacement workers?” And three times the government has had no problem with this. You cannot pretend to be impartial when you're not. There's a famous saying that if you're sitting on the fence, your backside faces somebody. It is loud and clear for those ACTRA workers which side the government is facing and which side their backside is facing.

The root of all of this is that we want to encourage fair bargaining. In question period, whenever a question is asked about a labour dispute, the minister will always respond, “I do not get involved; I encourage people to get to the table.” That's what this bill essentially is about. It's encouraging people to get to the table for a fair deal. It's about encouraging people to come together and have that conversation to negotiate a fair deal.

Nobody wants a labour dispute. It is bad for the community. It's bad for the workers. It's bad for their families. It's bad for the employer. It is bad for the bottom line of the community as a whole. Whenever there's a labour dispute, buying power drops and the economy starts to collapse. It is better for everybody when they come together. And although you see it in the news often—people with picket lines and placards—the reality is that 97% of labour negotiations are resolved without any labour dispute at all.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. David Smith: It is my pleasure to rise in the House today to discuss Bill 90, proposed by my colleague opposite. The bill proposes to outlaw replacement workers when workers are out on strike. However, our government, under the leadership of the Premier, has overseen one of the best periods for workers this province has seen in recent memory. In fact, it has been the greatest period for workers and for employers. Over 98% of collective agreements are reached without a strike or lockout. This bill is attempting to solve the wrong problems.

The Premier and the Minister of Labour, Immigration, Training and Skills Development take the rights of workers very seriously, and that is why our government continues to promote a stable and constructive labour relations climate to foster productive workplace relationships in Ontario. A stable negotiation and labour relations environment produces an environment where our economy can grow.

And as we continue to build a strong Ontario, an Ontario that leaves no one behind, we will continue to provide support to encourage the stability in Ontario's

labour relations environment that promotes the interests of both workers and employers. This way, we can work together to ensure everyone can go home at the end of a workday and meet their family and be proud of the work they are doing in each and every community across the province.

Our government has a long history of working for workers. In 2021, the former Minister of Labour, my friend Monte McNaughton, introduced the first Working for Workers bill. This bill brought forward revolutionary changes to the Ontario labour market. It required employers with 25 or more employees to have a written policy about when employees can disconnect from work. It banned the use of non-compete agreements to spur on economic growth and opportunities for workers. It removed barriers for newcomers looking to contribute to our economy and required recruiters of temporary foreign workers to register their business to protect vulnerable workers. All of these changes under our government were a major step towards making an Ontario that is the best place in the world to live, work and raise a family.

1710

But our government, under the leadership of this Premier, didn't stop there. We didn't just stop at making improvements; we doubled down for Ontario workers and families everywhere across the province. In 2022, our government introduced the second Working for Workers bill. It established fundamental rights for digital platform workers who provide rideshare, delivery or courier services, ensuring they received a minimum wage and protections for their tips, and ensuring disputes with their employers would be resolved in Ontario and protection from reprisals from these platforms.

The bill also aimed at the labour shortage by ensuring out-of-province regulated professionals could begin working in their field or trade within 30 days. More still, the bill protected privacy by requiring employers to provide and share policies with employees on how they are being electronically monitored at work. It also increased workers' protection by increasing fines for employers who are taking advantage of their workers and providing job-protected leave for the brave men and women of the Canadian Armed Forces reserves while they are serving our country.

And then, Madam Speaker, our government, under the Premier, continued to make transformative changes to support Ontario's workers by introducing the third Working for Workers bill in February of this year. This bill increased, yet again, the maximum fine under the Occupational Health and Safety Act. It also provided the groundwork to ensure that employees starting a new job have the right to critical information regarding their employment before they have their first shift, information like their pay, work location, hours of work and other information critical to their success. The bill also introduced the highest maximum fine for those temporary help agencies that are breaking the rules by taking the passports of foreign workers—the highest fine in Canada ever.

All through this, our government has been making strides to help those affected by workplace injuries and illnesses. Over the past three Working for Workers bills, we have made enormous changes to both presumptive coverage for occupational illnesses and the coverage from the Workplace Safety and Insurance Board. Under our government, the WSIB continued to show increasing value. Not only has it increased support for workers, but it has done so without increasing premiums for employers.

Now, our government and the Ministry of Labour, Immigration, Training and Skills Development are at it again with our newest legislative package, a package that, if passed, would keep Ontario the best place in the world to live, work and raise a family: the Working for Workers Four Act, or as we know it, Bill 149. This bill seeks to help workers make informed decisions in their career search by requiring employers to discuss salary ranges in job postings and if artificial intelligence is used during the hiring process. It will also continue our government's mission of supporting injured workers by enabling super-indexing increases to Workplace Safety and Insurance Board benefits above the annual rate of inflation to increase pay for injured workers, along with improving cancer coverage for firefighters.

This bill, if passed, will also make Ontario the first province in Canada to ban the use of Canadian work experience as a requirement in job postings or application forms, so more qualified candidates progress in their job search. On top of that, Madam Speaker, Bill 149 strengthens wage protections for restaurant and hospitality work by banning unpaid trial shifts, making clear that employers can never deduct an employee's wage in the event of a dine-and-dash, gas-and-dash or any other stolen properties. And it will protect their hard-earned tips.

On top of these proposed changes, our government will also launch consultations on restricting the use of non-disclosure agreements in the settlement of cases of workplace sexual harassment, misconduct or violence. Additionally, we will also be consulting with workers, employers, business and union leaders about the creation of a new, job-protected leave for a critical illness like cancer to match the length of 26 weeks, matching the federal government's Employment Insurance sickness benefit plan.

As we can see, Speaker, our government, under the leadership of the Minister of Labour, Immigration, Training and Skills Development and our pro-worker Premier, is hard at work, as we have been since taking office, working for workers.

As I mentioned earlier, we have a labour shortage in this province. In no sector is this more urgently needed than in our construction and skill trades. That is why our government is also preparing students to enter the skilled trades faster by allowing students in grade 11 to transition to a full-time skilled-trades apprenticeship program. After receiving their certificate of apprenticeship, these young workers can apply for their Ontario secondary school diploma as mature students. Our government continues to work to make it easier for young people to enter the skilled trades. We believe in working with the skilled trades, not

neglecting them like the Liberal and NDP coalition did for 15 years under previous governments.

Madam Speaker, our government has continually shown that we are on the side of Ontario workers, and we will continue to do so. If members of the House want to support workers—

The Deputy Speaker (Ms. Donna Skelly): I apologize to the member, but the time is up.

It's now time for further debate.

Ms. Jennifer K. French: I'm very pleased to be able to stand and offer some thoughts on Bill 90. But first I'd like to start with a quote from Peter Kormos, who was a labour champion who spent his 23 years in this House fighting for workers and for the good jobs that they deserve: "Down where I come from in Welland, just like up in Sudbury, or in Windsor, Hamilton or Toronto, you're either with working women and men or you're against them. And this bill is all about standing shoulder to shoulder, arm in arm, hand in hand with working women and men."

I represent a union town as well, one where generations of workers have been able to thrive and build a community because of good union jobs with fair wages secured at the bargaining table. I am proud to represent Oshawa, and I am proud to be part of the team bringing this anti-scab legislation before this chamber once again.

As you've heard, this is the 16th time that the Ontario NDP has brought this legislation forward. Ontario used to have anti-scab legislation, brought in by an NDP government. However, the Harris Conservatives got rid of that straight away, and ever since, workers and those who respect them have been fighting to reintroduce protections against the use of replacement workers.

1720

Recently, in Oshawa, we had a case of striking Unifor 222 cleaners who were working for a contracted cleaning company at the university. That company unnecessarily prolonged a strike by bringing in scab labour. When I spoke to the cleaners who were on the lines, they were quite distressed because the replacement workers were being dropped off in unmarked vans and were sprinting between residential buildings to get to the workplace. These replacement workers had to use Google Translate to communicate with the striking workers who were trying to explain to them that they were not properly trained, did not have appropriate protective equipment and that it was not right that they were crossing a picket line. Those particular replacement workers were being sent into university level 2 labs that have very expensive equipment that require special handling and substances that require training. However, their employer—the scab employer—sent them in anyway with garbage bags and cheap gloves. Well, that was not a good situation, and it never is.

There's often an imbalance of power between employer and workers. The power of a strike is what makes it an effective tool. And Kormos said it best: "The right to withdraw one's labour is a fundamental right in a democratic society—it's fundamental."

Scab labour, on the other hand, prolongs strikes and labour disputes. Scab labour disrespect workers. This is a government that has never respected workers, ensured that they had protections, fair wages, paid sick days or tools like anti-scab legislation to even the playing field.

I'm eager to pass this private member's bill, and I encourage this Conservative government to make it law and make things fair.

And once again, in the always-relevant words of Peter Kormos:

"New Democrats believe strongly and adamantly that a strong economy means a healthy workforce, and a healthy workforce means a unionized workforce; that a strong economy means workers making decent wages, and if workers are going to make decent wages they've got to belong to trade unions so that they can negotiate those wages; that a strong economy and a strong province mean that workers ought to be able to negotiate and control their workplaces so they can arrive home at night in the same physical health condition as they went to work in the morning...."

"As a New Democrat, I'm proud to see this bill before this chamber.... I'm proud of the working women and men across this province, across this country who struggled over the course of generations and decades and often paid with their blood, lives and liberty to advance the rights and interests of working people in North America and the world."

Peter Kormos continues with, "I'm proud of you and I know that what you did wasn't for yourselves; it was for your kids and your grandkids. Re-enacting anti-scab legislation in the province of Ontario will be one of the greatest legacies...."

Peter Kormos has a pretty awesome legacy in this place and beyond, in the province.

And so, here we stand with an opportunity—the 16th opportunity—to pass anti-scab legislation. Unfortunately, when the Minister of Labour had the chance this morning, when he was asked, he gave a hard no about this government's intent to pass this. I hope that they've had a change of heart, that they will support this legislation and that the members opposite will join us in building a legacy of fairness for workers in Ontario and pass anti-scab legislation today.

Mr. Michael Mantha: It's a pleasure that I stand in my place today and support the member from Sudbury and his introduction of Bill 90, An Act to amend the Labour Relations Act, 1995 with respect to replacement workers.

I don't think, since I've been here—since 2011—I've ever had the opportunity to explain what brought me here. I'll have to go back to a story of my children's grandfather. I was going into work one day and, lo and behold, I was asked—or I was directed—to cross a strike line. And I told my then employer, "Are you kidding me?" I said, "You see the guys that are on that picket line? That's my kids' grandfather. That's my uncle. Those are my two cousins. I am not crossing that line." And, from that day on, I started being a voice for the people from the mill that I

worked at. And that was over at Gogama Forest Products. That's where I came out of, Speaker.

I started very early, with the chainsaw on my shoulder. I went out in the bush. I used to cut and skid for a while. I found out I wasn't going to be a big cutter and skidder. I ended up working in a sawmill. When I got to the sawmill, that's where I started listening to my co-workers and I found that they weren't being treated fairly, so I started being a voice and stepping up. Lo and behold, in order to avoid a union to be organized in the sawmill—there were a couple of guys who were kind of shoulder-to-shoulder with some of the management, so they decided to organize an association. This association just wasn't working for the workers that were there.

That's where I got involved. I became part of that association. Lo and behold, I became the president, and guess what? Within a year of me becoming president, that's where the union came into that mill, and I'm quite proud. That's what brings me here to where I am in this House.

Guys like Fred Miron, Claude Séguin and Ernest Turcotte—they used to call him “Dubby” Turcotte. He was two doors down the street from me on Beatrice Street in Gogama. Individuals that shaped me into the person that I am from the labour movement: Wilth MacIntyre, Joe Hannan, Bruce Frost, Bert Poulin, Jules Desary. Jules Desary lives in Chapleau Cree First Nation. I go see him every now and again when I drop by there. We talk about old union stories. We love it. These are the individuals that have really shaped me into the person that I am—that I stand here today.

To this day, I'm quite proud I've never crossed the picket line, nor will I ever. I am proud to say that I come from a tradition of lumber and saw, which merged in and which then became the Industrial, Wood and Allied Workers—IWA—Local 2693, which then merged into the United Steelworkers. We became Local 1-2693. Then, that Local, after I had left from there, ended up merging with my colleague the member from James Bay—

Ms. Jennifer K. French: Mushkegowuk.

Mr. Michael Mantha: Mushkegowuk—tabarouette, j'ai de la misère à dire ça.

Anyways, he became the president of that local. And so, it comes from a long history. I wanted to get to that because what brought me into this was, again, talking on behalf of workers that had been affected.

I know today, with the experience that I have now, that the then employer that I had over at Gogama Forest Products—the owner was Bill Day, who lived in Azilda; his son, Shawn; and the shift foremen that were there, Paul and Stan Secord, were good people. I'm not worried about saying that today, because they were looking for fairness as well, as much as we do. What we discovered over years of negotiations—and now I'm able to go back home in Gogama and we can sit down in the backyard over a fire, enjoying some beverage, and we can say, “Hey, we were only looking for the best for each other.” We've set parameters that we can both respect and that makes the environment that much safer.

So when we see individuals who take up a picket sign and take up a cause, and say, “I am going out on that line because I want to improve things,” that is a major decision that impacts not only that individual, but the family and the community. Those are things that are taken under consideration when you're having your union hall discussions. I know; I've been part of them before for a long time. There's nothing more gut-wrenching than when you have to make that decision, but improving our lives is one thing that we will always try to do. That's what brought me here to this place. That's what keeps me here in this place as the member for Algoma-Manitoulin. I will always speak for the small person. I will always speak for those who can't speak for themselves. I will always defend the rights of our workers in Ontario, and I will never, ever cross a picket line.

I commend the member for bringing this forward for the 16th time. I hope this time it gets through.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. Peter Tabuns: I appreciate the opportunity to address this bill before us. I want to thank the member for bringing it forward.

I grew up in Hamilton. I grew up in the east end of Hamilton. I could see some of the Stelco stacks from the end of our street—as you would know, Speaker, as you would know. I was a beneficiary of the great strike of 1946 when the steel workers blockaded Stelco, when they put boats out onto the water to stop scabs coming in by water and when they fought for a decent wage. They were on strike for 81 days. Because of what they did and because of who they inspired, they made a huge difference to working-class people in Hamilton, so people could buy a home, so they could establish a decent standard of living, and so they weren't living hardscrabble. I have to say, Speaker, if you want to actually ensure that working people have decent lives, then you make sure that they can unionize and that within their union they can defend themselves, they can defend their wage increases that they need, they can fight for the better benefits that will make a difference in the lives of everyone and their family.

1730

In the early 1970s, I was involved with the Canadian Labour Congress and their white-collar organizing drive in downtown Toronto. I learned a lot. But one of the things that we also did is we went out to the picket line at Artistic Woodwork in North York. People may not remember Artistic Woodwork. It was a small outfit. Almost all the workers were immigrants. It was a tough place. They went out on strike because they needed the money to feed themselves and their families.

We would go up for 7 o'clock in the morning, when the scabs started coming in on their buses. A bunch of us who were young union activists would be out there on the picket line with these workers who, I have to say, were not well-dressed people. They had what they had, but it was cold, and they were not dressed well. They were fighting for their lives. They were fighting for their kids' lives.

I have to say, for them, this was a time of desperation. And I have to say, for the police officers who were on the other side trying to get the buses through with the scabs, I don't think they wanted to be there. They understood what was at risk. They did what their duty dictated. They were there to get the scabs through, but they didn't want to be there.

The picketers didn't want to be there. They wanted the strike settled. Frankly, I'm not sympathetic to scabs, but my guess is the people on those buses coming through didn't have much at home either. If there had been anti-scab legislation, there would still have been a tough strike. People would have sacrificed to get through, but they wouldn't have had to go through what they went through every morning to try to defend themselves, defend their families, defend their future.

That's what we have before us today: an opportunity to actually ensure that working people can live decent lives, that they can actually get wages that will pay for housing and food. Speaker, I urge everyone in this chamber to vote for this legislation. Vote for a future for working people, vote for security and a life of respect and dignity.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. Terence Kernaghan: It's my honour today to rise to provide my absolute support to the MPP for Sudbury's Bill 90, the Anti-Scab Labour Act. I'd also like to thank the co-signatories: the MPP for Oshawa, the MPP for Nickel Belt and the MPP for Windsor West.

Scab labour, you see, is completely antithetical to the labour movement. One might even say that it's antithetical to labour itself. Scabs simply benefit the employer, and it's a form of exploitation that is absolutely terrible because the employer will use scabs as a tool. Now, I don't typically like to describe people in this way but, really, the employer is the one who is responsible for reducing people and dehumanizing them in that manner. Scab labour is an exploitation of people who legitimately need work, but it pits them against those who already have a job. They already have work, and it's work that the employer doesn't want to pay fairly for.

I'd like to quote the MPP for Windsor West, who talked about how scab labour brings "the poison of resentment into our communities ... that lingers many years after an agreement is" finally "reached." Scabs undermine the entire bargaining process. They undermine fairness. It's like a knife hanging over all of those negotiations because it is a power imbalance.

Strikes are always the last thing that workers actually want. Sometimes, unfair or unethical employers make it the only possible option. For workers, it's a huge financial hit. But workers know that, while it may be incredibly uncomfortable for a time, in the long term, it makes things better.

Workers want to stand up for other workers. It's like they have an innate sense of family. Workers also know what is fair. Progress means sharing in the profits. Trickle down economics is an absolute myth that the 1% have tried to peddle since time immemorial. The labour move-

ment built the middle class. We've been witnessing a dangerous shrinking of the middle class under policies and seeing wealth being hoarded by CEOs and supported by fleets of middle managers. But who actually creates the economic benefits? The workers.

To my Conservative friends across the way: Being a worker isn't about playing dress-up. Being a worker isn't just about the words that you use. Despite all the times this government names bills for workers, each time they have a chance to actually stand up for them, their legs grow weak. When I think of it, I don't know of any Conservative members who have actually shown up at a picket line; I could be wrong. It seems to me that they avoid picket lines like they avoid other things, which I probably would get called out for saying.

But you don't get to have a fair-weather relationship with labour. Labour has a long memory. The labour movement will last as long as the human race, and as the member from Sudbury has pointed out, this government itself has actually used scab labour.

So to my Conservative friends across the way: Let's see your actions match your words. You claim to stand up for workers. Let's see it today. Let's pass this anti-scab labour bill and make sure that we actually support workers in thought, word and deed.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

I recognize the member from Sudbury for a two-minute reply.

MPP Jamie West: I want to thank my colleagues the member from Oshawa, the member from Algoma-Manitoulin, the member from Toronto-Danforth and the member from London North Centre for their comments.

As well, the member from Scarborough Centre replied on behalf of the Conservative government. Speaker, when he was speaking, he mentioned right at the beginning that over 98% of labour disputes are resolved without any disruption at all. We're talking about a very small number of people who end up in labour disputes, and even a smaller amount of people and organizations that will use scab replacement workers. What we're saying is just to eliminate that tiny part who are using these replacement workers, who are artificially lengthening lockouts and strikes.

The member opposite from the Conservative government said that they take workers' rights seriously, but I'll push back on that, Speaker. I'll push back on that with Bill 28, when they legislated the lowest-paid workers in education back to work, when they brought in the "notwithstanding" clause to step on the necks of these workers. They had to wildcat in order to do this.

Then they brought forward Bill 124, and lost it, and still continue to appeal, as workers' wages have been flatlined and the cost of living continues to skyrocket.

The latest bill, the Working for Workers bill, has three schedules in it about wage theft that are already law—three schedules that are already laws—and the government is aware of \$10 million, accurately reported as stolen from workers, that they do nothing about.

They do not respect workers. They can prove that they do by passing Bill 90, this anti-scab legislation.

Right now in Ontario, we have a record number of full-time workers using food banks on a regular basis, and that number has gone up every year since 2018. That was when the Conservative government and Doug Ford were elected. That was a carry-over from the Liberals, but they should be turning that around. Instead, it's declining, Speaker.

We are talking about fairness for workers so that workers can make ends meet. They should be passing this bill, Bill 90, anti-scab legislation.

The Deputy Speaker (Ms. Donna Skelly): The time provided for private members' public business has now expired.

MPP West has moved second reading of Bill 90, An Act to amend the Labour Relations Act, 1995 with respect to replacement workers. Is it the pleasure of the House that the motion carry? I heard a no.

All those in favour of the motion will please say "aye."

All those opposed to the motion will please say "nay."

In my opinion, the nays have it.

A recorded vote being required, it will be deferred until the next instance of deferred votes.

Second reading vote deferred.

ORDERS OF THE DAY

WORKING FOR WORKERS FOUR ACT, 2023

LOI DE 2023 VISANT À OEUVRER POUR LES TRAVAILLEURS, QUATRE

Resuming the debate adjourned on November 22, 2023, on the motion for second reading of the following bill:

Bill 149, An Act to amend various statutes with respect to employment and labour and other matters / Projet de loi 149, Loi modifiant diverses lois en ce qui concerne l'emploi, le travail et d'autres questions.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. Stephen Crawford: It's great to be able to speak here in the chamber this evening, and great to be speaking about a Working for Workers bill, Bill 149.

First I'd like to congratulate the minister and his staff at the Ministry of Labour, Immigration, Training and Skills Development for all the hard work they've put in this legislation. I see two of the parliamentary assistants who work with them here today, so I want to thank you for all the great work you've done and the great legislation you've put forward.

1740

I'd also like to highlight that today's proposed legislation expands on the groundbreaking actions under the Working for Workers Acts, 2021, 2022 and 2023, which are already helping millions of people right here in this province of Ontario.

Speaker, it is my pleasure to be able to rise and speak in support of the bill before us today, Working for Workers Four Act, an ambitious and forward-looking piece of legislation that demonstrates our government's unwavering commitment to Ontario's workforce. At its core, this act is about respect—respect for the hard work, respect for the dignity and respect for the dreams of every worker in Ontario. It is designed to usher in a new era of transparency, fairness and support that our workers not only need but rightfully deserve.

Firstly, this act proposes to enhance job-seeker transparency. It will require businesses to include salary ranges in their job postings, ensuring that workers have the best information they need to make the best decisions for their careers and for their families. This step is not only about openness, but also about combatting the persistent pay disparities that plague our workforce. Women in our province, especially those from racialized or Indigenous communities, earn, on average, 87 cents for every dollar earned by men. This act aims to bridge that gap, making Ontario a fairer place to work and live.

Secondly, the act takes a pioneering stance on the use of artificial intelligence in hiring. It will make Ontario the first jurisdiction in all of Canada to require employers to disclose the use of AI during the recruitment process. This is not just about keeping up with technology but about ensuring that it serves our workers, not sidelines them. As artificial intelligence's role in our lives grows, we need to protect our oversight and the privacy and rights of job-seekers.

Our province faces a historic labour shortage, with nearly 250,000 jobs left unfilled right now. These are not just vacancies on some spreadsheet; they are lost opportunities for growth, for service and for community building. They are gaps in our health care, our skilled trades and other critical sectors that we rely on every single day. Yet, while these positions remain vacant, we have internationally trained professionals right here in Ontario who are ready and willing to fill those job positions. It's a startling reality that only one quarter of these trained and skilled newcomers work in the professions for which they have been educated. These individuals have dedicated years to becoming experts in their fields, only to face barriers when they arrive here in Canada. It's not a lack of qualifications or willingness to work that holds them back, but a requirement that fails to recognize the value of international experience—the requirement of Canadian work experience. To build a stronger province, one that truly works for everyone, we must ensure that newcomers with valuable health care experience, skilled trades knowledge and expertise in other vital areas can contribute from the moment they arrive here in Ontario. If someone has the work experience, it shouldn't matter which country's stamp is on their diploma. What should matter is their skill, their dedication and their potential to enhance the fabric of our province.

That is why our government, after introducing historic legislation that prohibited regulated professions from requiring Canadian work experience in over 30 occupa-

tions, is now introducing legislation to ban Canadian work experience requirements from job postings and application forms across the board. It's a change that says unequivocally, "We value your skills, we respect your journey, and we welcome your contributions.

Moreover, we're proposing changes to streamline the path for international students in Ontario to qualify for the Ontario Immigrant Nominee Program. These bright minds come to our province, earn their education here, and too often we see them leave because there are unnecessary roadblocks on their path to permanent residency. By making it easier for these graduates to qualify for the Ontario Immigrant Nominee Program, we're not just retaining talent; we're investing in the future of Ontario.

We're also taking a close look at how regulated professions like engineers, architects and geologists use third-party companies to assess international credentials. Our goal is to improve oversight and accountability, to ensure assessments are conducted expeditiously and fairly. It's about time that these assessments become facilitators of talent, not barriers.

Speaker, these initiatives will help thousands of otherwise qualified professionals to not only pursue their dreams but to reinforce Ontario's infrastructure of expertise over the coming years. And let me be clear: This is not about lowering standards. Ontario will continue to uphold world-class licensing and exam requirements. This is about removing unnecessary barriers, about aligning international experience with Canadian opportunities and about sending a clear message: Ontario is not only open for business; it's open for talent.

The act also bravely tackles the issue of non-disclosure agreements, especially in cases of workplace sexual harassment and misconduct. By proposing to restrict the use of NDAs, this government stands with victims and survivors, affirming that their voices should not be silenced and that their rights are paramount. The use of NDAs to cover up and dismiss inappropriate behaviour will not be tolerated in Ontario.

Moreover, we speak on behalf of the hard-working people of Ontario and to advocate for a cause that touches the very heart of our community: the welfare and security of injured workers. Our government is bringing forth legislation that signifies a monumental shift in support for those who have suffered injuries on the job. This legislation, if passed, will implement super-indexing of Workplace Safety and Insurance Board benefits, or WSIB, which will go above and beyond the annual rate of inflation.

Consider the case of a worker earning \$70,000 a year. With a 2% increase through super-indexing, this individual could see an additional \$900 annually. This is not just an adjustment for inflation, which was 6.5% in 2023, but recognition of the real and increasing costs that injured workers face. It's a step toward ensuring that when a worker is injured, they are not left behind by an economy that continues to move forward.

With that, let us delve deeper into the significance of this change. The current system adjusts for inflation, but

as we all know, the cost of living, medical expenses and the financial demands on families often outpace inflation. Super-indexing ensures that our injured workers are not just keeping up, but are genuinely supported through their recovery and beyond.

In a move towards more compassionate coverage, Ontario is set to improve cancer care for our brave firefighters and fire investigators. We propose to lower the employment period required to receive presumed compensation for esophageal cancer from 25 to 15 years. I can tell you, Speaker, this is something that every member in this chamber can go to their local communities, local fire departments and support and bring awareness of this change, regardless of whether you're a government or an opposition member in this chamber. This is phenomenal news for those first responders.

1750

And this is not merely a legislative change; it's a statement of support for those who risk their lives for us. It's about giving back to those who have given so much for us. A firefighter with 24 years of service should not have to fight bureaucracy. They've already fought fires for us. The last thing we want them to do is go and fight government bureaucracy to get the coverage that they so much deserve. This change will mean swifter access to WSIB benefits and critical services. It means that our firefighters and fire investigators can focus on their health rather than on paperwork. It's about ensuring that when those who serve us fall on hard times, we are there to catch them and support them and then carry them through their darkest hours.

But our commitment does not stop there. We are also looking to support workers facing critical illness. We plan to launch consultations on a new job-protected leave that aligns with the 26 weeks of federal employment insurance sickness benefits. This initiative is about peace of mind. It's about ensuring that a worker diagnosed with cancer or any other serious disease doesn't have to worry about their job security while they're fighting for their life. They should have every confidence that their job will be there when they return.

A job-protected leave is a promise to our workers that their contributions are valued and that their place in the workforce is secure. It's a promise that acknowledges that workers are more than just their labour. They are individuals with lives, families, and sometimes, unfortunately, health crises. This component of the legislation is a tangible expression of our support for those who have been hurt in the service of our communities.

In the heart of our vibrant economy lies the restaurant and hospitality industry, a sector that employs over 400,000 Ontarians. These hard-working individuals are the backbone of our social life and our economy, and I'm sure most members in this chamber have either worked in the hospitality and restaurant business or have family members that work in this critical component of our economy. However, for too long, workers in this sector have faced unfair practices, like unpaid trial shifts and wage deductions for events beyond their control such as a

dine-and-dash or a gas-and-dash incident. This act proposes to right these wrongs by updating the province's Employment Standards Act to ban such unjust practices unequivocally. We are clear in our stance in this legislation: No worker should ever have their wages unfairly deducted or be placed at risk due to the unlawful actions of others.

Ontario's laws are built on the principle that for every hour worked, there should be pay earned and received. Despite this, the reality is that unpaid trial shifts and punitive deductions still persist in the restaurant and service industry. It's time that these outdated and exploitive practices are relegated to the past where they belong. This legislation, if enacted, will firmly prohibit these actions, ensuring every worker is compensated fairly for the time and effort they dedicate to their jobs.

Furthermore, our government is addressing a lesser-known but equally important issue: the sharing of pooled tips. Workers deserve to know if and when their employers participate in tip-sharing. This act will mandate employers to post their policies regarding pooled tips in the workplace, fostering a culture of transparency and trust. This is a fair and just practice that must be upheld, particularly when employers contribute to the same work as their staff.

In this modern era, the rise of digital payment platforms in the service industry has introduced new challenges. Some of these platforms impose fees on workers to access their hard-earned tips. Our proposed changes take a stand against such impositions by requiring employers who pay tips through direct deposit to allow employees to choose the destination account of those tips. This measure ensures that workers can access their full tips without unnecessary deductions, respecting their right to the full value of their labour.

Speaker, the Working for Workers Acts of the past—of 2021, 2022 and now 2023—have been monumental in supporting millions of Ontarians. No doubt this has played a huge role in the support from various labour unions throughout the province in supporting the Progressive Conservative government. Many of them have abandoned their traditional alliance with the opposition New Democrats and have come and supported the government. Today's proposed legislation is not just a continuation but an expansion of our efforts to help workers. It's a testament to our commitment to worker rights, fairness in employment and the ongoing support of the hard-working people of Ontario.

As we move forward with this legislation, let us remember that these are not just policies and statutes; these are lifelines for those who serve our communities, boost our economy and represent the very success and the best of what Ontario is. Working for Workers Four Act is about building a province where every worker is valued, every right is protected, and every opportunity is given to succeed. I am proud to support this legislation that will safeguard our workers' paychecks, support our injured heroes, and bring much-needed transparency to the hiring process.

There have been a tremendous number of stakeholders who have supported this legislation. With the limited time

left, I'll give a quote from Jeff Lang, who is the president and CEO of the WSIB: "If someone gets hurt or sick from their work, we want to help them safely recover so they can get back to what matters. These changes," as proposed in Bill 149, "will mean better, easier and faster services and support for people who need the WSIB."

But it doesn't just stop there, Speaker. The Canadian Lung Association, the Heart and Stroke Foundation, the Ontario Nonprofit Network, the YMCA, the John Howard Society, Youth Employment Services have all come out in support of this legislation. Broad-based community and stakeholder support for Bill 149—I certainly hope that our opposition colleagues and friends in the House will also support this legislation.

It's time for Ontario to lead, and with this proposed legislation, we are not just leading, we are setting a new standard for the rest of this country.

The Acting Speaker (Mr. Lorne Coe): Thank you for that presentation. We're on questions.

Mr. Chris Glover: I want to thank the member from Oakville for your comments, but I can't disagree more with your characterization of your "pretending to work for workers" bill. This is the second in a series of these bills. And it's not just me who disagrees that this is about workers. This does not support workers.

1800

Just when gig workers were being declared employees and were going to be given protections under the Employment Standards Act, what this government did is they introduced a special gig workers bill—they called it Working for Workers—and it actually stripped them of those rights that they would have had under the Employment Standards Act. It's not just me who says this. The Globe and Mail has an article that says, "How Uber Got Almost Everything It Wanted in Ontario's Working for Workers Act."

I wonder, how can the member from Oakville possibly characterize this legislation when they're not really working for workers—they're working for Uber?

Mr. Stephen Crawford: Thank you to the member opposite for the question. Your question was really on a previous bill, but I'll bring it back to this bill.

What I can tell you is, having met with the firefighters in my community, which I have, to talk about what's in this legislation, I can tell you they've said they have wanted this for decades. Lowering the number of years of the cancer presumption from 25 to 15 is incredibly, incredibly supportive of our first responders.

We've got dozens of stakeholder quotes that, if I have the time, I'll get into and be happy to share with you and show you how organizations and stakeholder groups across the province are supporting this legislation.

The Acting Speaker (Mr. Lorne Coe): The member from Markham-Thornhill, please.

Mr. Logan Kanapathi: You're looking great up there, Mr. Chair.

Thank you to my colleague from Oakville for the insightful presentation. Mr. Speaker, when I came to this wonderful province and country 40 years ago, I came with

a degree. I still haven't used that degree because I went through a lot of provisional—and even financial planning and insurance. They never gave me any exemption for that degree. Just like me, so many newcomers come into this wonderful country and they come in with their dreams and hopes and aspirations. I think this bill is a game-changer.

A question to my colleague: We have thousands of newcomers across the province who want to be doing the jobs they are trained to do. What is our government doing to ensure that discriminatory barriers to hiring newcomers are being knocked down?

Mr. Stephen Crawford: Thank you to the member from Markham–Thornhill for your great question. What's really interesting in your question is your own lived experience coming here from another country and experiencing it. That's what our government does when we pull together legislation. We talk to people from different experiences, different walks of life and different stakeholders. We talk to the business community. We talk to social organizations and get their input as to how they will be able to better meet the needs of their clients, the people they are serving.

Speeding up the foreign credentialing in various sectors and, again, maintaining Canadian standards—in no way are we going to degrade Ontarian or Canadian standards—

The Acting Speaker (Mr. Lorne Coe): Thank you very much for that response.

I have a question from the member for University–Rosedale, please.

Ms. Jessica Bell: You introduced me before I'd even spoken up. That's real service. Thank you, Speaker.

My question is to the member for Oakville. When I read Bill 149, there's a lot in this bill that makes a lot of sense. One thing that concerns me is that I don't think we go far enough to provide Uber workers, gig workers, with the kind of wages that they deserve and the protections they deserve to make it a living-wage job. They are out all times of the year—snow, rain. In fact, more people want them to deliver food and services when the weather is horrible, and they get paid so little. This bill doesn't address the fundamental fact that when they're waiting for a job they're not paid.

I'm asking you personally, member for Oakville: What do you think of that? Do you think that's acceptable?

Mr. Stephen Crawford: Thank you to the member opposite. We did have legislation in one of the previous Working for Workers acts that addressed the issue you're talking about. Certainly, it's not a component of this particular legislation.

But as a government, first of all, we're always open to hear more about how we can improve. But this legislation, as it stands, is a phenomenal piece of legislation that I have seen support for from such a wide, diverse group of individual stakeholder groups.

In terms of going beyond that, working for workers, we've also had the largest increase in the minimum wage, just this past summer, to \$16.55, which I believe is either the highest or one of the highest minimum wages in Canada.

The Acting Speaker (Mr. Lorne Coe): The member for Hastings–Lennox and Addington, please.

Mr. Ric Bresee: To the member from Oakville: I really appreciated your presentation.

One thing that this House may not know is that my father was a full-time firefighter with the city of Kingston for 28 years. I grew up watching him. I grew up hearing the stories and understanding the damage both to his body and to his mental health that that job did for him, so I'm very pleased to know that this is helping firefighters in the future. If you would, I would like you to explain in more detail how this will change for firefighters that have had that kind of health impact.

Mr. Stephen Crawford: Thank you to the member for that. I didn't know that your father was a firefighter. I appreciate the service he did in serving our communities as a first responder. We all appreciate that, so I want to pass that along.

I'm sure you're probably aware that your father had been, perhaps, lobbying for some of these changes that are proposed in this legislation right now, and understand the impact that this is going to have on families, on the first responders. I think, most importantly, a lot of the first responders who I've talked to in my community have said, "This is a government that has our back. We go out there day in, day out, go through some very difficult conditions, see some tragic circumstances, but we know the government of Ontario has our back."

The Acting Speaker (Mr. Lorne Coe): I have the member for Hamilton West–Ancaster–Dundas, please.

Ms. Sandy Shaw: As I've said in this House before, I wanted to acknowledge that Captain Craig Bowman was my cousin, so the inclusion of presumptive coverage for esophageal cancer in this bill is something that's very personal. I also want to commend MPP Jeff Burch from Niagara Centre. His Bill 127, the Captain Craig Bowman Act, was included in this. So I want to thank both sides of the House for making this happen.

Although I do want to ask—I'm curious why we have excluded wildfire fire workers from this presumptive coverage. They're working 50 crews short already. We know with the increase—because of climate change, we're seeing more and bigger fires in northern Ontario. They do so much to protect us on the front line. Why did your government not see fit to include them in the coverage here? Because I think that's the least we could do for those first responders who put their lives on the line in very, very dangerous conditions.

Mr. Stephen Crawford: Thanks to the member opposite, and thank you for sharing that story as well.

I think that when this legislation was put through, the Ministry of Labour did a lot of consultation, talking to first responders, talking to various stakeholders, and in coming up with this legislation, it was the firefighters themselves that had been pressing for this particular issue to be included in the legislation, which we have done.

The Acting Speaker (Mr. Lorne Coe): Further debate?

Ms. Doly Begum: I rise to speak to Bill 149. I'm always excited to talk about workers' rights and ways that

we can make sure workers have the best possible work environment, wages, compensation benefits, as well as making sure that they are safe and secure in their workplace so they go come to work and get home safely. I think this bill has components that touch on those, and so I want to be able to give some feedback but also applaud the government on the good things as well as give criticism—I would say constructive criticism—on things that we hope would be better in this legislation.

There are a few things that this legislation does, and there are four aspects to it. This act, I would say, is an act that looks at the Digital Platform Workers' Rights Act, 2022; the Employment Standards Act; and the Fair Access to Regulated Professions and Compulsory Trades Act, as well as the Workplace Safety and Insurance Act.

1810

So I'll start my time, Speaker, first to talk about the section about the Fair Access to Regulated Professions and Compulsory Trades Act, because as the critic for immigration and foreign credential recognition, I want to be able to provide some feedback on some of the specifics that we see in this act, which really goes back to some of the work we have done—I, myself, have done and New Democrats have done—with a lot of community leaders, a lot of internationally trained workers who have come to Canada from around the world: people who have come to Canada to make this their home, to finally have their dreams fulfilled, to be able to contribute their skills and their education and really work in professions that they truly, deeply care about and have the understanding, education, the professional expertise. But when they get here, unfortunately, they're not given those opportunities. They're not given the fair access they truly need in order to be able to have the jobs that they are qualified to do, as well as contribute to this province.

This bill, Bill 149, tries to really look into this. I know that this is an attempt, and I thank the government for making that attempt, because I think it's a noble thought. I know when I brought my bill forward some time ago, it was to make sure that we come together and understand some of the issues that internationally trained professionals face when it comes to their expertise and the way they can have access within the work environment. Canadian experience is actually one of those barriers that workers face when they look at any job that they're hoping to get and, unfortunately, they do not have access to it. They do not have the opportunity to even get through the interviews and to be able to actually show their skills and then, obviously, have that job.

I know that it's a complicated issue, so I hope that I can spend some time, Speaker, to be able to explain to government members how this really works, because this bill will prohibit the requirement of Canadian experience in job posting. I know that the Minister of Labour has the right intention in making sure that workers who are internationally trained are not stopped from going for job interviews, not stopped from trying to find a job and applying and being able to get an interview for a job that they are qualified for. It's very important that many skilled workers

who chose to come to Canada are actually facing that when it comes to Canadian experience.

However, when we look at the actual issue of it—and I know some of the members opposite, on the government side, will know this—more than a decade ago the Ontario Human Rights Commission actually ruled it as a discrimination to even put Canadian experience in a job description, or to ask for Canadian experience during an interview. It was actually declared as discrimination within the Human Rights Commission, so while the minister's and the government's intentions are noble, unfortunately, this is already in effect. The only problem is, it is not enforced. I know it may be hard to understand, and the reason why I'm able to talk about it and I understand the deeply rooted problem in this is because I have talked to hundreds and hundreds of internationally trained professionals who go through the struggles, day in and day out.

And there are so many doctors, nurses, engineers—in fact, I was just at an event with a group of engineers, where we were talking about exactly this. And I actually had a chance to talk to them and ask them about this bill and ask them about their opinion, and one of them just laughed at me and said, “Yes, but no one really asks me if I have Canadian experience or puts that in a job description.” Because you don't actually write that down in a job description, because what happens is, when you have a job description, and you go and actually put in your resumé for that job, you put in exact experience that you have and the education you have. And then what happens? What happens is you have an employer who will look at your resumé and see that you have studied in South Africa, for example, you have studied in Mexico, you have experience from Cambodia, you have excellent experience from all these different countries; I have a lot of community members who are from Bangladesh who have come here, who are engineers, nurses, who are doctors. They will apply for this job—actually, I should refrain from saying doctors because there are specific requirements for that as well.

But when it comes to some specific professionals, when they apply for the job, it doesn't actually say “Canadian experience.” Even if you apply and you have highlighted on your resumé specific skills but it is not within Canada and that education is not within Canada, you actually don't get called for that interview. So you're actually discriminated quietly without a specification of the Canadian experience. So what happens is, you will never get that call. You will actually never get that call for that job.

We have a crane operator, for example, who is specifically told that he needs Canadian experience. For that individual, this will help. But to claim that all these different professions will benefit from that, that is not true, because what you actually see within this province and across Canada, actually—and actually, some of the other provinces have done better jobs, especially with the health sector, in helping people who are internationally trained get through the process. But within Ontario right now, there is a quiet bias. There is discrimination that takes

place where these people don't even get called for a job interview.

Let's say you get lucky and you do actually get a job interview. No one actually says, "Oh, do you have Canadian experience? Have you done something in Toronto, in Mississauga, in Sudbury?" No one actually specifically says that, and even if they do, they don't actually tell you that you're not being hired for the job because you do not have experience in Canada. It is very rarely—if anything, ever—that they actually tell you that, because it is discriminatory to do that. The Ontario Human Rights Commission has specifically highlighted this on their website to say that it is discriminatory to do that. There was something that came up and they did an assessment. They actually went and investigated, and they ruled it as discriminatory. So the minister is more than a decade late in coming out and putting that into this legislation.

What is missing is the enforcement mechanism, because what you really need is for you to be able to say if someone is going through those barriers, how do you make sure that those individuals have the abilities to actually access those professions?

And let me tell you, Speaker, when you talk to internationally trained professionals—and I wish the Ministry of Labour would actually listen to some of those validators who have come to—whether it was a press conference with me or whether it was in press releases that we have highlighted, whether it was some of the conversation we have had, or I can connect them with internationally trained professionals who are going through difficulties, whether it's the health-care sector, whether it's the engineering sector, whatever it may be—they will tell you that what actually happens is some of them want to get Canadian experience. They actually want to be able to do supervised experience. They want to be able to get—or PRA, for example, something I have highlighted in the past for the health care sector which is practice-ready assessment.

If Bill 149 really wanted to help internationally trained professionals to have fair access within some of those regulated professions, you can actually provide those specific mechanisms that will allow you to go through the necessary experience that helps those people get to the job, get to the interview, finally obtain that position and then stay in those professions because they will actually be able to—there's retention, right? You need to be able to continue to do those jobs.

What happens is because some of those people do not have Canadian experience the same way or they did not have even voluntary experience or practice-ready assessments where they're able to get supervised by someone within that field who's working here—the reason I talk about nurses or the reason I talk about health care professionals, residency for doctors, for example: When you have experts within those fields providing a supervised position for internationally trained professionals, you actually give them an opportunity to learn some specific ways of the workplace within Canada that allows them to

actually have better chances of getting that profession within our province and then retain those positions.

1820

Wouldn't that be a dream? Wouldn't that be amazing? Because you're actually helping those people get the jobs that they truly dream of doing and to be able to contribute to this province, because, honestly, when you talk to some of these professionals, they will tell you specific ways you can highlight—they will highlight for you specific ways you can help them within their profession.

So the reason why I have talked about PRAs, practice-ready assessments, over and over again is because that is a really good system. That is a really good way you can actually have nurses, for example, go into the profession, right? You have other nurses who are in Ontario, who are already practising, and to be able to provide that support—

Interjections.

Ms. Doly Begum: These guys are too excited about Canadian experience so they're way too loud over there, and I'm going to tell our whip because I cannot even concentrate on my own notes.

But when we have highly skilled workers who are, you know, looking for a position, what they're actually looking for is the opportunity to have someone who can supervise them and help them within their sector. And then what happens is they actually learn ways of the workplace as well. And let me tell you why that's important. Because some of the ways that people are discriminated are through things like accents, right? When they come in to the interview and they have an accent because they're from another part of the world, they're discriminated on, right? A lot of the times the hiring board or the panel won't tell you that that's why they're not hiring you. They won't tell you that, but that's the reason, right? Because you have a specific accent, you sound a different way, they don't want you in that workplace, right? That is discrimination. That is racism, right?

So, making sure that we help people go through these barriers in a way that actually works for them, and also understanding that there are specific things within the workplace in Canada that are different from abroad. So there are specific fields that actually will need that help to be in that workplace. So that's something that you can actually be able to provide for people through those examples, and I'm happy to work with the Ministry of Labour on any field, any compulsory trade, any regulated profession, because we can actually come up with specific ways you can get internationally trained professionals in those fields, and there are so many.

There are thousands of people who are waiting to get into the health sector right now who can actually provide valuable time and effort within Ontario and really help with the health care crisis—the human resources crisis that we're facing in Ontario through this as well. And the truth is, you know, people from across the world come here for a better life. They want to contribute. They want a better future, and they do not always get that opportunity. Providing them that little bit of support will go a long way,

honestly, whether it's workplace support through a supervised position or whether it's educational opportunities.

For example, I also talked about bridging opportunities. You can have bridging programs, and there are specific universities and colleges that are actually looking into this and they need more funding. They need more support. I know the Minister of Colleges and Universities is right here, so I know that she's listening. If you have colleges and universities with the funding that they need—Centennial, George Brown—there's a lot of those that are working on specific professions—

Interjections.

Ms. Doly Begum: And I can't believe it's my own side that won't even let me speak properly.

So you have professions where you have universities and colleges where they will actually be able to get the funding from our ministry, from the government, to do those specific bridging programs. And if they have those bridging programs, you have so many people who are not able to afford to redo that education. And they shouldn't be forced to. I know the government side will agree that they shouldn't be forced to spend more money, more time—years of their life—to restudy the same thing. It's just not fair.

So if you provide them with a bridging program that allows them to actually have just a transitional assessment, transitional education, then you have actually given them that leg up or that step up, however you say it, to get into those fields.

There's another thing that you can also do, which is specific assessments. If you have specific assessments for specific professions, especially those regulated professions, you can actually get people to be able to do—they can show what kind of qualifications they already have, and you can go through it and then say, "Do you know what? We have a Canadian college or university," or you can have a Canadian licensing program that has gone through this assessment program, that these people have certified A to Z and they need to have this one specific thing that will be good for this regulated profession or this trade.

That will actually help people who are internationally trained to be able to get through. That's what you mean by Canadian experience. That's what you mean by actually helping people gain the Canadian experience that they need to be able to get through those doors and have the professions, have the work experience, have the positions that they truly want to get and be able to contribute to this province. Unfortunately, just saying that we're banning Canadian experience from being posted won't go far enough. In effect, it won't even do the very little that I know the Ministry of Labour is attempting to do. So I really hope that you'll go back, and maybe the Working For Workers Five Act will establish that, and I will be here and continue to fight for that, because I truly believe that we'll get there. I know that the ministers are listening on the different parts that touch on this issue.

But the next part that I really want to emphasize is that some of those—actually, I should say that there are quite

a few other pieces in this bill, and my colleague the critic for labour already highlighted this, and he called it the "already a law" section. He actually went through some specific legislation, so I won't repeat those. But he talked about the work-during-trial period, which is already a law, in schedule 2: As announced, it amends the definition of "employee" to incorporate work performed during a trial period. This is already a law, and he talked about the example of a restaurant server asked to perform the job during an interview or a trial. This is already prohibited; it's just not enforced, and we need to be able to do a better job of enforcement. That means actually supporting the inspectors, supporting some of the unions that have great collective rights, to be able to do the job, so that we can have employees who are facing certain situations be able to call up an inspector and say, "This is what's happening," or have the ministry do a better job in terms of enforcing all of these aspects of it.

There is also an "already a law" section for wage theft. Schedule 2 also legislates that employers cannot withhold, deduct or require money to be returned in situations where a customer of a restaurant, gas station or other establishment leaves without paying. This is already prohibited. It's already a law. It's just not enforced, so what this bill really should do is to actually help the ministry do a better job in enforcing, and you need to be able to make sure that you work with some of the organizations. I've talked about some of the organizations that I worked with in Toronto, in Brampton, who have fought hard to make sure they help international students who are working in workplaces where they're paid cash, sometimes not paid well and, the worst thing is, sometimes not paid at all. There are thousands of dollars that are owed to workers across the province, and that's something that we could do a better job of.

I know I've run out of time. I actually had a little bit that I wanted to talk about how workers are facing the struggle, lining up at food banks, and what they're facing dealing with—

The Acting Speaker (Mr. Lorne Coe): Thank you for your presentation.

We're now into questions.

Mr. Logan Kanapathi: Thank you to my friend, my colleague, from the other side of the fence. Thank you for your activism. I've known you for a long time, and your activism and the hard work for the Scarborough Southwest constituents.

I know you covered a lot of things from your experience, the immigrant experience, the new Canadian experience. This is a game-changer, this bill. However, you talk about the challenges they are facing. This bill is addressing most of the challenges and addressing their hopes and dreams. My question to you—you are right in that Ontario is growing while our economy is too. There is always more to be done. What else does this bill do to help the address the labour shortage and help newcomers to our province get into good jobs?

1830

Ms. Doly Begum: I want to thank the member from Markham–Thornhill for his question. I know he also deeply cares about internationally trained professionals, workers who have come from different parts of the world with a dream, with the hope to be able to work in this country, to contribute to this province. Unfortunately, they face so many barriers when it comes to actually finding that job within their profession and within their qualifications—barrier after barrier because there is the hidden bias of Canadian experience, sometimes, which they need to get.

I talked a little bit about that. The way this bill actually could have helped is by providing the opportunity for these people to go through those barriers, which are actually unwritten. When the requirement for Canadian experience comes, it's actually unwritten, and so what this bill is missing are those specific components of it that I highlighted.

The Acting Speaker (Mr. Lorne Coe): Thank you for that response. I have the member from Hamilton West–Ancaster–Dundas. Thank you.

Ms. Sandy Shaw: Thank you to MPP Begum for a very informative speech here tonight. I want to ask you about what is being billed by this government as a pay transparency provision. As we know, just posting information about expected compensation is not what pay transparency is.

The Pay Transparency Act was passed and was supposed to come into effect in 2019, but it was blocked by this government. The purposes of that were to promote gender equality and disclose employment and pay inequities that women and other groups face in the workplace. It was a very robust act that would have done more than just pasting something on a board in the workplace. Women, as you will know, in the workplace, in the same job category, full-time, make something like 80% of what men do in the same job—

The Acting Speaker (Mr. Lorne Coe): I need a question please, thank you.

Ms. Sandy Shaw: So can you talk about people, women particularly, struggling with wages, the impact of Bill 124 and, really, what I would say is a very watered-down and disappointing Pay Transparency Act when women deserve so much more?

Ms. Doly Begum: I thank the member from Hamilton West–Ancaster–Dundas for her question. I know she deeply cares about workers. A lot of women who do the same job earn less than men. We know that it still is a problem here in 2023, in Ontario, in Canada.

The Pay Transparency Act, 2018, supported by the NDP, is necessary, but it does not go far enough. Our government should have done a better job in making sure that there is real change. We have advocated this point to make sure that specifically women workers—we know Bill 124 has really impacted. A lot of health care workers are women who are really struggling to keep up with their bills, right? The fact that we have so many workers who

are doing multiple jobs and lining up at food banks—that is a real shame on us to be able to legislate—

The Acting Speaker (Mr. Lorne Coe): Thank you for that response. I have the member from Windsor–Tecumseh.

Mr. Andrew Dowie: I want to thank the member from Scarborough Southwest for her impassioned remarks. I say I'm with you 100% on the barriers faced by many of our newcomers.

In fact, I used to help out with the Engineering Intern Program, and I saw plenty of people who were in their middle age just trying to find a path forward, new to our country, trying to get work. They were always, always turned down. That's why I'm pretty excited about what I see in this bill.

So my question for you is this: If we are going to continue to reduce these barriers, what else can be added that this doesn't bring forward to the forefront, the barriers that are seen? Because to me, this looks like a lot.

Ms. Doly Begum: Thank you very much. I really appreciate that question from the member opposite. I think there are a few things that we could have actually done in terms of helping internationally trained professionals. You've mentioned engineers, I was actually at an event with CUET, which is a university alumni organization of engineers and they talked about some of the ways that we could help them.

There are a few things we could do. One is to have college and university bridging programs that are funded and that allow them to have a short time that they go through a transitional program. Another one is to have practice-ready assessments, where you can actually go through that assessment and show what things you're qualified for. If there is anything that's missing, you can do the compulsory part, then you can go through that. That's something a lot of health care workers have asked for as well. Another thing we can do is increase the residency amounts for folks like our doctors. A lot of internationally trained doctors want more residencies available, which is very limited amounts. So when you have thousands of people and you have, let's say, 300 spots, it doesn't do justice. You need to have more spaces as well. There are a lot of things we could have done.

The Acting Speaker (Mr. Lorne Coe): I have the member from Spadina–Fort York, please.

Mr. Chris Glover: I want to thank the member from Scarborough Southwest not only for your comments today, but for your continued advocacy for newcomer workers. You were talking about how newcomer workers are often discriminated against because they don't have Canadian experience. And it's not that an employer comes up to them and says, "Well, I can't hire you because you don't have Canadian experience"; it's more subtle than that. It's that they don't get to the interview stage, or if they do get to the interview stage, they're discriminated against, but they never know that they're discriminated against.

So what you've suggested is that this is what's in the legislation, but it's already banned by the Ontario Human

Rights Code. The question is enforcement. So how can the government change this legislation, strengthen this legislation, so there are tools for enforcement, so that newcomer workers are not discriminated against?

Ms. Doly Begum: I thank the member for his question because the Ontario Human Rights Commission actually specifically highlighted this exact thing, which is that the Canadian experience, that discrimination part of it—which does take place but it's not written or it's not verbal. It is more of a hidden discrimination that takes place.

The Human Rights Commission actually talked about how there are times Canadian experience is actually needed. So you need to be able to provide Canadian experience to workers who want to have—it's sort of like transitioning into a new workplace. So you want Canadian experience, but you want to be able to afford it, to have access to it so that there aren't barriers in getting those spaces.

The other part of the element that the Human Rights Commission highlighted was that it happens very subtly. A lot of people don't even know that it's happening because they don't have those other elements that are necessary to eliminate this barrier. Unfortunately, a lot of people just completely get left out.

The Acting Speaker (Mr. Lorne Coe): I have the member from Hastings–Lennox and Addington, please.

Mr. Ric Bresee: Again, I appreciate the member opposite's passion and her presentation tonight.

One of the pieces that really caught me in this particular legislation—and it's because of my background: I spent the first 10 years of my working life working in kitchens, working as a line cook. There were often cases of, depending on the employer, tip-out and tip shares from the wait staff and arrangements like that. Upon reading it is when I realized that there are new programs, new methods for that tip collection that weren't there 25 years ago, 30 years ago, when I was doing this, certainly, and I was really glad to see the government stepping up to make sure that these programs are being used appropriately.

So my question to you is, don't you think that it is a good idea to support the service industry workers to make sure they're not impacted by the bad actor employers?

Ms. Doly Begum: Can I just say, this is actually probably the most collegial back-and-forth I've had, and I feel like I'm actually contributing to the members opposite. I appreciate that, truly, because I hope you're listening and I hope that it actually brings out the fruit of labour that we expect in this House. So thank you very much.

I agree with you. There are times, especially in the service sector, a lot of people who work very hard and sometimes they do multiple jobs just—

The Acting Speaker (Mr. Lorne Coe): Thank you for that response.

Further debate?

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Ms. Mary-Margaret McMahon: I'll be sharing my time with an amazing colleague of mine from Don Valley East later on. And I want to thank my neighbouring colleague from Scarborough Southwest for her great

speech. As she mentioned, it was great to hear some decent banter back and forth in conversations. It can be done. Let's do more of it.

With regard to Bill 149, An Act to amend various statutes with respect to employment and labour and other matters, it looks somewhat decent. As I said, there's some good things in this, so I was just going to speak on those. I'm going to speak primarily on firefighters, and I will get to the hospitality industry and the employment part in a bit. I will leave you in suspense for that.

With regard to the firefighters, as the member from—where are you from?—Hastings–Lennox and Addington mentioned—sorry, that's a triple riding there—I, too, have a family member who works in the firefighting sector, and he's actually deputy fire chief in our hometown and is doing a great job out there, I think. I worry about his health, as we worry about firefighters in all of our emergency services sector. And so, I think what's in this bill with regard to protection of firefighters is good. It's long overdue, and I've heard it from the firefighters, as well, that they want the extra protection. So that's great. Overall, I think if Bill 124 would help everyone, especially firefighters—that's something we should be looking at with the paid sick days there. So that's the good news about the firefighters.

What I would say we could do better, or more of: I'm big on the climate emergency, and we saw that 2023 was the worst year on record for Canada for forest fires and 15 million hectares of land across Canada was on fire at one point—27 times the size of Prince Edward Island. That is beyond scary. My son lives in Kelowna and he wasn't evacuated, but parts of Kelowna and other areas were. We know about all the mandatory evacuations and we know about the air quality problems that came with this and the pollution. For people with respiratory illnesses or respiratory problems, it was terrible.

Toronto had the worst air quality this summer and, at different times, worse than anything in Ontario or Quebec. It's not something to be proud of. But we know about the forest fires that were happening in Ontario and we heard from people very worried about the cuts to the wildfire management workers. There were 40 crews short, and 67% of the funding for fire management programs was cut. That's something that we cannot be doing in a climate emergency. We really need to be proactive to prevent further horrible things from happening.

We need to get a handle on adaptation and mitigation, and doing that is dealing with the firefighters' wildfire management budget and firefighters in general. What I've heard from firefighters and from Ontarians is they're looking for better wages, danger pay, more permanent full-time jobs, proper training and equipment, and that there are not enough fire rangers, as well, and that there is a high turnover. You can imagine.

With Ontario's aviation for forest firefighters, it's precarious work, and with firefighting and emergency services. I think that's something that we need to be considering as well, overall, in addition to what's in Bill 149, and so that's that.

Now we'll get on the hospitality section. Sure, the job-posting portion is good, mentioning salaries—finally, long overdue. The protection: Yes, that's good. But what I'll talk about on the hospitality sector—I used to be a waitress, actually, and I wasn't a very good one. If you've read the childhood book *Amelia Bedelia*, that was basically me. I just have to apologize to anyone who dined in the coffee house in the Royal York in the 1980s for maybe spilling coffee on you or serving you the wrong order—your eggs over easy instead of scrambled. And then anyone who worked or went to a banquet or a wedding or anything at the Château Laurier in the 1980s, again, I apologize for my terrible service, slopping red wine on you, or roast beef jus.

But it's a hard gig. It's a hard gig, and it's important work. As someone said, it's our leisure, pleasure, livelihood, social events. So we want people to be paid well and protected well.

The trial shifts—yes, I have kids in the hospitality industry, doing a much, much better job than I ever did. This goes a long way, I think, for workers, and I think that that's good.

The dine-and-dash, the gas-and-dash: I think that protection is very good as well.

And the tips: I actually had a constituent talk to me about how she had problems with some software called XTM for tip-outs, so maybe that's something to consider in your bill when you take it further, or maybe it's an amendment or something.

But overall, that's my two cents, my concerns. I guess a few strokes and maybe a poke or so, but overall it looks fairly decent right now for me, and I will hand over my time to my awesome colleague.

The Acting Speaker (Mr. Lorne Coe): The member for Don Valley East, please.

Mr. Adil Shamji: Thank you very much, Mr. Speaker, for giving me this opportunity to rise in the House and talk about many of the challenges that are facing workers in Ontario right now. Specifically, we face before us Bill 149, euphemistically known as the Working for Workers Four Act, a title which I cannot think of as being a better definition of an oxymoron, because every opportunity that this government has had to genuinely, honestly work for workers, they have turned down. I'll touch on all of those opportunities in just a moment.

As I peruse the bill, I see that we have a number of suggestions that are intended to help workers, and largely I don't see anything bad. But they are predominantly just window dressing on the broader root challenges that workers are facing. For example, we have some adjustments around digital platform workers. We have some changes to the Employment Standards Act which allow for greater clarity around tips and job postings. There are a few things on fair access to regulated professions and then, finally, some things on WSIB. Frankly, at face value they may seem to look okay, but when you actually dig down into the details and specifically look at the history of this government, it is very clear that the members across are doing anything but working for workers.

For example, in schedule 2 we have a provision that any publicly posted job advertisement has to indicate the salary or the salary range. Well, the reality is that's all fair and good, but if the wages that are getting posted are absolutely unacceptable—as we have seen under the wage-capping legislation of Bill 124 that has driven nurses, driven PSWs, driven health care workers, educators and teachers out of the health care system—the only thing that posting their wages on a public advertisement does is tell them not even to bother applying.

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Again, this is simply window dressing without addressing the root challenges that people are facing. This government says they're working for workers. This is also the same legislators who last fall tried to implement Bill 28, which trampled on collective bargaining rights. A government that genuinely cared would not dream of doing such a thing, yet they have. They only backed down from that under overwhelming pressure from the public. We were on the verge of a literal general strike.

When offered the opportunity to regulate temporary nursing agencies, merely to take aim at the most predatory and offensive recruiting practices that poach nurses out of public hospitals, this government said no. Just earlier this evening we considered private member's legislation to introduce anti-scab—to protect scab workers. This government voted against that time and time again. Given the opportunity to do the right thing, this government actually refuses to work for workers.

Which brings me to schedule 3: this supposed attempt to allow people who are trained abroad to be able to get credentialed more easily here in Ontario. And on this I point members to the Ministry of Health's attempt to accelerate credentialing of foreign-trained doctors. In August 2022, a proposal came out that they would implement the practice-ready assessment program, a program, mind you that was introduced and ready to go in 2018, that this government cancelled, but fine, they realized the error of their ways and brought that back or proposed to bring that back in August 2022.

The reality is that despite reannouncing it over and over and over again in question period and press releases and media opportunities, we have yet to see the practice-ready assessment program in action. And now, there is a lacklustre attempt to credential 50 internationally trained doctors by the end of 2024. Alberta is doing 100 every year and it's a province significantly smaller in terms of population. So if this government actually cared about accelerating credentialing of professionals who are trained abroad, they would focus less on schedule 3, and more on things like the practice-ready assessment program.

Finally, this brings me to schedule 4, the supposed improvements to the Workplace Safety and Insurance Act. Of course, I support ensuring that esophageal cancer is covered for firefighters. That's important. But when given the opportunity, with private member's Bill 54, to ensure that PSWs and DSWs working in retirement homes also shared protections under the Workplace Safety and Insurance Board plan, they voted that down.

Let's take this back even further. When there have been opportunities to improve cancer care for Ontarians, for example by funding take-home cancer drugs, no action on that. When given the opportunity to accelerate review of breakthrough cancer drugs so that people with metastatic cancers in Ontario can get better care, futuristic care as quickly as possible, this government refuses to act on that.

And so my overall message is, acknowledging that there are a few very superficial things that have merit in this bill, this government has demonstrated time and time again it does not work for workers. And if it wants to be serious about that, I have enumerated a number of things that they need to be taking urgent action on. I thank you for your time and attention.

The Acting Speaker (Mr. Lorne Coe): We have questions. I have the member from Hastings–Lennox and Addington, please.

Mr. Ric Bresee: I will start my comment with the idea the previous two speakers had said: that this debate was enjoying some congeniality, some good comment back and forth. I do appreciate the member from Beaches–East York's—I think I got that right—comments on the things that she liked about the bill.

So my question falls to the member from Don Valley East. He suggests that the title of the bill, "Working for Workers," is somehow inappropriate. In fact, he called it window dressing. My question is that, given the 15 years of your party's decimating employment in this province—the 300,000 jobs that were lost—and the turnaround that this government in the last five years has brought, with 700,000 new jobs to the province, don't you think that Working for Workers includes making sure that Ontarians actually have a job available to them?

Mr. Adil Shamji: Well, I mean, to that I would point to exodus of health care workers—the exodus of paramedics, PSWs, nurses—out of health care that stands in stark contrast to the proposition that we've heard from the member across. The reality is that genuinely working for workers means WSIB protections for firefighters—and I applaud the effort to add coverage for esophageal cancer; that's a good thing—but extending that WSIB protection to everybody, making sure that wages are fair and transparent for everybody, making sure that we never attempt to trample on collective bargaining rights. These are all things that would demonstrate a genuine intention to work for workers, and the recent history under this government has shown that that intention is not there.

The Acting Speaker (Mr. Lorne Coe): Questions?

Ms. Jessica Bell: Thank you to the member for Beaches–East York as well as the member for Don Valley East for your speeches this evening. I was particularly struck by the comments you were making about health care workers and what can be done to improve the working conditions of health care workers. Could you elaborate for us again? What are some useful things the government can do to improve working conditions for health care workers?

Mr. Adil Shamji: Thank you for the question. You know, in the wake of the pandemic and in the wake of wages that have not even come close to keeping up with

the pace of inflation, we face massive burnout and mental health challenges with our health care workers. They deserve the kind of mental health supports that allow them to recover from that. Health care workers currently face profound moral injury from having to ration care over the last few years because there simply hasn't been enough to go around. And then, finally, in the wake of all of that, we see patients, sadly, who are angrier than ever before, and we see increased rates of workplace violence in hospitals and clinics.

Efforts need to be made to address all of those things. That comes in the way of ensuring that there are those mental health supports, ensuring that we increase the number of health care workers to alleviate a lot of that burnout, and implementing protections that people can demonstrate—

The Acting Speaker (Mr. Lorne Coe): Thank you for that response. Questions?

Mrs. Daisy Wai: Thank you to the member from Don Valley East. From what I'm hearing, I really hope that you will support this bill. One thing that really touched me about this bill is how we do for firefighters. They are really heroes who risk their lives and then their service for us. I honestly hope that all members on both sides of the aisle approve and support this bill. If, in the event you are not supporting this bill, does it mean that you are going to make it more difficult for firefighters and their families to get the support they need when they are facing the illnesses?

Mr. Adil Shamji: I would never want to make things more difficult for firefighters. What I'm saying in my remarks tonight is that firefighters can't be the only ones that we care about. Let's take the example of another kind of front-line hero. We saw PSWs—personal support workers—who were working during the pandemic at long-term-care homes such as Orchard Villa. They contracted COVID-19. They were in close, prolonged contact with COVID-19 patients, didn't have adequate PPE, and they literally died. They are not covered by WSIB right now, and when given the opportunity in this House to vote to extend WSIB to them, the members in this House did not vote to do so.

So, what I'm saying is, of course we should support firefighters, but let's support all workers. Schedule 4 has an opportunity to extend WSIB coverage to many workers who don't have that.

The Acting Speaker (Mr. Lorne Coe): Questions?

Mr. Chris Glover: I want to thank the member from Don Valley East for your comments today. You know, one of the propaganda games that is played by the government side in this House is they always say, "Oh, the opposition, the NDP, the Liberals, they voted against this, they voted against that," you know, because they put some stuff that's in a piece of legislation that's actually very good, like the presumptive coverage of esophageal cancer for firefighters. That's in this bill. That's a good thing, but there are other things in this bill that are not so good, that are not actually going to protect the gig workers, as they pretend to.

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So the question that I have for you is, what do you make of this when the government is actually saying, “Oh, you voted against this or you voted against that,” when they put it in an omnibus bill where there are some good things and there are some other things that you just can’t support, but then they play this game? It seems like an attempt to mislead the public about the actual intent and the actual vote that the opposition members have made.

Ms. Mary-Margaret McMahon: Thank you very much to the hard-working and ever-popular member from Spadina–Fort York who cares about the planet, I think, as much as I do, the same amount, and it shows in the work you do. You’re absolutely right, and you get painted—I say “bingo” every time I hear, “The previous Liberal government, propped up by the NDP,” but it’s really getting stale and it’s ridiculous. Also, the previous government, as in last term, was actually the Conservatives.

We’re all here to work together, but this constant—these bills come out, as you say, so many of them, where there are some really good things in it, so of course we want to support it. And then there are some things that aren’t so good or that need tweaking, and that’s why this morning at committee—

The Acting Speaker (Mr. Lorne Coe): Thank you for that response. Thank you.

I have the member from Lanark–Frontenac–Kingston.

Mr. John Jordan: My question is for the member from Beaches–East York. I thank her for her comments and sharing her work experience in the hospitality industry. I’m wondering if she could comment on some of the protections that are in this act: the dine-and-dash, the employer sharing in tips and unpaid trial shifts. I’m wondering if you had any experience with that; maybe, given what you told us, there weren’t any tips. But if you could just comment on if you think this will help people working in that particular industry.

Ms. Mary-Margaret McMahon: Thank you very much for that question, and now we’re airing my dirty laundry because, no, I did not receive good tips and many times I received no tips. Back then, the wage was \$2.35 an hour so, yes—I mean, it was a different time, and I’ve improved, I think, a little bit in my hospitality skills since then.

So, absolutely, it’s precarious work, it’s gig work, and people live paycheque to paycheque. It’s hard work serving people and getting treated badly and rudely many times—and people who dash on paying the bill. So, in that way—and the training shifts as well—that portion is good.

But as the MPP for Spadina–Fort York and also my colleague said, then there’s also stuff that needs improvement. I guess my big ask is, please, please, please consider amendments when they come to committee because we actually are trying to work with you—

The Acting Speaker (Mr. Lorne Coe): Thank you very much for that response.

Further debate?

Hon. Charmaine A. Williams: Good evening. It’s great to be able to speak to this bill, Bill 149, the Working

for Workers Four Act, another edition of us making Ontario the best place to live, work and play.

As Ontario’s Associate Minister for Women’s Social and Economic Opportunity, I do have a passion for championing women of this province. Our government’s vision for the future is for women across the province to thrive everywhere—at home, at work and in their communities. Increasing women’s participation in the workforce is critical to helping more women achieve financial independence and prosperity and, most importantly, safety. Helping women participate in the workforce is also very good for our economy. That’s why our government is getting more women into jobs than ever before.

Overall employment continues to be higher than pre-pandemic in February 2020, and more than 700,000 men and women go to work today who didn’t go to work five years ago. In fact, just last month, the employment of core-age women increased by a further 14,600 jobs or 0.6%. Also, the Financial Accountability Officer found that the labour participation rate of mothers with children between the ages of zero to five increased from 76.5% in 2021 to 78.9% in 2022. That’s a 2.4% increase in just one year under our government. That jump made 2022 the highest year on record since 1976 for all core-age mothers participating in the job market.

Our plan is to build Ontario and to make it the best province to do business. The results of that are speaking for themselves. Women are an integral part of this growth. Women are critical to helping Ontario address the many pressing labour shortages facing our province, particularly in tech, skilled trade and construction sectors, but there is more work to do to bring women into the forefront of our economy. Women still face barriers to being hired, retained and promoted—especially in traditionally male-dominated occupations. These barriers include things like gender bias, inequitable workplace practices, pay gaps, lack of mentors, sponsorship and role models, and work environments where women do not feel safe. These barriers are even greater for Black, Indigenous and other racialized women. This is why our government is giving workers the help they need to find better jobs and get bigger paycheques while having their privacy protected.

Under the proposed legislative changes that we are debating today, it would require businesses to include salaries in job postings, giving workers more information to make decisions that benefit them. In addition, our government is proposing to require employers to disclose if artificial intelligence is being used during the hiring process. With the increasing use of AI to streamline candidate selection and the historical pay differences between men and women and those from under-represented groups, we are taking action to ensure our province can tackle the labour shortage so that job seekers get a fair shot at the Ontario dream.

Finally, to help end workplace misconduct and hold abusers to account, our government is proposing to conduct consultations and detailed analysis of the use of non-disclosure agreements in the settlement of cases of workplace sexual harassment, misconduct or violence,

which is so important for us to do. The consultation would identify legislative options to restrict the use of NDAs while protecting the rights of victims and survivors. If approved, these changes would expand on the groundbreaking actions the government has taken under Working for Workers Acts, 2021, 2022 and 2023, that are already helping millions of people by introducing more leading-edge, pro-worker supports to help workers earn more, increase protections and support newcomers.

The legislation being debated today complements our government's efforts to support women's social and economic empowerment, and that includes women's participation in the workforce by making workplaces safer for women and supporting affordable child care options. In fact, I was just at an announcement last Thursday with our minister and the parliamentary assistant of education where we announced the comprehensive strategy to boost child care workforce and protect children. This announcement included major enhancements to wages and working conditions supporting access to affordable and safe child care. The unquestionable result of this marquee investment is that working moms will be able to enter or re-enter the workforce. It's so huge. You know my kids are all above the age of six and they're watching tonight—hi, kids. That's why I had to advocate so strongly to make sure that we got a good deal for the women of Ontario, because child care is that choice between staying at home or going to work and contributing to your family. And if you were a mom like me, where you had your kids close together, sometimes going to work is a bit of respite and you want to get out. So thank goodness that we're making that option available to the many women out here in Ontario.

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Another component in our government's plan to support women's social and economic empowerment and increase participation in the workforce is by offering targeted employment and skills development and training opportunities, and providing programs that help women overcome barriers and achieve financial independence.

That's so important. I think a lot of people are starting to realize that we've changed the way this ministry operates. My ministry used to be called "women's issues." I don't know about you—I know all the women in here, and we don't have issues. We're not problems that need to be solved. In fact, women are the solution to many of the challenges that we face in Ontario. That's why changing the name to "social and economic opportunities" is so vital to the success and empowerment of women, and not just the women who are in the age where they're trying to make a decision on where they're going to go back to work, but also for those young women who are in school and need woman role models to look up to and say, "Oh, I can be that. That's the future I want to get into. I want to be that engineer. I want to be that person who is in leadership." So that's why the name change was critical, and a refocus of what the Ministry of Women's Social and Economic Opportunity is going to achieve in Ontario.

My ministry is offering training—targeted training—skills development and employment programs for woman experiencing social and economic barriers such as poverty and gender-based violence. One of the initiatives that I'm proud of is the expansion of the Investing in Women's Futures Program. We've expanded it to 33 service delivery locations across the province. The program provides a safe space and wraparound supports for women who experience social and economic barriers, including abuse, violence and isolation. In the last year, the Investing in Women's Futures Program served more than 6,900 women and helped more than 1,300 women across the province secure employment and start their own business or pursue further training or education.

Another initiative that I'm incredibly proud of is the Women's Economic Security Program, which provides skill-based training to low-income women in high-demand sectors. It features training streams for general employment, information technology, skilled trades and entrepreneurship. Since 2021, the Women's Economic Security Program has served nearly 1,800 low-income women and it has assisted nearly 1,000 of them to start their own business or pursue further training and/or education. I actually think some of these numbers are lower because we are seeing more women—because we just announced not long ago the expansion, more women are engaging in these programs.

I got the chance to meet a woman named Kendra, who had the dream of having her own catering company. Because of circumstances, it was difficult for her to be able to do this, but the program that we supported, through Investing in Women's Futures Program, in her community was able to give her the opportunity that she so sought and needed, and now she has her own catering company called Kendra's Cuisine. These are the types of outcomes that we are creating, because now she is able to afford—especially afford things now, which has been very difficult. Affordability has been a challenge right now, and for so many women. Now she has hope because she's creating an opportunity for her kids in ways that she was not thinking were possible before.

Over the next three years, we are investing \$30 million into these programs to help more women gain necessary skills, knowledge and experience. And these supports are designed to help women enter or re-enter the workforce, achieve financial security and independence and provide for their families.

Today's debate, though, on Working for Workers and the proposed salary disclosures in job advertisements will help keep and encourage more women into these underrepresented sectors. And it is an important tool on closing the pay equity gap from men and women in similar positions. It's a no-brainer to support a bill like this, because it is changing the status quo. It supports women, and it supports diversity and inclusion in our workforce. I call on all members to support this bill, because supporting equity, diversity and inclusion gives women and newcomers to Canada a fairer shot at economic stability. That's what we need to achieve, because all hands are

needed on deck to build Ontario. We need all women. We need all newcomer women to thrive and to succeed. That is what we need to see here in Ontario.

I am so happy that we are now making it possible for people to see what kind of salary they may be getting before going through the process of taking time off work. You know what I mean: taking time off work to go to an interview. Some people get very anxious during interviews. It takes a lot of mental energy and strength to get yourself together, put yourself in front of that employer, go through that whole process to get to the end stages of that interview, and find out that it's a salary that is way below what you know you are capable of achieving or knowing what you should be getting. That happens to a lot of women. I hear that often. So having salaries available to you, you can pick and choose. You have a choice now, whether you are going to invest all that time and energy into that job interview or if you're going to say, "I will wait for the next one."

Also, the NDAs—we often talk about making sure women are safe in Ontario. I know our Minister for Colleges and Universities—I was very proud to support the bill when we did that for students in the colleges and making sure that NDAs were not silencing women. If you were a victim of sexual assault, you should never be silenced. You should be able to speak about it. NDAs and us doing these consultations are going to be extremely impactful for the many women who have had to sign NDAs and keep silent. We shouldn't be encouraging that.

These are good steps in the right direction for us in Ontario. I know all of these steps are going to support women who are entering these traditionally male-dominated fields and sectors. It's also increasing the likelihood of women staying in the workforce and enjoying long and successful careers. We know the percentage of women in low-paying precarious job situations is quite high, because oftentimes, women are not able to invest the time to upskill or reskill, which is why I'm glad we have these programs to give women those opportunities.

Many women are impacted in the low-paying precarious job situations. This bill is going to really help many of the women out there who are just trying to make ends meet and are working, and taking time away from their kids when they would much rather have a job that pays them well and respects them. So I'm very happy that we're making these changes.

Speaker, you know, that is the Ontario I envision for my own daughters. I have three daughters and two sons. They're watching, like I was saying. I envision an Ontario that is full of opportunities for all of my kids and all of their peers, the many children out there who are going to school and making decisions about their careers, but then also making a decision about what jobs they're going to get into while they're studying, going to school: thinking about what kind of employment they're going to go to, where's a safe employer. I used to work in retail when I was in college way back in the day when I was in school, a long time ago—having to decide where I'm going to work. There are a lot of women right now who are going

to have better opportunities and have greater work experience that is preparing them for this next long-term gig. So I'm really happy to see us taking this step in the right direction for Working for Workers Four.

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I know we're a government that takes action and that wants to make change. Many of us in our caucus and many of us here had careers. We have done work in many different sectors. We know the things that people are experiencing, and we want to make it possible that if we have experienced those things, nobody else has to, right? That's why we're bringing these bills forward. Working for Workers Four is just four. There's going to be five, six, seven, and hopefully many more to continue to make Ontario the best place to live, work, and play.

I'm going to wrap up my speech here with the line that I always say all the time, because I believe it: I believe women, again, are the solution. We don't have issues; we're not the problem. Women are the solution, and when we invest in women, we are investing in a bright future. When women succeed, Ontario succeeds.

The Acting Speaker (Mr. Lorne Coe): Thank you, Minister.

I have the member from Hamilton Mountain, please. Thank you.

Miss Monique Taylor: I listened intently to the minister's debate tonight on this workers bill, and I have great concerns. I heard her talk about child care spaces, and yet we know in our communities that families are on wait-lists for child care and not able to get spaces. We know that child care providers are not covered under WSIB.

I've heard her talk about women in the workforce. We have PSWs. We have DSWs. These are highly women-oriented jobs, and yet they're part-time jobs. Their wages are so low. They're not paid for their travel time, and they're not covered under WSIB, which gives them absolutely no protection for their children if they're hurt at work.

What does the minister have to say to that? Will she commit in the workers number five bill to include WSIB for all of these women who are left out within the province of Ontario?

Hon. Charmaine A. Williams: I really do appreciate the question from the member, because these are all things that we have to consider. When I was speaking about ensuring that this is not the last of the bills that we're working on to make Ontario the best place to work, live, and play, and especially for women, there are many things that we want to consider.

I'm very proud, though, that our government has increased the wages for many of these jobs, especially after years of seeing the status quo. It is this government that said we're going to increase the wage flow for child care workers, for PSWs, legitimizing their positions. These are the steps that really should have been done years ago, so that we're not in the position where people are feeling so strapped and so restricted by the challenges of our economy. I think we are in the right direction. I'm

proud of the work that we have done and more is yet to come.

The Acting Speaker (Mr. Lorne Coe): I have the member from Windsor–Tecumseh, please.

Mr. Andrew Dowie: I want to thank the associate minister for her remarks. I think there are very few people who are as knowledgeable as the minister on this subject. When she came down to my community, about a year ago now, I was just so impressed with her outreach and her ability to connect with so many in the community, so that's what leads to my question on this bill.

I know I will never be able to experience what a woman experiences in the workplace. I know that sometimes the workplace is not a welcoming environment. We know that non-disclosure agreements will silence individuals who have experienced workplace sexual misconduct and abuse, so my question to the minister is this: Do you think that by beginning the consultation process, our government is taking the right steps to be on the side of workers who have suffered in silence?

Hon. Charmaine A. Williams: Thank you to the member from Windsor. Windsor is really a great, great place to be. There's so much potential in Windsor. While out there, I met a number of women who have started their own business and are employing other women, and are saying, "We want to make sure our work environments are safe." I often say that if there are places that won't make room at the table for women, that's okay; we can create our own.

The Acting Speaker (Mr. Lorne Coe): Questions, please?

Ms. Sandy Shaw: To the Minister of Women's Social and Economic Opportunity: You said making room at the table, but I wish you would make room at the violence-against-women shelters in this province. There is an epidemic of partner violence in this province. Almost 50 municipalities, including Sault Ste. Marie, have declared intimate partner violence an epidemic.

In Hamilton, the director of Inasmuch House, Erin Griver, said that they haven't had an increase in 15 years. It's no wonder that last year they turned away almost 5,000 women from violence-against-women shelters, just in Hamilton alone.

It's one thing to talk about women in the workforce, but your government doesn't even work to make sure women are safe when they're fleeing domestic violence or when they're in abusive situations.

How can you stand behind this bill and say, "Down the road, we'll look after women," when women are dying in communities across Ontario right now?

Hon. Charmaine A. Williams: Through the Speaker, it is devastating. I've heard the stories. I've gone to the shelters of women having no space to go to, especially because the transitional supportive housing workers that we invested heavily in are having difficulty finding places for the women who are in the shelters for longer than they should be and finding a house for them to move into or rental income for them to be into, which is why we're supporting in making sure we're building the homes.

Do you know what we also did, just last week? We increased the amount of funds that many of these places that are offering support across the board to address the gender-based violence.

I've worked in this sector. I've worked with women who are fleeing violence, who have to create safety plans. It's been really challenging, but one thing I can say is that we have to start taking action. I think that's what our government has been doing, is taking action.

The Acting Speaker (Mr. Lorne Coe): I have the member from Bruce–Grey–Owen Sound, please.

Mr. Rick Byers: Thank you very much to the minister for her remarks on this important piece of legislation. As well, it's great listening to her talk about all the important initiatives her ministry is doing—and just the name change, in and of itself, is something that is so appropriate, because women are the solution, as we all know.

There are so many initiatives in this bill that relate and are consistent with our broad goal of economic development and job creation for Ontario—700,000 jobs that we have now that we didn't have before.

I wonder if the minister could give us a sense of how this bill not only helps the economic development, but specifically women's initiatives in this great province of Ontario. Because as we all know, when women succeed, Ontario succeeds.

Hon. Charmaine A. Williams: Thank you for the question. When I used to work in this sector with many of the women who are experiencing challenges like finding a place to live and trying to flee violence, a lot of women stay in abusive relationships because they can't afford to get out. Oftentimes, women go back to these abusive relationships because they can't afford to action their safety plan. So the choice has been taken away from them when they are not economically supported and stable, which is why we are heavily committed.

I'm heavily committed in my ministry to making sure there are opportunities for women to go back to school, for women to get training in sectors where they're under-represented, like trades, where there are high incomes and bigger paycheques. That is where my focus is in this ministry. This bill is going to make it possible for many women to stay employed and be able to climb themselves from under the poverty line.

The Acting Speaker (Mr. Lorne Coe): Thank you for that response.

Questions, please?

Ms. Jessica Bell: Thank you to the Minister of Women's Social and Economic Opportunity. I enjoyed listening to your speech. I also have children at home. I was very grateful to go back to work once they were at an age where they were ready to go to child care. It was a good day—a sad day, but a good day.

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My question is about child care. We have many parents in our riding who don't have access to child care, mainly because they can't find a spot. One of the reasons why they have difficulty finding a spot is because there's child care centres in my riding that just can't find workers to work in

these rooms. The rooms are available, the parents are willing, they're on the wait-list, but they can't find workers to come in because of the wages being set at a rate that—they're too low for people living in Toronto to afford because they can't find a place to live at that kind of wage.

What's the plan to fix that worker shortage?

Hon. Charmaine A. Williams: That's a very good question. When we announced it with Minister Lecce—sorry, the Minister of Education—and the PA to education that we increased the wage floor for our ECEs, which is so vital—it is the challenge that we face. A lot of municipalities have spots but not workers. So increasing the wage for our ECEs but also giving the opportunity for those who are not registered a pathway to become registered so that they can get that higher employment wage rate is the plan because we want to see women working and we want to see child care centres filled with many children so that we know that we're growing Ontario together.

The Acting Speaker (Mr. Lorne Coe): Further debate?

Ms. Jessica Bell: I am pleased to rise this evening, on a Thursday, to talk about a topic that is extremely important to Ontario and our economy, which is the issue of workers and their conditions. It's extremely important. This bill is called Working for Workers Four Act, Bill 149. I took a look at what this, practically, means for workers in Ontario, what kind of changes it would mean. I do want to summarize that, and that's how I'm going to start off.

It does affect gig workers. So these are the workers that get their jobs through an app like Uber to get employment. When we're looking at the pretty small changes that are made to workers who are gig workers, some experts say that this legislation could actually make them worse off.

I do want to summarize the other changes that are in this bill. There is a requirement here in job postings to include information about the expected compensation or range of compensation for the position. This does make a lot of sense. It is no fun to apply for a job and then find out that it pays a whole lot less than you expected it would pay you. I think that's an experience every worker in Ontario has faced some time or another, especially younger workers or people who are new to Canada.

And then there's also the change here when it comes to job postings where posts will be banned from stating that Canadian job experience is required. That's a good thing. One of the challenges that I have seen and heard—the member for Scarborough Southwest gave a very impassioned presentation that draws on her experience as the critic for credentialing international workers. She explained very clearly that there are many ways that employers can look at a résumé and screen out prospective employees who don't have a lot of Canadian work experience, even if it doesn't explicitly say that in the job posting. They look at where they've worked before, maybe in other countries. When people go to an interview, they might be judged by how they look or how they speak, and there's subtle discrimination there, even though they

might explicitly not say the words “you are required to have Canadian work experience.”

And then there's also this other issue that the member for Scarborough Southwest also raised, which is that in Ontario you already are not allowed to discriminate against workers based on their experience elsewhere. It's already a law; the issue is that it's not enforced. And, as she wisely pointed out, there's nothing in this bill that talks about or addresses the lack of enforcement in Ontario. That's an issue.

Another change that's introduced in Bill 149 is the move to ban employers from not paying a worker during a trial period before formally hiring them. This makes sense. When I was starting out as an employee, there were jobs that I took where you had to do a trial period where you were not paid. It's not acceptable. You're going there to work, they're using your time; so it makes a lot of sense to put this in legislation.

There's also the change here to ban employers from deducting wages from an employee if a customer leaves without paying or if there's a drive-and-dash situation where an individual takes gas and then leaves. This also makes a lot of sense. If you're a waiter or a waitress, it's in no one's best interest for you to chase after a customer and put yourself in harm's way because they're choosing not to pay. It's also not acceptable to have an employee being forced to pay or lose \$100 worth of wages or \$50 worth of wages because someone didn't pay.

The challenge with some of these catchy examples is that the legislation in Ontario already does not allow employers to deduct wages from employees in situations like this, so what's the value added here if Bill 149 is not addressing the enforcement piece?

The additional thing I noticed by reading the bill is that there will be a requirement that employers must follow: If they've got a policy of sharing tips with employees, they need to post their tip policy in a conspicuous space. That makes a lot of sense. Explaining the tip policy, putting it in the kitchen or in the washroom or in the hallways where all the employees walk through so that everyone knows the rules when it comes to sharing tips makes a lot of sense. Because when you're a new employee, maybe you don't know, maybe you're not front staff so you're not seeing the collection of tips and you don't understand where they go or how much you would be eligible for. It makes sense.

Another change that's being proposed in this bill is to permit increases to the Workplace Safety and Insurance Board, WSIB, so that they're above the annual rate of inflation in certain cases, which essentially means that some injured workers will be eligible to receive higher rates of pay.

The additional piece that we see here is that firefighters will be eligible for compensation for esophageal cancer from the WSIB after 15 years of employment, down from 25. This issue of firefighters spending years putting themselves in harm's way, running to danger instead of running away from it and rescuing people who might have passed out or might be in very dangerous situations—it makes a

whole lot of sense to ensure that they receive good coverage if they find that years down the road they are suffering a serious health issue.

I know many of the firefighters have met with many of you. I have met with firefighters in my riding as well. They like to point out to me that the way we make homes now and the way we make furniture and products is very different than what we did 30 or 40 years ago. There's a lot more plastics. There's a lot more toxic material. A lot of pollutants are released when fires happen and these pollutants are breathed in, so firefighters are experiencing pretty serious health conditions in periods of time that aren't that long. So it is a good thing to see changes in this legislation to provide them with access to WSIB within a more reasonable period of time.

What we don't see in the bill, and this is a concern, are other measures that we need to take to make our workplaces fair, to ensure workers have a living wage, to ensure that they are not injured on the job unnecessarily, that they get to come home at the end of the day safe, in one piece. We don't see those changes here.

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We have introduced many pieces of legislation calling on the Ontario government to use the incredible power that it has to improve workplace conditions. It's almost exclusively a provincial jurisdiction. We are the level of government that has a huge amount of power. We might not have as much money as the federal government, but we certainly have a huge amount of jurisdictional power provincially, especially when it comes to workplace conditions, so it's really upon us to show leadership.

What I would like to see in this bill and what many people would like to see in this bill is an increase to the minimum wage, especially with inflation rates going up and up—though certainly the rate at which they're increasing has thankfully stalled. But things are a lot more expensive than they were two years ago, five years ago. I walk into the supermarket and I literally have people come up to me and say, "Oh, my God, I am going to be spending too much in this supermarket today."

We have many people who approach us and say they cannot afford the price of housing. They're looking at moving to other provinces. They can't make it work anymore. They're living paycheque to paycheque. It makes a whole lot of sense, if we're introducing legislation to improve working conditions, to lift the floor and increase the minimum wage, because when we do that we ensure more workers have money in their pockets.

We have seen study after study after study show that when workers are given more money, they spend it locally, it stimulates the local economy and most of that money stays within the local neighbourhood or city or province. It is a good thing. We don't see that here, but we will continue to advocate for that because it makes a whole lot of sense.

We need to make it easier for people to form a union. In Australia, in the US, in Canada, what we have seen is that when union rates increase, it overall increases wages.

It is a good thing, and it ensures people have better working conditions.

We would like to see more improvement to the WSIB. I noticed the member for Don Valley East spoke about this earlier: In my riding, there are a lot of workers who are not eligible for WSIB. I'm thinking of personal support workers in my riding at Sienna, as a good example, and Vermont Square, before it closed down. These are workers that, during the pandemic, would come in, work incredibly long hours, be responsible for looking after a whole floor of old, sometimes very sick people for 12-hour shifts at night, and they were being paid very little.

And what was so troubling to hear—and we worked with a bunch of workers over this—is that many of them did get COVID. Some of them got sick. Most of them recovered. Some didn't. Some didn't fully recover. They're not eligible for WSIB, and it's very difficult to see that and to know that's happening in Ontario when these are our front-line workers.

We should be doing as much as we can to recruit front-line workers, PSWs, health care workers and also ensure that the ones who are already working here stay. We don't want them to leave. Expanding WSIB would be a step in the right direction for that.

I'm also thinking about the need for higher wages for other workers in my riding, especially in areas where we're experiencing workplace shortages. I'm thinking of the child care centres in our riding that are not able to open up all the rooms that they have access to in schools because they just can't find workers who can afford to live in this area with the little amount of pay that they get. I'm thinking about the hospitals along university row: Many of them have significant workplace shortages right now; up to 10% of staff in an area, the positions are left open, they're vacant—not just technicians, but also people in HR and finance, and it's having a significant impact on our hospital sector. It's a problem.

Part of this is because of this government's insistence, their decision, to bring in Bill 124 and to deliberately unnecessarily suppress our public sector workers' wages for too long. It has led to an exodus of workers from sectors where we absolutely need them to stay. It's been a huge problem, and it was a problem that was created by this government. It was a problem that could have been fixed with this bill, but it wasn't.

These are some of the things that we would have liked to have seen in this bill that we are not seeing in this bill. This bill is tinkering around the edges. When it comes to some of the more proactive, bold, and sensible measures that we need to really lift the working conditions in Ontario, they're not there. I'm not the only one saying this. There are many stakeholder groups who are saying the same thing. I will give you an example.

This is from Parkdale legal and the Justice for Workers campaign. They're talking about the gig worker piece and this is what they say:

"The new legislation is expected to weaken existing laws that protect workers, strengthen the hand of multinational corporations like Uber and Lyft, and divert

attention from the government's ongoing failure to enact and enforce existing legislation that would make a meaningful difference in workers' lives.

"To be effective, employment laws must be enforced"—and this is something the member for Scarborough Southwest raised as well—"which means better protections for workers against unjust dismissal and workplace reprisals so their employment is not at risk when they ask for their workplace rights," because that's one of the challenges many workers face is that they know an injustice is happening. Maybe they got paid less than what they should have. I certainly had that experience happen to me. When I was a teenager and in my early twenties, I would get less than what I expected to and what I thought I was going to get paid. There is very little that you can do in situations like that because your employer has a whole lot more power than you. And where are you going to go? Where are you going to go? That's why it's important that the steady hand of government is available to ensure that the playing field is fair and people have a number to call or a bylaw officer that can intervene or some place to go to ensure that workplace standards are upheld and enforced. It makes a lot of sense.

"For those who do make claims, timely investigations of claims is essential, which means hiring an adequate number of employment standards officers so they can investigate and follow up to ensure" issues are addressed, such as "stolen wages are actually paid."

Jan Borowy, with the Equal Pay Coalition, also provided a reaction to the government's Bill 149 announcement. Her reaction was around the small steps that were taken to address pay equity. They were reacting to the announcement of the salary disclosure changes and that these didn't go as far as they could have gone, which is a concern.

I want to spend the final part of my time talking about gig workers and digital platform workers. The reason why I want to spend a bit of my time talking about that is because in University–Rosedale we have a lot of gig workers. People rely heavily on buying restaurant food from many of the small businesses we have in our riding and small restaurants we have in our riding—it's a flourishing sector. It is safe to say that these workers are not paid enough for the work that they do. They don't get paid for their whole time. They only get paid for some of their time. It's a hard job, especially now that it's late November, early December. It's a hard job. They're out at all hours. When the weather gets worse, demand for their services increases because people are less interested in going out and getting their own services or doing their own deliveries. That is a concern.

What is also a concern is that—you know, gig workers get this. Many gig workers organized a few years ago. They were fighting for the right to be classified as an employee and not as a contractor. They formed unions. Foodora had a workers' union, which is hard—it's hard to organize a union when workers are not all going into one place and leaving at the end of the day. It's difficult work, but that union was formed. Then, they also took this issue

of whether they were classified as an employee or as a contractor to court. The Ontario courts ruled that they should be employees. They ruled that they should be employees, because they are. They're employees. They work a set number of hours, they're on the job—but they don't get paid like they are.

And this government made the decision to weaken those standards and essentially return gig workers to being contractors again. I don't think that's right. They're working. They should be employees.

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I want to commend the MPP for London West, who has introduced numerous bills to address this injustice. She has introduced the Preventing Worker Misclassification Act, which would reclassify these workers or set a standard for when workers should be reclassified as employees. That makes a whole lot of sense, because it means that we're helping workers here in Ontario who want to earn a little bit more from multinational corporations that exist somewhere else.

Uber isn't our friend here in Ontario. They're not here to make Ontario better. They're not here to commit to Ontario like workers here are. So why would we want to rule and stay on their side when we could be doing something for people who choose to make Ontario home? It would have been nice to see something like that in government Bill 149; we didn't. My hope is that when the "working for workers 5" act is introduced, those kinds of more meaningful changes that we need in Ontario are included in that future bill.

The Deputy Speaker (Ms. Donna Skelly): It's now time for questions.

Mr. David Smith: I want to thank the member from University–Rosedale for her advocacy and what she has stated here. I was listening very attentively to what she had to say.

This bill that is before the House has so many valuable pieces that can be used in so many ways.

I ask the question to the member: Do you believe that increasing WSIB payments for those who need them is something that should not be supported? By failing to support this legislation, it appears that this is their position.

Ms. Jessica Bell: Thank you to the member from Scarborough Centre for your question.

When I gave my presentation, I did raise and point out many of the pieces in this legislation; I didn't speak out against them. In fact, I suggested that many of them were heading in the right direction. My question was more around enforcement and what else we could do. So I think that's a little bit of a misclassification of what I said. Some of these changes make a lot of sense. We just want to see more, and workers want to see more.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Terence Kernaghan: I'd like to thank the member from University–Rosedale for her presentation and all of the points that she has raised.

Here on the side of the official opposition, we agree with the presumptive coverage for esophageal cancer in

firefighters. To the member: I noticed that Bill 149 does not include wildfire workers. Would the member like to see this government include them in the definition of firefighters covered by presumptive clauses under the WSIA?

Ms. Jessica Bell: Thank you to the member for London North Centre. I appreciate that question. It's also an issue that was raised by the member for Hamilton West–Ancaster–Dundas. She and you both wisely pointed out that there are many firefighters in Ontario today who would not be eligible for this improvement in WSIB compensation. These are firefighters who are very much needed—we have a shortage of them—especially when we're seeing an increase in the length of the fire season, the intensity of the fires, the frequency of the fires. It's important that we provide the kind of workplace conditions that ensure that they're safe, as much as they can be, on the job and that they're properly looked after once the job is done. So it would be nice to see that change.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mrs. Daisy Wai: I thank the member from University–Rosedale. As I hear you intently, a lot of the areas that you just said—you think that we're in the right direction and you're happy with it. On each one of them, you also add a few things off your wish list. Honestly, Rome was not built in one day. The way it is in the bill—I am sure you agree with me that it covers a lot of valuable areas. Can we seek your support for this bill with all that we have done so far?

Ms. Jessica Bell: Thank you to the member from Richmond Hill for your question.

What I raised in my presentation in terms of what is needed to improve workplace conditions, like increasing the minimum wage and expanding WSIB coverage, have been measures that workers have been advocating for for years and years and years. We should have done it a long time ago.

We're going to vote what we're going to vote; I'm not going to reveal the big surprise tonight. But I have, you know, pointed out in my speech—there are some things here that make a lot of sense, especially since, with some of these examples, we have introduced our own private members' bills.

My colleague here from Niagara has introduced private member's bills—so has the member from Hamilton West–Ancaster–Dundas—that are now in this bill. So, clearly, there are some things here that make a lot of sense.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Ms. Mary-Margaret McMahon: To the super hard-working member from—University–Rosedale, right? Yes, phew. It's late. Thank you for your speech. It's very enlightening, and I always learn a lot from you when you speak.

And so, if you had your druthers, can you name me one or two or three things you would change—or three million things you would change—about this bill?

Ms. Jessica Bell: Thank you to the member from Beaches–East York for the question.

I think there are some very useful things that we should do with this bill. Number one: We should take the member for London West's measure to set up a system for classifying workers as employees and bring that into this bill so that gig workers who meet that definition are classified as employees and start getting paid properly. I think that would make a lot of sense, especially since the legislation is already written. So that would be the number one thing I would add to this bill, and then improving the WSIB and expanding who's eligible for coverage. I think that makes a lot of sense. We've heard a lot of people give examples today of front-line workers who are not eligible for WSIB coverage, from firefighters who work up north to many personal support workers who are front-line workers during the pandemic.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Miss Monique Taylor: Thank you to the member for University–Rosedale and her debate this evening. Like her, I'm very much interested in expanding WSIB coverage. I have heard from developmental service workers, PSWs, child care workers who are just not included. Developmental service workers are begging to be a part of WSIB. When the system was changed from institution to the community, that's when the change happened. So anybody who works within a facility is covered under WSIB, but if you work in the community, you're not covered under WSIB. It's a major problem.

Do you think it's something that the government should ensure is in the next Working for Workers bill?

Ms. Jessica Bell: Thank you to the member for Hamilton Mountain for that question. You know, you're elaborating on what I think is a very valid point: What's missing in this bill? Who's left out? Who should be included in the next one?

It makes a lot of sense to include front-line workers who have jobs which are physically draining. There's a lot of repetitive stress injuries. There can be aggression in some settings. The developmental services sector and health care settings, where workers are injured—maybe it's COVID. It makes a lot of sense to include them under the WSIB program as well.

My hope is that, when this government carefully reads the Hansard from tonight and from previous days, they look at some of the recommendations that we are raising that have come from residents, that have come from constituents, and includes them in future bills.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

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Mr. Rick Byers: I thank the member for her comments this evening—we're listening to them over here. I would hope the member would share the excitement we have for economic development in the province and 700,000 jobs in place now that weren't before. There are so many initiatives in this bill from workers and firefighters, job-seeker transparency, protecting hospitality workers, newcomers etc., and I heard the member say it was in the right direction and made a lot of sense. Aren't these things that

you could see yourself supporting for the support of workers in Ontario?

Ms. Jessica Bell: Thank you to the member for Bruce–Grey–Owen Sound for your question.

Certainly, the issues that were raised about improving job postings, as you mentioned—so no longer allowing Canadian work experience being a post and making sure that expected compensation is included, among other things that you suggested—they do make sense. What we heard from members and also from stakeholders is that there's an issue of enforcement. Many of these pieces of legislation are already on the books. It's already law. So what is this government—and this is a genuine question: What is this government going to do to ensure that this legislation, Bill 149, is going to be enforced?

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Hon. Todd J. McCarthy: I am proud to be here on behalf of my ministry, the Ministry of Public and Business Service Delivery for the province of Ontario, where we've been entrusted with overseeing the development of our province's trustworthy artificial intelligence framework.

First, though, to clarify—and I believe, actually, everyone knows, but for those who don't know who are perhaps watching on television tonight—what artificial intelligence, or AI, means within the context of the bill that we're debating this evening: AI is considered a computer technology that learns and sees patterns in data to solve problems, create things and make decisions. A well-known example of AI includes the generative tool known as ChatGPT, which I am sure many members and many members of the public are familiar with for its impressive ability to make sense of language.

Technological developments such as this over the last few years have made it very clear that AI is becoming central to everyday life, and like any new technology, it has its risks and rewards. The speed at which it has grown shows us that AI has the potential to affect every single industry and sector, and indeed every individual, every family and every business. But most importantly, these are not changes coming down the road; they are happening right now.

One potential key application for artificial intelligence in virtually every industry and sector is in the recruitment and hiring process for business and job seekers, and that is in part what this proposed legislation is designed to address. AI tools and algorithms are being adopted by Ontario businesses at a rapid rate and use high volumes of personal data about job applicants and employees.

Since the pre-Internet days when jobs were posted in the newspaper, the job-seeking and recruitment process has changed dramatically for both employers and potential employees. This begs the question, then, of how artificial intelligence is changing the recruitment and hiring process here in our province of Ontario and around the globe.

HR reps are now able to sort through several resumes at a time using automated tools, saving them countless hours of manual scanning. They're even able to find the right candidates more quickly because AI tools are pro-

grammed to hone in on certain key words and certain key phrases.

Other governments around the world are already reacting to this new reality and taking necessary steps to safeguard their populations. Current Quebec legislation requires businesses to inform individuals when they collect personal information using technology that identifies, locates or profiles the individual or when they use personal information to make decisions based on automated processing.

These provisions came into force in the province of Quebec on September 22 of this year. In our nation's capital, the federal government's proposed Artificial Intelligence and Data Act, or AIDA, for short, would regulate commercial use of artificial intelligence and would include public disclosure requirements for the use of these technologies. The federal legislation has not yet passed, while Quebec's legislation is coming into force in stages.

Other jurisdictions in the United States, such as California, New York and Maryland have introduced regulations and legislation intended to impose obligations on employers to evaluate the impact of various types of machine-learning tools and provide notice regarding their use.

The bottom line is that our jurisdictional partners, both at home and abroad, are well under way to meet the needs of their constituents by providing guarantees, regulations and protections from what is undoubtedly revolutionary technology.

It is well known that when these tools are used unchecked, they can lead to a number of issues with data privacy and algorithmic bias. That is why I am pleased to see the great work that our Ontario government is doing to make job searches more transparent and equitable for all of the people of Ontario.

This proposed legislation is a positive step forward, and I encourage my colleagues on both sides of the House to appreciate the magnitude of this proposal contained within this bill.

The people of Ontario deserve to know when artificial intelligence has been used to screen their job applications and determine their suitability for an interview. Furthermore, with applicants' personal data now being collected and stored electronically in the databases of companies large and small, there is an increased concern of that data being at risk. Given these growing concerns, our government would be the first in Canada to propose requiring employers to inform job seekers when AI is being used to make hiring decisions.

The fact is that governments have a responsibility to keep up with evolving technologies. Governments also have a responsibility to address the impact of evolving technologies that can create unfair practices, so job seekers should be informed when these automated systems are being used to inform their hiring decisions. That being said, for those people already selected for job opportunities and those already employed, what future awaits them?

Well, in addition to this legislation's proposal to ban employers from requiring Canadian experience as a requirement of employment, our government is also taking action on other positive measures. For example, we are seeking to make it mandatory for employers to post salary ranges in their job advertisements. We propose these measures, Speaker, because although we already know that Ontario is the best place in the world—in my respectful submission—to live, work, raise a family and to engage in leisure activities, we still need to create the right conditions for new skilled workers to thrive and to make Ontario home.

The Toronto-Waterloo tech corridor is just one example, serving as the second-largest hub of technological development and business in North America, second only to the Silicon Valley. It is important that the province of Ontario continues to be a hub for technological development, because I cannot overstate enough just how impactful AI is becoming in almost every aspect of our lives.

The public understandably has questions about what risks we might face if we do not act fast enough to guarantee protections and safeguards for the use of AI. However, just as there are very real risks associated with artificial intelligence, there are also very real and positive opportunities. One very important rule of thumb that guides my ministry's work on artificial intelligence is that we simply cannot afford to be an offline government in an online world, and that means embracing the potential of AI to revolutionize how we imagine, how we plan and how we deliver government services to those who elected us, those who rely on us and those who trust us to govern.

2010

We can only begin to wonder what these opportunities just might look like. Our imagination might be the only limit to predicting how future generations will leverage the use of artificial intelligence in 25, 50 or even 100 years from now. But today, we can already see the value of powerful artificial intelligence tools and the many opportunities these tools can provide.

As it currently stands, artificial intelligence has the power to help us reimagine entire programs and services so that we can better serve Ontario's people and businesses while also saving precious time and money for all. This is reflected in the work many of us are currently focused on, but we must never forget about the threats that exist if we choose to ignore the potential risks of artificial intelligence.

This is why, to address these concerns and to ensure our government can make the best use of AI, we have been working to create a made-in-Ontario framework for the use of artificial intelligence in our public sector. We want to unlock the benefits of AI for millions of people and businesses who make Ontario home and who want to make Ontario their home. But as a government, we must also make sure that we approach and employ our artificial intelligence in a safe, responsible and fully transparent manner.

As many of you here today may know, my ministry has been developing Ontario's first trustworthy AI framework. This is designed to guide the government's responsible and ethical use of this new technology. Among other things, this has resulted in the design of our framework's three key assurances, which we know matter the most to Ontarians who have shared their thoughts with us directly.

The first key assurance is no artificial intelligence in secret. This means that we need to provide a clear understanding of how and when artificial intelligence is deployed.

The second is that artificial intelligence must be used based on what people can trust. This means that we must clearly define risks, promote their prevention and protect Ontarians proactively.

The third, the last and perhaps the most important is that artificial intelligence serves all the people of Ontario. This guarantees that the right processes are in place to challenge decisions based upon the use of AI.

This framework is rooted in basic democratic principles and fundamental rights, and it will help us harness the benefits of artificial intelligence in a trustworthy, responsible and transparent way, one that benefits Ontarians everywhere in the decades ahead.

Our work on this reflects internal feedback received from our fellow ministries and government entities, and we will continue to consult with the public and experts, including the Information and Privacy Commissioner for the province of Ontario. All of this input is to inform the framework that we are planning for. The approach that we are taking in Ontario will address what the experts are calling for and it will set out risk-based rules for the transparent, responsible and accountable use of AI by the government of Ontario.

Speaker, our province can never lose sight of the importance of privacy. Protecting people's privacy and personal information, and ensuring online security for all, is a top priority for our Ontario government. As technology becomes increasingly relied upon to make crucial decisions, new risks do emerge. That is why, in order to build trust and ensure the safe use of artificial intelligence, measures must be implemented to ensure transparency and to prevent harm.

With the rise of generative AI tools such as ChatGPT, there have been increasing concerns about potential negative effects, which include biased outcomes, a surge in misinformation and cybercrime, copyright violations and the displacement of white-collar workers and artists. A few months ago, several leaders from the technology sector signed an open letter calling for a pause on new artificial intelligence technology and to ensure that risks and appropriate mitigations can be properly considered before we allow this emerging technology to move forward. And calls for creating ethical frameworks or guidance on AI use and regulating the industry have continued to intensify.

Furthermore, both the Information and Privacy Commissioner of our province and the human rights com-

mission of our province have spoken out about the significant impact of and safeguards required for the effective use of AI technologies in the public sector. The federal government, in introducing its not-yet-passed privacy modernization bill, including the proposed AIDA bill governing commercial AI use that I mentioned earlier, must also be taken into account as we move forward in our federal system of government.

Mandatory requirements for the federal public sector are already in place, and the European Union's Parliament has proposed an AI act governing the commercial use of AI. Very recently, in the United States, we saw a bold move, with President Biden releasing an executive order outlining recommendations, best practices and directives for the AI industry to prioritize civil rights, consumer protections, equity and safety in the use of AI technologies. Previously, the United States had released a blueprint for an AI bill of rights, setting principles for the design and deployment of artificial intelligence technology. In California, two bills were introduced to recommend regulating artificial intelligence in employment, as we are attempting to do with this proposed legislation.

This announcement came amidst the first global AI Safety Summit, held in London, England, where leaders and tech innovators from across the world came together to discuss the safety and regulation of the artificial intelligence industry. At this summit, 28 countries, including Canada, the United States, the United Kingdom and China, alongside the European Union, signed the Bletchley Declaration, the first global AI declaration. An excerpt from this agreement states the following:

"We welcome relevant international efforts to examine and address the potential impact of AI systems in existing fora and other relevant initiatives, and the recognition that the protection of human rights, transparency and explainability, fairness, accountability, regulation, safety, appropriate human oversight, ethics, bias mitigation, privacy and data protection needs to be addressed. We also note the potential for unforeseen risks stemming from the capability to manipulate content or generate deceptive content." I emphasize that important phrase from the quote from the agreement signed by, among others, our nation, Canada, on behalf of the federal government and its provinces: "appropriate human oversight." That particular aspect of this cannot be emphasized enough.

"All of these issues are critically important, and we affirm the necessity and urgency of addressing them...."

"We resolve to work together in an inclusive manner to ensure human-centric, trustworthy, and responsible" artificial intelligence "that is safe, and supports the good of all through existing international fora and other relevant initiatives, to promote co-operation to address the broad range of risks posed by AI." And that latter paragraph is a direct quote from the agreement.

Speaker, Ontario has showcased leadership in this field since 2019 by being the first jurisdiction in Canada to create ethical principles to support government use of AI. We've seen in the last four years the rapid development and deployment of this new technology, and despite all the

buzz around AI in the past year or so, most Canadian businesses are in no hurry to jump on board.

2020

A recent report from The Dais, a policy think tank out of TMU here in Toronto, indicates that out of 35 OECD countries whose national statistics agencies have conducted similar surveys, Canada ranks 20th in AI adoption. That report also notes that some of Canada's largest industries have been some of the slowest adopters of this new technology. The real estate sector, the single biggest contributor to Canada's GDP, is near the bottom of the list.

The future of artificial intelligence in Ontario is nevertheless exciting. But as I mentioned earlier, like with any other new technological innovation, AI's exploration and adoption must be done with a cautious and measured approach to ensure that our people—the people of Ontario who elected us to represent them—are protected against potential harms and abuses. The people of Ontario must be able to trust artificial intelligence, and they must be able to trust our government with their data. That means making sure risks are clearly defined and mitigations are in place to minimize harm.

I appreciate the opportunity, Speaker, to address this House today about a topic that promises to revolutionize the way we deliver our programs and our services for our fellow citizens and residents. I look forward to further discussion and debate as we move forward together. I believe that this issue rises above partisanship, and I thank all members for their contributions to this debate thus far.

The Deputy Speaker (Ms. Donna Skelly): Questions?

Ms. Jessica Bell: Thank you to the member from Durham for your presentation. I don't know a lot about artificial intelligence. I've been trying to keep up to speed on all the very significant changes that are happening in this sector. It's good that you are looking into the issue and thinking about how it's going to impact Ontario and Ontarians.

I have a question about the section in Bill 149 that affects gig workers. I don't think that the gig workers' protection goes far enough. I think gig workers deserve to earn more, and they should be paid when they're waiting for a job and not just when they're on a job because they're on the clock even as they're waiting, just like someone who is in a store waiting for a customer to walk in. Is this something that you would be open to exploring or championing?

Hon. Todd J. McCarthy: I thank the member opposite for the question. What I am proud of when it comes to this proposed legislation—this is the fourth iteration of Working for Workers initiated by this government, and it's one of a series of bills that stands up for our workers, the backbone of our economy. Working for Workers Four—the injured workers and firefighters that are affected by this—is very, very important. The gig workers that my friend, the member opposite, mentioned—also important.

I believe that this particular version of the series of Working for Workers acts is good for all workers to the extent that it legislates in the areas that it does. I can only add that there is more to come, certainly by way of

regulation, and there is more to come in the series of Working for Workers. Our government, with Premier Ford and Minister Piccini, stands up for our fellow citizens and residents, who we need. We need skilled workers. We need all types of workers, gig workers and otherwise. We welcome everyone to make Ontario strong.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Deepak Anand: I was listening to the minister, and it was like a meditation listening to him persistently talking about what this bill is bringing for our province of Ontario and workers. I just want to ask you, for your riding, when you meet your residents, they ask you questions about so many positions being vacant. What are we doing as a government to support the economy through bringing all these important steps for our workers?

Hon. Todd J. McCarthy: I thank the member for that excellent question and the great work that he does in his Mississauga riding on behalf of his residents. In Durham riding, I'm proud to say that this act and its predecessors are being very well-received because, of course, my riding being, as I've said before, Speaker, a microcosm of the province of Ontario—we have the Darlington plant in our riding. We're next door to the revitalized GM plant. Further north, we have farms in rural areas. We have the suburban areas of Courtice, Bowmanville, Newcastle and North Oshawa. We have Ontario Tech and Durham College, and in the south of Oshawa, we have a Trent University branch campus. And we are matching skilled workers to jobs at Darlington and GM and elsewhere in the province of Ontario.

“Working for workers” is not just a slogan; it's real government policy. It's the future of Ontario. It's telling all workers that prosperity awaits and, of course, we have your backs, because the firefighters have applauded our efforts to include other illnesses—other types of cancers that were not previously included for purposes of workers compensation. So, it's an act for everyone.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. John Vanthof: I would like to thank the minister for his remarks and his focus on the benefits and challenges of AI. I found the speech very informative. My daughter teaches a couple of courses in university, and one of their biggest challenges now is determining whether the papers written by the people who take the course are actually written by the people or written by ChatGPT. And it's a huge challenge.

I don't always compliment the government, but I'm encouraged that the government is looking at not only the benefits but the challenges. Because, if you will recall, when Internet first came out, it was going to be information for everyone, and now that we've had it for a while, it's turned out to be misinformation by an awful lot of people.

So could you expand a bit on what the true risks of false information created by AI are, and what they could be?

Hon. Todd J. McCarthy: I thank the thoughtful House leader of the opposition. I always enjoy his speeches very

much as well—very persuasive, and sometimes more entertaining than persuasive. But, in any event, I always welcome the member's questions and his participation in debates.

There are real risks, as there are with every technology. You know, 20 years ago, we only saw the bright side of Facebook, for example, and now we see the dark side of social media and the negativity and the abuse. And there is a negative side to AI: Plagiarism could go undetected at universities and colleges, for example. We're going to have to be vigilant. We have to know now and recognize now and plan for the negative uses of AI—impersonation, cyber attacks, identity theft are more possible with AI. So we have to set up the guard rails to guard against that, to protect against that, but not run away from technology that can improve our world, can improve our lives.

Think of what it can do in the health care field. Think of what it can do in terms of diagnosing illnesses and recommending treatment, working with good, human judgment by physicians and nurse practitioners and others. That is it. If the human element is there, I believe the right things can be done, and we can and should embrace the technology on the basis of a bright future.

The Acting Speaker (Ms. Patrice Barnes): Further questions?

Mr. Deepak Anand: To the minister: Minister, I was looking on the TV and there was a fire shown. One of my colleagues was saying, when the fire happens, as the people run away, the firefighters run towards it. They have been true heroes who work tirelessly to protect others, and the physical and mental stresses they face takes a toll.

So the question to you is, how will this bill help firefighters who have been diagnosed with life-changing illnesses as a result of their service, or when they have been injured on the job? To those true heroes, what does this protect?

Hon. Todd J. McCarthy: Thank you again to the member with his thoughtful question.

Our firefighters are the front-line heroes. True heroes like our firefighters don't hesitate. They put themselves in the line of fire, in the way of harm, to protect others. I can tell you how proud I am of the firefighters of Clarington and Oshawa. I know them personally. They are fully embracing this bill because it recognizes an important feature.

2030

Our heroes, those who actually are survivors of potential life-threatening situations, may not discover until years later, after a particular incident, that they have a cancer caused by that. By expanding the number of cancers that are recognized for the purposes of this bill, for the purposes of WSIB and disabilities, we protect and respect those heroes for something that might have happened decades ago that affects them today.

The Acting Speaker (Ms. Patrice Barnes): Further questions?

Ms. Sandy Shaw: Thank you again. It was an informative discussion about AI.

I realize that you were talking a lot about privacy, but I will have to say, I'm very disappointed that the government did not take the Information and Privacy Commissioner's recommendation on the health care bill—where the minister wanted to say, "The minister shall not collect, use or disclose more personal health information or personal information than is reasonably necessary." The government turned down that amendment that came from the Information and Privacy Commissioner.

Also, the Information and Privacy Commissioner wrote to this government about their use of AI and said, "There are inherent privacy and other human-rights-related risks with these technologies. We would welcome the opportunity to work closely with the government to develop an effective framework to ensure that these risks are mitigated appropriately."

Can you tell me if the government responded to the IPC regarding their use of AI?

Hon. Todd J. McCarthy: I always greatly appreciate the thoughtful debate and questions from the member for Hamilton West–Ancaster–Dundas.

We're not done. This is the first foray, I believe, in terms of legislation into artificial intelligence. We'll be listening to the Information and Privacy Commissioner and many others—

The Acting Speaker (Ms. Patrice Barnes): Thank you. Further debate?

Mr. Terence Kernaghan: Before I begin, I'd mention that I will be sharing my time with the member from Spadina–Fort York.

I rise today with a heavy heart. Unfortunately, my community is mourning the loss of Captain Chris Bruinink, who lost a three-year battle with cancer after having an over-two-decade-long career with the London Fire Department, as well as the London Professional Fire Fighters Association, where he provided advocacy, mentorship and friendship. He was a fierce advocate, a strong advocate for health and safety protections as well as cancer prevention. There is the London Fire Strong campaign with purple bracelets.

I'd like to share a quote now from the London Fire Department:

"Captain Bruinink was recently awarded the 25-year exemplary service medal for his dedication to the fire service. His unwavering commitment, loyalty, and passion for his work alongside his professionalism, integrity and strong work ethic has undoubtedly left a lasting impact on all of us. His positive attitude was contagious, and he had a smile and a hello for everyone.

"Chris was an invaluable asset to our team, incredible mentor, and role model to many, who consistently went above and beyond to ensure the success of our service and satisfaction of the residents of the city of London.

"Captain Bruinink faced many challenges and overcame obstacles as he adapted to the ever-changing landscape of the fire service throughout his career, always with a focus on people. His focus on people and caring was evident in his passion for ensuring the health and safety of

personnel. He was instrumental in so many initiatives that have made our workplace safer.

"Chris was also an active and engaged member of the London Professional Fire Fighters Association. He served a term on the executive board, performed committee work, and dedicated hours of his time to his community through numerous charitable efforts.

"We will all miss him."

To let the government know, Chris also advocated for firefighters getting a second set of gear. This is incredibly important, because much research indicates that the gear that they wear can transmit certain chemicals through the skin.

My heart and my condolences go out to Chris's parents Willemn and Janny Bruinink, his wife, Christy, and family Miranda, Jordan, Carson and Nicole.

Thank you very much, Captain Bruinink, for your service and for your dedication to our community. Rest in peace.

The Acting Speaker (Ms. Patrice Barnes): Member from Spadina–Fort York.

Mr. Chris Glover: I just want to echo the member from London North Centre. We're sorry about your community's loss, and thankful to Chris Bruinink and his family for all his service to your community.

Sometimes we come in here and it feels like, for those of us who grew up in the Bugs Bunny and Road Runner era, that you walk in—there's a point at the beginning of the cartoon where the coyote and the sheepdog are walking in, and they say, "Good morning, Ralph," "Good morning, Sam," and then they punch their cards and they go try to clobber each other all day. I think sometimes it feels like this, but then there's moments like this, when you're reading a dedication to a fallen firefighter in London, where you realize that we're all just human here, and we really need to be thinking about the humanity that we're trying to share and the values that we need to bring to the decisions that we're making here.

I'd also like to take a moment—sorry. I'm sorry. I just want to take a moment to wish best wishes to my brother, who's watching this tonight from his hospital bed. My brother Scott is my older brother. He's two years older than me. He's the most courageous person I've ever known. When we were kids, he was my best friend. I can't tell you the number of memories that I have of him. When we were growing up in Oshawa at the time, kids got into a lot of fights and my older brother always, always had my back. He engendered in me a love of sports, and that got passed on to both me and my younger brother, and also to my children and to my brother's children.

When he was 28, he developed schizophrenia. It's an absolutely devastating illness. He was a lettered athlete in high school. He was one of the strongest people I know. I remember going to family parties at Christmas time—he was like 16 or 17 at the time. My uncles were all tradespeople, they were bricklayers and carpenters, and they'd have arm-wrestling competitions, and my brother would be able to beat them all. His illness has really taken a toll on his health, but the courage that I saw in him when he

was a kid—he's faced this illness with that same level of courage all these years.

And so, to my brother Scott, we're here at the Ontario Legislature and I can tell you that everybody in this room right now is wishing you a speedy recovery and that you're able to get out of the hospital as soon as possible. Thank you.

Applause.

Mr. Chris Glover: Thank you. I hadn't really talked out loud about it before, and I guess there's a lot more emotion than I anticipated. I think it speaks to—we all have heroes in our lives who help us to get here, and my brother is one of the heroes who helped me to be where I am today. So much thanks to him, and thank you to all of you for extending your good wishes to my brother as well.

I did rise to speak about a bill, and I guess I should do that now. This is Working for Workers, and there's a good section in this I wanted to give a shout-out about. It changes section 15.1 of the Workplace Safety and Insurance Act, and it provides presumptive coverage for additional cancers for firefighters. This is really important, as we just heard from the member from London southwest—

Mr. Terence Kernaghan: North Centre.

2040

Mr. Chris Glover: Centre, sorry—about the death of a firefighter in his community. This is absolutely essential.

I've got two firefighters in my family. My cousin Doug Jones just retired from the Toronto Fire Services after 32 years of service, and my uncle Mike Wood is a captain in the Toronto Fire Services. We want to make sure that we take care of our firefighters because they are the heroes in our community.

I'd like to ask the government to extend this kind of coverage to forest firefighters. Many years ago, I was a forest firefighter operating out of Geraldton, Ontario. My former crew leader John Gibson is actually watching now. He just retired after—I don't know; it must have been 40-plus years in the forest fire service, and he's most recently been working out of Kenora.

But we need to treat our forest firefighters better. When I was there—I was there for two fire seasons, 1988 and 1989—I was making \$12 an hour plus overtime. And that \$12 an hour, if you put it in the inflation calculator on the Bank of Canada website, works out to be \$28 an hour, and so that's what forest firefighters should be making now. Forest firefighters are actually making \$21 an hour. There's been a \$7-an-hour inflationary pay cut over the last almost 30 years for forest firefighters, and that needs to be addressed.

The other change that's happened is, when I was hired by the Ministry of Natural Resources to be a firefighter, we were shipped out to Atikokan. I think it was a 10-day training program to give us the basic skills we needed, and then we became part of a forest fire crew. There were crews of five of us. That training, we were paid for it. It was all part of the job. As soon as you got hired, you were shipped off to Atikokan for this training. That training is no longer paid for. If you want to be a forest firefighter in

the province of Ontario, you actually have to pay a thousand dollars to get that training in the hope that you will get a job later on.

So there are some things in this bill about when you're working, if you work in a restaurant or whatever and do a training shift, you have to be paid for that training shift. It should be the same for forest firefighters in the province. They should be paid for that training. If there's an amendment or a future bill that's coming out, that needs to be changed, because we need more forest firefighters.

We were 50 crews short in Ontario this year, compared to last year. There's been a 67% cut to the budget by this government. That needs to be reversed, and I'll tell you the reason is that we are in a global warming emergency. One of the things that came up last summer—last summer, there were 16.3 million hectares of land, of forest, burned in Canada. That's more than double the previous record. It was 7.1 million hectares burned in a single forest fire season in the country, in Canada. It's more than double any record that we've ever had. So we need more forest firefighters because they protect communities; they protect timber rights. It's absolutely essential that we invest in this. This is part of prevention and preparing for the environmental crisis that we're facing. We need to invest more in our forest firefighters.

My colleagues from Mushkegowuk—James Bay and from Thunder Bay—Superior North have asked for the same presumptive coverage that's available to regular firefighters be applied to forest firefighters as well. We need to make sure that we are treating our heroes—all of our firefighting heroes—as heroes, as the ones that they are.

I can tell you from my own experience as a forest firefighter, it's an exhilarating job, but it's also a really challenging job, because you go to work in the morning and you might be home that evening to have supper with your family, or you might be home in a month. I was working out of Geraldton, and sometimes I'd go to work in the morning and by noon, we were on a plane to Kenora or to Sudbury. Then, you get out on a fire, and you're on the fire for 10 days or 12 days. Then, they need you somewhere else, and they just fly you to another part of the province.

More recently, because of the number of forest fires that are happening across the country, you end up being shipped out of province. That didn't happen to me, but my forest fire crew leader, John Gibson, has been all over the country. He was in the Fort McMurray fires a few years ago, when there was a lot of damage done. A lot of the town was burned in Fort McMurray.

We need to invest in our forest firefighters, and the same principle that you're applying to restaurant workers, that they get paid for the training—forest firefighters need to get paid for their training as well.

Let's see. I'm looking at the time. I took a lot more time with my intro than I anticipated, but I did want to talk about a few other things in this. I'll just change gears a little bit here.

Adam Smith wrote, in 1776, *The Wealth of Nations*. He's considered the godfather of capitalism. I mean, that

was the book that sort of launched capitalism. One of the things he says in that book is he says he never went to a meeting of employers where they weren't trying to figure out how to lower wages. I have got to say, there are pieces in these, what the government is calling Working for Workers bills, that are actually undermining workers and undermining their wages. And one example, the member—I forget where he's from, but the member was just talking about AI. There's a section in this bill about artificial intelligence and that the government is going to require that employers let workers know if AI is being used in the screening process. That's absolutely essential, because AI, the algorithms—it's already been shown that they have biases. They register biases, and they feed those biases in so it can impact who gets hired. It can negatively impact people based on race, on colour, on religion, and other categories. So it's essential that, at least as a starting point, we let workers know about this.

The other piece about technology, though, that I wanted to talk about: When I've been reading about artificial intelligence, as well, one of the things that comes out is that technology—whenever there's a technological revolution, the gap between rich and poor tends to grow. We've seen this over and over again. I went back to 1776; it was *The Wealth of Nations*. By the 1800s, we were in the industrial revolution, and workers' conditions actually worsened throughout the 1800s. Workers were far worse off in terms of hunger than they had ever been. There was horrific child labour. I mean, if you've ever read a Dickens novel or seen a Dickens movie, you have an understanding of just how bad it got. It was because the employers were using this new industrial technology, and they had control over it. Because they had that knowledge—you know, knowledge is power, and they used that power to reduce workers' working conditions and workers' wages.

What we've seen over the last 40 years in Canada and in the industrialized world is the same sort of thing. I saw my first PC, my first personal computer, in 1980 in a high school when I was in grade 13. We've had the computer revolution of the 1980s. We had the Internet revolution of the 2000s. Now, we're into the artificial intelligence revolution. If you look at what's happened to the gap between rich and poor, it has grown massively. Over the last 40 years, the GDP per capita in Canada has increased by 50%. So the amount of wealth in this province has increased by 50%. We're 50% wealthier than we were, but the median income over that same 40 years has stayed flat. All of that 50% of wealth has gone to the wealthiest, and 50% of people are actually worse off—and this is just in measuring income—than they would have been 40 years ago, and it's because of technology. It's because employers get to use the technology first, and they figure out how to use the knowledge of that technology to increase their own power.

2050

I'm going to pivot here to say that's what's happening with gig workers. Gig workers are not being properly treated in this province and in many places. The idea of Uber, the idea that you develop an app—that's a great idea, because it's far more convenient. A lot of taxi

services are using apps, as well, so that you can order a taxi online. But what has happened with this technology is that it's being used to reduce workers' wages.

There was a case in California a few years ago; I think it was 2018. Uber had classified all of their workers as contractors, rather than as employees. The case in California made them pay, I think it was, an \$18-million settlement to their workers, because they had been misclassified. The court in California argued that they weren't really contractors; they were actually employees entitled to all the protections of—in Ontario we would call it the Employment Standards Act.

The same thing was happening here. There was a judicial decision that our gig workers were actually employees and not contractors. The response from Uber was to start lobbying this government, and they lobbied the government to the point where the government introduced legislation to create a third underclass of workers, which are gig workers. So they passed this legislation, the initial Working for Workers bill, which actually reduced the rights of workers so that they weren't entitled to all of the protections that they would have under the Employment Standards Act, which was awful for workers.

You can see that this gap between rich and poor is going to continue to grow with legislation like what are called the Working for Workers bills introduced by this government.

The Acting Speaker (Ms. Patrice Barnes): Questions?

Mr. Rick Byers: Thank you to the member opposite for his comments. I was very interested to hear about his history as a firefighter out in the woods, where it mattered—a more important issue now; always important, but certainly a growing important issue—and other elements of the bill, including AI and its impact on labour.

I'm just curious, in listening to the member's comments, because so many of these factors, I would have thought, particularly with the firefighter role he has had and the important changes that are included in this bill—are those elements that the member can see himself considering to support in this bill since he's had direct experience in firefighting in his past? Could he support this bill with the important changes to firefighting safety going forward?

Mr. Chris Glover: The section of this bill where they extend the presumptive coverage to firefighters: Absolutely, we want to support that. We want to extend it to forest firefighters as well. We want to make sure that everybody has those protections, because if people are putting their lives on the line for their communities, they should have that protection, and if they fall ill at a later date, they should not be left on their own. They have our backs all the time, and we as a community should have their backs if they do fall ill.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Mr. Terence Kernaghan: I'd like to thank the member from Spadina-Fort York for a beautiful tribute to your

brother, and we do wish your brother Scott well. During your—

Interjection.

The Deputy Speaker (Ms. Donna Skelly): I apologize to the member from London North Centre. Apparently you can't ask a question, because you spoke to it.

Mr. Terence Kernaghan: Oh. My bad. Sorry.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Ms. Sandy Shaw: Oh, okay, so we have to all the questions then—some heavy lifting over here.

Interjections.

The Deputy Speaker (Ms. Donna Skelly): Go ahead, the member for Hamilton West—Ancaster—Dundas.

Ms. Sandy Shaw: To the member for Spadina—Fort York, I want to thank you very much for what you brought here to the House today. We presented so many bills on behalf of workers that the government has turned down. You've identified some of them in your speech. This government just voted down our bill, Bill 90, the anti-scab legislation. We know that it's an important right for workers. It's their constitutional right for free and fair collective bargaining. Scab workers on picket lines create tensions in the community and make workers and all other employees unsafe.

For a government that keeps saying they're working for workers, why do you think they would vote against one of the most fundamental principles, one of the most fundamental rights workers have in the workplace, which is the right to free and fair collective bargaining on the picket line?

Mr. Chris Glover: My response comes after Sam and Ralph have already punched in. I think it's a divide-and-conquer strategy. There are some good things in this bill. The presumptive coverage for cancer for firefighters makes a lot of sense, but the government just earlier this evening voted down a bill to ban scab labourers from taking over workers' jobs when they're on strike. You can't pretend to be working for workers if you are doing that. It's a divide-and-conquer strategy. They're winning over some workers, but they're not trying to support all workers.

This is why solidarity is the model of the labour movement, because we are only strong when we stand together. That's why we have to stand not with a government that sometimes will support some workers but with a government that will always support all workers. That's what an NDP government is.

The Deputy Speaker (Ms. Donna Skelly): Further questions?

Ms. Mary-Margaret McMahon: I keep trying to wear brighter-coloured clothing for over here.

Thank you to the member from Spadina—Fort York for that very heartfelt and touching tribute to your brother. We are thinking of you. I don't know his name—

Mr. Chris Glover: Scott.

Ms. Mary-Margaret McMahon: Scott, right. I have three brothers, and you've just raised the bar on the level of tributes.

Thank you for your story about firefighting. I did not realize that you had done that in your past life and I wondered if you could add to that. I can only imagine how harrowing that experience and that job is and was and is to people nowadays. I'm just wondering if you can enlighten us on that and why they should be taken care of and paid well and added to.

Mr. Chris Glover: I'll just tell you the day in a forest fire: You're on the base, you're there and you're prepping your equipment. You've got to be ready. If you're the crew that's on standby, you've got to be ready to be in the helicopter and take off in five minutes at any time. As soon as a fire gets called in, you load all your gear—you've got backpacks, you've got tents, you've got your fire hose—and you jump into the helicopter. And as soon as you get up above the tree line—because this is northern Ontario, it's fairly flat—you can see the smoke. It may be 50 or 60 miles away but you can see where you're heading. There's a column of smoke, and that's what you head for.

Then you get to the location, and the pilot and the crew leader scout the fire and then they find a spot near a lake, on the side of a lake, whatever. You often end up getting out into the water. You're waist-high in the water and then pass the gear onto the shore, you set up your pump and then the crew leader goes and takes the first pack of hose—400 feet—and he starts laying that out. He's got a compass and he's heading for the fire. Then the rest of the guys get the pump going and then they take off.

Interjection.

Mr. Chris Glover: Yes, it's an exciting job but it's definitely also a challenging and dangerous job. So they need to be compensated.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Hon. Michael S. Kerzner: Again, I want to wish your brother a speedy recovery.

I think that our government has shown, especially with the firefighters—and this is personal to me because of my own experiences of travelling Ontario so extensively and, as I've said many times, stopping the car to go in to see for myself.

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Perhaps my friend opposite would agree that it was long overdue for governments of past terms to make the efforts that our government has in recognizing the presumptive cancers, including the esophageal cancer which you've spoken of. I think it's important to acknowledge—and this is what I hope my colleague opposite will do—that the concern that we all have for firefighters, especially with the presumptive cancers, is essential, and that's why our government has included the esophageal in the legislation.

Mr. Chris Glover: Absolutely, we support this. In fact, this actually came from a piece of legislation that was introduced by former MPP Andrea Horwath. It was called the Bob Shaw law. I'm glad that the Conservative government is now providing presumptive coverage for firefighters. It's long overdue.

The Deputy Speaker (Ms. Donna Skelly): There's time for another question.

Ms. Jessica Bell: Thank you to the member for Spadina–Fort York for your presentation. I was hoping that you could finish your day as a firefighter—I think you were starting it. Could you keep going? I was interested.

Mr. Chris Glover: When you get to the fire location, you unload on the side of the lake. The crew leader has a compass—we've already scouted where the fire is—and he heads in. The second year, I was the pump guy. On the first day, you're going to be soaked. You just walk in, you prime the pump and you get the pump going.

One of the gags we used to pull is—the crew leader has 400 feet of hose in his backpack that's unravelling as he's walking through the woods, and we would try to get the hose ready before he unloaded all his hose so it would blast out of his pack.

You start at the back of the fire and you work your way around, and eventually you get to the front of the fire. Sometimes these fires are enormous, so it will not be one crew; it will be five crews in different sections of the fire, trying to cool down the fire from the back and working around to the front and then eventually knocking it down. Once you've knocked down the flames at the front, then you've got all kinds of smouldering burns in this burn, however many acres it is, and it takes a long time. So—

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. Piccini has moved second reading of Bill 149, An Act to amend various statutes with respect to employment and labour and other matters.

Is it the pleasure of the House that the motion carry?

I declare the motion carried.

Second reading agreed to.

The Deputy Speaker (Ms. Donna Skelly): Shall the bill be ordered for third reading?

Interjections.

The Deputy Speaker (Ms. Donna Skelly): I recognize the deputy government House leader.

Mr. Trevor Jones: Please refer it to the Standing Committee on Social Policy.

The Deputy Speaker (Ms. Donna Skelly): The bill is referred to the Standing Committee on Social Policy.

Orders of the day. I recognize the deputy government House leader.

Mr. Trevor Jones: No further business, Speaker.

The Deputy Speaker (Ms. Donna Skelly): Since there is no further business, this House stands adjourned until 9 a.m. on Monday, November 27, 2023.

The House adjourned at 2104.

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Gélinas, France (NDP)	Nickel Belt	
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Gretzky, Lisa (NDP)	Windsor West / Windsor-Ouest	
Grewal, Hardeep Singh (PC)	Brampton East / Brampton-Est	
Hardeman, Ernie (PC)	Oxford	
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Harris, Mike (PC)	Kitchener—Conestoga	
Hazell, Andrea (LIB)	Scarborough—Guildwood	
Hogarth, Christine (PC)	Etobicoke—Lakeshore	
Holland, Kevin (PC)	Thunder Bay—Atikokan	
Hsu, Ted (LIB)	Kingston and the Islands / Kingston et les Îles	
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Martin, Robin (PC)	Eglinton—Lawrence	
McCarthy, Hon. / L'hon. Todd J. (PC)	Durham	Minister of Public and Business Service Delivery / Ministre des Services au public et aux entreprises
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McMahon, Mary-Margaret (LIB)	Beaches—East York	
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Pirie, Hon. / L'hon. George (PC)	Timmins	Minister of Mines / Ministre des Mines
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Rae, Matthew (PC)	Perth—Wellington	
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Sabawy, Sheref (PC)	Mississauga—Erin Mills	
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Schreiner, Mike (GRN)	Guelph	
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Smith, David (PC)	Scarborough Centre / Scarborough-Centre	
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Smith, Laura (PC)	Thornhill	
Smith, Hon. / L'hon. Todd (PC)	Bay of Quinte / Baie de Quinte	Minister of Energy / Ministre de l'Énergie
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West, Jamie (NDP)	Sudbury	
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Yakabuski, John (PC)	Renfrew—Nipissing—Pembroke	
Vacant	Kitchener Centre / Kitchener-Centre	
Vacant	Lambton—Kent—Middlesex	